Texas Ethics Commission	P.O. Box 12070	Austin, Texas 7	8711-2070		(512)463-5800	1-80	0-325-8506
					FORM (COR-C	:/ОН
	CC	RRECTIO	NAFFID	AVIT			
	FOR CA	NDIDATE	OFFICE	HOLDER		2010	_ ۍ _
						0 ≘	AUS POST
1 ACCOUNT#		2 Tota	ıl pages filed:	78	OFFIC	E USĘ QN	
3 CANDIDATE/	MS/MRS/MR	FIRST		/ O	Date Received	တ	CITY
OFFICEHOLDER NAME	, , , .	Chris	<i>, , .</i>			Pm	ALC ALC
	NICKNAME	Riley		SUFFIX		12	LER /TII
4 ORIGINAL REPORT	January 15	Runoff	Other	(specify)	Date Hand-delivere	od or Date Pestm	**************************************
TYPE	July 15	Exceeded \$	500 limit		Receipt #	Amount	
	30th day before election		er treasurer nt (officeholder only)		Legal	Totals	
	8th day before election	Final report			Date Processed		
5 ORIGINAL PERIOD	Month Day You 201	99 THROUGH	Month Day 04 / 29	y Year / 2009	Date Imaged		
6 EXPLANATION OF COR	1 /			/			
	This amended r shown on his ch	•			JJ Baskin (as	
							î
7 AFFIDAVIT			ear, or affirm, ort is true and		of perjury, th	at this cor	rected
		Che	eck ONLY if ap	plicable:			
ANY PULS. ANI	MANADADET	11/	ear, or affirm,		-	•	
(* (* (*) *) * (* (*) * (*)	N MARGRETT FRANKLIN Notary Public State of Texas	that	r than the 14t the report as o	originally filed	is inaccurate	or incomp	olete.
E OF TEN S	My Commission Expires Ceptember 29, 2010		ear, or affirm, i inally filed was	-		in the repo	ort as
			Ch	Ris (T	2:a		
AFFIX NOTARY STAMP	/ SEAL ABOVE		Sign	ature of Candidat	e or Officehold	er	
Sworn to and subscri	ibed before me by	hris Ri	ley	_ this the lo	th day of A	ygust_	
<u>₽</u> 10 to cert	tify which, witness m	y hand and sea	al of office.			V	
Un mana	rett Franci	I Ann Ma	uscrett Fice	anklin	Notary		
Fignature of officer admire	sistering oath	Printed name of of	ficer administering	oath T	itle of officer ad	ministering oa	ath
Remen	nber To Attach A	ny Part Of T	he Campaig	ın Finance I	Report For	m	
	Needed To	o Report An	d Explain C	orrections			1

	OFFICEHOLDER INANCE REPORT		FORM C/OH COVER SHEET PG 1
The C/OH Instruction Guit	DE explains how to complete this form.	1 ACCOUNT # (Ethics Commission filers) 00010009	2 PAGE # 2010 PO AL
3 CANDIDATE / OFFICEHOLDER NAME	MS/MRS/MR FIRST Chris NICKNAME LAST Rilley	MI SUFFIX	OFFICE USE ONLY ON ONLY ONLY
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address	ADDRESS / PO BOX; APT / SUITE #; (1310 San Antonio #1 Austin, TX 78701	CITY; STATE; ZIP CODE	Date Hand-delivered or Date Postmarked Receipt # Amount
5 CAMPAIGN TREASURER	MS / MRS / MR FIRST Catherine	Mi	Date Processed
NAME	NICKNAME LAST Mauzy	SÚFFIX	Date Imaged
6 CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE): APT / SUI 700 Lavaca, Ste. 1150 Austin, TX 78701	ITE#; CITY; STATE;	ZIP CODE
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER (512) 474-1493	EXTENSION	
8 REPORT TYPE	January 15 30th day before electi		15th day after campaign treasurer appointment (officeholder only) Final report (Attach C/OH - FR)
9 PERIOD COVERED	Month Day Year THRO 03/31/2009		Year 99
10 ELECTION	Month Day Year ELECTION TY 05/09/2009 Primar		General Special
11 OFFICE	OFFICE HELD (if any)	12 OFFICE SOUGHT (if known) City Council, Place 1	1
13 NOTICE OF DIRECT CAMPAIGN EXPENDITURE	Direct campaign expenditures are campaign exp Candidates are required to disclose this information of		
BY OTHER INDIVIDUALS	Name		
additional pages	Address/PO Box; Apt. / Suite #; City; State;	Zip Code	
	- 	PAGE 2	

CANDIDATE / OFFICEHOLDER REPORT:

SUPPORT &	TOTALO			OOVER .	SHEET PG 2
14 C/OH NAME Riley	, Chris		15	5 ACCOUNT # (E 00010009	thics Commission filers)
16 NOTICE FROM	have been made with	ice of political expenditures by political committ but the candidate's or officeholder's knowledge y receive notice of such expenditures			
POLITICAL COMMITTEE(S)	COMMITTEE TYPE	COMMITTEE NAME Austin Police Association PAC			
	GENERAL	COMMITTEE ADDRESS 400 W. 14th Street, Ste. B50 Austin, TX 78701			
	SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME Escobar, Valencia			
additional pages					
		COMMUTER CAMPAIGN TREASURER ADDRESS Austin, TX 78701			
17 CONTRIBUTION TOTALS		OLITICAL CONTRIBUTIONS OF \$50 OR LESS S, LOANS, OR GUARANTEES OF LOANS), UI		\$	0.00
		OLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES	OF LOANS)	\$	51,286.60
EXPENDITURE TOTALS	3. TOTAL F	OLITICAL EXPENDITURES OF \$50 OR LESS	, UNLESS ITEMIZED	\$	194.68
	4. TOTAL I	OLITICAL EXPENDITURES		\$	85,678.41
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD \$ 21,908				21,908.54
OUTSTANDING LOAN TOTALS		RINCIPAL AMOUNT OF ALL OUTSTANDING Y OF THE REPORTING PERIOD	LOANS AS OF THE	\$	0.00
18 AFFIDAVIT				<u></u>	
	ANN MARGRETT FR	is true and co me under Title	firm, under penalty of percet and includes all in e 15, Election Code.		
	Notary Public State of Texas My Commission Ex September 29, 2	ires 010	Signature of Cand	JZ-C idate or Office hold	er
AFFIX NOTARY S	STAMP / SEAL ABOV	፤		1	
Sworn to and subscrit				_, this the	otnday
of August,	20 <u>10</u> , to ce	tify which, witness my hand and seal	of office.	Mara	
Signature of officer admi	Mett J 10~	Print name of officer administering	Cn(In g oath Tit	le of officer adminis	stering oath

Texas Ethics Commission	P.O.Box 1207	70 Austin, Texa	as 78711-2070	(512)463-5800	1-800-325-850
CANDIDAT NOTICE FROM			EPORT:		ORM C/OH ADDENDUM
C/OH NAME Riley, C	hris			Page 3 of 76 ACCOUNT # (Et	hics Commission filers)
				00010009	,
17 NOTICE FROM POLITICAL This box is for notice of political expenditures by political committees to support the candidate have been made without the candidate's or officeholder's knowledge or consent. Candidates an information only if they receive notice of such expenditures.					
COMMITTEE(S)	COMMITTEE TYPE	COMMITTEE NAME	Austin-Travis County EMS E	mployee Association P	AC
	X GENERAL	COMMITTEE ADDRESS	7901 Cameron Rd., Bldg. 3, Austin, TX 78754	Ste. 288	
	SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME	Fitzpatrick, Bryan		
		COMMITTEE CAMPAIGN TREASURER ADDRESS	7901 Cameron Rd., Bldg. 3, Austin, TX 78754	Ste. 288	
	<u> </u>	1			

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Γ	The Instruction	אס Guide explains how to complete this form.		1 PAGE# Schedule: 1/	64 Report: 4/76
2	FILER NAME	Riley, Chris		3 ACCOUNT # 00010009	(Ethics Commission filers)
4	Date	5 Full name of contributor ut-of-state PAC (IDA Abadi, Toni	<u></u>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	04/20/2009	6 Contributor address; City; State; Zip Code 360 Nueces St. Unit 2311 Austin, TX 78701		\$25.00	
					Texas, complete Schedule T)
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In	structions)	
	Date	Full name of contributor	/)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	04/16/2009	Contributor address; City; State; Zip Code 2100 Airole Way Austin, TX 78704		\$50.00	
				(If tenual outside of	Texas, complete Schedule T)
├	Principal occur	eation / Job title (See Instructions)	Employer (See In	<u> </u>	r rexas, complete schedule 1)
	r incipal occup	ation 7 500 tille (See Instituctions)	Employer (ode in	sudcitorie;	
	Date	Full name of contributor	‡)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	04/22/2009	Contributor address; City; State; Zip Code 1204 Castle Hill Austin, TX 78703		\$100.00	1
				<u> </u>	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	04/04/2009	Contributor address; City; State; Zip Code 2827 Salado St. Austin, TX 78705		\$125.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor	1)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	04/20/2009	Contributor address; City; State; Zip Code 815 A Brazos PMB 196 Austin, TX 78701		\$75.00	! ! !
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	

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	The Instruction	אס Guide explains how to complete this form.		1 PAGE# Schedule: 2/6	54 Report: 5/76			
2	FILER NAME	Riley, Chris		3 ACCOUNT # 00010009	(Ethics Commission filers)			
4	Date	5 Full name of contributor ut-of-state PAC (ID# Anderson, Greg	<u> </u>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable) Event Expense			
<u> </u>	04/20/2009	6 Contributor address; City; State; Zip Code 327 Congress Ste, 200		\$200.00				
		: Austin, TX 78701		(If travel outside of	Texas, complete Schedule T)			
9	Principal occup Real Estate	ation / Job title (See Instructions)	10 Employer (See In Andrews Urban					
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	04/10/2009	Contributor address; City; State; Zip Code 1012 Rio Grande Austin, TX 78701		\$200.00	 			
 				(if travel outside of	Texas, complete Schedule T)			
	Principal occup attorney	ation / Job title (See Instructions)	Employer (See In self	structions)				
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	04/24/2009	Contributor address; City; State; Zip Code 316 Hartwood Dr. Austin, TX 78745		\$100.00	 			
				(If travel outside of	Texas, complete Schedule T)			
	Principal occup	ation / Job title (See Instructions)	Employer (See In	'	,			
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	04/02/2009	Contributor address; City; State; Zip Code 2807 Regents Park Austin, TX 78746		\$50.00	 			
				(If travel outside of	Texas, complete Schedule T)			
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)				
	Date	Full name of contributor ut-of-state PAC (ID# Aulick, Michael)	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	04/16/2009	Contributor address; City; State; Zip Code 700 S. Creekwood Dr. Driftwood, TX 78619	•••••	\$100.00	1 			
				(If travel outside of	Texas, complete Schedule T)			
	Principal occup	ation / Job title (See Instructions)	Employer (See In:	structions)				
		1						

The Instruction	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 3/6	64 Report: 6/76
2 FILER NAME	Riley, Chris		3 ACCOUNT# 00010009	(Ethics Commission filers)
4 Date	5 Full name of contributor	#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
04/27/2009	6 Contributor address; City; State; Zip Code 2930 Kassarine Pass Austin, TX 78704	•••••	\$100.00	
			(If travel outside of	Texas, complete Schedule T)
9 Principal occup	pation / Job title (See Instructions)	10 Employer (See In	structions)	
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
04/03/2009	Contributor address; City; State; Zip Code 4107 Medical Pkwy. Austin, TX 78756		\$350.00	1 ! !
			(If travel outside of	Texas, complete Schedule T)
Principal occur	Joation / Job title (See Instructions)	Employer (See In	1 '	
Fillidparoccus			T	
Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
04/20/2009	Contributor address; City; State; Zip Code 6400A South 1st Street Austin, TX 78745		\$350.00	[]
				Texas, complete Schedule T)
Principal occur	pation / Job title (See Instructions)	Employer (See In:	structions)	
Date	Full name of contributor	<u></u>)	Amount of contribution (\$)	In-kind contribution description (if applicable)
03/31/2009	Contributor address; City; State; Zip Code 4106 Medical Pkwy. Austin, TX 78756		\$350.00	!
			(If travel outside of	Texas, complete Schedule T)
Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	
Date	Full name of contributor	<u></u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
03/31/2009	Contributor address; City; State; Zip Code 1303 Bentwood Rd. Austin, TX 78722		\$50.00	[[
			!	·
			(if travel outside of	Texas, complete Schedule T)
Principal occup	ation / Job title (See Instructions)	Employer (See Ins	structions)	

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	The Instruction	אס Guide explains how to complete this form.		1 PAGE# Schedule: 4/	64 Report: 7/76
2	FILER NAME	Riley, Chris		3 ACCOUNT # 00010009	(Ethics Commission filers)
4	Date	5 Full name of contributor ut-of-state PAC (ID# Ball, Sandra Lee	<u> </u>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
}	04/21/2009	6 Contributor address; City; State; Zip Code 1804 Raleigh Ave. Austin, TX 78703		\$50.00	
				(if travel outside of	Texas, complete Schedule T)
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	04/20/2009	Contributor address; City; State; Zip Code 7817 Roockwood Cove #300 Austin, TX 78757		\$50.00	
				<u> </u>	Texas, complete Schedule T)
	Principal occup	eation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	04/26/2009	Contributor address; City; State; Zip Code 7706 Stoneywood Dr. Austin, TX 78731		\$250.00	
					Texas, complete Schedule T)
	Principal occup Architect	eation / Job title (See Instructions)	Employer (See In White, Dolce &		
	Date	Full name of contributor ut-of-state PAC (ID# Barry, Clare)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	04/01/2009	Contributor address; City; State; Zip Code 1505 Brentwood Austin, TX 78757-2509		\$100.00	! ! !
	ı			(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor ut-of-state PAC (ID# Bartram, John & Ashley Flynn)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	04/08/2009	Contributor address; City; State; Zip Code 204 East Milton Street Austin, TX 78704		\$700.00	1 {
				(if travel outside of	Texas, complete Schedule T)
		ation / Job title (See Instructions)	Employer (See In:		
	attorney / atto	rney	Armbrust Brown	LLP / TX AG Off	ice

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	The Instruction	אס Guide explains how to complete this form.		1 PAGE# Schedule: 5/	64 Report: 8/76		
2	FILER NAME	Riley, Chris		3 ACCOUNT # 00010009	(Ethics Commission filers)		
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Baskin, Jefferson J.	;)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
:	04/23/2009	6 Contributor address; City; State; Zip Code 1618 Waterston Ave. Austin, TX 78703		\$50.00	 		
				(If travel outside of	Texas, complete Schedule T)		
9	Principal occup	eation / Job title (See Instructions)	10 Employer (See In	structions)			
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	04/21/2009	Contributor address; City; State; Zip Code 5909 Sierra Grande Austin, TX 78759		\$5.00	 		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)			
-	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	04/03/2009	Contributor address; City; State; Zip Code 11205 Limoncilo Ct. Austin, TX 78750		\$700.00	i ! !		
) 				(If travel outside of	Texas, complete Schedule T)		
	Principal occup attorney / nor	pation / Job title (See Instructions) ne	Employer (See In Armbrust & Bro				
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	04/09/2009	Contributor address; City; State; Zip Code 2100 Rio Grande St. Austin, TX 78705		\$20.00	 		
				(if travel outside of	Texas, complete Schedule T)		
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)			
	Date	Full name of contributor	<u>:</u>)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	03/31/2009	Contributor address; City; State; Zip Code 3411 Southill Circle Austin, TX 78703-1045		\$150.00	 		
		The state of the s			- I		
	Deterote of		Employee (O. 1	i .	Texas, complete Schedule T)		
	Principal occup	ation / Job title (See Instructions)	Employer (See In:	structions)			

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	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE#	
2	FILER NAME	Riley, Chris		3 ACCOUNT # 00010009	64 Report: 9/76 (Ethics Commission filers)
4	Date	5 Full name of contributor	<u> </u>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	04/13/2009	6 Contributor address; City; State; Zip Code 801 5th. St. Apt. 908 Austin, TX 78703	• • • • • • • • • • • • • • • • • • • •	\$700.00	
				(If travel outside of	Texas, complete Schedule T)
9	Principal occup attorney / stu	ation / Job title (See Instructions) dent	10 Employer (See In Armbrust Brown		
	Date	Full name of contributor	‡)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	04/27/2009	Contributor address; City; State; Zip Code 2007 Palo Duro Rd. Austin, TX 78757		\$30.00	
		Austin, TA (0)/01		(If travel outside of	Texas, complete Schedule T)
	Principal occup	pation / Job title (See Instructions)	Employer (See In	structions)	
_					
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	04/08/2009	Contributor address; City; State; Zip Code 4303 Greystone Drive Austin, TX 78731		\$200.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup President	ation / Job title (See Instructions)	Employer (See In Waterloo Devel		
	Date	Full name of contributor	<u>; </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	04/20/2009	Contributor address; City; State; Zip Code 201 Lavaca #433 Austin, TX 78701		\$23.00	
		Adolli, TA 70701		(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	<u> </u>
				I	1
	Date	Full name of contributor ut-of-state PAC (ID# Blodgett, Terreli	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	04/12/2009	Contributor address; City; State; Zip Code 1801 Lavaca, #13-E Austin, TX 78701		\$350.00	ł †
				(If traval outside of	Tayon complete C-b-d-d-T)
	Dringing! oncom	ation / Job titlo (Soo Jostrustians)	Employer (See In		Texas, complete Schedule T)
	retired	ation / Job title (See Instructions)	Employer (See In: retired	sudduons)	

	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE#	64 Report: 10/76	
2	FILER NAME	Riley, Chris		3 ACCOUNT # 00010009	(Ethics Commission filers)	
4	Date	5 Full name of contributor ut-of-state PAC (ID# Blood, Michele	<u></u>)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)	
	04/07/2009	6 Contributor address; City; State; Zip Code 4100 Bradwood Rd, Austin, TX 78722	• • • • • • • • • • • • • • • • • • • •	\$100.00	 	
				(if travel outside of	Texas, complete Schedule T)	
9	Principal occup	pation / Job title (See Instructions)	10 Employer (See In	structions)		
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	04/21/2009	Contributor address; City; State; Zip Code 10821 Range View Dr. Austin, TX 78730	• • • • • • • • • • • • • • • • • • • •	\$100.00	 -	
		, , , , , , , , , , , , , , , , , , ,		(If travel outside of	Texas, complete Schedule T)	
 	Principal occup	pation / Job title (See Instructions)	Employer (See In	L.`		
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	03/31/2009	Contributor address; City; State; Zip Code 106 Laurel Ln. austin, TX 78705		\$50.00	 	
				(if travel outside of	Texas, complete Schedule T)	
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)		
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	04/19/2009	Contributor address; City; State; Zip Code 6916 Larue Belle Cv. Austin, TX 78739		\$50.00	 	
				(If travel outside of	Texas, complete Schedule T)	
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)		
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	03/31/2009	Contributor address; City; State; Zip Code 3036 Thrushwood Dr. Austin, TX 78757		\$200.00	1 	
				(If travel outside of	Texas, complete Schedule T)	
	Principal occup hardware stor	ation / Job title (See Instructions) re	Employer (See In self	structions)		

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	The Instruction	אס Guide explains how to complete this form.		1 PAGE # Schedule: 8/6	64 Report: 11/76			
2	FILER NAME	Riley, Chris		3 ACCOUNT# 00010009	(Ethics Commission filers)			
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Brady, Ken	<u> </u>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)			
	04/16/2009	6 Contributor address; City; State; Zip Code 7420 Carrousel Westland, MI 48185		\$20.00	1 1 1			
				(If travel outside of	Texas, complete Schedule T)			
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In	structions)				
	Date	Full name of contributor	‡)	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	04/21/2009	Contributor address; City; State; Zip Code 3030 North Sheridan #303		\$100.00	} 			
		Chicago, IL 60657			Texas, complete Schedule T)			
	Principal occup	ation / Job title (See Instructions)	Employer (See In:	structions)				
	Date	Full name of contributor	‡)	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	04/21/2009	Contributor address; City; State; Zip Code 2502 Pinewood Terrace Austin, TX 78757		\$20.00	 			
ı				(If travel outside of	Texas, complete Schedule T)			
	Principal occup	ation / Job title (See Instructions)	Employer (See In:	structions)				
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	04/08/2009	Contributor address; City; State; Zip Code 1106 West 22nd 1/2 St. Austin, TX 78705-5302		\$100.00	 			
				(if travel outside of	Texas, complete Schedule T)			
	Principal occup	ation / Job title (See Instructions)	Employer (See In:	structions)				
	Date	Full name of contributor	·)	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	04/29/2009	Contributor address; City; State; Zip Code 505 W. Alpine Rd. Austin, TX 78704		\$100.00) (
				(If travel outside of	Texas, complete Schadule T)			
	Principal occup	ation / Job title (See Instructions)	Employer (See Ins	structions)				

	The Instruction	אס Guide explains how to complete this form.		1 PAGE# Schedule: 9/6	64 Report: 12/76		
2	FILER NAME	Riley, Chris		3 ACCOUNT# 00010009	(Ethics Commission filers)		
4	Date	5 Full name of contributor)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
	04/12/2009	6 Contributor address; City; State; Zip Code 602 Coquina Lane Austin, TX 78746-4536		\$700.00	l 		
				(If travel outside of	Texas, complete Schedule T)		
9		ation / Job title (See Instructions) lege Selection Consultant	10 Employer (See In: Armbrust Brown				
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	04/26/2009	Contributor address; City; State; Zip Code 4611 Mellow Hollow Dr. Austin, TX 78744	; ;	\$100.00	 		
				,	Texas, complete Schedule T)		
	Principal occup	ation / Job title (See Instructions)	Employer (See In:	structions)			
	Date	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable)		
	04/23/2009	Contributor address; City; State; Zip Code 1500 W. 24th St. Austin, TX 78703		\$25.00			
		· · · · · · · · · · · · · · · · · · ·	(0. 1	<u> </u>	Texas, complete Schedule T)		
	Principal occup	ation / Job title (See Instructions)	Employer (See In:	structions)			
	Date	Full name of contributor ut-of-state PAC (ID# Bryce, Jim	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	04/05/2009	Contributor address; City; State; Zip Code 6103 Shoal Creek Boulevard Austin, TX 78757		\$50.00	 		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup	ation / Job title (See Instructions)	Employer (See Ins	structions)			
•••	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	04/27/2009	Contributor address; City; State; Zip Code 7202 Foxtree Cove Austin, TX 78750		\$25.00			
				-	Texas, complete Schedule T)		
	Principal occupa	ation / Job title (See Instructions)	Employer (See Ins	structions)			

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	The Instruction	אס Guide explains how to complete this form.		1 PAGE# Schedule: 10)/64 Report: 13/76	
2	FILER NAME	Riley, Chris		3 ACCOUNT # 00010009	(Ethics Commission filers)	
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Burns, Nancy	<u> </u>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)	
	04/13/2009	6 Contributor address; City; State; Zip Code 710 Colorado St. Unit 2B Austin, TX 78701		\$100.00	 	
1				(If travel outside of	Texas, complete Schedule T)	
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In	structions)	3 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 	
	Date	Full name of contributor ☐ out-of-state PAC (ID# Burton, Carol	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	04/26/2009	Contributor address; City; State; Zip Code		\$100.00	 	
}		Austin, TX 78751		(If travel outside of	Texas, complete Schedule T)	
Г	Principal occup	pation / Job title (See Instructions)	Employer (See In	structions)		
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	04/14/2009	Contributor address; City; State; Zip Code 2125 Sea Eagle View Austin, TX 78738		\$700.00	 	
		, , , , , , , , , , , , , , , , , , ,			,	
┞	Principal occur	ation / Job title (See Instructions)	Employer (See In	1	Texas, complete Schedule T)	
	attorney / nor		Armbrust Brown			
	Date	Full name of contributor	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	04/28/2009	Contributor address; City; State; Zip Code 1306 Guadalupe St. Austin, TX 78701		\$350.00	() 	
				(If travel outside of	Texas, complete Schedule T)	
	Principal occup Attorney	ation / Job title (See Instructions)	Employer (See In Self	structions)		
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	04/02/2009	Contributor address; City; State; Zip Code 2103 Schulle Avenue Austin, TX 78703		\$700.00	} 	
	-	rooming 177.707.00			-	
	Dringing!	ntion / Joh fillo (Coo Instructions)	Employer /See In	1 '	Texas, complete Schedule T)	
	Attorney / nor	ation / Job title (See Instructions) ne	Employer (See In: Armbrust & Bro	wn, L.L.P. / none		

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-	The Instruction	אס Guide explains how to complete this form.		1 PAGE# Schedule: 11	/64 Report: 14/76	
2	FILER NAME	Riley, Chris	, ,	3 ACCOUNT # 00010009	(Ethics Commission filers)	
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Cagle, Gregory & Alana	<i>‡</i>)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)	
	04/08/2009	6 Contributor address; City; State; Zip Code 4162 Travis Country Circle Austin, TX 78735		\$700.00	 	
				(if travel outside of	Texas, complete Schedule T)	
9	Principal occup attorney / nor	ation / Job title (See Instructions) ne	10 Employer (See In Armbrust & Bro	structions) wn, L.L.P. / none		
	Date	Full name of contributor ☐ out-of-state PAC (ID# Cain, William	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	04/29/2009	Contributor address; City; State; Zip Code 11160 Jollyville Rd. #1221 Austin, TX 78759		\$250.00	 -	
				(If travel outside of	Texas, complete Schedule T)	
		pation / Job title (See Instructions)	Employer (See In	structions)		
	software engi	neer	Alcatel-Lucent			
-	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	04/20/2009	Contributor address; City; State; Zip Code 1501 Inglewood Street Austin, TX 78741		\$50.00	} }	
		7.004., 7.7.01.11		(If travel outside of	Texas, complete Schedule T)	
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)		
	Date	Full name of contributor ut-of-state PAC (ID#	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	04/07/2009	Contributor address; City; State; Zip Code 4903 Southcrest Dr. Austin, TX 78746		\$50.00	1 ! 1	
				(If travel outside of	Texas, complete Schedule T)	
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)		
	Date	Full name of contributor	<u>:</u>)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	04/04/2009	Contributor address; City; State; Zip Code 2502 Sheridan Houston, TX 77030		\$50.00	! 	
				(If travel outside of	Texas, complete Schedule T)	
	Principal occup	ation / Job title (See Instructions)	Employer (See In:			

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	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE#	1/64 Report: 15/76	
2	FILER NAME	Riley, Chris		3 ACCOUNT # 00010009	(Ethics Commission filers)	
4	Date	5 Full name of contributor	¥)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)	
	04/17/2009	6 Contributor address; City; State; Zip Code 54 Rainey Street, No. 713 Austin, TX 78701		\$25.00	 	
				(if travel outside of	Texas, complete Schedule T)	
9	Principal occup	oation / Job title (See Instructions)	10 Employer (See In	structions)		
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	04/24/2009	Contributor address; City; State; Zip Code P.O. Box 144542 Austin, TX 78714	• • • • • • • • • • • • • • • • • • • •	\$100.00	 	
		Adding TX TOTAL		(If travel outside of	Texas, complete Schedule T)	
⊢	Principal occur	l pation / Job title (See Instructions)	Employer (See In			
	Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	04/29/2009	Contributor address; City; State; Zip Code 2203 Mountain View Rd. austin, TX 78703		\$50.00	 	
				(If travel outside of	Texas, complete Schedule T)	
	Principal occup	pation / Job title (See Instructions)	Employer (See In	structions)		
	Date	Full name of contributor	‡)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	04/17/2009	Contributor address; City; State; Zip Code 1904 Larchmont Dr. Austin, TX 78704		\$150.00	 	
				(If travel outside of	Texas, complete Schedule T)	
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	•	
	Date	Full name of contributor	'	Amount of	In-kind contribution	
		Clark, Cari	·	contribution (\$)	description (if applicable)	
	04/29/2009	Contributor address; City; State; Zip Code 5325 Tortuga Trail Austin, TX 78701		\$100.00	 	
				(If travel outside of	Texas, complete Schedule T)	
	Principal occup	eation / Job title (See Instructions)	Employer (See In	<u> </u>	,,,	
		,,	,	•		

The Instruct	ION GUIDE explains how to complete this form.		1 PAGE# Schedule: 13	3/64 Report: 16/76
2 FILER NAME	Riley, Chris		3 ACCOUNT # 00010009	(Ethics Commission filers)
4 Date	5 Full name of contributor ut-of-state PAC (ID# Clark, Katheryn	‡)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
04/27/2009	6 Contributor address; City; State; Zip Code 4308 Avenue D Austin, TX 78751		\$20.00	
{			(If travel outside of	Texas, complete Schedule T)
9 Principal occu	pation / Job title (See Instructions)	10 Employer (See In	structions)	
Date	Full name of contributor	<u>‡)</u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
04/15/2009	Contributor address; City; State; Zip Code 4210 River Garden Trail Austin, TX 78746		\$700.00	1
}			(If travel outside of	Texas, complete Schedule T)
Principal occu Chairman / ı	pation / Job title (See Instructions) none	Employer (See In Cypress Real E	structions) state Advisors, In	c. / none
Date	Full name of contributor	*)	Amount of contribution (\$)	In-kind contribution description (if applicable)
04/14/2009	Contributor address; City; State; Zip Code 2200 Far Gallant Dr. Austin, TX 78746		\$350.00	! ! !
			(If travel outside of	Texas, complete Schedule T)
Principal occu President	pation / Job title (See Instructions)	Employer (See In Cypress Real E		
Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
04/15/2009	Contributor address; City; State; Zip Code 6615 Argentia Rd. Austin, TX 78757		\$25.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occu	pation / Job title (See Instructions)	Employer (See In	<u> </u>	Toxas, compare contocate 1,
Date	Full name of contributor	‡)	Amount of contribution (\$)	In-kind contribution description (if applicable)
04/26/2009	Contributor address; City; State; Zip Code 3021 Westminster Ave. Dallas, TX 75205		\$75.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occu	pation / Job title (See Instructions)	Employer (See In	structions)	

	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 14	1/64 Report: 17/76		
2	FILER NAME	Riley, Chris		3 ACCOUNT # 00010009	(Ethics Commission filers)		
4	Date	5 Full name of contributor	;)	7 Amount of contribution (\$)	8 in-kind contribution description (if applicable)		
	04/20/2009	6 Contributor address; City; State; Zip Code 3306 Gentry Drive Austin, TX 78746		\$20.00	 		
				(If travel outside of	Texas, complete Schedule T)		
9	Principal occup	pation / Job title (See Instructions)	10 Employer (See In	structions)			
	Date	Full name of contributor	<u>+</u>)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	04/21/2009	Contributor address; City; State; Zip Code 3406 Lakeside Drive Austin, TX 78723		\$25.00	1 		
 				(If travel outside of	Texas, complete Schedule T)		
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)			
	Date	Full name of contributor ut-of-state PAC (ID# Cohen, Jeff	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	04/01/2009	Contributor address; City; State; Zip Code 8506 Emerald Hill Dr. Austin, TX 78759		\$100.00	 		
L					Texas, complete Schedule 7)		
	Principal occup	eation / Job title (See Instructions)	Employer (See In:	structions)			
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	04/02/2009	Contributor address; City; State; Zip Code 1408 Mohle Dr. Austin, TX 78703		\$50.00	1 		
	:			(if travel outside of	Texas, complete Schedule T)		
i	Principal occup	ation / Job title (See Instructions)	Employer (See In:	<u> </u>	Toxas, compute conductor,		
	Date	Full name of contributor ut-of-state PAC (ID#	\	Amount of	In-kind contribution		
	Date	Collins, Sharlene & Patrick		contribution (\$)	description (if applicable)		
	04/02/2009	Contributor address; City; State; Zip Code 1400 Yaupon Valley Rd. West Lake Hills, TX 78746-4335		\$700.00] 		
				//E4====1 === 1.4 . #	Tanan		
_	Principal occup	ation / Job title (See Instructions)	Employer (See In:		Texas, complete Schedule T)		
	attorney / reti		Armbrust Brown				

	The Instruction	ON GUIDE explains how to com	plete this form.		1 PAGE# Schedule: 15	5/64 Report: 18/76
2	FILER NAME	Riley, Chris			3 ACCOUNT# 00010009	(Ethics Commission filers)
4	Date	5 Full name of contributor Colorito, Sonia	out-of-state PAC (ID#	<u></u> ,)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	04/29/2009	6 Contributor address; 4103 Greystone Dr. Austin, TX 78731	City; State; Zip Code	• • • • • • • • • • • • • • • • • • • •	\$5.00	
		<u></u>			(If travel outside of	Texas, complete Schedule T)
9	Principal occup	pation / Job title (See Instruction	15)	10 Employer (See In	structions)	
	Date	Full name of contributor Conley, John	out-of-state PAC (ID#	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	04/17/2009	Contributor address; 1741 Spyglass Dr #131 Austin, TX 78746	City; State; Zip Code		\$100.00	!
					(If travel outside of	Texas, complete Schedule T)
	Principal occup	eation / Job title (See Instruction	ns)	Employer (See In	structions)	
	Date	Full name of contributor Connelly, Megan Rose	out-of-state PAC (ID#	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
1	04/08/2009	Contributor address; 155 E. Clay Avenue Roselle Park, NJ 7204	City; State; Zip Code		\$100.00	
					<u> </u>	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instruction	ns)	Employer (See In	structions)	
	Date	Full name of contributor Cooksey, Frank	☐ out-of-state PAC (ID#	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	04/02/2009	Contributor address; 2208 Matthews Dr. Austin, TX 78703	City; State; Zip Code		\$100.00	! ! !
					(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instruction	s)	Employer (See In	structions)	
	Date	Full name of contributor Coopwood, Thomas	☐ out-of-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	04/22/2009	Contributor address; 6717 Valburn Dr Austin, TX 78731	City; State; Zip Code		\$100.00	1
					(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instruction	ns)	Employer (See In	1 '	. , , , , , , , , , , , , , , , , , , ,

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L	The Instruction	אס Guide explains how to complete this form.		1 PAGE# Schedule: 16	5/64 Report: 19/76		
2	FILER NAME	Riley, Chris	-	3 ACCOUNT # 00010009	(Ethics Commission filers)		
4	Date	5 Full name of contributor	,)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
[04/20/2009	6 Contributor address; City; State; Zip Code 4933 Strass Dr. Austin, TX 78731		\$100.00	{] 		
				(If travel outside of	Texas, complete Schedule T)		
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In	structions)			
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	04/20/2009	Contributor address; City; State; Zip Code 830 W. 3rd St. Apt. 4141		\$50.00	} 		
		Austin, TX 78701			-		
<u> </u>	Dringing ago, o	pation / Job title (See Instructions)	Employer (See In	l'	Texas, complete Schedule T)		
	Principal occup	adon / Job lide (See instructions)	Employer (See III	su dedons)			
	Date	Full name of contributor	‡)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	04/29/2009	Contributor address; City; State; Zip Code 4002 Petes Path		\$50.00	 		
		Austin, TX 78731		(If travel outside of	Texas, complete Schedule T)		
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)			
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	04/02/2009	Contributor address; City; State; Zip Code 606 Highland Ave. Austin, TX 78703		\$100.00	{ } 		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)			
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)		
 	04/24/2009	Contributor address; City; State; Zip Code 2612 Delwood Place		\$200.00	} !		
	;	Austin, TX 78703	:				
	Orinoinal cos:	ation / Joh title (See Instructions)	Employer/Con In	·	Texas, complete Schedule T)		
	Lawyer	ation / Job title (See Instructions)	Employer (See In: State Office of A	structions) Administrative Hea	aring		

	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 17	7/64 Report: 20/76	
2	FILER NAME	Riley, Chris		3 ACCOUNT # 00010009	(Ethics Commission filers)	
4	Date	5 Full name of contributor ut-of-state PAC (ID: Dobson, Casey	;)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)	
	03/31/2009	6 Contributor address; City; State; Zip Code 1517 Northwood Rd Austin, TX 78703	• • • • • • • • • • • • • • • • • • • •	\$350.00	! 	
				(if travel outside of	Texas, complete Schedule T)	
9	Principal occup attorney	ation / Job title (See Instructions)	10 Employer (See In Scott, Douglass	structions) & McConnico, L.	L.P.	
	Date	Full name of contributor	<u>*</u>)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	04/22/2009	Contributor address; City; State; Zip Code 3702 Greystone Dr. Austin, TX 78731		\$100.00	 	
				(If travel outside of	Texas, complete Schedule T)	
	Principal occup	ation / Job title (See Instructions)	Employer (See In	l '		
	Date	Full name of contributor	¥)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	04/05/2009	Contributor address; City; State; Zip Code 5413 Shoalwood Ave Austin, TX 78756		\$50.00	! ! !	
				(if travel outside of	Texas, complete Schedule T)	
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)		
	Date	Full name of contributor	<u>; </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	03/31/2009	Contributor address; City; State; Zip Code 508 Genard St. Austin, TX 78751		\$100.00	 	
				(if travel outside of	Texas, complete Schedule T)	
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)		
	Date	Full name of contributor	/)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	04/02/2009	Contributor address; City; State; Zip Code 2506 Spring Lane Austin, TX 78703		\$30.00	 	
				//6 dea)	**************************************	
	Principal occup	ation / Job title (See Instructions)	Employer (See In		Texas, complete Schedule T)	
		<u></u>				

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	The Instruction	on Guid∈ explains how to complete this form.		1 PAGE#	
ŀ					7/64 Report: 21/76
2	FILER NAME	Riley, Chris		3 ACCOUNT# 00010009	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Draper, Charles	·)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	03/31/2009	6 Contributor address; City; State; Zip Code 4609 Trail Crest Cir. Austin, TX 78735		\$200.00	
_				1	Texas, complete Schedule T)
9	Principal occup Real Estate	ation / Job title (See Instructions)	10 Employer (See In Tejasland & Co		
	Date	Full name of contributor	ŧ)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	04/20/2009	Contributor address; City; State; Zip Code 4108 Camacho St. Austin, TX 78723		\$25.00	1 } {
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor ut-of-state PAC (ID#	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	04/16/2009	Contributor address; City; State; Zip Code 13809 Research Blvd., Ste. 1050 Austin, TX 78750		\$350.00	
i				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor uut-of-state PAC (ID# Duncan, Michelle Angelique)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	04/23/2009	Contributor address; City; State; Zip Code 3103 Canter Lane Austin, TX 78759		\$10.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor ut-of-state PAC (ID# Durst, Philip)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	04/21/2009	Contributor address; City; State; Zip Code 1204 San Antonio St. Ste. 203 Austin, TX 78701		\$100.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	

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2	FILER NAME	Riley, Chris		3 ACCOUNT # 00010009	/64 Report: 22/76 (Ethics Commission filers)	
4	Date	5 Full name of contributor ut-of-state PAC (ID# Duthie, Jennifer	<u> </u>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)	
	04/22/2009	6 Contributor address; City; State; Zip Code 503 Nelray Blvd. #B Austin, TX 78751		\$25.00	 	
				(If travel outside of	Texas, complete Schedule T)	
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In	structions)		
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	04/27/2009	Contributor address; City; State; Zip Code 1522 Thibodeaux Round Rock, TX 78664		\$200.00) 	
				(If travel outside of	Texas, complete Schedule T)	
	Principal occup Employee	ation / Job title (See Instructions)	Employer (See In Texas Environn	structions) nental Quality Cor	ntrol	
	Date	Full name of contributor	<u>; </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	04/24/2009	Contributor address; City; State; Zip Code P.O. Box 49492 Austin, TX 78765		\$20.00	 	
				/If travel cutside of	Texas, complete Schedule T)	
⊢	Principal occur	ation / Job title (See Instructions)	Employer (See In		Toxas, complete dellectie 17	
	7 micipal cocap	and in the later i	Zimpioyer (God in			
	Date	Full name of contributor	()	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	04/08/2009	Contributor address; City; State; Zip Code 1313 Broadmoor Austin, TX 78723		\$100.00	 	
				(If travel outside of	Texas, complete Schedule T)	
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)		
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	03/31/2009	Contributor address; City; State; Zip Code 3 Jeffrey Cove Austin, TX 78746		\$50.00	 	
				(If travel outside of	Texas, complete Schedule T)	
	Principal occup	ation / Job title (See Instructions)	Employer (See In	l.,		
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		CAL CONTRIBUTIONS THAN PLEDGES OR LOAI	NS		SCHEDULE A
	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 20	//64 Report: 23/76
2	FILER NAME	Riley, Chris		3 ACCOUNT # 00010009	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Ewen, Chris)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	04/21/2009	6 Contributor address; City; State; Zip Code PO Box 49238 Austin, TX 78765		\$200.00	i
9	Principal occup Market Resea	pation / Job title (See Instructions) arch	10 Employer (See In Self	,	Texas, complete Schedule T}
-	Date	Full name of contributor ut-of-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	04/20/2009	Contributor address; City; State; Zip Code 4124 Lawless St. Austin, TX 78723	•••••	\$20.00	
	ļ			(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	04/15/2009	Contributor address; City; State; Zip Code 110 Cloudview Dr Austin, TX 78745		\$100.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	04/20/2009	Contributor address; City; State; Zip Code 305 E, 32nd St. Austin, TX 78705-2405		\$100.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	04/11/2009	Contributor address; City; State; Zip Code 6603 Cat Creek Trail Austin, TX 78731-2600		\$100.00	
			'	(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	

	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 21	/64 Report: 24/76
2	FILER NAME	Riley, Chris		3 ACCOUNT# 00010009	(Ethics Commission filers)
4	Date	5 Full name of contributor ut-of-state PAC (ID# Gadbois, Glenn	<u> </u>	7 Amount of contribution (\$)	8
	04/05/2009	6 Contributor address; City; State; Zip Code 5616 Bull Creek Blvd. Austin, TX 78756	,,,	\$50.00	
				(If travel outside of	Texas, complete Schedule T)
9	Principal occup	pation / Job title (See Instructions)	10 Employer (See Ins	structions)	
	Date	Full name of contributor	1)	Amount of contribution (\$)	In-kind contribution description (if applicable) Event Expense
	04/17/2009	Contributor address; City; State; Zip Code 5616 Bull Creek Blvd. Austin, TX 78756		\$30.00	
				l`	Texas, complete Schedule T)
	Principal occup	pation / Job title (See Instructions)	Employer (See Ins	structions)	
	Date	Full name of contributor	<u>'</u>)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	04/05/2009	Contributor address; City; State; Zip Code 3207 Kerbey Lane Austin, TX 78703		\$25.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	pation / Job title (See Instructions)	Employer (See Ins	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	04/12/2009	Contributor address; City; State; Zip Code 513A East Monroe St Austin, TX 78704		\$100.00]
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See Ins	structions)	
	Date	Full name of contributor	:)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	04/01/2009	Contributor address; City; State; Zip Code P.O. Box 40964 Austin, TX 78704	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	\$75.00	}
		I		 (If travel outside of	Texas, complete Schedule 7)
	Principal occup	eation / Job title (See Instructions)	Employer (See Ins		
		·	,	·	

The Instruct	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 22	2/64 Report: 25/76
2 FILER NAME	Riley, Chris		3 ACCOUNT # 00010009	(Ethics Commission filers)
4 Date	5 Full name of contributor ut-of-state PAC (ID)	;)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
04/17/2009	6 Contributor address; City; State; Zip Code 3308 Liberty St. Austin, TX 78705		\$50.00	1
			(if travel outside of	Texas, complete Schedule T)
9 Principal occu	pation / Job title (See Instructions)	10 Employer (See In	structions)	
Date	Full name of contributor	*)	Amount of contribution (\$)	In-kind contribution description (if applicable)
04/20/2009	Contributor address; City; State; Zip Code 4308 Bellvue Ave. Austin, TX 78756		\$100.00	
			(if travel outside of	Texas, complete Schedule T)
Principal occu	pation / Job title (See Instructions)	Employer (See In	<u></u>	Texas, complete schedule 1)
	,		,	
Date	Full name of contributor	‡)	Amount of contribution (\$)	In-kind contribution description (if applicable)
03/31/2009	Contributor address; City; State; Zip Code 4303 Endcliffe Dr. Austin, TX 78731		\$50.00	
				Texas, complete Schedule T)
Principal occu	pation / Job title (See Instructions)	Employer (See In	structions)	
Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
04/03/2009	Contributor address; City; State; Zip Code 3521 Starline Dr. Austin, TX 78759-8941		\$50.00	} }
			(If travel outside of	Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions)	Employer (See In	structions)	
Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
04/05/2009	Contributor address; City; State; Zip Code 5400 Woodview Ave. Austin, TX 78756		\$50.00	1
			(If travel outside of	Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions)	Employer (See In	structions)	

-	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE#	8/64 Report: 26/76	
2	FILER NAME	Riley, Chris		3 ACCOUNT # 00010009	(Ethics Commission filers)	
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Gregory, Bob & Kay	¥)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)	
	04/16/2009	6 Contributor address; City; State; Zip Code 2939 Westlake Cove Austin, TX 78746		\$700.00		
					Texas, complete Schedule T)	
9		pation / Job title (See Instructions) CEO / homemaker	10 Employer (See In Texas Disposal	structions) Systems, Inc. / no	one	
	Date	Full name of contributor	¥)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	04/16/2009	Contributor address; City; State; Zip Code P.O. Box 163164 Austin, TX 78716		\$350.00	 	
				<u> </u>	Texas, complete Schedule T)	
 	Principal occup Attorney	pation / Job title (See Instructions)	Employer (See In: Ford & Ferraro	structions)		
	Date	Full name of contributor ☐ out-of-state PAC (ID# Hardin, Richard	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	04/15/2009	Contributor address; City; State; Zip Code P.O. Box 5628 Austin, TX 78763	•••••	\$350.00		
	m · -!!-		- (Cools	L_i	Texas, complete Schedule T)	
 	Principal occupates	vation / Job title (See Instructions)	Employer (See In: self	structions)		
	Date	Full name of contributor	<i>‡</i>)	Amount of contribution (\$)	In-kind contribution description (if applicable) Event Expense	
	04/02/2009	Contributor address; City; State; Zip Code 1403 W. 9th St. Austin, TX 78703		\$150.00	 	
		ı		(If travel outside of	Texas, complete Schedule T)	
	Principal occup	ation / Job title (See Instructions)	Employer (See In:	structions)		
j	Date	Full name of contributor	<i>‡</i>)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	04/17/2009	Contributor address; City; State; Zip Code 404 Rio Grande St. Apt. 134 Austin, TX 78701		\$25.00	! 	
	ļ			(If travel outside of	Texas, complete Schedule T)	
	Principal occup	ation / Job title (See Instructions)	Employer (See Ins	structions)		

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	The Instruction	אס Guide explains how to complete this form.		1 PAGE# Schedule: 24	/64 Report: 27/76
2	FILER NAME	Riley, Chris		3 ACCOUNT# 00010009	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Harutunian, Garabed	:)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	04/24/2009	6 Contributor address; City; State; Zip Code 9504 Meadowheath Dr. Austin, TX 78729-2715		\$200.00	
				(If travel outside of	Texas, complete Schedule T)
9	Principal occup President	ation / Job title (See Instructions)	10 Employer (See In Kurkjian Engine	structions) eering Corporation	
	Date	Full name of contributor	<u>'</u>)	Amount of contribution (\$)	In-kind contribution description (if applicable)
<u></u>	04/20/2009	Contributor address; City; State; Zip Code 360 Nueces St.		\$25.00	
		#3305 Austin, TX 78701		//E4===================================	Tanana saamatata Bahadata Ti
				<u> </u>	Texas, complete Schedule T)
	Principal occup	eation / Job title (See Instructions)	Employer (See In	structions)	***
-	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	04/08/2009	Contributor address; City; State; Zip Code 5805 Carry Back Lane Austin, TX 78746		\$700.00	 -
				•	Texas, complete Schedule T)
_	Principal occup attorney / nor	eation / Job title (See Instructions) ne	Employer (See In Armbrust & Bro	structions) wn, L.L.P. / none	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	04/27/2009	Contributor address; City; State; Zip Code 1613 Gamaas Dr. Austin, TX 78758		\$350.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup business own	ation / Job title (See Instructions) er	Employer (See In Haynes-Eaglin-		
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	04/03/2009	Contributor address; City; State; Zip Code 3604 Highland View Austin, TX 78731		\$25.00	!
				(if travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	<u> </u>	, land
					<u> </u>

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	The Instruction	GUIDE explains how to complete this form.		1 PAGE# Schedule: 25	/64 Report: 28/76		
2	FILER NAME	Riley, Chris		3 ACCOUNT # 00010009	(Ethics Commission filers)		
4	Date	5 Full name of contributor	<u> </u>	7 Amount of contribution (\$)	8		
	04/26/2009	6 Contributor address; City; State; Zip Code 7115 Sungate Dr. Austin, TX 78731	• • • • • • • • • • • • • • • • • • • •	\$100.00			
				(If travel outside of	Texas, complete Schedule T)		
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In	structions)			
	Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable) Event Expense		
	04/02/2009	Contributor address; City; State; Zip Code 1104 Enfield Rd. Austin, TX 78703		\$160.00	 		
				(If travel outside of	Texas, complete Schedule T)		
-	Principal occup	ation / Job title (See Instructions)	Employer (See In	,	, <u> </u>		
	Date	Full name of contributor	‡)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	04/08/2009	Contributor address; City; State; Zip Code 438 W Gramercy Place San Antonio, TX 78212		\$350.00	 		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup Attorney	ation / Job title (See Instructions)	Employer (See In Bexar County D				
	Date	Full name of contributor	‡)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	04/06/2009	Contributor address; City; State; Zip Code 2903 Tarry Trail Austin, TX 78703		\$100.00	 		
				(if travel outside of	Texas, complete Schedule T)		
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	· · · · · · · · · · · · · · · · · · ·		
	Date	Full name of contributor	‡)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	04/15/2009	Contributor address; City; State; Zip Code 2512 Great Oaks Parkway Austin, TX 78756-2908		\$100.00	1 [
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup	ation / Job title (See Instructions)	Employer (See In:	structions)			

The Instructi	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 26	6/64 Report: 29/76		
2 FILER NAME	Riley, Chris		3 ACCOUNT # 00010009	(Ethics Commission filers)		
4 Date	5 Full name of contributor ☐ out-of-state PAC (ID# Heyer, Connie	<u> </u>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
04/05/2009	6 Contributor address; City; State; Zip Code 3205 Greenlee Dr. Austin, TX 78703		\$200.00	 		
		:	(If travel outside of	Texas, complete Schedule T)		
9 Principal occul Attorney	pation / Job title (See Instructions)	10 Employer (See In Niemann & Nier				
Date	Full name of contributor	ŧ)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
04/07/2009	Contributor address; City; State; Zip Code 2214 Alta Vista Ave. Austin, TX 78704		\$100.00	 		
1			(If travel outside of	Texas, complete Schedule T)		
Principal occur	pation / Job title (See Instructions)	Employer (See In	structions)			
Date	Full name of contributor	<u>; </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)		
04/06/2009	Contributor address; City; State; Zip Code 4100 Jackson Ave. No. 311 Austin, TX 78731		\$75.00	 		
				Texas, complete Schedule T)		
Principal occup	pation / Job title (See Instructions)	Employer (See In	structions)			
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable) Event Expense		
04/20/2009	Contributor address; City; State; Zip Code 4120 Lawless St. Austin, TX 78723		\$62.00	I 		
			(If travel outside of	Texas, complete Schedule T)		
Principal occup	pation / Job title (See Instructions)	Employer (See In	structions)			
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
04/21/2009	Contributor address; City; State; Zip Code 4120 Lawless St. Austin, TX 78723		\$50.00	1 } 		
			(If travel outside of	Texas, complete Schedule T)		
Principal occur	pation / Job title (See Instructions)	Employer (See In:	· ·			
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	The Instruction	אס Guide explains how to complete this form.	· · · · · · · · · · · · · · · · · · ·	1 PAGE# Schedule: 27	/64 Report: 30/76	
2	FILER NAME	Riley, Chris		3 ACCOUNT # 00010009	(Ethics Commission filers)	
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Hobbs, Jeff & Lisa	<u> </u>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)	
	04/08/2009	6 Contributor address; City; State; Zip Code 3700 Hillbrook Dr. Austin, TX 78731		\$700.00) 	
				(If travel outside of	Texas, complete Schedule T)	
9	Principal occup attorney / atto	eation / Job title (See Instructions) Prney	10 Employer (See In Armbrust & Bro	structions) wn LLP / Vinson &	& Elkins, L.L.P.	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	04/29/2009	Contributor address; City; State; Zip Code 300 West Ave Apt 4321 Austin, TX 78701		\$100.00	 	
				<u> </u>	Texas, complete Schedule T)	
	Principal occup	vation / Job title (See Instructions)	Employer (See In	structions)		
┕				Y		
	Date	Full name of contributor □ out-of-state PAC (ID# Hollingsworth, Wayne & Desiree	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	04/02/2009	Contributor address; City; State; Zip Code 504 Furlong Drive Austin, TX 78746		\$700.00	 	
				(If travel outside of	Texas, complete Schedule T)	
	Principal occup attorney / reta	ation / Job title (See Instructions) ail jeweler	Employer (See In Armbrust Brown			
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	04/21/2009	Contributor address; City; State; Zip Code 1104 Clermont Ave. Austin, TX 78702		\$100.00	 	
				(if travel outside of	Texas, complete Schedule T)	
	Principal occup	ation / Job title (See Instructions)	Employer (See In:	structions)		
	Date	Full name of contributor	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	04/23/2009	Contributor address; City; State; Zip Code 151 Post Oak Trail Cedar Creek, TX 78612		\$25.00	! 	
				. / f traval aut-like -f	Texas, complete Schedule T)	
	Principal occur	ation / Job title (See Instructions)	Employer (See In:	•	reads, complete schedule 1/	
	г иныраг оссор	anon i son nna (saa mennone)	Employer (See III:	au uullulla j		

	The INSTRUCTION	אס Guide explains how to complete this form.		1 PAGE#	1/64 Report: 31/76
2	FILER NAME	Riley, Chris	· <u>.</u> .·	3 ACCOUNT # 00010009	(Ethics Commission filers)
4	Date	5 Full name of contributor ut-of-state PAC (ID#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	04/21/2009	6 Contributor address; City; State; Zip Code 4007 North Hills Drive Austin, TX 78731		\$50.00	}
}				(If travel outside of	Taxas, complete Schedule T)
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In	structions)	
	Date	Full name of contributor ☐ out-of-state PAC (ID≴ Horton, John	(Amount of contribution (\$)	In-kind contribution description (if applicable)
	04/17/2009	Contributor address; City; State; Zip Code 3111 Westlake Dr. Austin, TX 78746		\$100.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	04/29/2009	Contributor address; City; State; Zip Code 3310 Meredith Austin, TX 78703	••••••	\$50.00	
		, in the second			'
_				<u></u>	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In:	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	04/17/2009	Contributor address; City; State; Zip Code 5436 Moon Shadow Dr. Austin, TX 78735		\$50.00	1
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	District	-tire I leb (the IDee leevellee)	F		Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In:	structions)	
	Date	Full name of contributor ut-of-state PAC (ID#)	Amount of	In-kind contribution
		Howe, Kalinda		contribution (\$)	description (if applicable)
	04/17/2009	Contributor address; City; State; Zip Code 5604 Southwest Parkway, Apt. 1832 Austin, TX 78735		\$25.00	
ı				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In:	· .	· ,
	, ,,,	,	• • • •	•	

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	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 29	1/64 Report: 32/76	
2	FILER NAME	Riley, Chris		3 ACCOUNT # 00010009	(Ethics Commission filers)	
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Hudson, Patrick	<u> </u>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)	
	04/17/2009	6 Contributor address; City; State; Zip Code 12014 Wycliff Ln Austin, TX 78727		\$150.00] ! }	
				(If travel outside of	Texas, complete Schedule T)	
9	Principal occup	eation / Job title (See Instructions)	10 Employer (See In	structions)	· · · · · · · · · · · · · · · · · · ·	
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	04/21/2009	Contributor address; City; State; Zip Code 36 St. Marks #4 New York, NY 10003		\$100.00	 	
		·		1	Texas, complete Schedule T)	
	Principal occup	eation / Job title (See Instructions)	Employer (See In	structions)		
	Date	Full name of contributor	 	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	04/24/2009	Contributor address; City; State; Zip Code 810 W. 32nd St. Unit B. Austin, TX 78705		\$5.00	 	
				//6414	Towns complete Schoolide To	
	Principal occur	pation / Job title (See Instructions)	Employer (See In		Texas, complete Schedule T)	
	T IIIIODAI GCCAP	and it is to be the fore mentalions)	Employer (occ in	3845451137		
	Date	Full name of contributor	<u>; </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	04/19/2009	Contributor address; City; State; Zip Code 800 Christopher St. Austin, TX 78704		\$300.00	1 1 1	
	i			(If travel outside of	Texas, complete Schedule T)	
	Principal occup Architect	ation / Job title (See Instructions)	Employer (See In Hurt Partners	structions)		
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	04/29/2009	Contributor address; City; State; Zip Code 3012 West Avenue Austin, TX 78705		\$100.00] 	
				(If travel outside of	Texas, complete Schedule T)	
	Principal occup	ation / Job title (See Instructions)	Employer (See In:	structions)		

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	The Instruction	אס Guide explains how to complete this form.		1 PAGE# Schedule: 30	1/64 Report: 33/76		
2	FILER NAME	Riley, Chris		3 ACCOUNT # 00010009	(Ethics Commission filers)		
4	Date	5 Full name of contributor)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
	04/17/2009	6 Contributor address; City; State; Zip Code 3977 Fall Creek Rd. Austin, TX 78669		\$50.00	 		
				(If travel outside of	Texas, complete Schedule T)		
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In	structions)			
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	04/03/2009	Contributor address; City; State; Zip Code 4910 Brighton Rd Austin, TX 78745		\$20.00	I 		
				(If travel outside of	Texas, complete Schedule T)		
_	Principal occup	ation / Job title (See Instructions)	Employer (See In				
}							
	Date	Full name of contributor	<u>; </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	04/20/2009	Contributor address; City; State; Zip Code 103 W. 55th 1/2 St. Austin, TX 78751		\$20.00	 		
				,	Texas, complete Schedule T)		
	Principal occup	ation / Job title (See Instructions)	Employer (See In:	structions)			
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	04/07/2009	Contributor address; City; State; Zip Code 101 Crestwood Ct. Austin, TX 78746		\$700.00	[
		,		(15 tanual nutaida as	Taura assentata Bahadula Ti		
	Principal occup	ation / Job title (See Instructions)	Employer (See In:	-	Texas, complete Schedule T)		
	attorney / non	e	Armburst & Bro				
	Date	Full name of contributor ut-of-state PAC (ID# Juby, Graham)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	04/26/2009	Contributor address; City; State; Zip Code 13671 Onkayha Cir. Irvine, CA 92620		\$75.00	 		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup	ation / Job title (See Instructions)	Employer (See In:	structions)			

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	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 31	/64 Report: 34/76	
2	FILER NAME	Riley, Chris		3 ACCOUNT# 00010009	(Ethics Commission filers)	
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Kaighin, James Jr.	<u> </u>	7 Amount of contribution (\$)	In-kind contribution description (if applicable)	
	04/06/2009	6 Contributor address; City; State; Zip Code 1409 Hartford Rd. Austin, TX 78703		\$50.00	 	
L				(If travel outside of	Texas, complete Schedule T)	
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In	structions)	****	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
}	04/19/2009	Contributor address; City; State; Zip Code 207 East 34th St. Austin, TX 78705		\$10.00	 	
				<u> </u>	Texas, complete Schedule T)	
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)		
	Date	Full name of contributor	(Amount of contribution (\$)	In-kind contribution description (if applicable)	
	04/29/2009	Contributor address; City; State; Zip Code 2510 Cedarview Austin, TX 78704		\$50.00	[
				(If travel outside of	Texas, complete Schedule T)	
	Principal occup	ation / Job title (See Instructions)	Employer (See In:	structions)		
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	04/27/2009	Contributor address; City; State; Zip Code 5507 Avenue G. Austin, TX 78751		\$25.00	1 1 1	
			<u></u>	(If travel outside of	Texas, complete Schedule T)	
	Principal occup	ation / Job title (See Instructions)	Employer (See In:	structions)		
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	04/13/2009	Contributor address; City; State; Zip Code 1603 Northridge Drive Austin, TX 78723		\$50.00	 	
	ĺ			(If travel outside of	Texas, complete Schedule T)	
	Principal occup	ation / Job title (See Instructions)	Employer (See In:		, ,	

	The Instruction	אס Guide explains how to complete this form.		1 PAGE # Schedule: 32	1/64 Report: 35/76		
2	FILER NAME	Riley, Chris		3 ACCOUNT # 00010009	(Ethics Commission filers)		
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Kassa, Solomon	;)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
	04/27/2009	6 Contributor address; City; State; Zip Code 2958 Donnell Dr. Round Rock, TX 78664		\$200.00	 		
L					Texas, complete Schedule T)		
9	Principal occup Founder	ation / Job title (See Instructions)	10 Employer (See In Lone Star Cab	structions)			
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	04/29/2009	Contributor address; City; State; Zip Code 4541 Capitol Dome Dr. Jacksonville, FL 32246		\$350.00	} 		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup Naval Officer	ation / Job title (See Instructions)	Employer (See In U.S. Central Co				
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	04/08/2009	Contributor address; City; State; Zip Code 1417 Westmoor Dr. Austin, TX 78723		\$50.00	{ 		
_				<u> </u>	Texas, complete Schedule T)		
	Principal occup	ation / Job title (See Instructions)	Employer (See In:	structions)			
	Date	Full name of contributor ut-of-state PAC (IDA Kelley, Dallas)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	03/31/2009	Contributor address; City; State; Zip Code 7122 Wood Hollow Dr. #83 Austin, TX 78731		\$25.00	 		
				(if travel outside of	Texas, complete Schedule T)		
	Principal occup	ation / Job title (See Instructions)	Employer (See In:	structions)			
	Date	Full name of contributor ut-of-state PAC (ID# King, Frank	:)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	04/06/2009	Contributor address; City; State; Zip Code 5602 Shoal Edge Ct. Austin, TX 78756	;	\$100.00	 		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup	ation / Job title (See Instructions)	Employer (See In:	structions)			
					•		

The Instructi	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 33	3/64 Report: 36/76
2 FILER NAME	Rifey, Chris		3 ACCOUNT # 00010009	(Ethics Commission filers)
4 Date	5 Full name of contributor	/)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
04/17/2009	6 Contributor address; City; State; Zip Code 3305 River Rd Austin, TX 78703-1028	••••••	\$500.00	1 !
			(If travel outside of	Texas, complete Schedule T)
	pation / Job title (See Instructions) sociate Commissioner	10 Employer (See In Capital Sports &	structions) & Entertainment /	TEA
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
04/09/2009	Contributor address; City; State; Zip Code 2707 Park View Dr. Austin, TX 78757		\$100.00	
	Tradin, 177 (70)		J	_
		F		Texas, complete Schedule T)
Principal occuj	pation / Job title (See Instructions)	Employer (See In	structions)	
Date	Full name of contributor ☐ out-of-state PAC (ID# Koeninger, Sara)	Amount of contribution (\$)	In-kind contribution description (if applicable)
04/17/2009	Contributor address; Clty; State; Zip Code 801 W. 5th St. #704 Austin, TX 78703		\$200.00	[[[
			(If travel outside of	Texas, complete Schedule T)
Principal occup Vice Preside	nt	Employer (See In Balcones Resor		
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
04/28/2009	Contributor address; City; State; Zip Code 7129 Chimney Corners Austin, TX 78731		\$100.00	
			(if travel outside of	Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions)	Employer (See In		<u>.</u>
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
04/02/2009	Contributor address; City; State; Zip Code 100 Congress Ave. Ste. 1300 Austin, TX 78701		\$700.00	!
			(If travel outside of	Texas, complete Schedule T)
	vation / Job title (See Instructions)	Employer (See In:	structions)	· · ·
attorney / nor	ne	Armbrust & Brow	wn / none	

	The Instruction	ON GUIDE explains how to complete this f	orm.		1 PAGE # Schedule: 34	/64 Report: 37/76
2	FILER NAME	Riley, Chris			3 ACCOUNT# 00010009	(Ethics Commission filers)
4	Date	5 Full name of contributor	state PAC (ID#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	04/07/2009	6 Contributor address; City; State 4805 Crestway Drive Austin, TX 78731	e; Zip Code	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	\$100.00	
					(If travel outside of	Texas, complete Schedule T)
9	Principal occup	ation / Job title (See Instructions)	10	Employer (See Ins	structions)	
	Date	Full name of contributor	state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	04/24/2009	Contributor address; City; State 508 W. 16th St. Austin, TX 78701	e; Zip Code		\$350.00	
	Dringing googs	- Lab title (Can Instructions)		Smolawar (Sag Inc		Texas, complete Schedula T)
	Principal occup President	pation / Job title (See Instructions)		Employer (See Ins Frank Lam & As		
	Date	Full name of contributor	state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	03/31/2009	Contributor address; City; State 9005 Arbor Oaks Cv. Austin, TX 78759	e; Zip Code		\$100.00	
		İ			(If travel outside of	Texas, complete Schedule T)
	Principal occup	eation / Job title (See Instructions)		Employer (See Ins	tructions)	
	Date	Full name of contributor	state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	04/23/2009	Contributor address; City; State 4331 Canoas Dr. Austin, TX 78730	e; Zip Code		\$200.00 	! !
		ı			(If travel outside of	Texas, complete Schedule T)
	Principal occupa Director	ation / Job title (See Instructions)		Employer (See Ins Austin Convention		
	Date	Full name of contributor	state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	04/21/2009	Contributor address; City; State 3304 Woodbriar Ln. Austin, TX 78723	e; Zip Code		\$50.00 	
		i			Aftravel outside of	Texas, complete Schedule T)
	Principal occur	ation / Job title (See Instructions)		Employer (See Ins	<u>'</u>	Taxas, complete contactor,
	Filitolpal occup	adon 7 300 title (Gee mandenons)		Employer (occ ma	Ardetions)	

	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 35	5/64 Report: 38/76
2	FILER NAME	Riley, Chris		3 ACCOUNT# 00010009	(Ethics Commission filers)
4	Date	5 Full name of contributor uut-of-state PAC (ID# Langley, John)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	04/05/2009	6 Contributor address; City; State; Zip Code 3816 S. Lamar Blvd. Apt. 3507 Austin, TX 78704		\$40.00	
				(if travel outside of	Texas, complete Schedule T)
9	Principal occup	eation / Job title (See Instructions)	10 Employer (See In	structions)	
	Date	Full name of contributor ut-of-state PAC (ID# Laves, Benard	1)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	04/10/2009	Contributor address; City; State; Zip Code P.O. Box 28130 Austin, TX 78755-8130		\$150.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	l '	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	04/26/2009	Contributor address; City; State; Zip Code 7508 Stoneoliff Circle Austin, TX 78731		\$250.00	
					Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In: retired	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	04/26/2009	Contributor address; City; State; Zip Code 7201 Mesa Dr. Austin, TX 78731		\$26.00	
				(if travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	<u> L`</u>	
	Date	Full name of contributor ut-of-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	04/17/2009	Contributor address; City; State; Zip Code 5309 Tortuga Trail Austin, TX 78731		\$100.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In:		
	•		- `	-	

	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 36	/64 Report: 39/76	
2	FILER NAME	Riley, Chris		3 ACCOUNT # 00010009	(Ethics Commission filers)	
4	Date	5 Full name of contributor)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)	
	04/16/2009	6 Contributor address; City; State; Zip Code 226 N. Gainsborough Ave. Royal Oak, MI 48067	• • • • • • • • • • • • • • • • • • • •	\$25.00	! ! !	
				(If travel outside of	Texas, complete Schedule T)	
9	Principal occup	eation / Job title (See Instructions)	10 Employer (See In.	structions)	MARKET	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	03/31/2009	Contributor address; City; State; Zip Code 8303 Pommel Cove Austin, TX 78759		\$700.00		
					Texas, complete Schedule T)	
	Principal occup Principal / hor	ation / Job title (See Instructions) memaker	Employer (See In Hejl, Lee & Ass	structions) ociates, Inc. / non	e	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	04/27/2009	Contributor address; City; State; Zip Code 2911 Kassarine Pass Austin, TX 78704-4628		\$100.00	} 	
				(If travel outside of	Texas, complete Schedule T)	
	Principal occup	ation / Job title (See Instructions)	Employer (See In:	structions)		
	Date	Full name of contributor ut-of-state PAC (ID# Lewis, Lisa)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	04/22/2009	Contributor address; City; State; Zip Code 3030 N. Sheridan Rd. #303 Chicago, IL 60657		\$50.00	∤ 	
		Officago, 12 00007		(If travel outside of	Texas, complete Schedule T)	
	Principal occup	ation / Job title (See Instructions)	Employer (See In		Totals, complete contactor (,	
_	Data	Editor of codding [7] and of data DAC (ID4		A	I 1-43-44444	
	Date	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable)	
	04/23/2009	Contributor address; City; State; Zip Code 1212 Guadalupe St. #702		\$150.00	! 	
		Austin, TX 78701				
				(If travel outside of	Texas, complete Schedule T)	
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)		

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	The Instruction	อง Guide explains how to complete this form.		1 PAGE#	U64 Danot: 40/76
2	FILER NAME	Riley, Chris		3 ACCOUNT # 00010009	//64 Report: 40/76 (Ethics Commission filers)
4	Date	5 Full name of contributor ut-of-state PAC (ID# Lippincott, Rob and Cathy	<u> </u>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	04/11/2009	6 Contributor address; City; State; Zip Code 2322 Townes Ln Austin, TX 78703-2332		\$700.00	
				(If travel outside of	Texas, complete Schedule T)
9	Principal occup owner / co-ov	pation / Job title (See Instructions) vner	10 Employer (See In Guero's / Guero		
-	Date	Full name of contributor	<u></u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	04/07/2009	Contributor address; City; State; Zip Code 204 Westhaven Dr. Austin, TX 78746		\$350.00	1 1
		, in the second		(If travel outside of	Texas, complete Schedule T)
┢	Principal occup	pation / Job title (See Instructions)	Employer (See In		
	attorney		Armbrust & Bro	wn, L.L.P.	
	Date	Full name of contributor	/)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	04/18/2009	Contributor address; City; State; Zip Code 8004 High Hollow Dr. Austin, TX 78750		\$50.00	
		7.00.00		(If travel outside of	Texas, complete Schedule T)
-	Principal occup	etion / Job title (See Instructions)	Employer (See In		
	Date	Full name of contributor	;)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	04/20/2009	Contributor address; City; State; Zip Code 360 Nueces St. #1706	, ,	\$100.00] { }
	,	Austin, TX 78701		(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	
-	Date	Full name of contributor ut-of-state PAC (ID#	t)	Amount of	In-kind contribution
		Luciano, Leslie		contribution (\$)	description (if applicable)
	04/16/2009	Contributor address; City; State; Zip Code 710 Upson St. Austin, TX 78703		\$10.02	
				(if travel outside of	Texas, complete Schedule T)
 	Principal occup	ation / Job title (See Instructions)	Employer (See In		- ender complete conducte 1)
	,	,	, , (<u>, </u>	

POLITICAL CONTRIBUTIONS

	OTHER THAN PLEDGES OR LOANS						
	The Instruction	אס Guide explains how to complete this form.		1 PAGE# Schedule: 38	/64 Report: 41/76		
2	FILER NAME	Riley, Chris		3 ACCOUNT # 00010009	(Ethics Commission filers)		
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Maebius, Andrew & Clayton	!)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
	04/06/2009	6 Contributor address; City; State; Zip Code 3909 Balcones Dr. Austin, TX 78731		\$700.00	I I I		
L				(If travel outside of	Texas, complete Schedule T)		
9	Principal occup attorney / nor	eation / Job title (See Instructions)	10 Employer (See In Armbrust & Bro				
	Date	Full name of contributor	1)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	04/21/2009	Contributor address; City; State; Zip Code 6204 Salcon Cliff Dr. Austin, TX 78749		\$50.00] 		
		Additi, 17,70740		(If travel outside of	Texas, complete Schedule T)		
<u> </u>	Principal occup	eation / Job title (See Instructions)	Employer (See In	<u> </u>	Texas, complete schedule 1)		
		· ·		,			
	Date	Full name of contributor ut-of-state PAC (ID# MAK Interests)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	03/31/2009	Contributor address; City; State; Zip Code 515 Congress Ave. #1500 Austin, TX 78701		\$350.00			
<u> </u>	District	etica / Jah Etla (Oca Jasta eticae)	Faralas as (Oa a la		Texas, complete Schedule T)		
	Principal occup	ation / Job title (See Instructions)	Employer (See In:	structions)			
	Date	Full name of contributor	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	04/19/2009	Contributor address; City; State; Zip Code 8300 Puerta Vista Austin, TX 78759-8029		\$100.00	I I I		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup	ation / Job title (See Instructions)	Employer (See In:	structions)			
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable) Event Expense		
	04/20/2009	Contributor address; City; State; Zip Code 6000 Shepherd Mountain Cove #2212 Austin, TX 78730		\$38.38			
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup	ation / Job title (See Instructions)	Employer (See Ins	structions)			
					•		

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	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 39	9/64 Report: 42/76
2	FILER NAME	Riley, Chris		3 ACCOUNT# 00010009	(Ethics Commission filers)
4	Date	5 Full name of contributor uut-of-state PAC (ID# Marsh, Charles	<u> </u>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	04/27/2009	6 Contributor address; City; State; Zip Code 2212 East Windsor Rd. Austin, TX 78703		\$100.00	! ! !
				(if travel outside of	Texas, complete Schedule T)
9	Principal occup	pation / Job title (See Instructions)	10 Employer (See In	structions)	
	Date	Full name of contributor	<u>; </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	04/24/2009	Contributor address; City; State; Zip Code 3802 Orrell Court Austin, TX 78731		\$50.00	[]
	1	}		(If travel outside of	Texas, complete Schedule T)
\vdash	Principal occup	Detion / Job title (See Instructions)	Employer (See In		
	Date	Full name of contributor ut-of-state PAC (ID#	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	04/19/2009	Contributor address; City; State; Zip Code 1004 Yaupon Valley Austin, TX 78746		\$100.00	
				1	Texas, complete Schedule T)
	Principal occup	pation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)
İ	04/22/2009	Contributor address; City; State; Zip Code 2915 Regents Park Austin, TX 78746	-	\$200.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup broker	ation / Job title (See Instructions)	Employer (See In: Matt Mathias &		
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	04/21/2009	Contributor address; City; State; Zip Code 3201 Bryker Dr. Austin, TX 78703		\$150.00	
				(If travel outside of	Texas, complete Schedule T)
-	Principal occup	ation / Job title (See Instructions)	Employer (See In		· · · · · · · · · · · · · · · · · · ·

	The Instruction	אס Guide explains how to complete this form.		1 PAGE# Schedule: 40)/64 Report: 43/76		
2	FILER NAME	Riley, Chris		3 ACCOUNT # 00010009	(Ethics Commission filers)		
4	Date	5 Full name of contributor ut-of-state PAC (ID: Maxson, Peter	<u></u>)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
	04/02/2009	6 Contributor address; City; State; Zip Code 4212 Avenue F Austin, TX 78751		\$100.00	 		
				(if travel outside of	Texas, complete Schedule T)		
9	Principal occup	pation / Job title (See Instructions)	10 Employer (See In	structions)			
	Date	Full name of contributor	<u></u>	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	04/20/2009	Contributor address; City; State; Zip Code 1301 Broadmoor Dr. Austin, TX 78723		\$100.00	 		
				<u> </u>	Texas, complete Schedule T)		
	Principal occup	eation / Job title (See Instructions)	Employer (See In	structions)			
	Date	Full name of contributor	<i>‡</i>)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	04/22/2009	Contributor address; City; State; Zip Code 3406 Lakeside Dr. Austin, TX 78723		\$50.00] -		
					'		
			· · · · · · · · · · · · · · · · · · ·	1	Texas, complete Schedule T)		
	Principal occup	vation / Job title (See Instructions)	Employer (See In	structions)			
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	04/01/2009	Contributor address; City; State; Zip Code 720 Brazos St. Ste. 200 Austin, TX 78701		\$250.00	 		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup attorney	ation / Job title (See Instructions)	Employer (See In HDM	structions)			
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	04/01/2009	Contributor address; City; State; Zip Code 901 South Mopac, Ste. 300 Austin, TX 78746		\$100.00	 		
					· -		
	Dringing com	ation / Joh title (Con Instructions)	Employer (Con to	,	Texas, complete Schedule T)		
	Frincipal occup	ation / Job title (See Instructions)	Employer (See In:	siruciions)			

	The Instruction	אס Guide explains how to complete this form.		1 PAGE # Schedule: 41	I/64 Report: 44/76
2	FILER NAME	Riley, Chris		3 ACCOUNT# 00010009	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# McIntosh Jr, Lawrence	<u> </u>	7 Amount of contribution (\$)	I 8 In-kind contribution description (if applicable)
	04/29/2009	6 Contributor address; City; State; Zip Code 7705 Stoneywood Dr. Austin, TX 78731		\$25.00] []
				(If travel outside of	Texas, complete Schedule T)
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	04/17/2009	Contributor address; City; State; Zip Code 2109 Griswold Lane Austin, TX 78703		\$50.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	04/02/2009	Contributor address; City; State; Zip Code 2501 Inwood PI. Austin, TX 78703		\$35.00	(
				1	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	04/22/2009	Contributor address; City; State; Zip Code 1710 Windsor Rd. Austin, TX 78703		\$700.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup consultants	ation / Job title (See Instructions)	Employer (See In: McWilliams & A		
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	03/31/2009	Contributor address; City; State; Zip Code 2501 Wilson St. Austin, TX 78704		\$100.00	
				(If trave) outside of	Texas, complete Schedule T)
_	Principal occup	ation / Job title (See Instructions)	Employer (See in:	*	
	·				

	The Instruction	אס Guide explains how to complete this form.		1 PAGE# Schedule: 42	1/64 Report: 45/76
2	FILER NAME	Riley, Chris		3 ACCOUNT# 00010009	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Mersha, Abera	<u> </u>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	04/22/2009	6 Contributor address; City; State; Zip Code 4501 E. Riverside Dr. Apt. 2032 Austin, TX 78741		\$200.00	
				(If travel outside of	Texas, complete Schedule T)
9	Principal occup Taxi Driver	ation / Job title (See Instructions)	10 Employer (See In Lone Star Cab	structions)	
	Date	Full name of contributor ☐ out-of-state PAC (ID# Mersha, Zenaw)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	04/23/2009	Contributor address; City; State; Zip Code 4501 E. Riverside Dr. Apt 2032	,	\$200.00	}
		Austin, TX 78741		(If travel outside of	Texas, complete Schedule T)
	Principal occup Taxi Driver	ation / Job title (See Instructions)	Employer (See In Lone Star Cab	structions)	
	Date	Full name of contributor	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	04/17/2009	Contributor address; City; State; Zip Code 4312 Rio Robles Dr. Austin, TX 78746		\$25.00	
İ				(If travel outside of	Texas, complete Schedule T)
⊢	Principal occup	ation / Job title (See Instructions)	Employer (See In	<u> </u>	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	04/19/2009	Contributor address; City; State; Zip Code 4807 Crafty Cove Austin, TX 78749		\$25.00	
				(If travel outside of	Texas, complete Schedule T)
!	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	
l İ	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	04/27/2009	Contributor address; City; State; Zip Code 2705 Northland Dr. Austin, TX 78756		\$230.00	
				(If travel outside of	Texas, complete Schedule T)
		ation / Job title (See Instructions)	Employer (See In		
	Government A	Affairs	Mintz Consulting	g	

	OTHER THAN PLEDGES OR LOANS						
	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 43	/64 Report: 46/76		
2	FILER NAME	Riley, Chris		3 ACCOUNT# 00010009	(Ethics Commission filers)		
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Moore, Catherine	<u>'</u>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
	04/08/2009	6 Contributor address; City; State; Zip Code 3802 Avenue H. Austin, TX 78751		\$50.00	 		
				(If travel outside of	Texas, complete Schedule T)		
9	Principal occup	pation / Job title (See Instructions)	10 Employer (See In	structions)			
	Date	Full name of contributor □ out-of-state PAC (ID# Morehead, Lucian	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	04/17/2009	Contributor address; City; State; Zip Code P.O. Box 50224 Austin, TX 78763		\$100.00	 		
ļ !				l '	Texas, complete Schedule T)		
	Principal occup	pation / Job title (See Instructions)	Employer (See In	structions)			
	Date	Full name of contributor □ out-of-state PAC (ID# Morgan, Barbara)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
 	04/20/2009	Contributor address; City; State; Zip Code 2211 Trail of the Madrones Austin, TX 78746		\$150.00	 		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup	pation / Job title (See Instructions)	Employer (See In	structions)			
	Date	Full name of contributor □ out-of-state PAC (ID# Morgan, Tom)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	04/16/2009	Contributor address; City; State; Zip Code 3302 Harris Park Ave. Austin, TX 78705		\$100.00	 		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)			
	Date	Full name of contributor ☐ out-of-state PAC (ID# Muskin, Ellen)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	04/29/2009	Contributor address; City; State; Zip Code 5907 Lonesome Valley Trail Austin, TX 78731		\$250.00	! 		
				,	Texas, complete Schedule T)		
	Principal occup Partner	eation / Job title (See Instructions)	Employer (See In: Hendricks & Pa				

<u></u>								
	The Instruction	on Guide explains how to complete this form.		1 PAGE#	/64 Deports 47/76			
2	FILER NAME	Riley, Chris		3 ACCOUNT # 00010009	/64 Report: 47/76 (Ethics Commission filers)			
4	Date	5 Full name of contributor ut-of-state PAC (ID: Musselman, Karl-Thomas	<u> </u>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)			
	04/16/2009	6 Contributor address; City; State; Zip Code 1512 A Pennsylvania Ave. Austin, TX 78702		\$50.02	 			
				(If travel outside of	Texas, complete Schedule T)			
9	Principal occup	pation / Job title (See Instructions)	10 Employer (See In	structions)				
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	04/28/2009	Contributor address; City; State; Zip Code 1512 A Pennsylvania Ave Austin, TX 78702		\$49.98	i ! 1			
				(If travel outside of	Texas, complete Schedule T)			
	Principal occup	pation / Job title (See Instructions)	Employer (See In	structions)				
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	04/21/2009	Contributor address; City; State; Zip Code 809 Canyon Creek Drive Austin, TX 78746		\$25.00	 			
	,			(If travel outside of	Texas, complete Schedule T)			
_	Principal occur	ation / Job title (See Instructions)	Employer (See In					
	1 mopal coop		20070707000000					
	Date	Full name of contributor ☐ out-of-state PAC (ID# Nabers, Mary Scott & Lynn	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	03/31/2009	Contributor address; City; State; Zip Code 6034 W. Courtyard Dr., Ste. 100-B Austin, TX 78730		\$50.00	; } [
				(If travel outside of	Texas, complete Schedule T)			
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)				
	Date	Full name of contributor	·)	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	04/16/2009	Contributor address; City; State; Zip Code 112 Skyline Dr. Austin, TX 78746	••••	\$100.00	 			
				(If travel outside of	Texas, complete Schedule T)			
	Principal occup	ation / Job title (See Instructions)	Employer (See In:	•				
	. ,	•		*				

The IN	STRUCTION GUIDE explains how to complete this form.	.,	1 PAGE# Schedule: 45	5/64 Report: 48/76
2 FILER	NAME Riley, Chris		3 ACCOUNT# 00010009	(Ethics Commission filers)
4 Date	5 Full name of contributor ut-of-state PAC (In Nathan, Terry	D#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
04/29/	2009 6 Contributor address; City; State; Zip Cod 2426 Hartford Austin, TX 78703	e	\$50.00) []
			(If travel outside of	Texas, complete Schedule T)
9 Principa	al occupation / Job title (See Instructions)	10 Employer (See In	nstructions)	
Date	Full name of contributor	D#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
04/01/	Contributor address; City; State; Zip Code 2511 Glen Springs Way Austin, TX 78741	0	\$100.00	
}			(if travel outside of	Texas, complete Schedule T)
Principa	al occupation / Job title (See Instructions)	Employer (See Ir	J	1000,000,000
}				
Date	Full name of contributor	D#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
04/17/	Contributor address; City; State; Zip Code 424 Amelia Ave Royal Oak, MI 48073	9	\$50.00	1 1
			(if travel outside of	Texas, complete Schedule T)
Principa	Il occupation / Job title (See Instructions)	Employer (See In	nstructions)	
Date	Full name of contributor	D#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
04/15/	2009 Contributor address; City; State; Zip Code 3701 Moon Lark Court Austin, TX 78746	9	\$100.00	
	Addition to the second			
Principa	I occupation / Job title (See Instructions)	Employer (See In	1	Texas, complete Schedule T)
Timope	i occupation 7 500 title (Gee maductions)	Limployer (Ode in	isu douons y	
Date	Full name of contributor	D#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
04/23/	Contributor address; City; State; Zip Code 10814 Jollyville Rd Blgd 4, suite 100 Austin, TX 78759	3	\$250.00	
			(If travel outside of	Texas, complete Schedule T)
	l occupation / Job title (See Instructions) Vice President	Employer (See In Freese & Nicho		

	The INSTRUCTION	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 46	i/64 Report: 49/76
2	FILER NAME	Riley, Chris		3 ACCOUNT # 00010009	(Ethics Commission filers)
4	Date	5 Full name of contributor ut-of-state PAC (ID# Ogden, Steven	<u>; </u>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	04/29/2009	6 Contributor address; City; State; Zip Code 2604 Bridle Path Austin, TX 78703		\$100.00	
				(If travel outside of	Texas, complete Schedule T)
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
!	04/29/2009	Contributor address; City; State; Zip Code 5907 Balsam Hollow Austin, TX 78731		\$100.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	pation / Job title (See Instructions)	Employer (See In		
		· · · · · · · · · · · · · · · · · · ·		·	
	Date	Full name of contributor)	Amount of	In-kind contribution
		Ostrom, Carolyn		contribution (\$)	description (if applicable) Event Expense
	04/07/2009	Contributor address; City; State; Zip Code 1705 Summit View Austin, TX 78703		\$162.18	1
		Austili, 17 70703]:	l
	District	G . / 1-1- CD . / CD	F 1 (O - 1 -	<u> </u>	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In:	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	04/21/2009	Contributor address; City; State; Zip Code P.O. Box 26623 Austin, TX 78755		\$25.00	1 1 1
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable) Event Expense
	04/20/2009	Contributor address; City; State; Zip Code 2616 Soledo St. Ste. 406		\$50.00	(
		Austin, TX 78705		(lf tenun) mutalda = f	Toyon complete Pahadula T\
	Principal occup	ation / Job title (See Instructions)	Employer (See In:		Texas, complete Schedule T)
	, такара оссор	anon soo uno looo manaonons)	Employer (See III:	on donorie)	

_	The Instruction	on Guide explains how to compl	ete this form.		1 PAGE # Schedule: 47	//64 Report: 50/76
2	FILER NAME	Riley, Chris			3 ACCOUNT # 00010009	(Ethics Commission filers)
4	Date	5 Full name of contributor Dearsley, E. Lee	out-of-state PAC (ID#	!)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	04/17/2009	6 Contributor address; Ci 6314 Ledge Mountian Dr. Austin, TX 78731	ity; State; Zip Code		\$250.00	
Ĺ					(If travel outside of	Texas, complete Schedule T)
9	Principal occup Attorney	ation / Job title (See Instructions)		10 Employer (See In Self	structions)	
	Date	Full name of contributor E Patman, Carrin	out-of-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	04/06/2009	West Austin Station P.O. Box 50033	ity; State; Zip Code		\$350.00	
		Austin, TX 78763			(If travel outside of	Texas, complete Schedule T)
	Principal occup retired	ation / Job title (See Instructions)		Employer (See In retired	structions)	
	Date	Full name of contributor Deak, Martha	out-of-state PAC (ID#	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	04/21/2009	Contributor address; Ci 7301 N. FM. 620 Ste. 155 Austin, TX 78726	ity; State; Zip Code		\$50.00	
					,	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)		Employer (See In	structions)	
	Date	Full name of contributor Pence, Bert	out-of-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	04/24/2009	Contributor address; Ci 708 Rìo Grande Austin, TX 78701	ity; State; Zip Code		\$250.00	
		Adding TX TOTO			(If travel outside of	Texas, complete Schedule T)
	Principal occup Real Estate D	ation / Job title (See Instructions) eveloper	ļ	Employer (See In Pence Propertie		
	Date	Full name of contributor Dertman, Michael	out-of-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	04/08/2009	Contributor address; Ci P.O. Box 684674 Austin, TX 78768	ty; State; Zip Code		\$100.00	1
					(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)		Employer (See In	structions)	

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	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 48	s/64 Report: 51/76		
2	FILER NAME	Riley, Chris		3 ACCOUNT# 00010009	(Ethics Commission filers)		
4	Date	5 Full name of contributor ut-of-state PAC (ID: Price, Gary	#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
	04/20/2009	6 Contributor address; City; State; Zip Code P.O. Box 2514 Austin, TX 78768-2514		\$350.00	 		
				(If travel outside of	Texas, complete Schedule T)		
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In requested	structions)			
	Date	Full name of contributor	‡)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	03/31/2009	Contributor address; City; State; Zip Code 3206 Walnut Ave. Austin, TX 78722	• • • • • • • • • • • • • • • • • • • •	\$120.00	 		
		Ausuii, 1770722		(If travel outside of	Texas, complete Schedule T)		
	Principal occup	eation / Job title (See Instructions)	Employer (See In	structions)			
	Date	Full name of contributor	¥)	Amount of contribution (\$)	In-kind contribution description (if applicable) Event Expense		
	04/20/2009	Contributor address; City; State; Zip Code 3115 Helms St. #316 Austin, TX 78705		\$40.00	 		
		·			'		
_	Principal occur	pation / Job title (See Instructions)	Employer (See In		Texas, complete Schedule T)		
	Timopar occup	and the last management,	2p.0) 0. (000 ii)	o ooo,			
	Date	Full name of contributor	<i>‡</i>)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
i i	04/29/2009	Contributor address; City; State; Zip Code 830 W. 3rd St. #4148 Austin, TX 78701		\$200.00	 		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup political consu	ation / Job title (See Instructions) ultant	Employer (See In self	structions)			
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
! !	04/19/2009	Contributor address; City; State; Zip Code 1707 Ellon Lane Austin, TX 78703		\$350.00	}		
	!	10000		///h	· · · · · · · · · · · · · · · · · · ·		
	Princinal occurs	ation / Job title (See Instructions)	Employer (See In:	[Texas, complete Schedule T)		
	Attorney	and the transfer interest of the second of t	Austin Commun				

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	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 49	1/64 Report: 52/76
2	FILER NAME	Riley, Chris		3 ACCOUNT# 00010009	(Ethics Commission filers)
4	Date	5 Full name of contributor ut-of-state PAC (ID: Ratliff, Shannon	/)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	04/22/2009	6 Contributor address; City; State; Zip Code 3700 Hampton Road Austin, TX 78705		\$350.00	[
				(If travel outside of	Texas, complete Schedule T)
9	Principal occup Lawyer	ation / Job title (See Instructions)	10 Employer (See In Bracewell & Giu		
	Date	Full name of contributor	*)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	04/17/2009	Contributor address; City; State; Zip Code 5816 Tributary Ridge Rd. Austin, TX 78759-5144		\$50.00	1
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	<u></u>	Toxas, volimpiato outloodis 1)
				·	
	Date	Full name of contributor	<i>‡</i>)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	04/20/2009	Contributor address; City; State; Zip Code 1104 Wayside Drive Austin, TX 78703	• • • • • • • • • • • • • • • • • • • •	\$250.00	!
				(if travel outside of	Texas, complete Schedule T)
	Principal occup retired	ation / Job title (See Instructions)	Employer (See In retired	structions)	
	Date	Full name of contributor ut-of-state PAC (ID#Rhodes, Christopher	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	04/08/2009	Contributor address; City; State; Zip Code 234 Cedar Hurst Lane Austin, TX 78734		\$50.00	
		Additi, 17/0/04		are and a second	T
	Principal occup	ation / Job title (See Instructions)	Employer (See In	<u> </u>	Texas, complete Schedule T)
	т торы оссы	and hy occ and (occ monatione)	Employor (occ in		
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	04/29/2009	Contributor address; City; State; Zip Code 6409 Abilene Trail Austin, TX 78749		\$100.00	
				<u></u>	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	

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Γ	The Instruction	ON GUIDE explains how to complete this form.	<u> </u>	1 PAGE# Schedule: 50	/64 Report: 53/76		
2	FILER NAME	Riley, Chris		3 ACCOUNT # 00010009	(Ethics Commission filers)		
4	Date	5 Full name of contributor ut-of-state PAC (IDI Richter, Dorothy	,	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
) } 	04/26/2009	6 Contributor address; City; State; Zip Code 3901 Avenue G Austin, TX 78751		\$30.00	 		
ᆫ				<u>i '</u>	Texas, complete Schedule T)		
9	Principal occup	pation / Job title (See Instructions)	10 Employer (See In	structions)			
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	04/24/2009	Contributor address; City; State; Zip Code 601 S. 3rd St. Austin, TX 78704		\$250.00	I 		
<u> </u> 				,	Texas, complete Schedule T)		
	Principal occup Attorney	eation / Job title (See Instructions)	Employer (See In Self	structions)			
	Date	Full name of contributor	;)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	04/24/2009	Contributor address; City; State; Zip Code P.O. Box 4598 Austin, TX 78765		\$350.00	} ! !		
		,			'		
<u> </u>				·	Texas, complete Schedule T)		
	Principal occup	eation / Job title (See Instructions)	Employer (See In	structions)			
	Date	Full name of contributor ut-of-state PAC (ID#Rosen, Eileen	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	04/25/2009	Contributor address; City; State; Zip Code 1611 Wetherfield Austin, TX 78703		\$20.00	 		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)			
_	Date	Full name of contributor	ł \	Amount of	In-kind contribution		
	Date	Rushing, Amy	·	contribution (\$)	description (if applicable)		
	04/21/2009	Contributor address; City; State; Zip Code 1310 San Antonio St. Apt. 4 Austin, TX 78701	· · · · · · · · · · · · · · · · · · ·	\$25.00	1 } 		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup	ation / Job title (See Instructions)	Employer (See In	,			

The Instruction	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 51	/64 Report: 54/76
2 FILER NAME	Riley, Chris	,	3 ACCOUNT # 00010009	(Ethics Commission filers)
4 Date	5 Full name of contributor ut-of-state PAC (ID)	<u></u>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
04/20/2009	6 Contributor address; City; State; Zip Code 807 Congress Ave. Austin, TX 78701	• • • • • • • • • • • • • • • • • • • •	\$250.00	
			(If travel outside of	Texas, complete Schedule T)
9 Principal occup Banker	pation / Job title (See Instructions)	10 Employer (See In Prosperity Bank		
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
04/29/2009	Contributor address; City; State; Zip Code 117 Laurel Lane Austin, TX 78705		\$200.00	
			L	Texas, complete Schedule T)
Principal occur attorney	pation / Job title (See Instructions)	Employer (See In Graves, Dough	structions) erty, Hearon & Mo	oody, P.C.
Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
04/29/2009	Contributor address; City; State; Zip Code P.O. Box 1445 Austin, TX 78767		\$250.00	
				Texas, complete Schedule T)
Principal occur CEO	pation / Job title (See Instructions)	Employer (See In Wild About Mus	structions) ic; Thriller New M 	edia
Date	Full name of contributor	1)	Amount of contribution (\$)	In-kind contribution description (if applicable)
04/09/2009	Contributor address; City; State; Zip Code 105 Brooks Hollow Drive Austin, TX 78734		\$700.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occup attorney / nor	ation / Job title (See Instructions) ne	Employer (See In Armbrust & Bro	structions) wn, L.L.P. / none	
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable) Event Expense
04/19/2009	Contributor address; City; State; Zip Code 5848 Back Bay Lane Austin, TX 78739	,	\$30.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occup	eation / Job title (See Instructions)	Employer (See In:	structions)	
	:			

	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 52	1/64 Report: 55/76		
2	FILER NAME	Riley, Chris		3 ACCOUNT# 00010009	(Ethics Commission filers)		
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Seals, Paul	<u> </u>	7 Amount of contribution (\$)	8		
	04/29/2009	6 Contributor address; City; State; Zip Code 1709 Francis Ave. austin, TX 78703		\$250.00	[
				(If travel outside of	Texas, complete Schedule T)		
9	Principal occup Attorney	eation / Job title (See Instructions)	10 Employer (See In Guida, Slavich				
	Date	Full name of contributor	<u>; </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)		
j j	04/26/2009	Contributor address; City; State; Zip Code 6910 Hart Lane No. 903 Austin, TX 78731		\$25.00	 		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup	eation / Job title (See Instructions)	Employer (See In	structions)			
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	04/29/2009	Contributor address; City; State; Zip Code 706 West Ave Apt H Austin, TX 78701		\$50.00	 		
				(if travel outside of	Texas, complete Schedule T)		
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	· · ·		
	Date	Full name of contributor	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	04/29/2009	Contributor address; City; State; Zip Code 7206 Running Rope Austin, TX 78731		\$100.00	[
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)			
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	04/20/2009	Contributor address; City; State; Zip Code 9801 Murmuring Creek Dr. Austin, TX 78736		\$50.00) 		
				(16 teasing and 12 of	Tayon samulata Sahaduta 🔻 🗔		
	Principal occup	ation / Job title (See Instructions)	Employer (See Ins		Texas, complete Schedule T)		

i	The Instruction	GUIDE explains how to complete this form.		1 PAGE # Schedule: 53	3/64 Report: 56/76	
2	FILER NAME	Riley, Chris		3 ACCOUNT# 00010009	(Ethics Commission filers)	
4	Date	5 Full name of contributor uut-of-state PAC (ID# Small, Clint)	7 Amount of contribution (\$)	8	
	04/28/2009	6 Contributor address; City; State; Zip Code 4209 Prickley Pear Dr. Austin, TX 78731		\$100.00	! 	
				(If travel outside of	Texas, complete Schedule T)	
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In	structions)		
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	04/18/2009	Contributor address; City; State; Zip Code 1610 Hartford Rd. Austin, TX 78703		\$150.00	1 	
				(If travel outside of	Texas, complete Schedule T)	
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)		
	Date	Full name of contributor ut-of-state PAC (ID# Smith, Bill)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	04/01/2009	Contributor address; City; State; Zip Code 2106 Brooklyn St Austin, TX 78704		\$20.00	 	
				,	Texas, complete Schedule T)	
	Principal occup	ation / Job title (See Instructions)	Employer (See In:	structions)		
l I	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	04/03/2009	Contributor address; City; State; Zip Code 100 Congress Ave. Ste. 1300 Austin, TX 78701		\$700.00	 	
				(If travel outside of	Texas, complete Schedule T)	
	Principal occup Attorney / Lab	ation / Job title (See Instructions) Technician	Employer (See In: Armbrust & Bro	structions) wn / University of	Texas	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	04/26/2009	Contributor address; City; State; Zip Code 2615 Pecos Austin, TX 78703		\$50.00	1 ! !	
	ł			(If travel outside of	Texas, complete Schedule T)	
	Principal occup	ation / Job title (See Instructions)	Employer (See In:	structions)		

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F	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE#	1/04 Danada 57/70		
2	FILER NAME	Riley, Chris		3 ACCOUNT # 00010009	l/64 Report: 57/76 (Ethics Commission filers)		
4	Date	5 Full name of contributor ut-of-state PAC (ID# Stanford, Blake	<u> </u>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
	04/29/2009	6 Contributor address; City; State; Zip Code 4906 Tortuga Place Austin, TX 78731	• • • • • • • • • • • • • • • • • • • •	\$350.00	 		
				(If travel outside of	Texas, complete Schedule T)		
9	Principal occup President	pation / Job title (See Instructions)	10 Employer (See In Southwest Hum	structions) nan Development	Services		
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	04/20/2009	Contributor address; City; State; Zip Code 3132 Eanes Circle Austin, TX 78746		\$100.00	 		
				(If travel outside of	Texas, complete Schedule 7)		
	Principal occup	pation / Job title (See Instructions)	Employer (See In	structions)			
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
 	04/21/2009	Contributor address; City; State; Zip Code 4003 Rosedale Avenue Austin, TX 78756	,	\$100.00	 		
Ì				(If travel outside of	Texas, complete Schedule T)		
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)			
	Date	Full name of contributor	f)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	04/20/2009	Contributor address; City; State; Zip Code 910 West James St.		\$30.00	} !		
		Austin, TX 78704		(if travel outside of	Texas, complete Schedule T)		
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)			
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	04/17/2009	Contributor address; City; State; Zip Code 3814 Half Penny Rd. Austin, TX 78722		\$100.00	 		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)			
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The Instruc	TION GUIDE explains how to complete this form.		1 PAGE# Schedule: 55	5/64 Report: 58/76
2 FILER NAM	E Riley, Chris		3 ACCOUNT# 00010009	(Ethics Commission filers)
4 Date	5 Full name of contributor ut-of-state PAC (ID# Stotts, Kristi	<u></u>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
04/17/2009	6 Contributor address; City; State; Zip Code 360 Nueces Street, Condo 1515 Austin, TX 78701	••••••	\$150.00	
			(If travel outside of	Texas, complete Schedule T)
9 Principal occ	supation / Job title (See Instructions)	10 Employer (See In	structions)	
Date	Full name of contributor	‡)	Amount of contribution (\$)	In-kind contribution description (if applicable) Event Expense
04/24/2009	Contributor address; City; State; Zip Code 705 West Lynn Austin, TX 78703		\$100.00	, } {
				Texas, complete Schedule T)
Principal occ	supation / Job title (See Instructions)	Employer (See In	structions)	
Date	Full name of contributor ut-of-state PAC (ID# Suits, Stacy	,)	Amount of contribution (\$)	In-kind contribution description (if applicable)
04/16/2009	Contributor address; City; State; Zip Code 7807 Doncaster Dr Austin, TX 78745		\$100.00	} [
			1	Texas, complete Schedule T)
Principal occ	rupation / Job title (See Instructions)	Employer (See In	structions)	
Date	Full name of contributor ut-of-state PAC (ID# Sumner, Joel)	Amount of contribution (\$)	In-kind contribution description (if applicable)
04/15/2009	Contributor address; City; State; Zip Code 10301 Mourning Dove Dr. Austin, TX 78750		\$25.02	
	ļ		(if travel outside of	Texas, complete Schedule T)
Principal occ	upation / Job title (See Instructions)	Employer (See In	structions)	
Date	Full name of contributor out-of-state PAC (ID# Suttle, Richard & Allison Jr.)	Amount of contribution (\$)	In-kind contribution description (if applicable)
04/13/2009	Contributor address; City; State; Zip Code 2900 Greenlee Dr. Austin, TX 78703		\$50.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occ	upation / Job title (See Instructions)	Employer (See In:	structions)	

The Instructi	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 56	6/64 Report: 59/76
2 FILER NAME	Riley, Chris		3 ACCOUNT # 00010009	(Ethics Commission filers)
4 Date	5 Full name of contributor ut-of-state PAC (ID# Taylor, Scott & Kim	*)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
04/02/2009	6 Contributor address; City; State; Zip Code 10919 Enchanted Rock Cove Austin, TX 78726		\$700.00	 - -
			(if travel outside of	Texas, complete Schedule T)
9 Principal occup attorney / no	pation / Job title (See Instructions) ne	10 Employer (See In Armbrust & Bro	structions) wn, L.L.P. / none	
Date	Full name of contributor	;)	Amount of contribution (\$)	In-kind contribution description (if applicable)
04/09/2009	Contributor address; City; State; Zip Code 1205 Richcreek Rd. Austin, TX 78757		\$100.00	1 []
			(if travel outside of	Texas, complete Schedule T)
Principal occur	Dation / Job title (See Instructions)	Employer (See In	L -	Taxas, complete concedito 1)
		, , ,	,	
Date	Full name of contributor	‡)	Amount of contribution (\$)	In-kind contribution description (if applicable)
04/26/2009	Contributor address; City; State; Zip Code 7201 Sungate Dr. Austin, TX 78731		\$25.00	
ļ. <u></u>			<u></u>	Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions)	Employer (See In	structions)	
Date	Full name of contributor out-of-state PAC (ID#	;)	Amount of contribution (\$)	In-kind contribution description (if applicable)
04/24/2009	Contributor address; City; State; Zip Code 17 Lone Oak Trail Austin, TX 78745		\$300.00	
			(if travel outside of	Texas, complete Schedule T)
Principal occur Lawyer	pation / Job title (See Instructions)	Employer (See In Texas Legislativ		
Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
04/27/2009	Contributor address; City; State; Zip Code 300 West 6th Street, #2300 Austin, TX 78701-3293		\$700.00	
			(If trave) outside of	Texas, complete Schedule T)
	pation / Job title (See Instructions)	Employer (See In		
Partner / hom	nemaker	Austin Ventures	s / none	

The Instruc	TION GUIDE explains how to complete this form.		1 PAGE # Schedule: 57	7/64 Report: 60/76
2 FILER NAME	Riley, Chris		3 ACCOUNT # 00010009	(Ethics Commission filers)
4 Date	5 Full name of contributor ut-of-state PAC (ID: Thrash, Joe	#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
04/05/2009	6 Contributor address; City; State; Zip Code 1821 Far Gallant Dr. Austin, TX 78746		\$25.00]] [
			(If travel outside of	Texas, complete Schedule T)
9 Principal occu	pation / Job title (See Instructions)	10 Employer (See In	structions)	
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
04/26/2009	Contributor address; City; State; Zip Code 13304 View Ridge Ct. Austin, TX 78737		\$50.00	1
!			(If travel outside of	Texas, complete Schedule T)
Principal occu	pation / Job title (See Instructions)	Employer (See In	structions)	
Date	Full name of contributor	<u>#</u>)	Amount of contribution (\$)	In-kind contribution description (if applicable)
04/15/2009	Contributor address; City; State; Zip Code 5516 Avenue G. Austin, TX 78751		\$25.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occu	pation / Job title (See Instructions)	Employer (See In	<u> </u>	
Date	Full name of contributor	<u>#</u>)	Amount of contribution (\$)	In-kind contribution description (if applicable)
04/02/2009	Contributor address; City; State; Zip Code 3203 French Pl. Austin, TX 78722		\$100.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occu	pation / Job title (See Instructions)	Employer (See In	structions)	
Date	Full name of contributor	‡)	Amount of contribution (\$)	In-kind contribution description (if applicable) Event Expense
04/20/2009	Contributor address; City; State; Zip Code 9430 Research Blvd. Ste. 180		\$350.00	
	Austin, TX 78759			
Principal occu	pation / Job title (See Instructions)	Employer (See In		Texas, complete Schedule T)
Realtor		Keller Williams	/	

SCHEDULE A

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

L					
	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 58	1/64 Report: 61/76
2	FILER NAME	Riley, Chris		3 ACCOUNT # 00010009	(Ethics Commission filers)
4	Date	5 Full name of contributor	‡)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	04/19/2009	6 Contributor address; City; State; Zip Code 3114 Wheeler St. Austin, TX 78705	, ,	\$250.00	
				(If travel outside of	Texas, complete Schedule T)
9	Principal occup Teacher	ation / Job title (See Instructions)	10 Employer (See In Acton School o		
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	04/28/2009	Contributor address; City; State; Zip Code		\$100.00	
		Austin, TX 78703			l
	Deinoinal annua	otion / Joh title (Con Instructions)	Employer/Cools	1	Texas, complete Schedule T)
	Principal occup	nation / Job title (See Instructions)	Employer (See In	saucaons)	
	Date	Full name of contributor	†)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	04/21/2009	Contributor address; City; State; Zip Code 5235 McCormick Mountain Dr. Austin, TX 78734		\$250.00	
		Austili, TA 19194		(If travel outside of	l Texas, complete Schedule T)
	Principal occup President	eation / Job title (See Instructions)	Employer (See In Tuerff-Davis En		
	Date	Full name of contributor	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)
<u>.</u>	03/31/2009	Contributor address; City; State; Zip Code 3613 Laurel Ledge Lane Austin, TX 78731		\$300.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Real Estate B	ation / Job title (See Instructions) roker	Employer (See In Turner Residen		
	Date	Full name of contributor ut-of-state PAC (ID#	· · · · · · · · · · · · · · · · · · ·	Amount of contribution (\$)	In-kind contribution description (if applicable)
	04/29/2009	Contributor address; City; State; Zip Code 901 W. 9th St. Unit 212 Austin, TX 78703		\$25.00]
				(if travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	<u> </u>
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					Electronic Filipo Version 3 4.

	The Instruction	אס Guide explains how to complete this form.		1 PAGE# Schedule: 59	9/64 Report: 62/76
2	FILER NAME	Riley, Chris		3 ACCOUNT # 00010009	(Ethics Commission filers)
4	Date	5 Full name of contributor ut-of-state PAC (ID# Urey, Lorraine	<u> </u>	7 Amount of contribution (\$)	8
	04/20/2009	6 Contributor address; City; State; Zip Code 2301 Waterway Cove Austin, TX 78728		\$50.00	
				(If travel outside of	Texas, complete Schedule T)
9	Principal occup	eation / Job title (See Instructions)	10 Employer (See In	structions)	
	Date	Full name of contributor ☐ out-of-state PAC (ID# Vaughan, Daphne	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	04/27/2009	Contributor address; City; State; Zip Code 2403 Sweetbrush Drive Austin, TX 78703		\$150.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	04/23/2009	Contributor address; City; State; Zip Code 90 East Ave. Austin, TX 78701		\$300.00	! ! !
				· ·	Texas, complete Schedule T)
	Principal occup	eation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
 	04/27/2009	Contributor address; City; State; Zip Code 804 E. 33rd St. Austin, TX 78751		\$50.00	1
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	·	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	04/26/2009	Contributor address; City; State; Zip Code 4803 Crestway Dr. Austin, TX 78731		\$20.00	1
				(If travel outside of	Texas, complete Schedule T)
-	Principal occup	ation / Job title (See Instructions)	Employer (See In:	<u></u>	

	The Instruction	אס Guide explains how to complete this form.		1 PAGE # Schedule: 60	0/64 Report: 63/76
2	FILER NAME	Riley, Chris		3 ACCOUNT # 00010009	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Walker, Heyden)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	04/19/2009	6 Contributor address; City; State; Zip Code 6006 Cary Dr. Austin, TX 78757		\$25.00	
				(if travel outside of	Texas, complete Schedule T)
9	Principal occup	eation / Job title (See Instructions)	10 Employer (See In	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	04/16/2009	Contributor address; City; State; Zip Code 6800 Waters Way Austin, TX 78737		\$700.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Account Man	ation / Job title (See Instructions) ager / none	Employer (See In TSMC / student		
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	04/21/2009	Contributor address; City; State; Zip Code 7002 Windrift Way Austin, TX 78745		\$50.00	የ
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	03/31/2009	Contributor address; City; State; Zip Code 311 W. 5th St. #506		\$100.00	1
	:	Austin, TX 78701		(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	04/06/2009	Contributor address; City; State; Zip Code 2118 Glendale Place Austin, TX 78704		\$50.00	[
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In:	structions)	

				Pro
The Instruction	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 61	/64 Report: 64/76
2 FILER NAME	Riley, Chris		3 ACCOUNT# 00010009	(Ethics Commission filers)
4 Date	5 Full name of contributor ut-of-state PAC (ID# Werbner, Stuart	*)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
04/27/2009	6 Contributor address; City; State; Zip Code 2118 Glendale Place Austin, TX 78704		\$50.00	
			(If travel outside of	Texas, complete Schedule T)
9 Principal occur	pation / Job title (See Instructions)	10 Employer (See In	structions)	
Date	Full name of contributor	;)	Amount of contribution (\$)	In-kind contribution description (if applicable)
04/08/2009	Contributor address; City; State; Zip Code 1903A Crested Butte Dr. Austin, TX 78746		\$350.00	
			(If travel outside of	Texas, complete Schedule 7)
Principal occup Retired	pation / Job title (See Instructions)	Employer (See In US Navy	structions)	
Date	Full name of contributor	<u></u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
04/17/2009	Contributor address; City; State; Zip Code 1520 Ben Crenshaw Way, Apt 221 Austin, TX 78746-6169		\$250.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occur Owner	pation / Job title (See Instructions)	Employer (See In The Whitfield C		
Date	Full name of contributor ut-of-state PAC (IDA Wiebrand, Jennifer	‡)	Amount of contribution (\$)	In-kind contribution description (if applicable)
04/17/2009	Contributor address; City; State; Zip Code 1104 Baylor St. Austin, TX 78703	,	\$40.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	
Date	Full name of contributor	<i>t</i>)	Amount of contribution (\$)	In-kind contribution description (if applicable)
04/02/2009	Contributor address; City; State; Zip Code 2006 E. 9th St. Austin, TX 78702		\$350.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions)	Employer (See In	structions)	
		requested		

	The Instruction	พ Guide explains how to complete this form.		1 PAGE # Schedule: 62	/64 Report: 65/76
2	FILER NAME	Riley, Chris		3 ACCOUNT# 00010009	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID: Williams, Jonathan	*)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable) Event Expense
	03/31/2009	6 Contributor address; City; State; Zip Code 3012 West Ave Austin, TX 78705		\$300.00	
				(if travel outside of	Texas, complete Schedule T)
9	Principal occup Owner	ation / Job title (See Instructions)	10 Employer (See In: Tesoro's Tradin		
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	04/28/2009	Contributor address; City; State; Zip Code 2502 Dip Cove Austin, TX 78704		\$150.00	1 1
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In:	structions)	
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	04/06/2009	Contributor address; City; State; Zip Code 4101 North Hills Dr. Austin, TX 78731		\$25.00	
				/16 h	Tayan annulate Schadule T\
	Principal occup	ation / Job title (See Instructions)	Employer (See In:		Texas, complete Schedule T)
	, , , , , , , , , , , , , , , , , , ,	,	,•, = (====		
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	04/20/2009	Contributor address; City; State; Zip Code 4404 River St. Austin, TX 78751		\$50.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	04/20/2009	Contributor address; City; State; Zip Code 4500 Greenbriar Ct. Austin, TX 78756	,	\$20.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	

	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 63	/64 Report: 66/76
2	FILER NAME	Riley, Chris		3 ACCOUNT # 00010009	(Ethics Commission filers)
4	Date	5 Full name of contributor	;)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	04/29/2009	6 Contributor address; City; State; Zip Code 4421 Lost Oasis Hollow Austin, TX 78739	• • • • • • • • • • • • • • • • • • • •	\$50.00	
				(If travel outside of	Texas, complete Schedule T)
9	Principal occup	vation / Job title (See Instructions)	10 Employer (See In	structions)	
	Date	Full name of contributor	/)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	04/20/2009	Contributor address; City; State; Zip Code 6301 Cat Mountain Cove Austin, TX 78731		\$200.00	1 !
				(If travel outside of	Texas, complete Schedule T)
	Principal occup teacher	ation / Job title (See Instructions)	Employer (See In Asain American	structions) Cultural Center	
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	04/02/2009	Contributor address; City; State; Zip Code 2203 Westover Rd. Austin, TX 78703	• • • • • • • • • • • • • • • • • • • •	\$25.00	†
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	eation / Job title (See Instructions)	Employer (See In		
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	04/25/2009	Contributor address; City; State; Zip Code 11511 Metric Blvd. #811 Austin, TX 78758		\$200.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Taxi Driver	ation / Job title (See Instructions)	Employer (See In Lone Star Cab	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	04/25/2009	Contributor address; City; State; Zip Code 709 Bouldin Avenue Austin, TX 78704	,	\$100.00	
				(If traval autoida as	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In:	,	rozas, complete schedule 1/
	-	,	, , , ,	,	

	The Instruction Guide explains how to complete this form.			1 PAGE # Schedule: 64/64 Report: 67/76	
2	FILER NAME	Riley, Chris		3 ACCOUNT# 00010009	(Ethics Commission filers)
4	Date	5 Full name of contributor ut-of-state PAC (ID# Yosief, Eyeyu	!)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	04/22/2009	6 Contributor address; City; State; Zip Code 13608 Merseyside Plfugerville, TX 78660		\$200.00	
	•			(If travel outside of	Texas, complete Schedule T)
9	Principal occup Taxi Driver	ation / Job title (See Instructions)	10 Employer (See In Lone Star Cab	structions)	
	Date	Full name of contributor ☐ out-of-state PAC (ID# Young, Douglas)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	04/27/2009	Contributor address; City; State; Zip Code 4002-A Duval St. Austin, TX 78751		\$25.00	i 1
		Austin, TATOTOT		(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	04/23/2009	Contributor address; City; State; Zip Code 17205 Tobermory Dr. Pflugerville, TX 78660	• • • • • • • • • • • • • • • • • • • •	\$200.00]] [
	i			(if travel outside of	Texas, complete Schedule T)
	Principal occup Taxi Driver	ation / Job title (See Instructions)	Employer (See In: Lone Star Cab		, _
	Date	Full name of contributor	· \	Amount of	In-kind contribution
	Date	Zirkle, Elliott	·/	contribution (\$)	description (if applicable)
	04/20/2009	Contributor address; City; State; Zip Code 9005 Arbor Oaks Cv. Austin, TX 78759		\$100.00	1 1 1
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In:	structions)	
		-			

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense

EXPENDITURE CATEGORIES Gifts/Awards/Memorial Expense Legal Services Food/Beverage 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)

Polling Expense Printing Expense The Instruction Guide explains how to complete this form. 2 FILER NAME 3 ACCOUNT # (TEC filers) 1 PAGE# Riley, Chris Schedule: 1/8 Report: 68/76 00010009 5 Payee name Date Arc360 Residential 04/10/2009 6 Amount (\$) Payee address City; State; Zip Code 360 Nueces Street \$300.00 Austin, TX 78701 (b) Description (a) Category (See Categories listed at the top of this schedule) (If travel outside of Texas, complete Schedule T) 8 **PURPOSE** event deposit EXPENDITURE Office held: 9 Complete ONLY if Candidate / Officeholder name Office sought: direct expenditure to benefit C/OH Date Payee name Beatty, Leland 04/16/2009 Payee address Amount (\$) City; State; Zip Code \$1,000.00 1103 Upland Ave Austin, TX 78741 Description (If travel outside of Texas, complete Schedule T) Category (See Categories listed at the top of this schedule) **PURPOSE** Field program contract labor OF EXPENDITURE Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Pavee name 03/31/2009 Central Market Amount (\$) Payee address City; State; Zip Code 4001 North Lamar Blvd. \$162.82 Austin, TX 78756 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** event expenses OF **EXPENDITURE** Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name 04/29/2009 Central Market Amount (\$) Payee address City; State; Zip Code 4001 North Lamar Blvd. \$309.92 Austin, TX 78756 Description Category (See Categories listed at the top of this schedule) (If travel outside of Texas, complete Schedule T) **PURPOSE** event expenses OF EXPENDITURE Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH

SCHEDULE F

Advertising Expense Accounting/Banking

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

EXPENDITURE CATEGORIES Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District Travel Out Of District

Loan Repayment/Reimbursement Transportation Equipment & Related Expense

Consulting Expense Event Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Fees Printing Expense Office Overhead/Rental Expense The Instruction Guide explains how to complete this form. 1 PAGE# 2 FILER NAME 3 ACCOUNT # (TEC filers) Riley, Chris Schedule: 2/8 Report: 69/76 00010009 4 Date 5 Payee name **Constant Contact** 04/22/2009 Payee address 6 Amount (\$) City: State: Zip Code 1601 Trapelo Rd., Ste. 329 \$85.00 Waltham, MA 2451 8 (a) Category (See Categories listed at the top of this schedule) (b) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** email list management OF **EXPENDITURE** 9 Complete ONLY if Candidate / Officeholder name Office held: Office sought: direct expenditure to benefit C/OH Date Payee name 04/20/2009 Environmedia Pavee address City; State: Zip Code Amount (\$) \$20,100.00 1717 West 6th St., Ste. 400 Austin, TX 78703 (If travel outside of Texas, complete Schedule T) Description Category (See Categories listed at the top of this schedule) **PURPOSE** television advertising OF EXPENDITURE Office held: Complete ONLY if Candidate / Officeholder name Office sought: direct expenditure to benefit C/OH Date Payee name 04/24/2009 Environmedia Payee address Amount (\$) City: State: Zip Code 1717 West 6th St., Ste. 400 \$10,295.00 Austin, TX 78703 (If travel outside of Texas, complete Schedule T) Description Category (See Categories listed at the top of this schedule) **PURPOSE** television advertising OF **EXPENDITURE** Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Payee name 04/02/2009 Goss, Delwin Amount (\$) Payee address City; State; Zip Code 6410 Ponca St. \$720.00 Austin, TX 78741 (If travel outside of Texas, complete Schedule T) Category (See Categories listed at the top of this schedule) Description **PURPOSE** contract labor - yard signs OF **EXPENDITURE** Office held: Candidate / Officeholder name Office sought: Complete ONLY if direct expenditure to benefit C/OH

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense

EXPENDITURE CATEGORIES Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense

Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District

Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By

Event Expense Fees	Polling Expense Travel Out (Printing Expense Office Over	Of District Candidate/Officeholder/Political Committee head/Rental Expense OTHER (enter a category not listed above)
	The Instruction Guide explains	s how to complete this form.
1 PAGE#	2 FILER NAME	3 ACCOUNT# (TEC filer
Schedule: 3/8 Re	port: 70/76 Riley, Chris	00010009
4 Date	5 Payee name	
04/29/2009	H&M Austin Management	
6 Amount (\$)	7 Payee address City; State; Zip Code	
\$405.00	PO Box 5334	
,	Austin, TX 78763	
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule T)
PURPOSE OF		rent
EXPENDITURE		
9 Complete ONLY if direct expenditure	Candidate / Officeholder name	Office sought: Office held:
to benefit C/OH		
Date	Payee name	.
04/01/2009	Harry, Susan	
Amount (\$)	Payee address City; State; Zip Code	
\$3,000.00	2520 Longview St., Ste. 211	
Ψ0,000.00	Austin, TX 78705	
	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
PURPOSE OF		Fundraising consulting
EXPENDITURE		
Complete ONLY if	Candidate / Officeholder name	0.00
	Candidate / Cinicendide Hame	Office sought: Office held:
direct expenditure to benefit C/OH	Candidate / Cincandide Harry	Office sought: Office held:
direct expenditure	Payee name	Office sought: Office held:
direct expenditure to benefit C/OH	Payee name	Office sought: Office held:
direct expenditure to benefit C/OH Date 04/29/2009	Payee name Harvey's Service Co.	Office sought: Office held:
direct expenditure to benefit C/OH Date 04/29/2009 Amount (\$)	Payee name Harvey's Service Co. Payee address City; State; Zip Code	Office sought: Office held:
direct expenditure to benefit C/OH Date 04/29/2009	Payee name Harvey's Service Co.	Office sought: Office held:
direct expenditure to benefit C/OH Date 04/29/2009 Amount (\$)	Payee name Harvey's Service Co. Payee address City; State; Zip Code 3900 Valley View Roa	Office sought: Office held:
Date 04/29/2009 Amount (\$) \$95.00	Payee name Harvey's Service Co. Payee address City; State; Zip Code 3900 Valley View Roa	Description (If travel outside of Texas, complete Schedule T)
Date 04/29/2009 Amount (\$) \$95.00	Payee name Harvey's Service Co. Payee address City; State; Zip Code 3900 Valley View Roa Austin, TX 78704	
Date 04/29/2009 Amount (\$) \$95.00	Payee name Harvey's Service Co. Payee address City; State; Zip Code 3900 Valley View Roa Austin, TX 78704	Description (If travel outside of Texas, complete Schedule T)
Date 04/29/2009 Amount (\$) \$95.00 PURPOSE OF EXPENDITURE	Payee name Harvey's Service Co. Payee address City; State; Zip Code 3900 Valley View Roa Austin, TX 78704 Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T) [a/c service
Date 04/29/2009 Amount (\$) \$95.00 PURPOSE OF EXPENDITURE Complete ONLY if	Payee name Harvey's Service Co. Payee address City; State; Zip Code 3900 Valley View Roa Austin, TX 78704	Description (If travel outside of Texas, complete Schedule T)
Date 04/29/2009 Amount (\$) \$95.00 PURPOSE OF EXPENDITURE	Payee name Harvey's Service Co. Payee address City; State; Zip Code 3900 Valley View Roa Austin, TX 78704 Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T) [a/c service
Date 04/29/2009 Amount (\$) \$95.00 PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure	Payee name Harvey's Service Co. Payee address City; State; Zip Code 3900 Valley View Roa Austin, TX 78704 Category (See Categories listed at the top of this schedule) Candidate / Officeholder name	Description (If travel outside of Texas, complete Schedule T) [a/c service
Date 04/29/2009 Amount (\$) \$95.00 PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OH Date	Payee name Harvey's Service Co. Payee address City; State; Zip Code 3900 Valley View Roa Austin, TX 78704 Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T) [a/c service
Date 04/29/2009 Amount (\$) \$95.00 PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OH Date 04/28/2009	Payee name Harvey's Service Co. Payee address City; State; Zip Code 3900 Valley View Roa Austin, TX 78704 Category (See Categories listed at the top of this schedule) Candidate / Officeholder name	Description (If travel outside of Texas, complete Schedule T) [a/c service
Date 04/29/2009 Amount (\$) \$95.00 PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OH Date 04/28/2009 Amount (\$)	Payee name Harvey's Service Co. Payee address City; State; Zip Code 3900 Valley View Roa Austin, TX 78704 Category (See Categories listed at the top of this schedule) Candidate / Officeholder name Payee name Kelly Graphics Payee address City; State; Zip Code	Description (If travel outside of Texas, complete Schedule T) [a/c service
Date 04/29/2009 Amount (\$) \$95.00 PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OH Date 04/28/2009	Payee name Harvey's Service Co. Payee address City; State; Zip Code 3900 Valley View Roa Austin, TX 78704 Category (See Categories listed at the top of this schedule) Candidate / Officeholder name Payee name Kelly Graphics	Description (If travel outside of Texas, complete Schedule T) [a/c service
Date 04/29/2009 Amount (\$) \$95.00 PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OH Date 04/28/2009 Amount (\$)	Payee name Harvey's Service Co. Payee address City; State; Zip Code 3900 Valley View Roa Austin, TX 78704 Category (See Categories listed at the top of this schedule) Candidate / Officeholder name Payee name Kelly Graphics Payee address City; State; Zip Code 1409 Quaker Ridge	Description (If travel outside of Texas, complete Schedule T) [a/c service
Date 04/29/2009 Amount (\$) \$95.00 PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OH Date 04/28/2009 Amount (\$) \$24,761.63	Payee name Harvey's Service Co. Payee address City; State; Zip Code 3900 Valley View Roa Austin, TX 78704 Category (See Categories listed at the top of this schedule) Candidate / Officeholder name Payee name Kelly Graphics Payee address City; State; Zip Code 1409 Quaker Ridge	Description (If travel outside of Texas, complete Schedule T) [a/c service Office sought: Office held:
Date 04/29/2009 Amount (\$) \$95.00 PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OH Date 04/28/2009 Amount (\$) \$24,761.63	Payee name Harvey's Service Co. Payee address City; State; Zip Code 3900 Valley View Roa Austin, TX 78704 Category (See Categories listed at the top of this schedule) Candidate / Officeholder name Payee name Kelly Graphics Payee address City; State; Zip Code 1409 Quaker Ridge Austin, TX 78746	Description (If travel outside of Texas, complete Schedule T) [a/c service Office sought: Office held:
Date 04/29/2009 Amount (\$) \$95.00 PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OH Date 04/28/2009 Amount (\$) \$24,761.63	Payee name Harvey's Service Co. Payee address City; State; Zip Code 3900 Valley View Roa Austin, TX 78704 Category (See Categories listed at the top of this schedule) Candidate / Officeholder name Payee name Kelly Graphics Payee address City; State; Zip Code 1409 Quaker Ridge Austin, TX 78746	Description (If travel outside of Texas, complete Schedule T) [a/c service Office sought: Office held:
Date 04/29/2009 Amount (\$) \$95.00 PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OH Date 04/28/2009 Amount (\$) \$24,761.63	Payee name Harvey's Service Co. Payee address City; State; Zip Code 3900 Valley View Roa Austin, TX 78704 Category (See Categories listed at the top of this schedule) Candidate / Officeholder name Payee name Kelly Graphics Payee address City; State; Zip Code 1409 Quaker Ridge Austin, TX 78746 Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T) a/c service Office sought: Office held: Description (If travel outside of Texas, complete Schedule T) printing and mailing
Date 04/29/2009 Amount (\$) \$95.00 PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OH Date 04/28/2009 Amount (\$) \$24,761.63	Payee name Harvey's Service Co. Payee address City; State; Zip Code 3900 Valley View Roa Austin, TX 78704 Category (See Categories listed at the top of this schedule) Candidate / Officeholder name Payee name Kelly Graphics Payee address City; State; Zip Code 1409 Quaker Ridge Austin, TX 78746	Description (If travel outside of Texas, complete Schedule T) [a/c service Office sought: Office held:

SCHEDULE F

Advertising Expense Accounting/Banking

Gifts/Awards/Memorial Expense Legal Services

EXPENDITURE CATEGORIES Salaries/Wages/Contract Labor Solicitation/Fundraising Expense

Loan Repayment/Reimbursement Transportation Equipment & Related Expense

Event Expense Fees	Polling Expense Travel Out of Dis Printing Expense Office Overhead/	strict Candidate Rental Expense OTHER (ent	s/Donations Made By s/Officeholder/Political Committee er a category not listed above)
	The Instruction Guide explains how	w to complete this form.	
1 PAGE# Schedule: 4/8 Re	eport: 71/76 2 FILER NAME Riley, Chris		3 ACCOUNT # (TEC filers) 00010009
4 Date	5 Payee name		-
04/06/2009	Litt, Mike		1
6 Amount (\$)	7 Payee address City; State; Zip Code		
\$1,050.00	4415 Avenue A 78751		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description (If travel outside Field Director salary	de of Texas, complete Schedule T}
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date	Payee name		
04/20/2009	Litt, Mike	<u></u>	
Amount (\$)	Payee address City; State; Zip Code		
\$1,050.00	4415 Avenue A 78751		
PURPOSE OF	Category (See Categories listed at the top of this schedule)	Description (If travel outside Field Director salary	de of Texas, complete Schedule T)
EXPENDITURE			
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date 04/01/2009	Payee name Office Max		
Amount (\$) \$73.29	Payee address City; State; Zip Code 907 West 5th St. Austin, TX 78701		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel outside office supplies	de of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date	Payee name		
04/14/2009	Office Max		į
Amount (\$)	Payee address City; State; Zip Code		
\$102.81	907 West 5th St. Austin, TX 78701		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel outside office supplies	de of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense

to benefit C/OH

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

EXPENDITURE CATEGORIES Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District

Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee

Travel Out Of District OTHER (enter a category not listed above) Fees Printing Expense Office Overhead/Rental Expense The Instruction Guide explains how to complete this form. 2 FILER NAME 1 PAGE# 3 ACCOUNT # (TEC filers) Riley, Chris 00010009 Schedule: 5/8 Report: 72/76 5 Payee name Date 04/29/2009 Pirvx 6 Amount (\$) Payee address City; State; Zip Code 401 West 15th Street, Ste. 520 \$537.02 Austin, TX 78701 8 (a) Category (See Categories listed at the top of this schedule) (b) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** credit card processing fees for period OF **EXPENDITURE** 9 Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Pavee name 04/14/2009 Puryear, Veronica Amount (\$) Payee address City; State; Zip Code 1301 W Lynn St Apt 310 Austin, TX 78703 \$250.00 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Campaign salary - intern **EXPENDITURE** Office held: Complete ONLY if Candidate / Officeholder name Office sought: direct expenditure to benefit C/OH Date Pavee name Shea, Philip 04/06/2009 Amount (\$) Payee address City; State; Zip Code c/o 621 West 7th St. \$250.00 Austin, TX 78701 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Campaign salary - intern **EXPENDITURE** Complete ONLY if Office held: Candidate / Officeholder name Office sought: direct expenditure to benefit C/OH Date Pavee name Smart Mail 04/17/2009 Payee address City; State; Zip Code Amount (\$) 2011 Anchor Lane \$1,472.22 Austin, TX 78723 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** postage & mailing services OF EXPENDITURE Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure

SCHEDULE F

EXPENDITURE CATEGORIES Advertising Expense Accounting/Banking Consulting Expense Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense

Salaries/Wages/Contract Labor Solicitation/Fundralsing Expense Travel to District

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense

Event Expense Fees	Polling Expense Travel of District Polling Expense Travel Office Overhead/	trict Candidate	s/Donations Made By e/Officeholder/Political Committee er a category not listed above)
	The Instruction Guide explains how	v to complete this form.	
1 PAGE# Schedule: 6/8 Re	2 FILER NAME Riley, Chris		3 ACCOUNT # (TEC filers) 00010009
4 Date	5 Payee name		00010000
04/27/2009	Smart Mail		
6 Amount (\$)	7 Payee address City; State; Zip Code		
\$112.00	2011 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 postage	de of Texas, complete Schedule T)
9 Complete ONLY if	Candidate / Officeholder name	Office sought:	Office held:
direct expenditure to benefit C/OH		o mad datg.m.	
Date	Payee name		
04/29/2009	Smart Mail		
Amount (\$)	Payee address City; State; Zip Code		
\$1,500.00	2011 Anchor Lane Austin, TX 78723		
PURPOSE	Category (See Categories listed at the top of this schedule)	Description (If travel outside postage & mailing service	te of Texas, complete Schedule T)
OF EXPENDITURE			
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
direct expenditure	Candidate / Officeholder name Payee name The Bear Media	Office sought:	Office held:
direct expenditure to benefit C/OH Date	Payee name	Office sought:	Office held:
direct expenditure to benefit C/OH Date 04/10/2009	Payee name The Bear Media	Office sought:	Office held:
Date 04/10/2009 Amount (\$) \$5,020.00	Payee name The Bear Media Payee address City; State; Zip Code 508 East 53rd St. #201	Description (If travel outside	de of Texas, complete Schedule T) ☐
Date 04/10/2009 Amount (\$) \$5,020.00	Payee name The Bear Media Payee address City; State; Zip Code 508 East 53rd St. #201 Austin, TX 78751		de of Texas, complete Schedule T) ☐
Date 04/10/2009 Amount (\$) \$5,020.00	Payee name The Bear Media Payee address City; State; Zip Code 508 East 53rd St. #201 Austin, TX 78751	Description (If travel outside	de of Texas, complete Schedule T) ☐
Date 04/10/2009 Amount (\$) \$5,020.00 PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure	Payee name The Bear Media Payee address City; State; Zip Code 508 East 53rd St. #201 Austin, TX 78751 Category (See Categories listed at the top of this schedule)	Description (If travel outsic television advertising pro	de of Texas, complete Schedule T)
Date 04/10/2009 Amount (\$) \$5,020.00 PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OH	Payee name The Bear Media Payee address City; State; Zip Code 508 East 53rd St. #201 Austin, TX 78751 Category (See Categories listed at the top of this schedule) Candidate / Officeholder name	Description (If travel outsic television advertising pro	de of Texas, complete Schedule T)
Date 04/10/2009 Amount (\$) \$5,020.00 PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OH Date	Payee name The Bear Media Payee address City; State; Zip Code 508 East 53rd St. #201 Austin, TX 78751 Category (See Categories listed at the top of this schedule) Candidate / Officeholder name	Description (If travel outsic television advertising pro	de of Texas, complete Schedule T)
Date 04/10/2009 Amount (\$) \$5,020.00 PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OH Date 04/29/2009	Payee name The Bear Media Payee address City; State; Zip Code 508 East 53rd St. #201 Austin, TX 78751 Category (See Categories listed at the top of this schedule) Candidate / Officeholder name Payee name The Bear Media	Description (If travel outsic television advertising pro	de of Texas, complete Schedule T)
Date 04/10/2009 Amount (\$) \$5,020.00 PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OH Date 04/29/2009 Amount (\$)	Payee name The Bear Media Payee address City; State; Zip Code 508 East 53rd St. #201 Austin, TX 78751 Category (See Categories listed at the top of this schedule) Candidate / Officeholder name Payee name The Bear Media Payee address City; State; Zip Code 508 East 53rd St. #201	Description (If travel outsic television advertising pro Office sought:	de of Texas, complete Schedule T) Oduction Office held:

SCHEDULE F

Advertising Expense Accounting/Banking

Gifts/Awards/Memorial Expense Legal Services

EXPENDITURE CATEGORIES Salaries/Wages/Contract Labor Solicitation/Fundraising Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense

Consulting Experience Event Expense Fees	nse Food/Beverage Expense Travel In District Polling Expense Travel Out Of Dis Printing Expense Office Overhead. The Instruction Guide explains ho	strict Candid /Rental Expense OTHER (e	ons/Donations Made By ate/Officeholder/Political Committee inter a category not listed above)
1 PAGE#	2 FILER NAME		3 ACCOUNT # (TEC filers)
Schedule: 7/8 Re	- Bil 05-1-		00010009
4 Date	5 Payee name		•
03/31/2009	The Belmont		
6 Amount (\$)	7 Payee address City; State; Zip Code	-	
\$493.30	305 W 6th St Austin, TX 78701		
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description (If travel out event expenses	side of Texas, complete Schedule T)
EXPENDITURE			
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date	Payee name		
04/22/2009	USPS		
Amount (\$)	Payee address City; State; Zip Code		
\$199.38	Downtown Station Austin, TX 78701		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel out postage	side of Texas, complete Schedule T)
EXPENDITORE			
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date 04/23/2009	Payee name USPS		
Amount (\$)	Payee address City; State; Zip Code		
\$252.00	Downtown Station Austin, TX 78701		
PURPOSE OF	Category (See Categories listed at the top of this schedule)	Description (If travel out postage	side of Texas, complete Schedule T)
EXPENDITURE			
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date	Payee name		
04/24/2009	USPS		
Amount (\$)	Payee address City; State; Zip Code		
\$162.00	Downtown Station Austin, TX 78701		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description (If travel out postage	side of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:

SCHEDULE F

Advertising Expense

EXPENDITURE CATEGORIES

anse Salaries/Wages/Contract Labor

Accounting/Bank Consulting Exper Event Expense Fees	g Expense Food/Beverage Expense Travel In District Contributionse Polling Expense Travel Out Of District Candi		tion Equipment & Related Expense ons/Donations Made By ate/Officeholder/Political Committee nter a category not listed above)
1 PAGE#	2 FILER NAME		3 ACCOUNT # (TEC filers)
Schedule: 8/8 Re	1		00010009
4 Date	5 Payee name		1 000 10000
04/06/2009	Wadia, Bahman		
6 Amount (\$)	7 Payee address City; State; Zip Code		
\$250.00	2205 Cliffs Edge Dr Austin, TX 78733		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description (If travel out Campaign salary - inte	side of Texas, complete Schedule T}
9 Comptete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date 04/28/2009	Payee name Worley Printing		
Amount (\$)	Payee address City; State; Zip Code		
\$975.34	3217 North IH 35 Austin, TX 78722		
PURPOSE OF	Category (See Categories listed at the top of this schedule)	Description (If travel out printing and mailing	side of Texas, complete Schedule T)
EXPENDITURE			
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

Advertising Expense Accounting/Banking

Gifts/Awards/Memorial Expense

EXPENDITURE CATEGORIES Salaries/Wages/Contract Labor Solicitation/Fundraising Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense

Consulting Expe Event Expense Fees	nse Food/Beverage Expense Polling Expense Printing Expense	Travel In District Travel Out Of District Office Overhead/Rental E Guide explains how to co	Contributions/I Candidate/0 xpense OTHER (enter	Contributions/Donations Made By Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) m.	
1 PAGE#	2 FILER NAME			3 ACCOUNT # (TEC filers)	
Schedule: 1/1 Re				00010009	
4 Date 04/28/2009	5 Payee name Environmedia				
6 Amount (\$)	7 Payee address City; State	; Zip Code			
\$10,000.00 Reimbursement from political contributions intended	1717 West 6th St., Ste. 400 Austin, TX 78703				
8 PURPOSE OF	(a) Category (See Categories listed at the top	of this schedule) (b)	Description (If travel outside television advertising	of Texas, complete Schedule T)	
EXPENDITURE		į			
			·		

Chris Riley

SCHEDULE V – attach to form C/OH PERSONS SOLICITING CONTRIBUTIONS ON YOUR BEHALF Reference 2-2-14, Austin City Code

Enter the name and address of any person who has solicited and obtained contributions on your behalf, during the reporting period, of \$200 per person from five or more individuals. (You need not include individuals who raise funds totaling \$5,000 or less through a fundraising event in that individual's residence.)

Name of person soliciting contributions: David Armbrust

Address: 2807 Regents Park, Austin, TX, 78746

Name of person soliciting contributions: Solomon Kassa

Address: 2958 Donnell Dr., Round Rock, TX, 78664