

FORM COR-C/OH

CORRECTION AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

1 ACCOUNT #		2 Total pages filed: 33		OFFICE USE ONLY	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST	MI	Date Received	
	Chris				
	NICKNAME	LAST	SUFFIX	Date Hand-delivered or Date Postmarked	
	Riley				
4 ORIGINAL REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> Runoff <input type="checkbox"/> Other (specify)			Receipt #	
	<input checked="" type="checkbox"/> July 15 <input type="checkbox"/> Exceeded \$500 limit			Amount	
	<input type="checkbox"/> 30th day before election <input type="checkbox"/> 15th day after treasurer appointment (officeholder only)			Legal	
	<input type="checkbox"/> 8th day before election <input type="checkbox"/> Final report			Totals	
5 ORIGINAL PERIOD COVERED	Month 04 / Day 30 / Year 2009	THROUGH	Month 06 / Day 30 / Year 2009	Date Processed	
				Date Imaged	

6 EXPLANATION OF CORRECTION

This amended report changes expenditure payee name previously reported as Worley to Worley Printing Co.

AUSTIN CITY CLERK
POSTING: DATE/TIME
2010 AUG 16 PM 12 22

7 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that this corrected report is true and correct.

Check ONLY if applicable:



I swear, or affirm, that I am filing this corrected report not later than the 14th business day after the date I learned that the report as originally filed is inaccurate or incomplete. I swear, or affirm, that any error or omission in the report as originally filed was made in good faith.



AFFIX NOTARY STAMP / SEAL ABOVE

Signature of Candidate or Officeholder

Sworn to and subscribed before me by Chris Riley this the 16 day of August

2010 to certify which, witness my hand and seal of office.

Ann Margrett Franklin

Notary Ann Margrett Franklin

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath

**Remember To Attach Any Part Of The Campaign Finance Report Form
Needed To Report And Explain Corrections**

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH INSTRUCTION GUIDE explains how to complete this form.

1 ACCOUNT #
(Ethics Commission filers)
00010009

2 PAGE #
1 of 32

**3 CANDIDATE /
OFFICEHOLDER
NAME**

 MS / MRS / MR FIRST MI
Chris
NICKNAME LAST SUFFIX
Riley
OFFICE USE ONLY:

Date Received

**4 CANDIDATE /
OFFICEHOLDER
MAILING
ADDRESS**

 ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
1310 San Antonio #1
Austin, TX 78701

☐ Change of Address

Date Hand-delivered or Date Postmarked

Receipt #

Amount

**5 CAMPAIGN
TREASURER
NAME**

 MS / MRS / MR FIRST MI
Catherine
NICKNAME LAST SUFFIX
Mauzy

Date Processed

Date Imaged

**6 CAMPAIGN
TREASURER
ADDRESS**
(Residence or business)

 STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE
700 Lavaca, Ste. 1150
Austin, TX 78701

**7 CAMPAIGN
TREASURER
PHONE**

 AREA CODE PHONE NUMBER EXTENSION
(512) 474-1493
8 REPORT TYPE
☐ January 15 ☐ 30th day before election ☐ Runoff ☐ 15th day after campaign treasurer appointment (officeholder only)
☒ July 15 ☐ 8th day before election ☐ Exceeded \$500 limit ☐ Final report (Attach C/OH - FR)
9 PERIOD COVERED
 Month Day Year MONTH DAY YEAR
04/30/2009 THROUGH 06/30/2009
10 ELECTION
 ELECTION DATE ELECTION TYPE
Month Day Year
05/10/2009 ☐ Primary ☐ Runoff ☒ General ☐ Special
11 OFFICE
 OFFICE HELD (if any)
City Council, Place 1
12 OFFICE SOUGHT (if known)
**13 NOTICE
OF DIRECT
CAMPAIGN
EXPENDITURE
BY OTHER
INDIVIDUALS**

.. Direct campaign expenditures are campaign expenditures made by others without the candidate's prior consent or approval. Candidates are required to disclose this information only if they receive notification of the direct campaign expenditure. ..

Name

Address/PO Box; Apt. / Suite #; City; State; Zip Code

☐ additional pages

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

14 C/OH NAME Riley, Chris

15 ACCOUNT # (Ethics Commission filers)
0001000916 NOTICE
FROM
POLITICAL
COMMITTEE(S)

.. This box is for notice of political expenditures by political committees to support the candidate / officeholder. These expenditures may have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this information only if they receive notice of such expenditures. ..

COMMITTEE TYPE

COMMITTEE NAME

☐ GENERAL

COMMITTEE ADDRESS

☐ SPECIFIC

COMMITTEE CAMPAIGN TREASURER NAME

☐ additional pages

COMMITTEE CAMPAIGN TREASURER ADDRESS

17 CONTRIBUTION
TOTALS1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN
PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED

\$

0.00

2. TOTAL POLITICAL CONTRIBUTIONS
(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)

\$

10,239.00

EXPENDITURE
TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED

\$

107.46

4. TOTAL POLITICAL EXPENDITURES

\$

35,192.26

CONTRIBUTION
BALANCE5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE
LAST DAY OF THE REPORTING PERIOD

\$

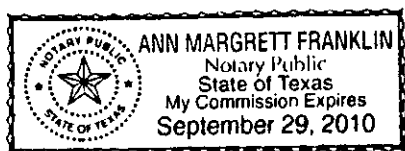
0.00

OUTSTANDING
LOAN TOTALS6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE
LAST DAY OF THE REPORTING PERIOD

\$

0.00

18 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.

Chris Riley
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Chris Riley, this the 16th day
of August, 2010, to certify which, witness my hand and seal of office.

Ann Margrett Franklin
Signature of officer administering oath

Ann Margrett Franklin
Print name of officer administering oath

Notary
Title of officer administering oath

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 1/14 Report: 3/33	
2 FILER NAME Riley, Chris		3 ACCOUNT # (Ethics Commission filers) 00010009	
4 Date 05/04/2009	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Anderson, Tammi 6 Contributor address; City; State; Zip Code 3600 N. Capital of Texas Highway Austin, TX 78746	7 Amount of contribution (\$) \$350.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions) Homemaker	
Date 05/01/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Byers, Julie Contributor address; City; State; Zip Code 4516 Balcones Dr. Austin, TX 78731	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/08/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Casias, Michael Contributor address; City; State; Zip Code 2113 Riverview Austin, TX 78702	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 04/30/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cheaney, Shelia Enid Contributor address; City; State; Zip Code 6016 Mount Bonnell Cove Austin, TX 78731	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/01/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cheaney, Shelia Enid Contributor address; City; State; Zip Code 6016 Mount Bonnell Cove Austin, TX 78731-3515	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 2/14 Report: 4/33	
2 FILER NAME Riley, Chris		3 ACCOUNT # (Ethics Commission filers) 00010009	
4 Date 05/03/2009	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cravey, Emma 6 Contributor address; City; State; Zip Code 2103A La Casa Dr. Austin, TX 78704	7 Amount of contribution (\$) \$25.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 05/08/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Curry, Mark Contributor address; City; State; Zip Code 4000 Table Rock Austin, TX 78731	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/02/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Duncan, Michelle Angelique Contributor address; City; State; Zip Code 3103 Canter Lane Austin, TX 78759	Amount of contribution (\$) \$10.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/02/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Fitzpatrick, John Contributor address; City; State; Zip Code 1706 Nickerson Street Austin, TX 78704	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 04/30/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gayle, Dewitt Contributor address; City; State; Zip Code 1609 Scenic Drive Austin, TX 78703	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Architect		Employer (See Instructions) RTG Partners	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 3/14 Report: 5/33	
2 FILER NAME Riley, Chris		3 ACCOUNT # (Ethics Commission filers) 00010009	
4 Date 05/03/2009	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ghahremani, Kay 6 Contributor address; City; State; Zip Code 3036 Thrushwood Dr. Austin, TX 78757	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 04/30/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Graham, Alan Contributor address; City; State; Zip Code 1408 Redbud Trail Austin, TX 78746	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/01/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Griebel, Thomas Contributor address; City; State; Zip Code 8332 La Plata Loop Austin, TX 78737	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/05/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gutierrez, Jenice Contributor address; City; State; Zip Code 360 Nueces #1008 Austin, TX 78701	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/08/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hahn, Jeffrey Contributor address; City; State; Zip Code 6700 Hot Springs Dr. Austin, TX 78749	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 4/14 Report: 6/33	
2 FILER NAME Riley, Chris		3 ACCOUNT # (Ethics Commission filers) 00010009	
4 Date 05/01/2009	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Handcox, Berl 6 Contributor address; City; State; Zip Code 5202 Rambling Range Austin, TX 78727	7 Amount of contribution (\$) \$200.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions) Retired		10 Employer (See Instructions) None	
Date 05/09/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Harris, Lisa Contributor address; City; State; Zip Code 4522 Avenue F. Austin, TX 78751	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/06/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Heidrick, Clarke Contributor address; City; State; Zip Code 3702 Eastledge Dr. Austin, TX 78731	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/03/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Herndon, Benjamin Contributor address; City; State; Zip Code 1111 West 12th St. #111 Austin, TX 78703	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Research Assistant		Employer (See Instructions) UT Austin	
Date 05/07/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hightower, Susan Contributor address; City; State; Zip Code 2214 Alta Vista Ave. Austin, TX 78704	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 5/14 Report: 7/33	
2 FILER NAME Riley, Chris		3 ACCOUNT # (Ethics Commission filers) 00010009	
4 Date 05/04/2009	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hill, Richard 6 Contributor address; City; State; Zip Code 2303 Windsor Rd. Austin, TX 78703	7 Amount of contribution (\$) \$350.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions) Partner		10 Employer (See Instructions) Hill Partners, Inc.	
Date 05/06/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hogan, Bill Contributor address; City; State; Zip Code 719 W. 6th St. Austin, TX 78701	Amount of contribution (\$) \$22.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/03/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Holland, Sarah Contributor address; City; State; Zip Code 1707 Wethersfield Rd. Austin, TX 78703	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/08/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hornaday, Walter & Raina Contributor address; City; State; Zip Code 908 West 18th St. Austin, TX 78701	Amount of contribution (\$) \$700.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Wind Farmer / Generation Operator		Employer (See Instructions) Cielo Wind Services / Cielo Wind Services	
Date 05/02/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hornburg, Kernan Contributor address; City; State; Zip Code 12105 Scribe Dr. Austin, TX 78759	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 6/14 Report: 8/33	
2 FILER NAME Riley, Chris		3 ACCOUNT # (Ethics Commission filers) 00010009	
4 Date 05/04/2009	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Jaikumar, Arjun Kent 6 Contributor address; City; State; Zip Code 2161 42nd St. Astoria, NY 11105	7 Amount of contribution (\$) \$25.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 05/03/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Johnson, Matthew Contributor address; City; State; Zip Code 611 Oakland Ave. Austin, TX 78703	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/01/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kennedy, Peter Contributor address; City; State; Zip Code 4401 Avenue H Austin, TX 78751	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/06/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Klein, Michael Contributor address; City; State; Zip Code 119 E. 6th St. Ste. 304 Austin, TX 78701	Amount of contribution (\$) \$22.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/08/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Laine, Samuel Contributor address; City; State; Zip Code 5421 Hitcher Bnd. Austin, TX 78749	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Associate		Employer (See Instructions) Riverside Resources	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 7/14 Report: 9/33	
2 FILER NAME Riley, Chris		3 ACCOUNT # (Ethics Commission filers) 00010009	
4 Date 05/05/2009	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lance, Kent Jr. 6 Contributor address; City; State; Zip Code 3600 N Capital of TX Hwy Bldg B Ste 250 Austin, TX 78746	7 Amount of contribution (\$) \$200.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions) Associate		10 Employer (See Instructions) Hill Partners	
Date 05/01/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Law Office of Jimmy Nassour Contributor address; City; State; Zip Code 3839 Bee Cave Rd. Ste. 200 Austin, TX 78746	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/01/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lowerre, Richard Contributor address; City; State; Zip Code 725 Patterson Austin, TX 78703	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/06/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Marvin, Flora Contributor address; City; State; Zip Code 2708 Westlake Dr. Austin, TX 78746	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/01/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mayo Clark, Pamela Contributor address; City; State; Zip Code 4100 Bluffridge Dr. Austin, TX 78759	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 8/14 Report: 10/33	
2 FILER NAME Riley, Chris		3 ACCOUNT # (Ethics Commission filers) 00010009	
4 Date 05/01/2009	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Moore, Catherine 6 Contributor address; City; State; Zip Code 3802 Avenue H. Austin, TX 78751	7 Amount of contribution (\$) \$50.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 05/07/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Moss, Ron Contributor address; City; State; Zip Code 7705 Stonehaven Circle Austin, TX 78731	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) attorney		Employer (See Instructions) Graves Dougherty Hearon & Moody, P.C.	
Date 05/04/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Neal, Erin Lee Contributor address; City; State; Zip Code 1345 East Whitten Place Chandler, AZ 85225	Amount of contribution (\$) \$40.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/09/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Pedersen, Craig Contributor address; City; State; Zip Code 4703 Trail Crest Circle Austin, TX 78735	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Vice President - Water Resources - Texas		Employer (See Instructions) URS	
Date 05/05/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Penn, Walter Contributor address; City; State; Zip Code 1109 Kennan Rd. Austin, TX 78746	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Financial Advisor		Employer (See Instructions) Raymond James	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 9/14 Report: 11/33	
2 FILER NAME Riley, Chris		3 ACCOUNT # (Ethics Commission filers) 00010009	
4 Date 05/09/2009	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Phillips, Gregory 6 Contributor address; City; State; Zip Code 4100 Michael Neill Dr. Austin, TX 78730	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 04/30/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rankin, Susan Contributor address; City; State; Zip Code 3216 Harris Park Austin, TX 78705	Amount of contribution (\$) \$150.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/08/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Reese, Andrew Contributor address; City; State; Zip Code 2914 Regents Park Austin, TX 78746	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Homemaker		Employer (See Instructions) n/a	
Date 05/08/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Reese, Donald Contributor address; City; State; Zip Code 100 Congress Ave., Ste. 780 Austin, TX 78701	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Founder		Employer (See Instructions) Riverside Resources	
Date 05/06/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Reese, Gina Contributor address; City; State; Zip Code 2914 Regents Park Austin, TX 78746	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Associate		Employer (See Instructions) Ironwood Real Estate	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 10/14 Report: 12/33	
2 FILER NAME Riley, Chris		3 ACCOUNT # (Ethics Commission filers) 00010009	
4 Date 05/07/2009	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rhode, Brett 6 Contributor address; City; State; Zip Code 808 Dawson Austin, TX 78704	7 Amount of contribution (\$) \$350.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions) Architect		10 Employer (See Instructions) Rhode Partners	
Date 05/09/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rieck, Peter Contributor address; City; State; Zip Code 6805 Vallecito Dr. Austin, TX 78759	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/01/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rostami, Amir Contributor address; City; State; Zip Code 5729 N. Scout Island Cir. Austin, TX 78731	Amount of contribution (\$) \$22.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/06/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Schenkkan, Phyllis Contributor address; City; State; Zip Code 3505 Mount Bonnell Rd. Austin, TX 78731	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/06/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Scherer, Bradley Contributor address; City; State; Zip Code 2 Bank St. Apt. 16 New York, NY 10014	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 11/14 Report: 13/33	
2 FILER NAME Riley, Chris		3 ACCOUNT # (Ethics Commission filers) 00010009	
4 Date 05/04/2009	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Sherman, Max 6 Contributor address; City; State; Zip Code 3505 Greenway Austin, TX 78705	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 05/07/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Smith, Craig Contributor address; City; State; Zip Code 1908 Barton Parkway Austin, TX 78704	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/05/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Smitheal, Jeremy Contributor address; City; State; Zip Code 100 Congress Ave., Ste. 780 Austin, TX 78701	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Principal		Employer (See Instructions) Riverside Resources	
Date 05/03/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Souhami, Gloria Contributor address; City; State; Zip Code 802 Norwalk Ln. Austin, TX 78703	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/05/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Stack, David Contributor address; City; State; Zip Code 1525 E. Candlestick Dr. Tempe, AZ 85283	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 12/14 Report: 14/33	
2 FILER NAME Riley, Chris		3 ACCOUNT # (Ethics Commission filers) 00010009	
4 Date 04/30/2009	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Stumberg, Eric 6 Contributor address; City; State; Zip Code 3911 Avenue G Austin, TX 78751	7 Amount of contribution (\$) \$250.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions) CEO		10 Employer (See Instructions) TengoInternet, Inc.	
Date 05/07/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Taylor, Beau Contributor address; City; State; Zip Code 11208 Hidden Bluff Dr. Austin, TX 78754	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/07/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Tilney, William Angus Contributor address; City; State; Zip Code 5516 Avenue G. Austin, TX 78751	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/01/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Vandelden, Jeffrey Contributor address; City; State; Zip Code 5809 Painted Valley Rd. Austin, TX 78759	Amount of contribution (\$) \$22.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/06/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Vita, Brian Contributor address; City; State; Zip Code 1007 S. Congress Ave. Apt. 432 Austin, TX 78704	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 13/14 Report: 15/33	
2 FILER NAME Riley, Chris		3 ACCOUNT # (Ethics Commission filers) 00010009	
4 Date 05/01/2009	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Waterloo Brothers LLC 6 Contributor address; City; State; Zip Code 705 W. Lynn St. Austin, TX 78703	7 Amount of contribution (\$) \$210.00	8 In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 05/06/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Whatley, Melba Contributor address; City; State; Zip Code 2909 W. 35th St. Austin, TX 78703	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) investments		Employer (See Instructions) clarite holdings	
Date 05/02/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Williams, Clayton Contributor address; City; State; Zip Code 6 Desta Drive Ste. 6500 Midland, TX 79705	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) investments		Employer (See Instructions) Self	
Date 05/02/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Williams, Modesta Jr. Contributor address; City; State; Zip Code 6 Desta Drive Ste. 6500 Midland, TX 79705	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) CWEI	
Date 05/06/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Winetroub, Jerald Contributor address; City; State; Zip Code 515 Congress Avenue, Suite 2230 Austin, TX 78701	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Jerald Winetroub Companies	

**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS****SCHEDULE A**

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 14/14 Report: 16/33	
2 FILER NAME Riley, Chris		3 ACCOUNT # (Ethics Commission filers) 00010009	
4 Date 05/06/2009	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Womack, Brad 6 Contributor address; City; State; Zip Code 719 W. 6th St. Austin, TX 78701	7 Amount of contribution (\$) \$22.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 05/06/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Woody, Bob Contributor address; City; State; Zip Code 807 Brazos St. #311 Austin, TX 78701	Amount of contribution (\$) \$22.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/06/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Yassine, Mike Contributor address; City; State; Zip Code 213 W. 4th St. Ste. 200 Austin, TX 78701	Amount of contribution (\$) \$22.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 1/11 Report: 17/33		2 FILER NAME Riley, Chris		3 ACCOUNT # (TEC filers) 00010009	
4 Date 05/22/2009	5 Payee name Constant Contact				
6 Amount (\$) \$85.00	7 Payee address City; State; Zip Code 1601 Trapelo Rd., Ste. 329 Waltham, MA 2451				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Email List Management		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 06/22/2009	Payee name Constant contact				
Amount (\$) \$50.00	Payee address City; State; Zip Code 1601 Trapelo Rd., Ste. 329 Waltham, MA 02451				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> email service		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 05/18/2009	Payee name Eastside Café				
Amount (\$) \$50.14	Payee address City; State; Zip Code 2113 Manor Rd. Austin, TX 78722				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Meals		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 05/11/2009	Payee name Elysium				
Amount (\$) \$104.99	Payee address City; State; Zip Code 705 Red River Austin, TX 78701				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Intern appreciation party		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:

POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 2/11 Report: 18/33		2 FILER NAME Riley, Chris		3 ACCOUNT # (TEC filers) 00010009	
4 Date 05/01/2009	5 Payee name Enviromedia				
6 Amount (\$) \$8,670.00	7 Payee address City; State; Zip Code 1717 W. 6th St. Ste. 400 Austin, TX 78703				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Television Advertising		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 05/05/2009	Payee name Enviromedia				
Amount (\$) \$1,035.00	Payee address City; State; Zip Code 1717 W. 6th St. Ste. 400 Austin, TX 78703				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Television Advertising		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 05/02/2009	Payee name Facebook				
Amount (\$) \$39.99	Payee address City; State; Zip Code 156 University Ave. Palo Alto, CA 94301				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Advertising		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 05/04/2009	Payee name Facebook				
Amount (\$) \$40.00	Payee address City; State; Zip Code 156 University Ave. Palo Alto, CA 94301				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Advertising		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:

POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 3/11 Report: 19/33		2 FILER NAME Riley, Chris		3 ACCOUNT # (TEC filers) 00010009	
4 Date 05/05/2009	5 Payee name Facebook				
6 Amount (\$) \$40.00	7 Payee address City; State; Zip Code 156 University Ave. Palo Alto, CA 94301				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Advertising		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 05/06/2009	Payee name Facebook				
Amount (\$) \$29.99	Payee address City; State; Zip Code 156 University Ave. Palo Alto, CA 94301				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Advertising		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 05/08/2009	Payee name Facebook				
Amount (\$) \$30.00	Payee address City; State; Zip Code 156 University Ave. Palo Alto, CA 94301				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Advertising		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 05/08/2009	Payee name Facebook				
Amount (\$) \$30.00	Payee address City; State; Zip Code 156 University Ave. Palo Alto, CA 94301				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Advertising		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:

POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 4/11 Report: 20/33		2 FILER NAME Riley, Chris		3 ACCOUNT # (TEC filers) 00010009	
4 Date 05/09/2009	5 Payee name Facebook				
6 Amount (\$) \$30.00	7 Payee address City: State: Zip Code 156 University Ave. Palo Alto, CA 94301				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Advertising		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 05/10/2009	Payee name Facebook				
Amount (\$) \$45.00	Payee address City: State: Zip Code 156 University Ave. Palo Alto, CA 94301				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Advertising		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 05/10/2009	Payee name Facebook				
Amount (\$) \$45.00	Payee address City: State: Zip Code 156 University Ave. Palo Alto, CA 94301				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Advertising		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 05/13/2009	Payee name Facebook				
Amount (\$) \$44.99	Payee address City: State: Zip Code 156 University Ave. Palo Alto, CA 94301				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Advertising		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:

POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 5/11 Report: 21/33		2 FILER NAME Riley, Chris		3 ACCOUNT # (TEC filers) 00010009	
4 Date 05/13/2009	5 Payee name Facebook				
6 Amount (\$) \$44.96	7 Payee address City; State; Zip Code 156 University Ave. Palo Alto, CA 94301				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Advertising		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 05/13/2009	Payee name Garrett, Hall				
Amount (\$) \$250.00	Payee address City; State; Zip Code 2509 Peachtree Mckinney, TX 78070				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign Salary: Intern		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 05/05/2009	Payee name Goss, Delwin				
Amount (\$) \$120.00	Payee address City; State; Zip Code 6410 Ponca St. Austin, TX 78741				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract Labor-Yard Signs		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 04/30/2009	Payee name Haenschen, Katherine				
Amount (\$) \$3,000.00	Payee address City; State; Zip Code 4505 Duval St. Apt. 229 Austin, TX 78751				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign Manager Salary		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:

POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 6/11 Report: 22/33		2 FILER NAME Riley, Chris		3 ACCOUNT # (TEC filers) 00010009	
4 Date 05/08/2009	5 Payee name Harry, Susan				
6 Amount (\$) \$3,000.00	7 Payee address City; State; Zip Code 2520 Longview St. Ste. 211 Austin, TX 78705				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign Salary: Finance Manager		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 05/04/2009	Payee name Kelly Graphics				
Amount (\$) \$2,918.32	Payee address City; State; Zip Code 1409 Quaker Ridge Austin, TX 78746				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Printing		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 05/04/2009	Payee name Kelly Graphics				
Amount (\$) \$489.76	Payee address City; State; Zip Code 1409 Quaker Ridge Austin, TX 78746				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Printing		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 05/13/2009	Payee name Ledesman, Chris				
Amount (\$) \$250.00	Payee address City; State; Zip Code 4415 Avenue A Austin, TX 78751				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign Salary: Intern		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:

POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 7/11 Report: 23/33		2 FILER NAME Riley, Chris		3 ACCOUNT # (TEC filers) 00010009	
4 Date 05/04/2009	5 Payee name McKinley, Warren				
6 Amount (\$) \$100.00	7 Payee address City: State: Zip Code 45 Lovegrass Lane Austin, TX 78745				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Event Expense		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 05/14/2009	Payee name Nokoa				
Amount (\$) \$920.00	Payee address City: State: Zip Code 1223 Rosewood Ave. Austin, TX 78702				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Advertising		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 05/05/2009	Payee name Office Max				
Amount (\$) \$62.76	Payee address City: State: Zip Code 907 W. 5th St. Austin, TX 78701				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Office Supplies		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 05/13/2009	Payee name Parikh, Ishanee				
Amount (\$) \$250.00	Payee address City: State: Zip Code 742 Annies Way Sugarland, TX 77479				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign Salary: Intern		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:

POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 8/11 Report: 24/33		2 FILER NAME Riley, Chris		3 ACCOUNT # (TEC filers) 00010009	
4 Date 05/10/2009		5 Payee name Pirya			
6 Amount (\$) \$193.34		7 Payee address City; State; Zip Code 401 W. 15th St. Ste. 520 Austin, TX 78701			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule)		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Credit card processing fees	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought:	Office held:
Date 05/07/2009		Payee name Political Calling			
Amount (\$) \$1,051.75		Payee address City; State; Zip Code 712 5th St. Ste., E Davis, CA 95616			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule)		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Robocall	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought:	Office held:
Date 05/13/2009		Payee name Puryear, Veronica			
Amount (\$) \$500.00		Payee address City; State; Zip Code 1301 W Lynn St Apt 310 Austin, TX 78703			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule)		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign Salary: Intern	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought:	Office held:
Date 05/09/2009		Payee name Scholtz Bier Garten			
Amount (\$) \$935.92		Payee address City; State; Zip Code 1607 San Jacinto Austin, TX 78701			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule)		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Election Night Party	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought:	Office held:

POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 9/11 Report: 25/33		2 FILER NAME Riley, Chris		3 ACCOUNT # (TEC filers) 00010009	
4 Date 05/13/2009	5 Payee name Shea, Philip				
6 Amount (\$) \$500.00	7 Payee address City; State; Zip Code c/o 621 West 7th St. Austin, TX 78701				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign Salary: Intern		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 05/04/2009	Payee name Telgoogle (ADWORDS)				
Amount (\$) \$50.90	Payee address City; State; Zip Code 1600 Amphitheatre Parkway Mountain View, CA 94043				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Advertising		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 05/08/2009	Payee name Telgoogle (ADWORDS)				
Amount (\$) \$23.74	Payee address City; State; Zip Code 1600 Amphitheatre Parkway Mountain View, CA 94043				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Advertising		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 05/01/2009	Payee name USPS				
Amount (\$) \$28.00	Payee address City; State; Zip Code Central Park West Station Austin, TX 78705				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Postage		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:

POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 10/11 Report: 26/33		2 FILER NAME Riley, Chris		3 ACCOUNT # (TEC filers) 00010009	
4 Date 05/02/2009	5 Payee name USPS				
6 Amount (\$) \$11.20	7 Payee address City; State; Zip Code Central Park West Station Austin, TX 78705				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Postage		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 06/12/2009	Payee name USPS				
Amount (\$) \$10.00	Payee address City; State; Zip Code Central Park West Station Austin, TX 78705				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Postage		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 06/12/2009	Payee name USPS				
Amount (\$) \$27.00	Payee address City; State; Zip Code Downtown Station Austin, TX 78701				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> postage		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 05/13/2009	Payee name Wadia, Bahman				
Amount (\$) \$500.00	Payee address City; State; Zip Code 2205 Cliffs Edge Dr. Austin, TX 78733				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign Salary: Intern		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:

POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 11/11 Report: 27/33		2 FILER NAME Riley, Chris		3 ACCOUNT # (TEC filers) 00010009	
4 Date 05/08/2009		5 Payee name Worley Printing Co.			
6 Amount (\$) \$2,432.38		7 Payee address City; State; Zip Code 3217 N. IH 35 Austin, TX 78722			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule)		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Printing	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 1/4 Report: 28/33		2 FILER NAME Riley, Chris		3 ACCOUNT # (TEC filers) 00010009	
4 Date 05/15/2009		5 Payee name AT&T			
6 Amount (\$) \$1,241.40 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		7 Payee address City; State; Zip Code PO Box 5001 Carol Stream, IL 60197			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule)		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Phone	
Date 06/22/2009		Payee name Constant Contact			
Amount (\$) \$35.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		Payee address City; State; Zip Code 1601 Trapelo Rd., Ste. 329 Waltham, MA 02451			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule)		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Email List Management	
Date 05/15/2009		Payee name David Thomas Photography			
Amount (\$) \$150.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		Payee address City; State; Zip Code 2004-E B 9th St. Austin, TX 78702			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule)		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Photography	
Date 05/15/2009		Payee name Haenschen, Katherine			
Amount (\$) \$1,500.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		Payee address City; State; Zip Code 4505 Duval St. Apt. 229 Austin, TX 78751			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule)		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign Manager Salary	

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 2/4 Report: 29/33		2 FILER NAME Riley, Chris		3 ACCOUNT # (TEC filers) 00010009	
4 Date 05/17/2009		5 Payee name Kelly Graphics			
6 Amount (\$) \$276.46 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		7 Payee address City; State; Zip Code 1409 Quaker Ridge Austin, TX 78746			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule)		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Printing & mailing services	
Date 05/15/2009		Payee name Litt, Mike			
Amount (\$) \$1,050.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		Payee address City; State; Zip Code 4415 Avenue A Austin, TX 78751			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule)		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign Salary: Field Director	
Date 05/22/2009		Payee name NGP			
Amount (\$) \$250.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		Payee address City; State; Zip Code 1225 Eye St., NW Ste. 1225 Washington, DC 20005			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule)		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Software	
Date 05/15/2009		Payee name People Calling People			
Amount (\$) \$863.15 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		Payee address City; State; Zip Code 3948 Legacy Dr. Ste. 106 PMB 272 Plano, TX 75023			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule)		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Robocall	

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 3/4 Report: 30/33		2 FILER NAME Riley, Chris		3 ACCOUNT # (TEC filers) 00010009	
4 Date 05/15/2009		5 Payee name Smart Mail			
6 Amount (\$) \$737.15 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		7 Payee address City; State; Zip Code 2012 Anchor Lane Austin, TX 78723			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule)		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Mailing services	
Date 05/15/2009		Payee name Smart Mail			
Amount (\$) \$359.55 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		Payee address City; State; Zip Code 2011 Anchor Lane Austin, TX 78723			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule)		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Mailing services	
Date 05/15/2009		Payee name Smart Mail			
Amount (\$) \$87.70 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		Payee address City; State; Zip Code 2011 Anchor Lane Austin, TX 78723			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule)		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Mailing services	
Date 06/15/2009		Payee name USPS			
Amount (\$) \$176.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		Payee address City; State; Zip Code Central Park West Station Austin, TX 78705			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule)		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Postage	

**POLITICAL EXPENDITURES
MADE FROM PERSONAL FUNDS****SCHEDULE G****EXPENDITURE CATEGORIES**Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
FeesGifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing ExpenseSalaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental ExpenseLoan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 4/4 Report: 31/33		2 FILER NAME Riley, Chris		3 ACCOUNT # (TEC filers) 00010009	
4 Date 05/15/2009		5 Payee name Worley Printing Co.			
6 Amount (\$) \$318.26 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		7 Payee address City; State; Zip Code 3217 North IH 35 Austin, TX 78722			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule)		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Printing	

CREDITS (optional)**SCHEDULE K**

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 1/1 Report: 32/33
2 FILER NAME Riley, Chris		3 ACCOUNT # (Ethics Commission filers) 00010009
4 Date 05/14/2009	5 Payor name Arc360 Residential 6 Payor address; City; State; Zip Code 360 Nueces Street Austin, TX 78701 7 Reason for credit deposit return	8 Amount (\$) \$300.00