

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: 12
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST	MI
	Holly		
	NICKNAME	LAST	SUFFIX
Flynn Vilaseca			
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY;		ZIP CODE
	P.O. Box 440544		
	Houston, TX 77244-0544		
	Date Hand-delivered or Date Postmarked		
Receipt #		Amount	
Date Processed			
Date Imaged			
5 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST	MI
	Mr. Roland		
	NICKNAME	LAST	SUFFIX
Garcia			
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE);		APT / SUITE #; CITY; STATE; ZIP CODE
	1000 Louisiana St. Suite 1700		Houston, TX 77002
7 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION
	(713) 374-3500		
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
	09/29/2017		THROUGH
		Month	Day
		10/28/2017	
10 ELECTION	ELECTION DATE		ELECTION TYPE
	Month	Day	Year
11/07/2017		<input type="checkbox"/> Primary	<input type="checkbox"/> Runoff
		<input checked="" type="checkbox"/> General	<input type="checkbox"/> Special
11 OFFICE	OFFICE HELD (if any)		12 OFFICE SOUGHT (if known)
	Houston Independent School District, District 6 Trustee		
		Houston Independent School District, District 6 Trustee	

OFFICE USE ONLY
Date Received
OCT 30 2017

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

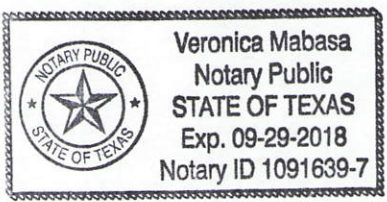
2 of 12

13 C / OH NAME Flynn Vilaseca, Holly	14 Filer ID
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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.	
	<input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE TYPE COMMITTEE NAME
		COMMITTEE ADDRESS
		COMMITTEE CAMPAIGN TREASURER NAME
		COMMITTEE CAMPAIGN TREASURER ADDRESS

16 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ 350.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 18,900.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ 84.36
	4. TOTAL POLITICAL EXPENDITURES	\$ 22,271.71
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 12,380.09
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.

Holly Maria Flynn Vilaseca

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Holly Maria Flynn Vilaseca, this the 30th day of October, 2017, to certify which, witness my hand and seal of office.

<u>Veronica Mabasa</u> Signature of officer administering	<u>Veronica Mabasa</u> Printed name of officer administering	<u>Team Lead</u> Title of officer administering oath
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SUBTOTALS - C/OH

18 FILER NAME Flynn Vilaseca, Holly		19 Filer ID
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 18,300.00
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 600.00
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	\$ 22,271.71
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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/3 Rpt: 4/12
2 FILER NAME Flynn Vilaseca, Holly		3 Filer ID
4 Date 10/10/2017	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bracewell PAC	7 Amount of Contribution (\$) \$1,000.00
6 Contributor address; City; State; Zip Code 711 Louisiana St. Suite 2300 Houston, TX 77002		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/23/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Colon, Edgardo	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code 4601 Washington Ave. Suite 200 Houston, TX 77007		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self employed
Date 10/25/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Farah, George	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code 4101 Washington Ave. Houston, TX 77007		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Guerra & Farah, PLLC
Date 10/04/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) GPS Action PAC	Amount of Contribution (\$) \$10,000.00
Contributor address; City; State; Zip Code 3105 Edloe St. Suite 320 Houston, TX 77027		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/19/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Sylvia	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code P.O. Box 8530 Houston, TX 77249		
Principal occupation / Job title (See Instructions) Senator		Employer (See Instructions) State of Texas

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
Sch: 2/3 Rpt: 5/12

2 FILER NAME
Flynn Vilaseca, Holly

3 Filer ID

4 Date
10/13/2017

5 Full name of contributor out-of-state PAC (ID#: C00027342)
IBEW PAC Voluntary Fund

6 Contributor address; City; State; Zip Code
900 Seventh St. N.W.

Washington, DC 20001

7 Amount of Contribution (\$)
\$500.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date
10/13/2017

Full name of contributor out-of-state PAC (ID#: _____)
Kinder, Nancy

Contributor address; City; State; Zip Code
2929 Lazy Lane Blvd.

Houston, TX 77019

Amount of Contribution (\$)
\$2,000.00

Principal occupation / Job title (See Instructions)
Philanthropist

Employer (See Instructions)
Self / Kinder Foundation

Date
10/23/2017

Full name of contributor out-of-state PAC (ID#: _____)
Leija, Fidencio

Contributor address; City; State; Zip Code
P.O. Box 278

Santa Fe, TX 77510

Amount of Contribution (\$)
\$250.00

Principal occupation / Job title (See Instructions)
Insurance Agent

Employer (See Instructions)
The Fidencio Leija Agency

Date
10/18/2017

Full name of contributor out-of-state PAC (ID#: _____)
Lira, Sergio

Contributor address; City; State; Zip Code
7001 Sloan St.

Houston, TX 77087

Amount of Contribution (\$)
\$100.00

Principal occupation / Job title (See Instructions)
Assistant Principal

Employer (See Instructions)
Houston Independent School District

Date
10/09/2017

Full name of contributor out-of-state PAC (ID#: _____)
Plumbers Local Union No. 68 PAC Fund

Contributor address; City; State; Zip Code
502 Link Road

Houston, TX 77009

Amount of Contribution (\$)
\$1,000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/3 Rpt: 6/12
2 FILER NAME Flynn Vilaseca, Holly		3 Filer ID
4 Date 10/18/2017	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schechter, Richard	7 Amount of Contribution (\$) \$250.00
	6 Contributor address; City; State; Zip Code 3207 Georgetown Houston, TX 77005	
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Self employed
Date 10/20/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, Diana	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code 25 East 78th St. New York, NY 10075	
Principal occupation / Job title (See Instructions) Finance		Employer (See Instructions) Self employed
Date 10/12/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas, Wretha	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code 14227 Ballfour Park Lane Houston, TX 77047	
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Houston Educational Support Personal
Date 10/12/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vilaseca Flynn, Maria del Pilar	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code 1960 S Bay Dr Port Clinton, OH 43452	
Principal occupation / Job title (See Instructions) Cleaning		Employer (See Instructions) Self employed
Date 10/02/2017	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walker, Geoffrey	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code 1705 North Blvd Houston, TX 77098	
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Andrews Kurth Kenyon LLP

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: Sch: 1/1 Rpt: 7/12	
2 FILER NAME Flynn Vilaseca, Holly		3 Filer ID	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 10/14/2017	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Salazar, Maria	8 Amount of contribution (\$) \$600.00	9 In-kind contribution description Event refreshments
	7 Contributor address; City; State; Zip Code 8814 Brae Acres Houston, TX 77074	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Trainer		11 Employer (FOR NON-JUDICIAL) (See instructions) Teacherbuilder.net	
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.

1 Total pages Schedule F1: Sch: 1/5 Rpt: 8/12		2 FILER NAME Flynn Vilaseca, Holly		3 Filer ID	
4 Date 09/29/2017		5 Payee name Bison Signs			
6 Amount (\$) \$1,123.09		7 Payee address; City; State; Zip Code 10100 Clay Rd. Suite G Houston, TX 77080			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Printing 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 signs	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 10/26/2017		Payee name Democracy Engine			
Amount (\$) \$71.56		Payee address; City; State; Zip Code 2125 14th Street NW Washington, DC 20009			
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 Online donation fees	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 10/20/2017		Payee name Facebook			
Amount (\$) \$250.10		Payee address; City; State; Zip Code 1 Hacker Way Menlo Park, CA 94025			
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 Facebook ads	
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: 2/5 Rpt: 9/12	2 FILER NAME Flynn Vilaseca, Holly	3 Filer ID
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4 Date 10/16/2017	5 Payee name Facebook
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6 Amount (\$) \$50.63	7 Payee address; City; State; Zip Code 1 Hacker Way Menlo Park, CA 94025
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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 Facebook ads
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/16/2017	Payee name Facebook
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Amount (\$) \$25.23	Payee address; City; State; Zip Code 1 Hacker Way Menlo Park, CA 94025
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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 Facebook ads
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/23/2017	Payee name Johnston Campaigns
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Amount (\$) \$4,508.16	Payee address; City; State; Zip Code 3715 Roylene Court Dickinson, TX 77539
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing 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 Direct mail
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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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: 3/5 Rpt: 10/12	2 FILER NAME Flynn Vilaseca, Holly	3 Filer ID
4 Date 10/16/2017	5 Payee name Johnston Campaigns	
6 Amount (\$) \$4,508.16	7 Payee address; City; State; Zip Code 3715 Roylene Court Dickinson, TX 77539	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing 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 Direct mail
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 10/03/2017	Payee name Johnston Campaigns	
Amount (\$) \$4,508.16	Payee address; City; State; Zip Code 3715 Roylene Court Dickinson, TX 77539	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing 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 Direct mail
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 10/16/2017	Payee name KLM Public Affairs, LLC	
Amount (\$) \$1,500.00	Payee address; City; State; Zip Code 2028 Buffalo Terrace Houston, TX 77019	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting 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 General campaign consulting services
	9 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.

1 Total pages Schedule F1: Sch: 4/5 Rpt: 11/12		2 FILER NAME Flynn Vilaseca, Holly		3 Filer ID	
4 Date 10/19/2017		5 Payee name La Griglia			
6 Amount (\$) \$1,185.10		7 Payee address; City; State; Zip Code 2002 West Gray Houston, TX 77009			
8 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 Event refreshments	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 10/28/2017		Payee name Nationbuilder			
Amount (\$) \$89.00		Payee address; City; State; Zip Code 520 S. Grand Ave. 2nd Floor Los Angeles, CA 90071			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 software	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 10/10/2017		Payee name Nationbuilder			
Amount (\$) \$59.00		Payee address; City; State; Zip Code 520 S. Grand Ave. 2nd Floor Los Angeles, CA 90071			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 software	
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: 5/5 Rpt: 12/12	2 FILER NAME Flynn Vilaseca, Holly	3 Filer ID	
4 Date 10/04/2017	5 Payee name Wythe, Greg		
6 Amount (\$) \$4,309.16	7 Payee address; City; State; Zip Code 5401 Rampart # 547 Houston, TX 77081		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting 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 management services	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held