

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		1 Filer ID	2 Total pages filed: 14
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI Brian	<b>OFFICE USE ONLY</b> Date Received <b>RECEIVED</b> <b>OCT 26 2020</b> <i>@ 2:16 pm jd</i> <b>CITY SECRETARY'S OFFICE</b>	
	NICKNAME LAST SUFFIX Livingston		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS  <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE 9520 Alberta Court  Frisco, TX 75033		Date Hand-delivered or Date Postmarked
			Receipt # Amount
			Date Processed
			Date Imaged
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Carol L.		
	NICKNAME LAST SUFFIX Gallagher		
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 7070 Glen Abbey Court Frisco, TX 75036		
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION 714-615-1625		
8 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input type="checkbox"/> July 15 <input checked="" type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final Report (Attach C/OH-FR)		
9 PERIOD COVERED	Month Day Year    Month Day Year 09/25/2020    THROUGH    10/24/2020		
10 ELECTION	ELECTION DATE Month Day Year 11/03/2020	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input checked="" type="checkbox"/> General <input type="checkbox"/> Special	
11 OFFICE	OFFICE HELD (if any) Frisco City Council Place 6 Collin		12 OFFICE SOUGHT (if known) Frisco City Council Place 6

GO TO PAGE 2

# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH  
COVER SHEET PG 2

2 of 14

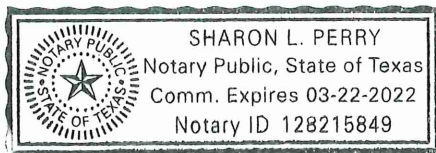
13 C / OH NAME Livingston, Brian	14 Filer ID
-------------------------------------	-------------

15 NOTICE FROM POLITICAL COMMITTEE(S)  <input type="checkbox"/> Additional Pages	This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures.	
	COMMITTEE TYPE	COMMITTEE NAME
	<input checked="" type="checkbox"/> GENERAL	Frisco Firefighters Association
	<input type="checkbox"/> SPECIFIC	COMMITTEE ADDRESS
		6735 Salt Cedar Way Building 1, Suite 300-104 Frisco, TX 75034
	COMMITTEE CAMPAIGN TREASURER NAME	Smith, Jeffrey
	COMMITTEE CAMPAIGN TREASURER ADDRESS	7421 San Jacinto Trail  McKinney, TX 75071

16 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ 186.84
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 10,150.23
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ 180.82
	4. TOTAL POLITICAL EXPENDITURES	\$ 9,878.20
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 6,235.84
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

## 17 AFFADAVIT

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.



Brian Livingston  
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Brian Livingston, this the 26<sup>th</sup> day of October, 20 20, to certify which, witness my hand and seal of office.

Sharon Perry  
Signature of officer administering

SHARON PERRY  
Printed name of officer administering

Notary  
Title of officer administering oath

**SUBTOTALS - C/OH****FORM C/OH  
COVER SHEET PG 3**

3 of 14

<b>18 FILER NAME</b> Livingston, Brian		<b>19 Filer ID</b>	
<b>20 SCHEDULE SUBTOTALS</b> NAME OF SCHEDULE		SUBTOTAL AMOUNT	
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$	3,880.00
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$	6,270.23
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$	
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$	
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	9,878.20
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$	
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$	
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$	
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$	
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$	
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$	

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 1/2 Rpt: 4/14
<b>2</b> FILER NAME Livingston, Brian		<b>3</b> Filer ID
<b>4</b> Date 10/12/2020	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adams, Judy <hr/> <b>6</b> Contributor address; City; State; Zip Code 8810 Coleman Boulevard  Frisco, TX 75034	<b>7</b> Amount of Contribution (\$)  \$200.00
<b>8</b> Principal occupation / Job title (See Instructions) Business Owner		<b>9</b> Employer (See Instructions) Business Owner
Date 10/12/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Costanza, Holli <hr/> Contributor address; City; State; Zip Code 9515 Crown Meadow Drive  Frisco, TX 75035	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Firearms Instructor		Employer (See Instructions) Eagle Gun Range
Date 10/05/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) HOMEPA <hr/> Contributor address; City; State; Zip Code 5816 W. Plano Pkwy  Plano, TX 75093	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/13/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kiran, Matthew <hr/> Contributor address; City; State; Zip Code P.O. Box 907  Celina, TX 75009	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Rex Real Estate
Date 10/23/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kleinert, Christopher <hr/> Contributor address; City; State; Zip Code 1900 North Akard Street  Dallas, TX 75201-2300	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) Investment Manager		Employer (See Instructions) Hunt Consolidated Investments, LLC



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 2/2 Rpt: 5/14
<b>2</b> FILER NAME Livingston, Brian		<b>3</b> Filer ID
<b>4</b> Date 10/13/2020	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pak, Judy <hr/> <b>6</b> Contributor address; City; State; Zip Code 1342 Plum Valley Drive  Frisco, TX 75033	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>8</b> Principal occupation / Job title (See Instructions) Analyst		<b>9</b> Employer (See Instructions) Norwex
Date 10/19/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Patel, Mital <hr/> Contributor address; City; State; Zip Code 6318 Shady Oaks Drive  Frisco, TX 75034	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions) Hospitality		Employer (See Instructions) NewCrestImage
Date 10/12/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pointer, April <hr/> Contributor address; City; State; Zip Code 12774 Hollister Drive  Frisco, TX 75033	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) Self
Date 10/12/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wysocki, Henry <hr/> Contributor address; City; State; Zip Code 12620 Hollister Drive  Frisco, TX 75033	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A2: Sch: 1/3 Rpt: 6/14	
<b>2</b> FILER NAME Livingston, Brian		<b>3</b> Filer ID	
<b>4</b> TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$ 156.84	
<b>5</b> Date 09/28/2020	<b>6</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frisco Firefighters Association	<b>8</b> Amount of contribution (\$) \$4,893.75	<b>9</b> In-kind contribution description Advertising Mailer
	<b>7</b> Contributor address; City; State; Zip Code 6735 Salt Cedar Way Building 1, Suite 300-1043 Frisco, TX 75034	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
<b>10</b> Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		<b>11</b> Employer (FOR NON-JUDICIAL) (See instructions)	
<b>12</b> Contributor's principal occupation (FOR JUDICIAL)		<b>13</b> Contributor's job title (FOR JUDICIAL) (See instructions)	
<b>14</b> Contributor's employer/law firm (FOR JUDICIAL)		<b>15</b> Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
<b>16</b> If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 10/08/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frisco Firefighters Association	Amount of contribution (\$) \$50.00	In-kind contribution description Facebook Ad
	Contributor address; City; State; Zip Code 6735 Salt Cedar Way Building 1, Suite 300-1043 Frisco, TX 75034	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		Employer (FOR NON-JUDICIAL) (See instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 10/11/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frisco Firefighters Association	Amount of contribution (\$) \$50.00	In-kind contribution description Facebook Ad
	Contributor address; City; State; Zip Code 6735 Salt Cedar Way Building 1, Suite 300-1043 Frisco, TX 75034	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		Employer (FOR NON-JUDICIAL) (See instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

**SCHEDULE A2**

<b>The Instruction Guide explains how to complete this form.</b>				<b>1</b> Total pages Schedule A2: Sch: 2/3 Rpt: 7/14	
<b>2</b> FILER NAME Livingston, Brian				<b>3</b> Filer ID	
<b>4</b> TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS				<b>\$</b> 156.84	
<b>5</b> Date 10/13/2020	<b>6</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frisco Firefighters Association	<b>8</b> Amount of contribution (\$) \$444.64	<b>9</b> In-kind contribution description Event expense food and beverage		
<b>7</b> Contributor address; City; State; Zip Code 6735 Salt Cedar Way Building 1, Suite 300-1043 Frisco, TX 75034		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.			
<b>10</b> Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)			<b>11</b> Employer (FOR NON-JUDICIAL) (See instructions)		
<b>12</b> Contributor's principal occupation (FOR JUDICIAL)			<b>13</b> Contributor's job title (FOR JUDICIAL) (See instructions)		
<b>14</b> Contributor's employer/law firm (FOR JUDICIAL)			<b>15</b> Law firm of contributor's spouse (if any) (FOR JUDICIAL)		
<b>16</b> If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)					

Date 10/13/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frisco Firefighters Association	Amount of contribution (\$) \$225.00	In-kind contribution description Salaries/Wages - Contract labor		
Contributor address; City; State; Zip Code 6735 Salt Cedar Way Building 1, Suite 300-1043 Frisco, TX 75034		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.			
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)			Employer (FOR NON-JUDICIAL) (See instructions)		
Contributor's principal occupation (FOR JUDICIAL)			Contributor's job title (FOR JUDICIAL) (See instructions)		
Contributor's employer/law firm (FOR JUDICIAL)			Law firm of contributor's spouse (if any) (FOR JUDICIAL)		
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)					

Date 10/13/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frisco Firefighters Association	Amount of contribution (\$) \$225.00	In-kind contribution description Salaries/Wages - Contract labor		
Contributor address; City; State; Zip Code 6735 Salt Cedar Way Building 1, Suite 300-1043 Frisco, TX 75034		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.			
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)			Employer (FOR NON-JUDICIAL) (See instructions)		
Contributor's principal occupation (FOR JUDICIAL)			Contributor's job title (FOR JUDICIAL) (See instructions)		
Contributor's employer/law firm (FOR JUDICIAL)			Law firm of contributor's spouse (if any) (FOR JUDICIAL)		
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)					

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: Sch: 3/3 Rpt: 8/14	
2 FILER NAME Livingston, Brian		3 Filer ID	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$ 156.84	
5 Date 10/20/2020	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frisco Firefighters Association	8 Amount of contribution (\$) \$225.00	9 In-kind contribution description salaries/wages contract labor
	7 Contributor address; City; State; Zip Code 6735 Salt Cedar Way Building 1, Suite 300-1043 Frisco, TX 75034	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		11 Employer (FOR NON-JUDICIAL) (See instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 1/6 Rpt: 9/14	<b>2</b> FILER NAME Livingston, Brian	<b>3</b> Filer ID
<b>4</b> Date 10/24/2020	<b>5</b> Payee name Anedot.com	
<b>6</b> Amount (\$) \$116.80	<b>7</b> Payee address; City; State; Zip Code PO Box 84314  Baton Rouge, LA 70884	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Service Fees - October 24th
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/09/2020	Payee name Anthem	
Amount (\$) \$2,844.50	Payee address; City; State; Zip Code 2591 Dallas Parkway Suite 300  Frisco, TX 75034	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Printing Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Mailer
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/05/2020	Payee name Collin County Bookkeeping	
Amount (\$) \$400.00	Payee address; City; State; Zip Code 11932 Salisbury Drive Suite 202 Frisco, TX 75035	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Finance Report
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 2/6 Rpt: 10/14	<b>2</b> FILER NAME Livingston, Brian	<b>3</b> Filer ID
<b>4</b> Date 10/21/2020	<b>5</b> Payee name Community Impact Newspaper	
<b>6</b> Amount (\$) \$50.00	<b>7</b> Payee address; City; State; Zip Code 7460 Warren Pkwy Suite 160 Frisco, TX 75034	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign ad
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/07/2020	Payee name Eventbrite	
Amount (\$) \$220.22	Payee address; City; State; Zip Code 651 Brannan St Suite 110 San Francisco, CA 94107	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Come and Take It Event 2020
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/30/2020	Payee name Facebook Ad Team	
Amount (\$) \$161.86	Payee address; City; State; Zip Code 1601 S. California Ave  Palo Alto, CA 94304	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Facebook Ad
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 3/6 Rpt: 11/14	<b>2</b> FILER NAME Livingston, Brian	<b>3</b> Filer ID
<b>4</b> Date 10/16/2020	<b>5</b> Payee name Facebook Ad Team	
<b>6</b> Amount (\$) \$750.00	<b>7</b> Payee address; City; State; Zip Code 1601 S. California Ave  Palo Alto, CA 94304	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Facebook ad
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/07/2020	Payee name Lava Cantina	
Amount (\$) \$67.54	Payee address; City; State; Zip Code 5805 Grandscape Blvd  The Colony, TX 75056	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Come and Take It Event
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/04/2020	Payee name Mainstream Business Solutions	
Amount (\$) \$512.96	Payee address; City; State; Zip Code 2591 Dallas Pkwy Suite 300 Frisco, TX 75034	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Printing Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense T-shirts
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 4/6 Rpt: 12/14	<b>2</b> FILER NAME Livingston, Brian	<b>3</b> Filer ID
<b>4</b> Date 10/20/2020	<b>5</b> Payee name RunSignUp	
<b>6</b> Amount (\$) \$260.00	<b>7</b> Payee address; City; State; Zip Code 300 Mill Street Suite 200 Moorsetown, NJ 08057	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Frisco Back the Blue 5K
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/02/2020	Payee name The Community Grill	
Amount (\$) \$63.50	Payee address; City; State; Zip Code 2525 Main Suite 400 Frisco, TX 75034	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Food/Beverage Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Meal
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/29/2020	Payee name YT Ad Service	
Amount (\$) \$500.00	Payee address; City; State; Zip Code 2340 E. Trinity Mills Road Suite 300 Carrollton, TX 75006	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense YouTube Ad
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 5/6 Rpt: 13/14	<b>2</b> FILER NAME Livingston, Brian	<b>3</b> Filer ID
<b>4</b> Date 10/05/2020	<b>5</b> Payee name YT Ad Service	
<b>6</b> Amount (\$) \$500.00	<b>7</b> Payee address; City; State; Zip Code 2340 E. Trinity Mills Road Suite 300 Carrollton, TX 75006	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense YouTube ad
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 10/06/2020	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$1,000.00	Payee name YT Ad Service Payee address; City; State; Zip Code 2340 E. Trinity Mills Road Suite 300 Carrollton, TX 75006	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense YouTube ad
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 10/07/2020	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$500.00	Payee name YT Ad Service Payee address; City; State; Zip Code 2340 E. Trinity Mills Road Suite 300 Carrollton, TX 75006	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense YouTube ad
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 6/6 Rpt: 14/14	<b>2</b> FILER NAME Livingston, Brian	<b>3</b> Filer ID
<b>4</b> Date 10/12/2020	<b>5</b> Payee name YT Ad Service	
<b>6</b> Amount (\$) \$500.00	<b>7</b> Payee address; City; State; Zip Code 2340 E. Trinity Mills Road Suite 300 Carrollton, TX 75006	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense YouTube ad
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 10/14/2020	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$500.00	Payee name YT Ad Service Payee address; City; State; Zip Code 2340 E. Trinity Mills Road Suite 300 Carrollton, TX 75006	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense YouTube ad
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 10/19/2020	Candidate/Officeholder name Office sought Office held	
Amount (\$) \$750.00	Payee name YT Ad Service Payee address; City; State; Zip Code 2340 E. Trinity Mills Road Suite 300 Carrollton, TX 75006	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense YouTube ad
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		