

# 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: 17
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST Brian	MI
	NICKNAME	LAST Livingston	SUFFIX
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS  <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; 9520 Alberta Court  Frisco, TX 75033		ZIP CODE
	Date Received		OFFICE USE ONLY <b>RECEIVED</b> APR 03 2023 @ 4:01 pm jg CITY SECRETARY'S OFFICE
	Receipt #	Amount	
	Date Processed	Date Imaged	
5 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST <del>Paul</del> Sena	MI
	NICKNAME	LAST <del>Naas</del> Naas	SUFFIX
6 CAMPAIGN TREASURER ADDRESS  (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE  <del>7070 Glen Abbey Court, Frisco, TX 75033</del> 8585 John Wesley Dr. Frisco TX		
	AREA CODE	PHONE NUMBER	EXTENSION
7 CAMPAIGN TREASURER PHONE	<del>214-614-1025</del> 469-400-6700		
8 REPORT TYPE	<input type="checkbox"/> January 15 <input checked="" 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 type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded modified reporting limit <input type="checkbox"/> Final Report (Attach C/OH-FR)		
9 PERIOD COVERED	Month Day Year    01/01/2023    THROUGH    Month Day Year    03/27/2023		
10 ELECTION	ELECTION DATE Month Day Year 05/06/2023		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		12 OFFICE SOUGHT (if known)

GO TO PAGE 2

**CANDIDATE / OFFICEHOLDER REPORT:  
SUPPORT & TOTALS**

**FORM C/OH  
COVER SHEET PG 2**

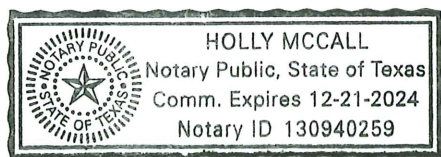
2 of 17

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

<b>15 NOTICE FROM POLITICAL COMMITTEE(S)</b>  <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.		
	<b>COMMITTEE TYPE</b>  <input type="checkbox"/> GENERAL  <input type="checkbox"/> SPECIFIC	<b>COMMITTEE NAME</b>	
		<b>COMMITTEE ADDRESS</b>	
		<b>COMMITTEE CAMPAIGN TREASURER NAME</b>	
		<b>COMMITTEE CAMPAIGN TREASURER ADDRESS</b>	

16 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$	33.67
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	1,833.67
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$	248.75
	4. TOTAL POLITICAL EXPENDITURES	\$	14,770.32
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	10,239.13
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	0.00

**17 AFFIDAVIT**



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 3rd day of April, 2023, to certify which, witness my hand and seal of office.

*Holly McCall*  
Signature of officer administering

Holly McCall  
Printed name of officer administering

public notary  
Title of officer administering oath

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

3 of 17

**18 FILER NAME**

Livingston, Brian

**19 Filer ID****20 SCHEDULE SUBTOTALS**

NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 1,833.67
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input checked="" type="checkbox"/> SCHEDULE E: LOANS	\$ 0.00
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 14,770.32
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 checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$ 0.00
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: 4/17
<b>2</b> FILER NAME Livingston, Brian		<b>3</b> Filer ID
<b>4</b> Date 01/23/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cox, Robert <hr/> <b>6</b> Contributor address; City; State; Zip Code 2732 Links  The Colony, TX 75056	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) Real Estate		<b>9</b> Employer (See Instructions) Real Estate
Date 01/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jaffer, Shawn <hr/> Contributor address; City; State; Zip Code 13211 Secretariat Blvd  Frisco, TX 75035	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Shawn Jaffer Law Firm
Date 01/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kite, Stuart <hr/> Contributor address; City; State; Zip Code 2136 Wyatt Way  Little Elm, TX 75068	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Banker		Employer (See Instructions) b1 Bank
Date 01/20/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Matt Shaheen Campaign <hr/> Contributor address; City; State; Zip Code 3917 Malton Drive  Plano, TX 75025	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Minett, Buddy <hr/> Contributor address; City; State; Zip Code 8548 Scott Circle  Frisco, TX 75034	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Self



# 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: 5/17
<b>2</b> FILER NAME Livingston, Brian		<b>3</b> Filer ID
<b>4</b> Date 02/21/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ovard, David <hr/> <b>6</b> Contributor address; City; State; Zip Code 5004 Thackery Drive  Frisco, TX 75034	<b>7</b> Amount of Contribution (\$)  \$250.00
<b>8</b> Principal occupation / Job title (See Instructions) Attorney		<b>9</b> Employer (See Instructions) Clark Hill, PLC
Date 01/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rattliff, Elizabeth <hr/> Contributor address; City; State; Zip Code 1317 Discovery Bay Dr  Frisco, TX 75036	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Retired
Date 02/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilcox, Dave <hr/> Contributor address; City; State; Zip Code PO Box 5163  Frisco, TX 75035	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions) Real Estate Developer		Employer (See Instructions) Wilcox Partners

# LOANS

## SCHEDULE E

**The Instruction Guide explains how to complete this form.**

**1** Total pages Schedule E:  
Sch: 1/1 Rpt: 6/17

**2** FILER NAME  
Livingston, Brian

**3** Filer ID

**4** TOTAL OF UNITEMIZED LOANS

\$ 0.00

**5** Date of loan

**7** Name of lender

☐ out-of-state PAC (ID#: \_\_\_\_\_)

**9** Loan Amount (\$)

**6** Is lender a  
financial  
institution?

**8** Lender address; City; State; Zip Code

**10** Interest Rate

**11** Maturity Date

**12** Principal occupation / Job title (See Instructions)

**13** Employer (See Instructions)

**14** Description of Collateral

☐ None

**15** Check if personal funds were deposited into political account  
(See Instructions)

☐

**16** GUARANTOR  
INFORMATION

**17** Name of guarantor

**19** Amount Guaranteed (\$)

☐ not applicable

**18** Guarantor address; City; State; Zip Code

**20** Principal occupation

**21** Employer (See Instructions)

# 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.

1 Total pages Schedule F1: Sch: 1/11 Rpt: 7/17	2 FILER NAME Livingston, Brian	3 Filer ID
4 Date 02/10/2023	5 Payee name Americas Defender Foundation	
6 Amount (\$) \$1,250.00	7 Payee address; City; State; Zip Code PO Box 6127  McKinney, TX 75071	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event 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 Thin Blue Line Ball
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/21/2023	Payee name Anedot.com	
Amount (\$) \$65.60	Payee address; City; State; Zip Code PO Box 84314  Baton Rouge, LA 70884	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Merchant Fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/30/2023	Payee name Bolgiano Design	
Amount (\$) \$55.00	Payee address; City; State; Zip Code 440 Longshore Drive  Little Elm, TX 75068	
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 Web
Complete ONLY 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: 2/11 Rpt: 8/17	<b>2</b> FILER NAME Livingston, Brian	<b>3</b> Filer ID
<b>4</b> Date 02/21/2023	<b>5</b> Payee name Chris Fields	
<b>6</b> Amount (\$) \$2,500.00	<b>7</b> Payee address; City; State; Zip Code 10300 Fire Ridge Drive  Frisco, TX 75033	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting 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 Misc
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 02/10/2023	Candidate/Officeholder name Chris Fields	Office sought Office held
Amount (\$) \$500.00	Payee address; City; State; Zip Code 10300 Fire Ridge Drive  Frisco, TX 75033	
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 Merchant fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 01/20/2023	Candidate/Officeholder name City of Frisco	Office sought Office held
Amount (\$) \$200.00	Payee address; City; State; Zip Code 6101 Frisco Square Blvd.  Frisco, TX 75034	
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 Filing Fee
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.

1 Total pages Schedule F1: Sch: 3/11 Rpt: 9/17	2 FILER NAME Livingston, Brian	3 Filer ID
4 Date 02/21/2023	5 Payee name Collin County Bookkeeping	
6 Amount (\$) \$100.00	7 Payee address; City; State; Zip Code 11932 Salisbury Drive Suite 202 Frisco, TX 75035	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bookkeeping and Campaign Reporting
9 Complete ONLY if direct expenditure to benefit C/OH		
Date 02/03/2023	Payee name Collin County Bookkeeping	
Amount (\$) \$100.00	Payee address; City; State; Zip Code 11932 Salisbury Drive Suite 202 Frisco, TX 75035	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Bookkeeping and Campaign Reporting
Complete ONLY if direct expenditure to benefit C/OH		
Date 02/21/2023	Payee name Cowboys Club	
Amount (\$) \$232.13	Payee address; City; State; Zip Code Five Cowboys Way #200 Frisco, TX 75034	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage 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 Misc
Complete ONLY 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: 4/11 Rpt: 10/17	<b>2</b> FILER NAME Livingston, Brian	<b>3</b> Filer ID
<b>4</b> Date 01/20/2023	<b>5</b> Payee name Earnest B's BBQ	
<b>6</b> Amount (\$) \$900.00	<b>7</b> Payee address; City; State; Zip Code 6100 TX-121  Frisco, TX 75034	
<b>8</b> 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 Campaign Kickoff
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 03/04/2023	Candidate/Officeholder name Office sought Office held	
Payee name Earnest B's BBQ		
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code 6100 TX-121  Frisco, TX 75034	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event 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 Event Deposit
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 02/13/2023	Candidate/Officeholder name Office sought Office held	
Payee name Embassy Suites		
Amount (\$) \$55.46	Payee address; City; State; Zip Code 3100 Town Center Tr  Denton, TX 76201	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage 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 Misc
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: 5/11 Rpt: 11/17	<b>2</b> FILER NAME Livingston, Brian	<b>3</b> Filer ID
<b>4</b> Date 03/01/2023	<b>5</b> Payee name Facebook Ad Team	
<b>6</b> Amount (\$) \$154.17	<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 Online Ad
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 02/01/2023	Candidate/Officeholder name Office sought Office held	
Payee name Facebook Ad Team		
Amount (\$) \$103.85	Payee address; City; State; Zip Code 1601 S. California Ave  Palo Alto, CA 94304	
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 Online Ad
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 01/01/2023	Candidate/Officeholder name Office sought Office held	
Payee name Facebook Ad Team		
Amount (\$) \$91.55	Payee address; City; State; Zip Code 1601 S. California Ave  Palo Alto, CA 94304	
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 Online 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: 6/11 Rpt: 12/17	<b>2</b> FILER NAME Livingston, Brian	<b>3</b> Filer ID
<b>4</b> Date 03/03/2023	<b>5</b> Payee name Fields, Chris	
<b>6</b> Amount (\$) \$500.00	<b>7</b> Payee address; City; State; Zip Code 10300 Fire Ridge Drive  Frisco, TX 75033	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting 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 Misc
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 01/27/2023	Candidate/Officeholder name Frisco Chamber of Commerce	Office sought Office held
Amount (\$) \$60.00	Payee address; City; State; Zip Code 6843 Main St  Frisco, TX 75034	
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 Gala
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 02/13/2023	Candidate/Officeholder name Goats Arena	Office sought Office held
Amount (\$) \$146.80	Payee address; City; State; Zip Code 1710 FM423 Suite 100 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 Misc
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.

1 Total pages Schedule F1: Sch: 7/11 Rpt: 13/17		2 FILER NAME Livingston, Brian		3 Filer ID	
4 Date 01/21/2023		5 Payee name Livingston, Brittany			
6 Amount (\$) \$62.70		7 Payee address; City; State; Zip Code 9250 Alberta Ct  Frisco, TX 75033			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Event 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 Supplies	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 01/12/2023		Payee name Melody of Hope			
Amount (\$) \$300.00		Payee address; City; State; Zip Code 5941 Stone Mountain Rd  The Colony, TX 75056			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Event 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 Music	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 02/21/2023		Payee name Pizzeria Testa			
Amount (\$) \$214.70		Payee address; City; State; Zip Code 8660 Church St  Frisco, TX 75034			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Food/Beverage 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 Misc	
Complete ONLY 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: 8/11 Rpt: 14/17	<b>2</b> FILER NAME Livingston, Brian	<b>3</b> Filer ID
<b>4</b> Date 01/26/2023	<b>5</b> Payee name Rutledge, Hunter	
<b>6</b> Amount (\$) \$550.00	<b>7</b> Payee address; City; State; Zip Code  TX	
<b>8</b> 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 Photography
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 02/24/2023	Candidate/Officeholder name Signarama	Office sought Office held
Amount (\$) \$476.30	Payee address; City; State; Zip Code 9410 Dallas Pkwy Suite 160 Frisco, TX 75033	
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 signage
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 01/12/2023	Candidate/Officeholder name Signarama	Office sought Office held
Amount (\$) \$1,217.81	Payee address; City; State; Zip Code 9410 Dallas Pkwy Suite 160 Frisco, TX 75033	
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 signage
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: 9/11 Rpt: 15/17	<b>2</b> FILER NAME Livingston, Brian	<b>3</b> Filer ID
<b>4</b> Date 03/27/2023	<b>5</b> Payee name The Community Grill	
<b>6</b> Amount (\$) \$74.35	<b>7</b> Payee address; City; State; Zip Code 2525 Main Suite 400 Frisco, TX 75034	
<b>8</b> 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 Misc
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 03/23/2023	Candidate/Officeholder name	Office sought
Amount (\$) \$171.08	Payee name The Community Grill	Office held
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage 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 Misc
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 03/05/2023	Candidate/Officeholder name	Office sought
Amount (\$) \$65.66	Payee name The Community Grill	Office held
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage 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 Misc
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.

1 Total pages Schedule F1: Sch: 10/11 Rpt: 16/17		2 FILER NAME Livingston, Brian		3 Filer ID	
4 Date 03/14/2023		5 Payee name YouTube			
6 Amount (\$) \$500.00		7 Payee address; City; State; Zip Code 901 Cherry Ave  San Bruno, CA 94066			
8 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 Ad	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 01/18/2023		Payee name YouTube			
Amount (\$) \$300.00		Payee address; City; State; Zip Code 901 Cherry Ave  San Bruno, CA 94066			
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 Ad	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 01/06/2023		Payee name YouTube			
Amount (\$) \$500.00		Payee address; City; State; Zip Code 901 Cherry Ave  San Bruno, CA 94066			
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 Ad	
Complete ONLY 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.

1 Total pages Schedule F1: Sch: 11/11 Rpt: 17/17	2 FILER NAME Livingston, Brian	3 Filer ID
4 Date 03/15/2023	5 Payee name iPROMOTEu	
6 Amount (\$) \$2,074.41	7 Payee address; City; State; Zip Code 321 Commonwealth Rd Suite 100 Wayland, MA 01778	
8 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 Campaign Promotional Items
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held