CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

| The C/OH Instruction Gui | IDE explains how to complete this form. | 1 ACCOUNT # (Ethics Commission filers) 00010009 | 2 PAGE# 1 of 34 | | | |
|---|---|---|---|--|--|--|
| 3 CANDIDATE / OFFICEHOLDER | MS/MRS/MR FIRST Chris | М | OFFICE USE ONLY | | | |
| NAME | NICKNAME LAST Riley | SUFFiX | Date Received AUSTIN C | | | |
| 4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address | ADDRESS/PO BOX; APT/SUITE #: P.O. Box 301118 Austin, TX 78703 | CITY; STATE; ZIP CODE | Date Hand-delivered or Date Postharked Receipt # Amount | | | |
| 5 CAMPAIGN | MS/MRS/MR FIRST | MI | Date Processed | | | |
| TREASURER NAME | Mike | | | | | |
| INDIVIL | NICKNAME LAST Clark-Madison | SUFFIX | Date Imaged | | | |
| 6 CAMPAIGN TREASURER ADDRESS (Residence or business) | STREET ADDRESS (NO PO BOX PLEASE); APT / S 907 East 15th Street Austin, TX 78702 | SUITE#; CITY; STATÉ; | ZIP CODE | | | |
| 7 CAMPAIGN TREASURER PHONE | агеа соре РНОЙЕ NUMBER (512) 478-0682 | EXTENSION | | | | |
| 8 REPORT TYPE | X January 15 30th day before el | lection Runoff | 15th day after campaign treasurer appointment (officeholder only) | | | |
| | July 15 8th day before ele | ection Exceeded \$500 limit | Final report (Attach C/OH - FR) | | | |
| 9 PERIOD COVERED | Month Day Year THF 11/15/2010 | Month Day ROUGH 12/31/20 | Year 10 | | | |
| 10 ELECTION | ELECTION DATE ELECTION | TYPE | | | | |
| | 05/14/2011 Prim | nary Runoff X | General Special | | | |
| 11 OFFICE | OFFICE HELD (if any) City Council, Place 1 | 12 OFFICE SOUGHT (if known City Council, Place |) | | | |
| 13 NOTICE OF DIRECT CAMPAIGN EXPENDITURE | Direct campaign expenditures are campaign expenditures are required to disclose this information. | | | | | |
| BY OTHER INDIVIDUALS | Name | | | | | |
| | Address/PO Box; Apt. / Suite #; City; State; | Zip Code | | | | |
| adddional pages | | | | | | |
| | GO TO PAGE 2 | | | | | |

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

| 14 C/OH NAME Riley | , Chris | | 15 ACCOUNT# (E 00010009 | thics Commission filers) |
|---|---|---|----------------------------|---------------------------------------|
| 16 NOTICE FROM This box is for notice of political expenditures by political committees to support the candidate / officeholder. These exhause been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are require information only if they receive notice of such expenditures | | | | |
| POLITICAL COMMITTEE(S) | COMMITTEE TYPE | COMMITTEE NAME | | |
| | GENERAL | COMMITTEE ADDRESS | | |
| | SPECIFIC | COMMITTEE CAMPAIGN TREASURER NAME | | |
| additional pages | | COMMITTEE CAMPAIGN TREASURER ADDRESS | | |
| 17 CONTRIBUTION | 1. TOTAL | POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN | 1 | |
| TOTALS | | ES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED | \$ | 1,050.00 |
| | | POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) | \$ | 41,275.00 |
| EXPENDITURE 3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED TOTALS | | | \$ | 94.56 |
| 4. T | | POLITICAL EXPENDITURES | \$ | 1,036.35 |
| CONTRIBUTION BALANCE | JTION 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD \$ | | | 40,238.73 |
| OUTSTANDING LOAN TOTALS | | PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE AY OF THE REPORTING PERIOD | \$ | 0.00 |
| 18 AFFIDAVIT | | | | · · · · · · · · · · · · · · · · · · · |
| | SUSAN C. HAR Notary Public, State My Commission E May 11, 201 | of Texas (pires | all information required | d to be reported by |
| AFFIX NOTARY S | STAMP / SEAL ABOV | _ | andidate or Officehold | |
| Sworn to and subscrib | ed before me, by t | Ch = 1211 | this the | 8th day |
| Swell | Jan | Susanc. Harry | Notar | Y |
| Signature of officer admi | nistering oath | Print name of officer administering oath | Title of officer adminis | stering oath |

| | OTHER THAN FLEDGES OR LOANS | | | | | |
|---|-----------------------------|--|--|--|--|--|
| | The INSTRUCTION | ON GUIDE explains how to complete this form. | | 1 PAGE# Schedule: 1/3 | 31 Report: 3/34 | |
| 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) | |
| | 12/30/2010 | 6 Contributor address; City; State; Zip Code 1607 Kerr St. Austin, TX 78704 | | \$350.00 | 1 | |
| | | | | <u> </u> | Texas, complete Schedule T) | |
| 9 | Principal occup Owner | pation / Job title (See Instructions) | 10 Employer (See In: Bicycle Sports S | | | |
| | Date | Full name of contributor | ·) | Amount of contribution (\$) | In-kind contribution description (if applicable) | |
| | 12/30/2010 | Contributor address; City; State; Zip Code 10700 Lovridge Drive Austin, TX 78739 | | \$100.00 | | |
| | | | | (If travel outside of | Texas, complete Schedule T) | |
| | Principal occup | pation / Job title (See Instructions) | Employer (See In: | structions) | | |
| | Date | Full name of contributor ut-of-state PAC (ID# Alsup, Jim |) | Amount of contribution (\$) | In-kind contribution description (if applicable) | |
| | 12/28/2010 | Contributor address; City; State; Zip Code 2610 Saint Anthony Austin, TX 78703 | | \$200.00 | | |
| | | | | (If travel outside of | Texas, complete Schedule T) | |
| | Principal occup Attorney | ation / Job title (See Instructions) | Employer (See Ins Jackson Walker | | | |
| | Date | Full name of contributor ut-of-state PAC (ID# Armbrust, Cheryl* |) | Amount of contribution (\$) | In-kind contribution description (if applicable) | |
| | 12/28/2010 | Contributor address; City; State; Zip Code 2807 Regents Park Austin, TX 78746 | | \$25.00 | 1 1 1 | |
| | | | | (If travel outside of | Texas, complete Schedule T) | |
| | Principal occup | ation / Job title (See Instructions) | Employer (See Ins | structions) | | |
| | Date | Full name of contributor ut-of-state PAC (ID# Armbrust, David* |) | Amount of contribution (\$) | In-kind contribution description (if applicable) | |
| | 12/28/2010 | Contributor address; City; State; Zip Code 2807 Regents Park Austin, TX 78746 | | \$25.00 | | |
| | | | | المراجع المراج | Toyan nomplete Schedule Ti | |
| | Principal occur | ation / Job title (See Instructions) | Employer (See Ins | | Texas, complete Schedule T) | |
| | | | | · - 1 | | |

POLITICAL CONTRIBUTIONS

| | OTHER THAN PLEDGES OR LOANS | | | | |
|---|-----------------------------|---|---|-------------------------------|--|
| | The INSTRUCTION | ON GUIDE explains how to complete this form. | | 1 PAGE# Schedule: 2/ | 31 Report: 4/34 |
| 2 | FILER NAME | Riley, Chris | | 3 ACCOUNT # 00010009 | (Ethics Commission filers) |
| 4 | Date | 5 Full name of contributor |) | 7 Amount of contribution (\$) | l 8 In-kind contribution description (if applicable) |
| | 12/28/2010 | 6 Contributor address; City; State; Zip Code 1215 Cleveland Street Wilmette, IL 60091 | | \$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) |
| | 12/31/2010 | Contributor address; City; State; Zip Code 802 Terrace Mt. Dr. Austin, TX 78746 | | \$100.00 | |
| | | | | <u> </u> | Texas, complete Schedule T) |
| | Principal occup | pation / Job title (See Instructions) | Employer (See In | structions) | |
| | Date | Full name of contributor ut-of-state PAC (ID# Bartram, Ashley* |) | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| | 12/28/2010 | Contributor address; City; State; Zip Code 309 McConnell Dr. Austin, TX 78746 | ••••• | \$350.00 | |
| | | | | (if travel outside of | Texas, complete Schedule T) |
| | Principal occup attorney | ation / Job title (See Instructions) | Employer (See In: State of Texas | structions) | |
| | Date | Full name of contributor |) | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| | 12/28/2010 | Contributor address; City; State; Zip Code 309 McConnell Dr. Austin, TX 78746 | • | \$350.00 | |
| | | | | <u> </u> | Texas, complete Schedule T) |
| | Principal occupation | eation / Job title (See Instructions) | Employer (See In: Armbrust Browr | | |
| | Date | Full name of contributor ut-of-state PAC (ID#_Beckham, Brian* |) | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| | 12/28/2010 | Contributor address; City; State; Zlp Code 11205 Limoncilo Ct. Austin, TX 78750 | | \$350.00 | |
| | | | | (If travel outside of | Texas, complete Schedule T) |
| | Principal occupa | ation / Job title (See Instructions) | Employer (See Ins | structions) | |

Principal occupation / Job title (See Instructions)

Austin, Texas 78711-2070 POLITICAL CONTRIBUTIONS SCHEDULE A OTHER THAN PLEDGES OR LOANS 1 PAGE# The Instruction Guide explains how to complete this form. Schedule: 3/31 Report: 5/34 (Ethics Commission filers) 2 FILER NAME Riley, Chris 3 ACCOUNT# 00010009 ut-of-state PAC (ID#_ In-kind contribution Date Full name of contributor Amount of contribution (\$) description (if applicable) Beckham, Kimberly* 12/28/2010 6 Contributor address; City; State; Zip Code \$350.00 11205 Limoncilo Ct. Austin, TX 78750 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) 10 Employer (See Instructions) attorney Armbrust & Brown, L.L.P. Full name of contributor ut-of-state PAC (ID# In-kind contribution Date Amount of description (if applicable) contribution (\$) Bernstein, Erin* 12/20/2010 Contributor address; City; State; Zip Code \$350.00 801 W. 5th St. #908 Austin, TX 78703 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) designer Sonno Date Full name of contributor ut-of-state PAC (ID# In-kind contribution Amount of contribution (\$) description (if applicable) Bernstein, Joshua* 12/20/2010 Contributor address; City: State: Zip Code \$350.00 801 W. 5th St. #908 Austin, TX 78703 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) attorney Armbrust Brown LLP Full name of contributor ut-of-state PAC (ID# In-kind contribution Date Amount of contribution (\$) description (if applicable) **BMcPAC** 12/15/2010 Contributor address; City; State; Zip Code \$350.00 111 Congress Ave., Ste. 1400 Austin, TX 78701-4043 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) In-kind contribution Date Amount of contribution (\$) description (if applicable) Booth, Susan* 12/30/2010 Contributor address; City; State; Zip Code \$100.00 2405 Greenlee Dr. Austin, TX 78703 (if travel outside of Texas, complete Schedule T)

Employer (See Instructions)

| | OTHER THAN PLEDGES OR LOANS | | | | | |
|---|----------------------------------|---|--|-----------------------------------|---|--|
| | The Instruction | אס Guide explains how to complete this form. | | 1 PAGE# Schedule: 4/ | 31 Report: 6/34 | |
| 2 | FILER NAME | Riley, Chris | | 3 ACCOUNT # 00010009 | (Ethics Commission filers) | |
| 4 | Date | 5 Full name of contributor ut-of-state PAC (ID# Boyt, Jeb |) | 7 Amount of contribution (\$) | 8 In-kind contribution description (if applicable) | |
| | 12/10/2010 | 6 Contributor address; City; State; Zip Code 5423 Shoalwood Austin, TX 78756 | | \$350.00 | | |
| | | | | (If travel outside of | Texas, complete Schedule T) | |
| 9 | Principal occup Attorney | ation / Job title (See Instructions) | 10 Employer (See In Attorney Genera | | | |
| | Date | Full name of contributor |) | Amount of contribution (\$) | In-kind contribution description (if applicable) | |
| | 12/20/2010 | Contributor address; City; State; Zip Code 800 W. 38th St. #4101 Austin, TX 78705 | | \$100.00 | | |
| | | | | | Texas, complete Schedule T) | |
| | Principal occup | eation / Job title (See Instructions) | Employer (See In: | structions) | | |
| i | Date | Full name of contributor ut-of-state PAC (ID# Brown, Frank* IV |) | Amount of contribution (\$) | In-kind contribution description (if applicable) | |
| | 12/28/2010 | Contributor address; City; State; Zip Code 602 Coquina Lane Austin, TX 78746-4536 | | \$350.00 | | |
| | | | | (If travel outside of | Texas, complete Schedule T) | |
| | Principal occup attorney | ation / Job title (See Instructions) | Employer (See Ins Armbrust Brown | | | |
| , | Date | Full name of contributor ut-of-state PAC (ID# Brown, Janice* |) | Amount of contribution (\$) | In-kind contribution description (if applicable) | |
| | 12/28/2010 | Contributor address; City; State; Zip Code 602 Coquina Lane Austin, TX 78746-4536 | | \$350.00 |] | |
| | | | | (If travel outside of | Texas, complete Schedule T) | |
| | Principal occup Vice Presiden | ation / Job title (See Instructions) t | Employer (See Ins College Applicat | structions) tions Processing (| Services, Inc. | |
| | Date | Full name of contributor ut-of-state PAC (ID# Brown McCarroll, L.L.P. |) | Amount of contribution (\$) | In-kind contribution description (if applicable) | |
| | 12/15/2010 | Contributor address; City; State; Zip Code 111 Congress Ave., Ste. 1400 Austin, TX 78701-4043 | | \$350.00 | | |
| _ | | | | (If travel outside of | Texas, complete Schedule T) | |
| | Principal occupa | ation / Job title (See Instructions) | Employer (See Ins | structions) | | |

| | OTHER | THAN PLEDGES OR LOAI | ч э | | |
|-------|------------------------------|--|---|-------------------------------|--|
| | The Instruction | אס Guide explains how to complete this form. | | 1 PAGE# Schedule: 5/3 | 31 Report: 7/34 |
| 2 | FILER NAME | Riley, Chris | | 3 ACCOUNT# 00010009 | (Ethics Commission filers) |
| 4 | Date | 5 Full name of contributor uut-of-state PAC (ID# Burnham, John** |) | 7 Amount of contribution (\$) | 8 In-kind contribution description (if applicable) |
| | 12/30/2010 | 6 Contributor address; City; State; Zip Code 2707 Cherry Lane Austin, TX 78703 | • | \$150.00 | 1 |
| | | | | (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) |
| | 12/28/2010 | Contributor address; City; State; Zip Code 2125 Sea Eagle View Austin, TX 78738 | | \$350.00 | |
| | | | | <u> </u> | Texas, complete Schedule T) |
| | Principal occup attorney | pation / Job title (See Instructions) | Employer (See In Armbrust Browr | | |
| | Date | Full name of contributor |) | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| | 12/28/2010 | Contributor address; City; State; Zip Code 2125 Sea Eagle View Austin, TX 78738 | | \$350.00 | |
| | | | | (if travel outside of | Texas, complete Schedule 7) |
| | Principal occup homemaker | ation / Job title (See Instructions) | Employer (See In: none | structions) | |
| 18.88 | Date | Full name of contributor |) | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| | 12/29/2010 | Contributor address; City; State; Zip Code 221 W. 6th Street, Ste. 600 Austin, TX 78701-3411 | | \$350.00 | 1 |
| | : | | | (If travel outside of | Texas, complete Schedule T) |
| | Principal occup President | ation / Job title (See Instructions) | Employer (See In: Bury & Partners | structions) | |
| | Date | Full name of contributor ut-of-state PAC (ID# Bury, Tracey |) | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| | 12/29/2010 | Contributor address; City; State; Zip Code 221 W. 6th Street, Ste. 600 Austin, TX 78701-3411 | | \$350.00 | |
| | | | | (If travel outside of | Texas, complete Schedule T) |
| | Principal occup homemaker | ation / Job title (See Instructions) | Employer (See Ins | structions) | |

| | OINER | THAN PLEDGES OR LOAD | 49 | | |
|----------|-----------------------------|---|------------------------------------|-------------------------------|--|
| <u> </u> | The Instruction | ON GUIDE explains how to complete this form. | | 1 PAGE # Schedule: 6/ | 31 Report: 8/34 |
| 2 | FILER NAME | Riley, Chris | | 3 ACCOUNT# 00010009 | (Ethics Commission filers) |
| 4 | Date | 5 Full name of contributor ☐ out-of-state PAC (ID# Butler Hunt, Meta | !) | 7 Amount of contribution (\$) | 8 In-kind contribution description (if applicable) |
| | 12/10/2010 | 6 Contributor address; City; State; Zip Code 2 Limerick Lane Austin, TX 78746 | | \$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 □ out-of-state PAC (ID# Byars, Anne* |) | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| | 12/28/2010 | Contributor address; City; State; Zip Code 2103 Schulle Avenue Austin, TX 78703 | | \$350.00 | |
| | | | | (If travel outside of | Texas, complete Schedule T) |
| | Principal occup investor | eation / Job title (See Instructions) | Employer (See In self | structions) | |
| | Date | Full name of contributor ☐ out-of-state PAC (ID# Byars, Sam* |) | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| | 12/28/2010 | Contributor address; City; State; Zip Code 2103 Schulle Avenue Austin, TX 78703 | | \$350.00 | 1 |
| | | | | (If travel outside of | Texas, complete Schedule T) |
| | Principal occup Attorney | ation / Job title (See Instructions) | Employer (See In Armbrust & Bro | | |
| | Date | Full name of contributor ut-of-state PAC (ID# Cagle, Greg* |) | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| | 12/28/2010 | Contributor address; City; State; Zip Code P.O. Box 1685 Austin, TX 78767 | | \$350.00 | |
| | | | | <u> </u> | Texas, complete Schedule T) |
| | Principal occup attorney | ation / Job title (See Instructions) | Employer (See In Armbrust & Bro | | |
| | Date | Full name of contributor |) | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| | 12/28/2010 | Contributor address; City; State; Zip Code 40 IH 35N Apt 5A1 Austin, TX 78701 | | \$100.00 | |
| | | | | (If travel outside of | Texas, complete Schedule T) |
| | Principal occup | ation / Job title (See Instructions) | Employer (See In | structions) | · |
| | | | | | |

| | O THER THAN I LEDGES ON EGANG | | | | | |
|----------|-------------------------------|---|---------------------------|--|--|--|
| | The Instruction | ON GUIDE explains how to complete this form. | | 1 PAGE# Schedule: 7/ | 31 Report: 9/34 | |
| 2 | FILER NAME | Riley, Chris | | 3 ACCOUNT # 00010009 | (Ethics Commission filers) | |
| 4 | Date | 5 Full name of contributor ut-of-state PAC (ID# Carlton, John* | <u> </u> | 7 Amount of contribution (\$) | 8 In-kind contribution description (if applicable) | |
| | 12/28/2010 | 6 Contributor address; City; State; Zip Code 4903 Southcrest Dr. Austin, TX 78746 | | \$25.00 | | |
| | 1 | | | (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 | <i>f</i>) | Amount of contribution (\$) | In-kind contribution description (if applicable) | |
| | 12/28/2010 | Contributor address; City; State; Zip Code 4903 Southcrest Dr. Austin, TX 78746 | | \$25.00 |] - | |
| | | | | 1 | 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) | |
| | 12/30/2010 | Contributor address; City; State; Zip Code 3050 Post Oak Błvd. Ste. 300 Houston, TX 77056 | | \$350.00 | | |
| <u> </u> | Principal cour | pation / Job title (See Instructions) | Employer (See In: | | Texas, complete Schedule T) | |
| | Principal occup | ation 7 Job file (See Instructions) | Employer (See in: | structions) | | |
| | Date | Full name of contributor |) | Amount of contribution (\$) | In-kind contribution description (if applicable) | |
| | 12/30/2010 | Contributor address; City; State; Zip Code 2200 Far Gallant Dr. Austin, TX 78746 | | \$350.00 | | |
| | | | | (If travel outside of | Texas, complete Schedule T) | |
| | Principal occup none | ation / Job title (See Instructions) | Employer (See Inc none | structions) | | |
| | Date | Full name of contributor |) | Amount of contribution (\$) | In-kind contribution description (if applicable) | |
| | 12/30/2010 | Contributor address; City; State; Zip Code 4210 River Garden Trail Austin, TX 78746 | 1 | \$350.00 | 1 1 1 | |
| | | | | (If travel outside of | Texas, complete Schedule T) | |
| | Principal occup | eation / Job title (See Instructions) | Employer (See Ins | <u>, </u> | , , | |
| | none | | none | | | |

POLITICAL CONTRIBUTIONS

| OTHER | THAN PLEDGES OR LOAI | | | |
|--------------------------------|---|------------------------------------|-----------------------------------|--|
| The Instruction | ON GUIDE explains how to complete this form. | | 1 PAGE# Schedule: 8/3 | 31 Report: 10/34 |
| 2 FILER NAME | Riley, Chris | | 3 ACCOUNT# 00010009 | (Ethics Commission filers) |
| 4 Date | 5 Full name of contributor ut-of-state PAC (ID# Clark, Joan** | ;) | 7 Amount of contribution (\$) | 8 In-kind contribution description (if applicable) |
| 12/30/2010 | 6 Contributor address; City; State; Zip Code 4210 River Garden Trail Austin, TX 78746 | | \$350.00 | l |
| | | | <u> </u> | Texas, complete Schedule T) |
| 9 Principal occur none | pation / Job title (See Instructions) | 10 Employer (See In none | structions) | |
| Date | Full name of contributor ut-of-state PAC (ID# Clark, Stephen** | ‡) | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| 12/30/2010 | Contributor address; City; State; Zip Code 4210 River Garden Trail Austin, TX 78746 | | \$350.00 | |
| 1 | Austin, 17.10170 | | (if travel outside of | Texas, complete Schedule T) |
| Principal occup Chairman | pation / Job title (See Instructions) | Employer (See In Cypress Real E | ' | |
| Date | Full name of contributor |) | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| 12/30/2010 | Contributor address; City; State; Zip Code 2200 Far Gallant Dr. Austin, TX 78746 | ••••• | \$350.00 | |
| | | | (If travel outside of | Texas, complete Schedule T) |
| Principal occup President | pation / Job title (See Instructions) | Employer (See In Cypress Real E | | |
| Date | Full name of contributor |) | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| 12/28/2010 | Contributor address; City; State; Zip Code 2700 Via Fortuna Ste 100 Austin, TX 78746 | | \$350.00 | |
| | | | • | Texas, complete Schedule T) |
| Principal occup Real Estate | pation / Job title (See Instructions) | Employer (See In: Cushman & Wa | structions) ikefield Oxford Co | mmercial |
| Date | Full name of contributor |) | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| 12/28/2010 | Contributor address; City; State; Zip Code 1400 Yaupon Valley Rd. Austin, TX 78746-4335 | | \$350.00 | |
| | | | (If travel outside of | Texas, complete Schedule T) |
| Principal occup | ation / Job title (See Instructions) | Employer (See Ins | | |

| | The Instruction | ON GUIDE explains how to complete this form. | | 1 PAGE# Schedule: 9/ | 31 Report: 11/34 |
|---|--------------------------------|---|---|-------------------------------|--|
| 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) |
| | 12/28/2010 | 6 Contributor address; City; State; Zip Code 1400 Yaupon Valley Rd. Austin, TX 78746-4335 | • | \$350.00 | |
| | | | | (If travel outside of | Texas, complete Schedule T) |
| 9 | Principal occup attorney | ation / Job title (See Instructions) | 10 Employer (See In Armbrust Brown | | |
| | Date | Full name of contributor |) | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| | 12/30/2010 | Contributor address; City; State; Zip Code 3402 Southill Cir. Austin, TX 78703 | | \$350.00 | |
| | | Masili, TX P0700 | | /if travel outside of | Texas, complete Schedule T) |
| - | Principal occur | pation / Job title (See Instructions) | Employer (See In | <u>'</u> | Texas, complete ochedule 1) |
| | homemaker | | none | | 100000000000000000000000000000000000000 |
| | Date | Full name of contributor ut-of-state PAC (ID# Covert, Rox | <u> </u> | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| | 12/30/2010 | Contributor address; City; State; Zip Code 3402 Southill Cir. Austin, TX 78703 | | \$350.00 | [[|
| | | Ausiii, 17 70703 | | (If travel outside of | Texas, complete Schedule T) |
| | Principal occup auto dealer | eation / Job title (See Instructions) | Employer (See In Covert Buick | <u> </u> | |
| | Date | Full name of contributor |) | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| | 12/28/2010 | Contributor address; City; State; Zip Code 1419 Preston Ave. Austin, TX 78703 | | \$200.00 | |
| | | | | (If travel outside of | Texas, complete Schedule T) |
| | Principal occup attorney | ation / Job title (See Instructions) | Employer (See Ins self | structions) | |
| ï | Date | Full name of contributor |) | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| | 12/28/2010 | Contributor address; City; State; Zip Code 3102 Above Stratford Place Austin, TX 78746 | | \$350.00 | - - |
| | | , 100 mg - 171 TO 170 | | (If travel outside of | Texas, complete Schedule T) |
| | Principal occup | ation / Job title (See Instructions) | Employer (See Ins | | The state of the s |
| | health care pr | | The University of | | |

| | OTTEN THAN ZEDOLO ON ZOANO | | | | | |
|---|----------------------------------|---|-------------------------------------|-------------------------------|---|--|
| | The Instruction | ON GUIDE explains how to complete this form. | | 1 PAGE# Schedule: 10 | //31 Report: 12/34 | |
| 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) | |
| | 12/31/2010 | 6 Contributor address; City; State; Zip Code 1622 Waterston Avenue Austin, TX 78703 | | \$200.00 | | |
| | | | | (If travel outside of | Texas, complete Schedule T) | |
| 9 | Principal occup software devi | action / Job title (See Instructions) elopment | 10 Employer (See In self | structions) | | |
| | Date | Full name of contributor ut-of-state PAC (1D# Espey, Joann | ;) | Amount of contribution (\$) | In-kind contribution description (if applicable) | |
| | 12/30/2010 | Contributor address; City; State; Zip Code 3809 South Second Street, Suite B-300 Austin, TX 78704 | | \$350.00 | | |
| | | | | (15 brough outside of | Tower complete Schodule T) | |
| ├ | Principal occur | pation / Job title (See Instructions) | Employer (See In | | Texas, complete Schedule T) | |
| | homemaker | valion 7 300 title (366 illistractions) | none | sa dedoris) | | |
| | Date | Full name of contributor ut-of-state PAC (ID# Espey, William Jr. | ‡) | Amount of contribution (\$) | In-kind contribution description (if applicable) | |
| | 12/30/2010 | Contributor address; City; State; Zip Code 3809 South Second Street, Suite B-300 Austin, TX 78704 | | \$350.00 | ! ! | |
| | | | | (If travel outside of | Texas, complete Schedule T) | |
| | Principal occup President | ation / Job title (See Instructions) | Employer (See In: Espey Consulta | | | |
| | Date | Full name of contributor |) | Amount of contribution (\$) | In-kind contribution description (if applicable) | |
| | 12/29/2010 | Contributor address; City; State; Zip Code 5503 Blueridge Ct. Austin, TX 78731 | : | \$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 ut-of-state PAC (ID# Freeland, Joe | :) | Amount of contribution (\$) | In-kind contribution description (if applicable) | |
| | 12/28/2010 | Contributor address; City; State; Zip Code 3704 Enfield Road Austin, TX 78703 | | \$100.00 | | |
| | | | | (If travel outside of | Texas, complete Schedule T) | |
| | Principal occup | ation / Job title (See Instructions) | Employer (See Ins | | | |
| | | | | | | |

POLITICAL CONTRIBUTIONS

| | OTHER THAN PLEDGES OR LOANS | | | | |
|---|----------------------------------|---|--------------------------------------|-------------------------------|--|
| | The INSTRUCTION | ON GUIDE explains how to complete this form. | | 1 PAGE# Schedule: 11 | I/31 Report: 13/34 |
| 2 | FILER NAME | Riley, Chris | | 3 ACCOUNT# 00010009 | (Ethics Commission filers) |
| 4 | Date | 5 Full name of contributor ☐ out-of-state PAC (ID# Frick, Laurie |) | 7 Amount of contribution (\$) | 8 In-kind contribution description (if applicable) |
| | 12/29/2010 | 6 Contributor address; City; State; Zip Code 1611 Linscomb Avenue 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 ut-of-state PAC (ID# Furrow, James |) | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| | 12/22/2010 | Contributor address; City; State; Zip Code 40 N IH 35 #6b4 Austin, TX 78701 | | \$350.00 |] |
| | | | | (If travel outside of | Texas, complete Schedule T) |
| | Principal occup Invoice Disco | bation / Job title (See Instructions) unting | Employer (See In The Interface Fi | | |
| | Date | Full name of contributor |) | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| : | 12/31/2010 | Contributor address; City; State; Zip Code 703 Caribou Ridge Trail Pflugerville, TX 78660 | | \$100.00 | } |
| | | | | ' | Texas, complete Schedule T) |
| ! | Principal occup | pation / Job title (See Instructions) | Employer (See Ins | structions) | |
| | Date | Full name of contributor ut-of-state PAC (ID# Garvey, Jerome |) | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| | 12/28/2010 | Contributor address; City; State; Zip Code 2501 Wilson Austin, TX 78704 | •••• | \$100.00 | 1 |
| | | | | <u> </u> | Texas, complete Schedule T) |
| | Principal occup | ation / Job title (See Instructions) | Employer (See Ins | structions) | |
| | Date | Full name of contributor ut-of-state PAC (ID# Goldston, Carolyn |) | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| | 12/29/2010 | Contributor address; City; State; Zip Code 3521 Starline Drive Austin, TX 78759 | | \$100.00 | |
| | | | | <u> </u> | Texas, complete Schedule T) |
| | Principal occup | ation / Job title (See Instructions) | Employer (See Ins | structions) | |

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|--|-------------------------|---------------------------------------|-------------------------------|--|--|--|--|
| The Instruction Guide explains how to cor | nplete this form. | | 1 PAGE# Schedule: 12 | 2/31 Report: 14/34 | | | |
| 2 FILER NAME Riley, Chris | - | | 3 ACCOUNT # 00010009 | (Ethics Commission filers) | | | |
| 4 Date 5 Full name of contributor Gregory, Bob | ut-of-state PAC (ID# | #) | 7 Amount of contribution (\$) | 8 In-kind contribution description (if applicable) | | | |
| 12/28/2010 6 Contributor address; 2939 Westlake Cove Austin, TX 78746 | City; State; Zip Code | | \$350.00 | | | | |
| ļ | | | (If travel outside of | Texas, complete Schedule T) | | | |
| Principal occupation / Job title (See Instructio CEO & Principal Owner | ns) | 10 Employer (See In Texas Disposal | | | | | |
| Date Full name of contributor Gregory, Kay | out-of-state PAC (ID# | ¥) | Amount of contribution (\$) | In-kind contribution description (if applicable) | | | |
| 12/28/2010 Contributor address; 2939 Westlake Cove Austin, TX 78746 | City; State; Zip Code | | \$350.00 | | | | |
| | | | | Texas, complete Schedule T) | | | |
| Principal occupation / Job title (See Instructio none | ns) | Employer (See In homemaker | structions) | | | | |
| Date Full name of contributor Harris, August | ☐ out-of-state PAC (ID# | ‡) | Amount of contribution (\$) | In-kind contribution description (if applicable) | | | |
| 12/31/2010 Contributor address; 1901 West 35th Street Austin, TX 78703 | City; State; Zip Code | •••••• | \$100.00 | | | | |
| | | · | | Texas, complete Schedule T) | | | |
| Principal occupation / Job title (See Instruction | ns) | Employer (See In: | structions) | | | | |
| Date Full name of contributor Harrison, Thomas* | out-of-state PAC (ID# | ŧ) | Amount of contribution (\$) | In-kind contribution description (if applicable) | | | |
| 12/05/2010 Contributor address; 9509 Woody Ridge View Austin, TX 78730 | City; State; Zip Code | •••• | \$350.00 | | | | |
| | | | | ' | | | |
| Principal occupation / Job title (See Instruction | 00) | Employer (See In: | | Texas, complete Schedule T) | | | |
| real estate | | self | sudcaons) | | | | |
| Date Full name of contributor Hawkins, Kelley* | out-of-state PAC (ID# | <u> </u> | Amount of contribution (\$) | In-kind contribution description (if applicable) | | | |
| 12/28/2010 Contributor address; 5805 Carry Back Ln. Austin, TX 78746 | City; State; Zip Code | | \$350.00 | | | | |
| | | | (If travel outside of | Texas, complete Schedule T) | | | |
| Principal occupation / Job title (See Instruction homemaker | ns) | Employer (See Ins | structions) | | | | |

| _ | | | | | | | |
|---|-----------------------------|---|---|--|---|--|--|
| | The Instruction | ON GUIDE explains how to complete this form. | | 1 PAGE# Schedule: 13/31 Report: 15/34 | | | |
| 2 | FILER NAME | Riley, Chris | | 3 ACCOUNT# 00010009 | (Ethics Commission filers) | | |
| 4 | Date | 5 Full name of contributor ☐ out-of-state PAC (ID: Hawkins, Mark* | #) | 7 Amount of contribution (\$) | 8 In-kind contribution description (if applicable) | | |
| | 12/28/2010 | 6 Contributor address; City; State; Zip Code 5805 Carry Back Ln. Austin, TX 78746 | | \$350.00 | - - | | |
| | | | | (If travel outside of | Texas, complete Schedule T) | | |
| 9 | Principal occup attorney | ation / Job title (See Instructions) | 10 Employer (See In Armbrust & Bro | | | | |
| | Date | Full name of contributor | #) | Amount of contribution (\$) | In-kind contribution description (if applicable) | | |
| | 12/28/2010 | Contributor address; City; State; Zip Code 7115 Sungate Dr. Austin, TX 78731 | | \$350.00 | | | |
| | | | | (If travel outside of | Texas, complete Schedule T) | | |
| _ | Principal occup | ation / Job title (See Instructions) | Employer (See In | L <u>`</u> | ,, | | |
| | Gardener | | Self | | | | |
| | Date | Full name of contributor | #) | Amount of contribution (\$) | In-kind contribution description (if applicable) | | |
| : | 12/28/2010 | Contributor address; City; State; Zip Code 3700 Hillbrook Dr. Austin, TX 78731 | | \$350.00 | l | | |
| | | | | (If travel outside of | Texas, complete Schedule T) | | |
| | Principal occup attorney | ation / Job title (See Instructions) | Employer (See Instructions) Armbrust & Brown LLP | | | | |
| | Date | Full name of contributor |) | Amount of contribution (\$) | In-kind contribution description (if applicable) | | |
| | 12/28/2010 | Contributor address; City; State; Zip Code 3700 Hillbrook Dr. Austin, TX 78731 | | \$350.00 | | | |
| | | | | (If travel outside of | Texas, complete Schedule T) | | |
| | Principal occup attorney | ation / Job title (See Instructions) | Employer (See In: Vinson & Elkins | | | | |
| | Date | Full name of contributor | ·) | Amount of contribution (\$) | In-kind contribution description (if applicable) | | |
| | 12/28/2010 | Contributor address; City; State; Zip Code 504 Furlong Drive Austin, TX 78746 | | \$350.00 | | | |
| | | | | (If travel outside of | Texas, complete Schedule T) | | |
| | | ation / Job title (See Instructions) | Employer (See Ins | structions) | | | |
| | retail jeweler | | self | | | | |

POLITICAL CONTRIBUTIONS

| | OTHER | THAN PLEDGES OR LOAD | NO | | |
|---|-----------------------------------|--|---------------------------------------|-------------------------------|---|
| | The INSTRUCT | ON GUIDE explains how to complete this form. | | 1 PAGE# Schedule: 14 | /31 Report: 16/34 |
| 2 | FILER NAME | Riley, Chris | | 3 ACCOUNT # 00010009 | (Ethics Commission filers) |
| 4 | Date | 5 Full name of contributor ut-of-state PAC (ID# Hollingsworth, Wayne* | ŧ) | 7 Amount of contribution (\$) | 8 In-kind contribution description (if applicable) |
| | 12/28/2010 | 6 Contributor address; City; State; Zip Code 504 Furlong Drive Austin, TX 78746 | | \$350.00 | |
| | | | | (If travel outside of | Texas, complete Schedule T) |
| 9 | Principal occup attorney | pation / Job title (See Instructions) | 10 Employer (See In Armbrust Brown | | |
| | Date | Full name of contributor ☐ out-of-state PAC (ID# Hopson, Shaun** |) | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| | 12/30/2010 | Contributor address; City; State; Zip Code 3611 Bonnie Rd. Unit B Austin, TX 78703 | ••••• | \$100.00 | ! |
| | | | | | 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) |
| | 12/28/2010 | Contributor address; City; State; Zip Code 3111 Westlake Drive Austin, TX 78746 | •••• | \$350.00 | |
| | | | | <u> </u> | Texas, complete Schedule T) |
| | Principal occup Real Estate In | nation / Job title (See Instructions) | Employer (See In: Horton Investme | | |
| | Date | Full name of contributor |) | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| | 12/10/2010 | 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 ut-of-state PAC (ID# Jones, Annette* |) | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| | 12/28/2010 | Contributor address; City; State; Zip Code 305 Riley Rd. Austin, TX 78746 | | \$350.00 | |
| | | | | (if travel outside of | Texas, complete Schedule T) |
| | Principal occup | ation / Job title (See Instructions) | Employer (See Ins | · | , ,, 🚨 |
| | none | , | none | , | |

| L | OTHER MART LEDGES OR LOAKS | | | | | | |
|---|-----------------------------|---|---|-------------------------------|--|--|--|
| | The Instruction | אס Guide explains how to complete this form. | | 1 PAGE# Schedule: 15 | /31 Report: 17/34 | | |
| 2 | FILER NAME | Riley, Chris | | 3 ACCOUNT # 00010009 | (Ethics Commission filers) | | |
| 4 | Date | 5 Full name of contributor ut-of-state PAC (ID# Jones, Kenneth* |) | 7 Amount of contribution (\$) | 8 In-kind contribution description (if applicable) | | |
| | 12/28/2010 | 6 Contributor address; City; State; Zip Code 305 Riley Rd. Austin, TX 78746 | | \$350.00 | | | |
| 1 | | | | (If travel outside of | Texas, complete Schedule T) | | |
| 9 | Principal occup attorney | pation / Job title (See Instructions) | 10 Employer (See In Armbrust & Bro | | | | |
| | Date | Full name of contributor | !) | Amount of contribution (\$) | In-kind contribution description (if applicable) | | |
| | 12/30/2010 | Contributor address; City; State; Zip Code 2803 Clearview Drive Austin, TX 78703 | | \$100.00 | { | | |
| | | (0-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1 | | l . | Texas, complete Schedule T) | | |
| _ | Principal occur | pation / Job title (See Instructions) | Employer (See In | structions) | | | |
| | Date | Full name of contributor |) | Amount of contribution (\$) | In-kind contribution description (if applicable) | | |
| | 12/29/2010 | Contributor address; City; State; Zip Code 1502 Marshall Lane AusTIN, TX 78703 | *************************************** | \$100.00 | | | |
| _ | | | | <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) | | |
| | 12/31/2010 | Contributor address; City; State; Zip Code 4204 Sinclair Avenue Austin, TX 78756 | | \$100.00 | | | |
| _ | | | | l ' | Texas, complete Schedule T) | | |
| | Principal occup | ation / Job title (See Instructions) | Employer (See In | structions) | 50. | | |
| | Date | Full name of contributor |) | Amount of contribution (\$) | In-kind contribution description (if applicable) | | |
| | 12/28/2010 | Contributor address; City; State; Zip Code 100 Congress Ave. Ste. 1300 Austin, TX 78701 | | \$350.00 | | | |
| | | | | (If travel outside of | Texas, complete Schedule T) | | |
| | Principal occup attorney | ation / Job title (See Instructions) | Employer (See In: Armbrust & Brown | | | | |

| | OTHER THAN FLEDGES OR LOANS | | | | | | |
|---|----------------------------------|---|--|----------------------------------|---|--|--|
| | The Instruction | ON GUIDE explains how to complete this form. | | 1 PAGE# Schedule: 16 | /31 Report: 18/34 | | |
| 2 | FILER NAME | Riley, Chris | | 3 ACCOUNT # 00010009 | (Ethics Commission filers) | | |
| 4 | Date | 5 Full name of contributor ☐ out-of-state PAC (ID# Krumme, Robin* | !) | 7 Amount of contribution (\$) | 8 In-kind contribution description (if applicable) | | |
| | 12/28/2010 | 6 Contributor address; City; State; Zip Code 100 Congress Ave. Ste. 1300 Austin, TX 78701 | | \$350.00 | | | |
| L | | | | (If travel outside of | Texas, complete Schedule T) | | |
| 9 | Principal occup attorney | pation / Job title (See Instructions) | 10 Employer (See In Martin Disirie Je | structions) efferson Wisdon | | | |
| | Date | Full name of contributor | <u> </u> | Amount of contribution (\$) | In-kind contribution description (if applicable) | | |
| | 12/10/2010 | Contributor address; City; State; Zip Code 6324 Bon Terra Drive Austin, TX 78731 | | \$350.00 | <u> </u> | | |
| | | | | (If travel outside of | Texas, complete Schedule T) | | |
| | Principal occup Attorney | ation / Job title (See Instructions) | Employer (See In Akin, Gump, Sti | structions) rauss, Hauer & Fe | ld LLP | | |
| | Date | Full name of contributor | <u>; </u> | Amount of contribution (\$) | In-kind contribution description (if applicable) | | |
| | 12/31/2010 | Contributor address; City; State; Zip Code 614 W. 31-1/2 St. Austin, TX 78705 | | \$350.00 | | | |
| | | | | (If travel outside of | Texas, complete Schedule T) | | |
| | Principal occup architect | ation / Job title (See Instructions) | Employer (See In Limbacher & Go | structions) odfrey Architects | | | |
| | Date | Full name of contributor |) | Amount of contribution (\$) | In-kind contribution description (if applicable) | | |
| | 12/28/2010 | Contributor address; City; State; Zip Code 204 Westhaven Dr. Austin, TX 78746 | | \$350.00 | - | | |
| | | | | (If travel outside of | Texas, complete Schedule T) | | |
| | Principal occup attorney | ation / Job title (See Instructions) | Employer (See In Armbrust & Bro | | | | |
| | Date | Full name of contributor |) | Amount of contribution (\$) | In-kind contribution description (if applicable) | | |
| | 12/11/2010 | Contributor address; City; State; Zip Code 1508 Norris Drive Austin, TX 78704 | | \$350.00 | | | |
| | ! | | | (If trave) outside of | Texas, complete Schedule T) | | |
| | Principal occup health center | ation / Job title (See Instructions) owner | Employer (See Ins Casa de Luz | . * | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | |
| | | l | | | l l | | |

SCHEDULE A

POLITICAL CONTRIBUTIONS

| OTHER THAN PLEDGES OR LOANS | | | | | |
|---|--|--|--|--|--|
| 1 PAGE # Schedule: 17/31 Report: 19/34 | | | | | |
| 3 ACCOUNT # (Ethics Commission filers) 00010009 | | | | | |
| #) 7 Amount of 8 In-kind contribution contribution (\$) description (if applicable) | | | | | |
| \$350.00 | | | | | |
| (If travel outside of Texas, complete Schedule T) | | | | | |
| 10 Employer (See Instructions) none | | | | | |
| #) Amount of In-kind contribution contribution (\$) description (if applicable) | | | | | |
| \$350.00 | | | | | |
| (If travel outside of Texas, complete Schedule T) | | | | | |
| Employer (See Instructions) self | | | | | |
| #) Amount of I In-kind contribution contribution (\$) description (if applicable) | | | | | |
| \$350.00 | | | | | |
| (If travel outside of Texas, complete Schedule T) | | | | | |
| Employer (See Instructions) Mitchell Family Properties | | | | | |
| #) Amount of I in-kind contribution contribution (\$) description (if applicable) | | | | | |
| \$100.00 | | | | | |
| (If travel outside of Texas, complete Schedule T) | | | | | |
| Employer (See Instructions) | | | | | |
| #) Amount of In-kind contribution contribution (\$) description (if applicable) | | | | | |
| \$100.00 | | | | | |
| (If travel outside of Texas, complete Schedule T) | | | | | |
| Employer (See Instructions) | | | | | |
| | | | | | |

| | OTHER | THAN PLEDGES OR LOAD | | | |
|---|------------------------------------|---|---|-------------------------------|--|
| | The Instruction | ON GUIDE explains how to complete this form. | | 1 PAGE# Schedule: 18 | 3/31 Report: 20/34 |
| 2 | FILER NAME | Riley, Chris | | 3 ACCOUNT# 00010009 | (Ethics Commission filers) |
| 4 | Date | 5 Full name of contributor ut-of-state PAC (ID# McDaniel, Dennis | :) | 7 Amount of contribution (\$) | 8 In-kind contribution description (if applicable) |
| | 12/28/2010 | 6 Contributor address; City; State; Zip Code 906 Crystal Creek Drive Austin, TX 78746 | | \$350.00 | |
| | | | | <u></u> | Texas, complete Schedule T) |
| 9 | Principal occup Real Estate | pation / Job title (See Instructions) | 10 Employer (See In Austin Fairchild | structions) Management Cor | mpany, LLC |
| | Date | Full name of contributor |) | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| | 12/28/2010 | Contributor address; City; State; Zip Code 301 E 4th St Apt 344 | | \$350.00 | |
| | | Austin, TX 78701 | | 1 ' | Texas, complete Schedule T) |
| | Principal occup Planner | pation / Job title (See Instructions) | Employer (See In: Freescale Semi | | |
| | Date | Full name of contributor ut-of-state PAC (ID# McGinnis, Cate |) | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| İ | 12/28/2010 | Contributor address; City; State; Zip Code 3407 Toro Canyon Rd. Austin, TX 78746 | | \$350.00 | ł |
| | | | | <u> </u> | Texas, complete Schedule T) |
| | Principal occup physician | pation / Job title (See Instructions) | Employer (See Ins | structions) | |
| | Date | Full name of contributor |) | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| | 12/28/2010 | Contributor address; City; State; Zip Code 3407 Toro Canyon Rd. Austin, TX 78746 | | \$350.00 |] |
| | | | | <u> </u> | Texas, complete Schedule T) |
| | Principal occup real estate att | pation / Job title (See Instructions) torney | Employer (See Ins self | structions) | |
| | Date | Full name of contributor ut-of-state PAC (ID#_McMenamin, Gene |) | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| | 12/30/2010 | Contributor address; City; State; Zip Code 300 Bowie St 1204 | | \$100.00 | - |
| | | Austin, TX 78703 | | (If travel outside of | Texas, complete Schedule T) |
| | Principal occup | ation / Job title (See Instructions) | Employer (See Ins | , | |
| | • | · | | | |

| | The Instruction | ON GUIDE explains how to complete this form. | | 1 PAGE# Schedule: 19 | 9/31 Report: 21/34 | | |
|---|-------------------------------|---|---|-------------------------------|--|--|--|
| 2 | FILER NAME | Riley, Chris | | 3 ACCOUNT# 00010009 | (Ethics Commission filers) | | |
| 4 | Date | 5 Full name of contributor ut-of-state PAC (ID# Nesenholtz, David |) | 7 Amount of contribution (\$) | 8 In-kind contribution description (if applicable) | | |
| | 12/31/2010 | 6 Contributor address; City; State; Zip Code 1310 San Antonio St. Apt. 3 Austin, TX 78701 | ••••• | \$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) | | |
| | 12/30/2010 | Contributor address; City; State; Zip Code 4100 Michael Neill Dr. Austin, TX 78730 | • | \$350.00 | } | | |
| | | | | | Texas, complete Schedule T) | | |
| | Principal occup President | pation / Job title (See Instructions) | Employer (See Ins Texas Gas Serv | , | | | |
| | Date | Full name of contributor |) | Amount of contribution (\$) | In-kind contribution description (if applicable) | | |
| | 12/30/2010 | Contributor address; City; State; Zip Code 10301 River Plantation Dr. Austin, TX 78747 | | \$350.00 | | | |
| | | | | (If travel outside of | Texas, complete Schedule T) | | |
| | Principal occup contractor | pation / Job title (See Instructions) | Employer (See Ins RZ & Associates | | | | |
| | Oate | Full name of contributor |) | Amount of contribution (\$) | In-kind contribution description (if applicable) | | |
| ı | 12/30/2010 | Contributor address; City; State; Zip Code 10301 River Plantation Dr. Austin, TX 78747 | | \$350.00 | | | |
| | | | | (If travel outside of | Texas, complete Schedule T) | | |
| | Principal occup homemaker | pation / Job title (See Instructions) | Employer (See Ins | structions) | | | |
| | Date | Full name of contributor |) | Amount of contribution (\$) | In-kind contribution description (if applicable) | | |
| | 12/29/2010 | Contributor address; City; State; Zip Code 5507 Ave. G Austin, TX 78751 | | \$350.00 | | | |
| | | l | | (If travel outside of | Texas, complete Schedule 1) | | |
| | Principal occup. Engineer | nation / Job title (See Instructions) | Employer (See Ins Dell, Inc | structions) | | | |

| | The Instruction | ON GUIDE explains how to complete this form. | | 1 PAGE# Schedule: 20 | /31 Report: 22/34 | | | |
|---|----------------------------------|--|---|-------------------------------|---|--|--|--|
| 2 | FILER NAME | Riley, Chris | | 3 ACCOUNT# 00010009 | (Ethics Commission filers) | | | |
| 4 | Date | 5 Full name of contributor ☐ out-of-state PAC (ID#Reid, Susan | <u> </u> | 7 Amount of contribution (\$) | 8 In-kind contribution description (if applicable) | | | |
| | 12/31/2010 | 6 Contributor address; City; State; Zip Code 1104 Wayside Dr. 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) | | | |
| | 12/30/2010 | Contributor address; City; State; Zip Code 6516 Rotan Drive Austin, TX 78749 | | \$350.00 | | | | |
| | | | 120-12-1 | | Texas, complete Schedule T) | | | |
| | Principal occup Vice Presider | pation / Job title (See Instructions) | Employer (See In: Espey Consulta | | | | | |
| | Date | Full name of contributor |) | Amount of contribution (\$) | In-kind contribution description (if applicable) | | | |
| | 12/30/2010 | Contributor address; City; State; Zip Code 6516 Rotan Drive Austin, TX 78749 | | \$350.00 | | | | |
| | | | | (If travel outside of | Texas, complete Schedule T) | | | |
| | Principal occup CFO | ation / Job title (See Instructions) | Employer (See In: Espey Consulta | | | | | |
| | Date | Full name of contributor |) | Amount of contribution (\$) | In-kind contribution description (if applicable) | | | |
| | 12/29/2010 | Contributor address; City; State; Zip Code 3511 Cherry Lane Austin, TX 78703 | *************************************** | \$350.00 | ! | | | |
| | | | | | Texas, complete Schedule T) | | | |
| | Principal occup none | ation / Job title (See Instructions) | Employer (See Ins | structions) | | | | |
| | Date | Full name of contributor ut-of-state PAC (ID# Riley, Michael |) | Amount of contribution (\$) | In-kind contribution description (if applicable) | | | |
| | 12/28/2010 | Contributor address; City; State; Zip Code 209 E 34th St Austin, TX 78705 | | \$350.00 | | | | |
| | | | | (If travel outside of | Texas, complete Schedule T) | | | |
| | Principal occup Engineer | ation / Job title (See Instructions) | Employer (See Ins Microsoft Corpo | structions) | , | | | |

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|---|----------------------------------|--|---------------------------------------|-------------------------------|--|
| | The INSTRUCTION | ON GUIDE explains how to complete this form. | | 1 PAGE# Schedule: 21 | I/31 Report: 23/34 |
| 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) |
| | 12/29/2010 | 6 Contributor address; City; State; Zip Code 3511 Cherry Lane Austin, TX 78703 | | \$350.00 |] |
| | | | | (If travel outside of | Texas, complete Schedule T) |
| 9 | Principal occup Assistant Dea | ation / Job title (See Instructions) an | 10 Employer (See In The University | | |
| | Date | Full name of contributor | () | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| | 12/28/2010 | Contributor address; City; State; Zip Code 209 E 34th St Austin, TX 78705 | | \$350.00 | |
| | | | | (If travel outside of | Texas, complete Schedule T) |
| | Principal occup homemaker | etion / Job title (See Instructions) | Employer (See In none | structions) | |
| | Date | Full name of contributor |) | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| - | 12/26/2010 | Contributor address; City; State; Zip Code 7201 Mesa Drive Austin, TX 78731 | | \$350.00 | |
| | | | | | Texas, complete Schedule T) |
| | Principal occup RN | ation / Job title (See Instructions) | Employer (See In Austin Endosco | | |
| | Date | Full name of contributor ut-of-state PAC (ID# Robinson, Susan* |) | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| | 12/05/2010 | Contributor address; City; State; Zip Code 13020 Travis View Loop Austin, TX 78732 | | \$350.00 | |
| | | | | /lf traval autoids of | Toyon complete Schodule Ti |
| | Principal occup real estate | ation / Job title (See Instructions) | Employer (See In self | | Texas, complete Schedule T) |
| | Date | Full name of contributor |) | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| | 12/29/2010 | Contributor address; City; State; Zip Code 112 West 9th St. Austin, TX 78703 | | \$350.00 | |
| | | | | (If travel outside of | Texas, complete Schedule T) |
| | | ation / Job title (See Instructions) | Employer (See In | , | <u>-</u> - |
| | real estate | | Rodgers & Reic | nie inc. | |

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| | The Instruction | ON GUIDE explains how to complete this form. | | 1 PAGE# Schedule: 22 | 1/31 Report: 24/34 | | |
| 2 | FILER NAME | Riley, Chris | | 3 ACCOUNT# 00010009 | (Ethics Commission filers) | | |
| 4 | Date | 5 Full name of contributor ☐ out-of-state PAC (ID#Rusk, Jeff | ;) | 7 Amount of contribution (\$) | 8 In-kind contribution description (if applicable) | | |
| | 12/30/2010 | 6 Contributor address; City; State; Zip Code 500 Rusk Lane Georgetown, TX 78626 | | \$350.00 | ! ! ! | | |
| L | | | | (if travel outside of | Texas, complete Schedule T) | | |
| 9 | Principal occup Attorney | pation / Job title (See Instructions) | 10 Employer (See In The Rusk Law I | | | | |
| | Date | Full name of contributor ☐ out-of-state PAC (ID#Rusk, Susan | <u> </u> | Amount of contribution (\$) | In-kind contribution description (if applicable) | | |
| | 12/30/2010 | Contributor address; City; State; Zip Code 500 Rusk Lane Georgetown, TX 78626 | • | \$350.00 | | | |
| | | | | (if travel outside of | Texas, complete Schedule T) | | |
| | Principal occup homemaker | pation / Job title (See Instructions) | Employer (See In none | structions) | | | |
| | Date | Full name of contributor |) | Amount of contribution (\$) | In-kind contribution description (if applicable) | | |
| | 12/28/2010 | Contributor address; City; State; Zip Code 4709 Sinclair Ave Austin, TX 78756 | | \$100.00 | 1 1 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 |) | Amount of contribution (\$) | In-kind contribution description (if applicable) | | |
| | 12/31/2010 | Contributor address; City; State; Zip Code 2609 Sherwood Ln Austin, TX 78704 | | \$100.00 | ! | | |
| | | 100000000000 | | (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) | | |
| | 12/29/2010 | Contributor address; City; State; Zip Code 105 Brooks Hollow Drive Austin, TX 78734 | | \$350.00 | | | |
| | | | ; | (If travel outside of | Texas, complete Schedule T) | | |
| | Principal occup attorney | ation / Job title (See Instructions) | Employer (See Ins Armbrust & Brow | | | | |

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| | The Instruction | אס Guide explains how to complete this form. | | 1 PAGE # Schedule: 23 | 3/31 Report: 25/34 |
| 2 | FILER NAME | Riley, Chris | | 3 ACCOUNT# 00010009 | (Ethics Commission filers) |
| 4 | Date | 5 Full name of contributor ☐ out-of-state PAC (ID# Scrafford, Nora* | <u> </u> | 7 Amount of contribution (\$) | 8 In-kind contribution description (if applicable) |
| | 12/29/2010 | 6 Contributor address; City; State; Zip Code 105 Brooks Hollow Drive Austin, TX 78734 | | \$350.00 | |
| | | | | (If travel outside of | Texas, complete Schedule T) |
| 9 | Principal occup none | ation / Job title (See Instructions) | 10 Employer (See In none | structions) | |
| | Date | Full name of contributor ut-of-state PAC (ID# Siff, Thedore |) | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| | 12/30/2010 | Contributor address; City; State; Zip Code 604 West 11th Street Austin, TX 78701 | | \$250.00 | ! ! |
| | | | | (If travel outside of | Texas, complete Schedule T) |
| | Principal occur CEO | pation / Job title (See Instructions) | Employer (See In Park Place Pub | | |
| | Date | Full name of contributor |) | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| | 12/10/2010 | Contributor address; City; State; Zip Code 604 West 11th Street Austin, TX 78701 | | \$100.00 | 1 ? |
| | | | | (If travel outside of | Texas, complete Schedule T) |
| | Principal occup CEO | ation / Job title (See Instructions) | Employer (See In Park Place Pub | | |
| | Date | Full name of contributor ut-of-state PAC (ID# Sloan, Leslie* |) | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| ! | 12/05/2010 | Contributor address; City; State; Zip Code 8208 Long Canyon Dr. Austin, TX 78730 | | \$350.00 |] [|
| | | | | (if travel outside of | Texas, complete Schedule T) |
| | Principal occup real estate | ation / Job title (See Instructions) | Employer (See In self | structions) | |
| | Date | Full name of contributor |) | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| | 12/28/2010 | Contributor address; City; State; Zip Code 100 Congress Ave., Ste. 1300 Austin, TX 78701 | | \$350.00 | 1 { 1 |
| | | | | | Texas, complete Schedule T) |
| | Principal occup attorney | ation / Job title (See Instructions) | Employer (See In: Armbrust & Bro | | |

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| | The Instruction | אס Guide explains how to complete this form. | | 1 PAGE# | •• . |
| _ | | | | Schedule: 24 | /31 Report: 26/34 |
| 2 | FILER NAME | Riley, Chris | | 3 ACCOUNT# 00010009 | (Ethics Commission filers) |
| 4 | Date | 5 Full name of contributor | !) | 7 Amount of contribution (\$) | In-kind contribution description (if applicable) |
| | 12/31/2010 | 6 Contributor address; City; State; Zip Code 1712 Pasadena Drive Austin, TX 78757 | | \$350.00 | { |
| | | | | (if travel outside of | Texas, complete Schedule T) |
| 9 | Principal occup Sr. Planner | ation / Job title (See Instructions) | 10 Employer (See In Travis County | structions) | |
| | Date | Full name of contributor | <u> </u> | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| | 12/05/2010 | Contributor address; City; State; Zip Code 221 W. Canino Houston, TX 77037 | | \$350.00 | , |
| | | | | (If travel outside of | Texas, complete Schedule T) |
| | | ation / Job title (See Instructions) | Employer (See In | structions) | |
| | real estate | | self | | |
| | Date | Full name of contributor | /) | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| | 12/05/2010 | Contributor address; City; State; Zip Code 221 W. Canino Rd. Houston, TX 77037 | | \$350.00 | |
| | | | | (If travel outside of | Texas, complete Schedule T) |
| | Principal occup real estate | ation / Job title (See Instructions) | Employer (See In self | structions) | |
| | Date | Full name of contributor |) | Amount of | In-kind contribution |
| | | Speaks, Rodney* | | contribution (\$) | description (if applicable) |
| | 12/05/2010 | Contributor address; City; State; Zip Code 9506 Woody Rdg. Austin, TX 78730 | | \$350.00 | |
| | | Adding TA Forod | | | · |
| | Principal occup | ation / Job title (See Instructions) | Employer (See In: | <u> </u> | Texas, complete Schedule T) |
| | real estate | anony soo the (see instructions) | self | an delionary | |
| | Date | Full name of contributor |) | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| | 12/12/2010 | Contributor address; City; State; Zip Code 800 West 5th St. #1102 Austin, TX 78703 | | \$350.00 | |
| | | | | (If travel outside of | Texas, complete Schedule T) |
| | Principal occup Architect | ation / Job title (See Instructions) | Employer (See In: Page Southerla | | |
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| | The INSTRUCTO | อพ Guide explains how to complete this form. | | 1 PAGE # Schedule: 25 | 5/31 Report: 27/34 |
| 2 | FILER NAME | Riley, Chris | | 3 ACCOUNT # 00010009 | (Ethics Commission filers) |
| 4 | Date | 5 Full name of contributor ☐ out-of-state PAC (ID# Stacy, Melinda | !) | 7 Amount of contribution (\$) | 8 |
| | 12/30/2010 | 6 Contributor address; City; State; Zip Code 823 Congress Avenue, Suite 1111 Austin, TX 78701 | | \$350.00 | |
| <u>. </u> | | | ! | (If travel outside of | Texas, complete Schedule T) |
| 9 | Principal occup Office Manag | pation / Job title (See Instructions) per | 10 Employer (See In T. Stacy & Asso | | |
| | Date | Full name of contributor | !) | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| | 12/30/2010 | Contributor address; City; State; Zip Code 823 Congress Avenue, Suite 1111 Austin, TX 78701 | | \$350.00 | |
| | | | | | Texas, complete Schedule T) |
| | Principal occup Owner | pation / Job title (See Instructions) | Employer (See In: T. Stacy & Asso | | |
| | Date | Full name of contributor |) | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| | 12/31/2010 | Contributor address; City; State; Zip Code 7901 Bracken Court Austin, TX 78731 | | \$350.00 | |
| | | | | (If travel outside of | Texas, complete Schedule T) |
| | Principal occup none | pation / Job title (See Instructions) | Employer (See In: retired | structions) | |
| | Date | Full name of contributor |) | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| | 12/10/2010 | Contributor address; City; State; Zip Code PO Box 341413 austin, TX 78734 | | \$250.00 | |
| | | | | (if travel outside of | Texas, complete Schedule T) |
| | Principal occup none | ation / Job title (See Instructions) | Employer (See Ins | structions) | |
| | Date | Full name of contributor ut-of-state PAC (ID# |) | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| | 12/10/2010 | Contributor address; City; State; Zip Code PO Box 341413 Austin, TX 78734 | | \$250.00 | } } |
| | | | | (If travel outside of | Texas, complete Schedule T) |
| | Principal occup none | 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: 26 | /31 Report: 28/34 |
| 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) |
| İ | 12/29/2010 | 6 Contributor address; City; State; Zip Code 1403 West 10th Street Austin, TX 78703 | | \$200.00 | |
| | | | | (If travel outside of | Texas, complete Schedule T) |
| 9 | Principal occup Special Proje | eation / Job title (See Instructions) cts Manager | 10 Employer (See In BikeTexas | structions) | |
| | Date | Full name of contributor |) | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| | 12/31/2010 | Contributor address; City; State; Zip Code 606 West 11th Street Austin, TX 78701 | | \$350.00 | |
| | | | | (if travel outside of | Texas, complete Schedule T) |
| Principal occupation / Job title (See Instructions) none | | Employer (See In retired | structions) | · | |
| | Date | Full name of contributor |) | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| | 12/31/2010 | Contributor address; City; State; Zip Code 606 West 11th Street Austin, TX 78701 | • | \$350.00 \$350.00 | |
| | | | | (If travel outside of | Texas, complete Schedule T) |
| | Principal occup homemaker | ation / Job title (See Instructions) | Employer (See In | structions) | |
| | Date | Full name of contributor |) | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| | 12/30/2010 | Contributor address; City; State; Zip Code 208 Barton Springs Rd Austin, TX 78704 | | \$100.00 ¦ ! | |
| | | | | , | Texas, complete Schedule T) |
| | Principal occup | ation / Job title (See Instructions) | Employer (See Ins | structions) | |
| | Date | Full name of contributor ut-of-state PAC (ID# Sullivan, David |) | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| | 12/10/2010 | Contributor address; City; State; Zip Code 1710 Waterston Ave Austin, TX 78703 | | \$100.00 <mark> </mark> | |
| | | | | (If travel outside of] | Гехаs, complete Schedule 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: 27 | 7/31 Report: 29/34 |
|---|------------------------------|---|-----------------------|-------------------------------|--|
| 2 | FILER NAME | Riley, Chris | | 3 ACCOUNT# 00010009 | (Ethics Commission filers) |
| 4 | Date | 5 Full name of contributor ☐ out-of-state PAC (ID# Suttle, Alison* | <u></u>) | 7 Amount of contribution (\$) | 8 In-kind contribution description (if applicable) |
| | 12/28/2010 | 6 Contributor address; City; State; Zip Code 2900 Greenlee Dr. Austin, TX 78703 | | \$25.00 | i 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 | <u>'</u>) | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| | 12/28/2010 | Contributor address; City; State; Zip Code 2900 Greenlee Dr. Austin, TX 78703 | | \$25.00 |] [! |
| | :: | | | 464 | ! |
| _ | Principal occur | ation / Job title (See Instructions) | Employer (See In | <u> </u> | Texas, complete Schedule T) |
| | T mioipai occap | | Employer (ese in | | |
| | Date | Full name of contributor □ out-of-state PAC (ID# Taylor, Kim* | <u> </u> | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| | 12/28/2010 | Contributor address; City; State; Zip Code 10919 Enchanted Rock Cove Austin, TX 78726 | | \$350.00 | |
| | | | | (If travel outside of | Texas, complete Schedule T) |
| | Principal occup homemaker | ation / Job title (See Instructions) | Employer (See In none | structions) | |
| *************************************** | Date | Full name of contributor ☐ out-of-state PAC (ID# Taylor, Scott* |) | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| | 12/28/2010 | Contributor address; City; State; Zip Code 10919 Enchanted Rock Cove Austin, TX 78726 | | \$350.00 | |
| | | Austri, 12 70720 | | | - |
| | Bringing coup | ation / Job title (See Instructions) | Employer (See In | 1 . | Texas, complete Schedule T) |
| | attorney | anony soo tine (see instructions) | Armbrust & Bro | | |
| | Date | Full name of contributor |) | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| | 12/15/2010 | Contributor address; City; State; Zip Code 3701 Bonnie Rd. Austin, TX 78703 | | \$100.00 | |
| | | | | (If travel outside of | Texas, complete Schedule T) |
| | Principal occup | ation / Job title (See Instructions) | Employer (See In: | | |
| | | | | | |

| The Instru | стюм Guide explains how to complete this form. | | 1 PAGE# Schedule: 28 | 3/31 Report: 30/34 |
|------------------------------|---|-------------------------------------|-------------------------------|--|
| 2 FILER NAM | IE Riley, Chris | | 3 ACCOUNT # 00010009 | (Ethics Commission filers) |
| 4 Date | 5 Full name of contributor ☐ out-of-state PAC (ID# | #) | 7 Amount of contribution (\$) | 8 In-kind contribution description (if applicable) |
| 12/10/201 | 0 6 Contributor address; City; State; Zip Code 1104 Enfield Road Austin, TX 78703 | | \$125.00 | |
| | | | (if travel outside of | Texas, complete Schedule T) |
| 9 Principal occ | cupation / Job title (See Instructions) | 10 Employer (See In | structions) | |
| Date | Full name of contributor ut-of-state PAC (ID# | #) | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| 12/10/2010 | O Contributor address; City; State; Zip Code 3106 Lookout Lane Austin, TX 78746 | | \$350.00 | |
| | | | | Texas, complete Schedule T) |
| Principal occ CEO | cupation / Job title (See Instructions) | Employer (See In La Corsha Hosp | | |
| Date | Full name of contributor |) | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| 12/31/2010 | Contributor address; City; State; Zip Code 413 Hazeltine Dr. Lakeway, TX 78734-4644 | ••••• | \$350.00 | - - |
| | | | L | Texas, complete Schedule T) |
| Principal occ Vice Presid | cupation / Job title (See Instructions) dent | Employer (See In: Schlosser Deve | | |
| Date | Full name of contributor ut-of-state PAC (ID# Vitanza, Mary Lou | <u> </u> | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| 12/31/2010 | Contributor address; City; State; Zip Code 8701 Chalk Knoll Austin, TX 78735 | ••••• | \$100.00 | 1 1 1 |
| | | | (If travel outside of | Texas, complete Schedule T) |
| Principal occ | cupation / Job title (See Instructions) | Employer (See In | structions) | |
| Date | Full name of contributor | <u> </u> | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| 12/31/2010 | Contributor address; City; State; Zip Code 8701 Chalk Knoll Austin, TX 78735 | | \$100.00 | 1 1 1 |
| | | | (If travel outside of | Texas, complete Schedule T) |
| Principal occ | cupation / 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: 29 | /31 Report: 31/34 |
| 2 | FILER NAME | Riley, Chris | | 3 ACCOUNT # 00010009 | (Ethics Commission filers) |
| 4 | Date | 5 Full name of contributor ut-of-state PAC (ID# Volz, Candace |) | 7 Amount of contribution (\$) | 8 In-kind contribution description (if applicable) |
| | 12/28/2010 | 6 Contributor address; City; State; Zip Code 1406 Preston Ave. Austin, TX 78703 | | \$150.00 | |
| | | | | (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) |
| | 12/10/2010 | Contributor address; City; State; Zip Code 1000 East 8th St. Austin, TX 78702 | | \$350.00 | } |
| | | | | | Texas, complete Schedule T) |
| | Principal occup Urban Develo | pation / Job title (See Instructions) ppment | Employer (See In: Self | structions) | |
| | Date | Full name of contributor |) | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| | 12/10/2010 | Contributor address; City; State; Zip Code 1000 East 8th St. Austin, TX 78702 | | \$350.00 | 1 1 1 |
| | | | | (If travel outside of | Texas, complete Schedule T) |
| | Principal occup none | ation / Job title (See Instructions) | Employer (See Ins homemaker | structions) | |
| | Date | Full name of contributor |) | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| | 12/30/2010 | Contributor address; City; State; Zip Code 9005 Heiden Lane Austin, TX 78749 | : | \$350.00 | |
| | | | | (If travel outside of | Texas, complete Schedule T) |
| | Principal occup Lawyer | ation / Job title (See Instructions) | Employer (See Ins McGinnis, Loch | structions) ridge & Kilgore, Ll | _P |
| | Date | Full name of contributor |) | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| | 12/30/2010 | Contributor address; City; State; Zip Code 908 E. Live Oak St. Austin, TX 78704 | | \$100.00 | |
| | | • | | | · |
| | Principal occurs | ation / Job title (See Instructions) | Employer (See Ins | · · · · · · · · · · · · · · · · · · · | Texas, complete Schedule T) |
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| | The Instruction | סא Guide explains how to complete this form. | | 1 PAGE# Schedule: 30 | //31 Report; 32/34 |
| 2 | FILER NAME | Riley, Chris | | 3 ACCOUNT# 00010009 | (Ethics Commission filers) |
| 4 | Date | 5 Full name of contributor ut-of-state PAC (ID# Woelke, Allen* | () | 7 Amount of contribution (\$) | 8 In-kind contribution description (if applicable) |
| | 12/30/2010 | 6 Contributor address; City; State; Zip Code 4101 Galacia Austin, TX 78759 | | \$350.00 |] |
| L | | | | (if travel outside of | Texas, complete Schedule T) |
| 9 | Principal occup Associate | eation / Job title (See Instructions) | 10 Employer (See In- Camp, Dresser, | | |
| | Date | Full name of contributor □ out-of-state PAC (ID# Yeatts, Malcolm Robbie |) | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| | 12/28/2010 | Contributor address; City; State; Zip Code 4811 Allison Cove Austin, TX 78741 | | \$100.00 | |
| | | | | differential outside of | Texas, complete Schedule T) |
| _ | Principal occup | pation / Job title (See Instructions) | Employer (See In | <u> </u> | Texas, complete schedule 1) |
| | | , | | • | |
| | Date | Full name of contributor | <u> </u> | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| | 12/30/2010 | Contributor address; City; State; Zip Code 6811 Daugherty Austin, TX 78757 | | \$100.00 | |
| L | | | | | 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) |
| | 12/31/2010 | Contributor address; City; State; Zip Code 4607 Avenue C. Austin, TX 78751 | | \$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 ut-of-state PAC (ID# Zoom, Carole |) | Amount of contribution (\$) | In-kind contribution description (if applicable) |
| | 12/30/2010 | Contributor address; City; State; Zip Code 830 W 3rd ST #1152 | | \$150.00 | [|
| | | Austin, TX 78701 | | //fitemumi and all = 4. | Towns normalate Sahadula Ti |
| | Principal occup | ation / Job title (See Instructions) | Employer (See Ins | , | Texas, complete Schedule T) |
| | | (| ap.2) 0. (000 iii) | | |

POLITICAL CONTRIBUTIONS

| | OTHER | THAN PLEDGES OR LOAN | S | |
|---|---------------------------------|---|---------------------------------------|--|
| | The Instruction | GUIDE explains how to complete this form. | | 1 PAGE # Schedule: 31/31 Report: 33/34 |
| 2 | 2 FILER NAME Riley, Chris | | | 3 ACCOUNT# (Ethics Commission filers) 00010009 |
| 4 | Date | 5 Full name of contributor ☐ out-of-state PAC (ID#_Zygmont, Colette |) | 7 Amount of 8 In-kind contribution contribution (\$) description (if applicable) |
| | 12/11/2010 | 6 Contributor address; City; State; Zip Code 1508 Norris Drive Austin, TX 78704 | | \$350.00 |
| | | | | (If travel outside of Texas, complete Schedule T) |
| 9 | Principal occup Chiropractor | ation / Job title (See Instructions) | Employer (See Ins self | tructions) |
| _ | | <u>'</u> | · · · · · · · · · · · · · · · · · · · | |
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POLITICAL EXPENDITURES

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense 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 Contributions/Donations Made By Candidate/Officeholder/Political Committee OTHER (enter a category not listed above)

| Event Expense Fees | Polling Expense Travel Out Of District Printing Expense Office Overhead/Rental Expe The INSTRUCTION GUIDE explains how to comp | |
|---|--|---|
| 1 PAGE# | 2 FILER NAME | 3 ACCOUNT # (TEC filers) |
| Schedule: 1/1 Re | eport: 34/34 Riley, Chris | 00010009 |
| 4 Date | 5 Payee name | |
| 12/13/2010 | Ledesma, Christopher | |
| 6 Amount (\$) | 7 Payee address City; State; Zip Code | |
| \$175.00 | 4503 Avenue B Unit B Austin, TX 78751 | |
| 8 PURPOSE | | scription (If travel outside of Texas, complete Schedule T) |
| OF EXPENDITURE | Consuming Expense | |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought: Office held: |
| Date | Payee name | |
| 12/31/2010 | Piryx | · · · · · · · · · · · · · · · · · · · |
| Amount (\$) | Payee address City; State; Zip Code | |
| \$708.79 | 401 West 15th Street, Ste. 520 Austin, TX 78701 | |
| PURPOSE | | scription (If travel outside of Texas, complete Schedule T) |
| OF | Accounting/Banking tot | al credit card processing fees for reporting period |
| EXPENDITURE | | |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought: Office held: |
| Date 11/22/2010 | Payee name USPS | |
| Amount (\$) | Payee address City; State; Zip Code | |
| \$58.00 | Central Park West Station Austin, TX 78705 | · · |
| | Category (See Categories listed at the top of this schedule) De: | scription (If travel outside of Texas, complete Schedule T) |
| PURPOSE OF | Office Overhead/Rental Expense pos | st office box rental |
| EXPENDITURE | | |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate / Officeholder name | Office sought: Office held: |
| | | |

Name of Officeholder: Chris Riley

ANNUAL RECONCILIATION OF CAMPAIGN DEBT

(To be filed by officeholders only during an election year) Period Covered: January 1, 20<u>10</u> to December 31, 20<u>10</u>)

Campaign debt**existing as of the first day of the calendar year: \$0

| amount owed, | other debt evidenced by a n the interest rate and the date an aggregate under (c) below | of maturity. Campai | |
|--------------|---|--------------------------|----------------------|
| Creditor | Principal amount owed | Interest rate | Date of maturity |
| | | | |
| • • | ampaign debts, enter the nan | | |
| Cı | reditor | Principal a | amount owed |
| | of a marious delete and a Se | 0 if they are not itemiz | zed under (a) or (b) |

Page 1 of 2

SCHEDULE X – Attach to form C/OH (C&E) Reference 2-2-42, Austin City Code

**Campaign debt is the actual outstanding obligation of the candidate or candidate's committee as of a particular date, minus all funds held by the candidate or candidate's committee in cash or bank accounts on that date.

SCHEDULE V – attach to form C/OH (C & E) Reference 2-2-22, Austin City Code

PERSONS SOLICITING CONTRIBUTIONS ON YOUR BEHALF

Name of Candidate/Officeholder: Chris Riley

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. (This requirement does not apply to an individual who raises funds in total amount of \$5,000 or less for a candidate through a fundraising event held at the individual's residence.)

| Name of person soliciting contributions | Address |
|---|--|
| David Armbrust (noted on C/OH with *) | 2807 Regents Park, Austin, TX, 78746 |
| Steve Clark (noted on C/OH with **) | 4210 River Garden Trail, Austin, TX, 78746 |

Reminder: This form is to identify bundlers, i.e. individuals who solicit and obtain contributions on your behalf. Remember there is a separate form to identify the *actual* donors (C/OH).

ANNUAL RECONCILIATION

(To be filed by candidate, officeholder or campaign committee with the January 15th contribution and expenditure report)

Name of candidate, officeholder or campaign committee: Chris Riley

For each checking, savings or other financial institution account maintained during 2010, enter the following information indicated. For each additional institution, use a copy of this schedule.

The name of the financial institution: Prosperity Bank of Texas

Type of account: Checking

The beginning balance: **\$0**

The ending balance: \$25,171.01

Enter the following information for checks issued on that account that have not cleared by

December 31:

| Date | Payee | Amount |
|---------------------|---|--------|
| Written on 12/28/10 | Susan Harry (reimbursement for domain renewal & post office box rental) | 108.00 |
| | | |

Enter the following information for checks received as contributions and deposited but dishonored by the contributor's financial institution:

| Date of receipt | Contributor | Amount |
|-----------------|-------------|--------|
| | | |
| | | |
| | | |

Amount of interest or dividends earned: \$0

All deposits and withdrawals not disclosed on a filed contribution and expenditure report:

| Date of deposit or withdrawal | Amount of deposit | Amount of withdrawal |
|-------------------------------|-------------------|----------------------|
| _ | | |
| | | |

ANNUAL RECONCILIATION

(To be filed by candidate, officeholder or campaign committee with the January 15th contribution and expenditure report)

Name of candidate, officeholder or campaign committee: Chris Riley

For each checking, savings or other financial institution account maintained during 2010, enter the following information indicated. For each additional institution, use a copy of this schedule.

The name of the financial institution: Prosperity Bank of Texas

Type of account: Checking

The beginning balance: \$0

The ending balance: \$25,171.01

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|-----------------|-------------|--------|
| | | |
| | | |
| | | |

Amount of interest or dividends earned: \$0

All deposits and withdrawals not disclosed on a filed contribution and expenditure report:

| Date of deposit or withdrawal | Amount of deposit | Amount of withdrawal |
|-------------------------------|-------------------|--|
| | | |
| | | |
| | | <u> </u> |

A listing of checks received that have not been deposited into any account by December 31:

These contributions are included on Schedule A and are counted in Line 5, Part 17 on Page 2.

| Date of receipt | Contributor | Amount |
|-----------------|------------------------|--------|
| 12/31/10 | David Vitanza | 350 |
| 12/31/10 | David Nesenholtz | 100 |
| 12/31/10 | Robin Schneider | 100 |
| 12/31/10 | Laura Lopez | 350 |
| 12/31/10 | Mary Lou Vitanza | 100 |
| 12/31/10 | Sebastian Vitanza | 100 |
| 12/31/10 | Mark Zimmerman | 150 |
| 12/29/10 | Paul & Tracey Bury | 700 |
| 12/29/10 | Jay Reddy | 350 |
| 12/29/10 | Peter & Eva Riley | 700 |
| 12/29/10 | Brian Rodgers | 350 |
| 12/29/10 | Bruce & Nora Scrafford | 700 |
| | | |

(The contributions listed below were all made by credit card prior to deadline but the deposit did not clear the bank until after December 31, 2010. These contributions are included on Schedule A and are counted in Line 5, Part 17 on Page 2.)

| Date of | | |
|------------|--------------------------|--------|
| receipt | Contributor | Amount |
| 12/26/2010 | Joan Riley Laves | 350.00 |
| 12/28/2010 | Jeff Coddington | 350.00 |
| 12/28/2010 | Dennis McDaniel | 350.00 |
| 12/28/2010 | Michael Patrick McGill | 350.00 |
| 12/28/2010 | j bradley greenblum | 50.00 |
| 12/28/2010 | Norman Johns | 40.00 |
| 12/28/2010 | Michael & Virginia Riley | 700.00 |
| 12/28/2010 | Jim Alsup | 200.00 |
| 12/28/2010 | Richard Hazeltine | 350.00 |
| 12/28/2010 | Francis Cahill | 100.00 |
| 12/28/2010 | Joe Freeland | 100.00 |
| 12/28/2010 | joel schaubert | 100.00 |
| 12/28/2010 | Jim Marston | 100.00 |
| 12/28/2010 | John Horton | 350.00 |
| 12/28/2010 | Roger Cauvin | 50.00 |
| 12/28/2010 | michael & cate meginnis | 700.00 |
| 12/28/2010 | Kedron Jerome Touvell | 50.00 |
| 12/28/2010 | Bob & Kay Gregory | 700.00 |

| 12/28/2010 | Jerome Garvey | 100.00 |
|------------|------------------------|--------|
| 12/28/2010 | Candace Volz | 150.00 |
| 12/28/2010 | Maverick Fisher | 25.00 |
| 12/28/2010 | Malcolm Robbie Yeatts | 100.00 |
| 12/28/2010 | Adam Augustynski | 100.00 |
| 12/28/2010 | ken brady | 25.00 |
| 12/29/2010 | George Cofer | 50.00 |
| 12/29/2010 | Katie Sternberg | 50.00 |
| 12/29/2010 | Mark Joseph Stine | 200.00 |
| 12/29/2010 | William Robert Kelly | 100.00 |
| 12/29/2010 | Elliott Zirkle | 50.00 |
| 12/29/2010 | Bennett Donovan | 50.00 |
| 12/29/2010 | Carolyn Goldston | 100.00 |
| 12/29/2010 | Neil Ferguson | 100.00 |
| 12/29/2010 | Nikelle Meade | 25.00 |
| 12/29/2010 | Laurie Frick | 100.00 |
| 12/29/2010 | Barb Fox | 25.00 |
| 12/30/2010 | Greg Phillips | 350.00 |
| 12/30/2010 | Karen Watkins | 350.00 |
| 12/30/2010 | Thedore Siff | 250.00 |
| 12/30/2010 | Jeff and Jane Howard | 50.00 |
| 12/30/2010 | Michael Whellan | 25.00 |
| 12/30/2010 | Scott Joslove | 100.00 |
| 12/30/2010 | Gene McMenamin | 100.00 |
| 12/30/2010 | Lance Stumpf | 100.00 |
| 12/30/2010 | Steven Zettner | 100.00 |
| 12/30/2010 | carole zoom | 150.00 |
| 12/31/2010 | Diana Stallings Tilley | 350.00 |
| 12/31/2010 | Bobbie Barker | 100.00 |
| 12/31/2010 | Denise Garcia | 100.00 |
| 12/31/2010 | August Harris | 100.00 |
| 12/31/2010 | Karen Sonleitner | 350.00 |
| | Albert and Kay James | |
| 12/31/2010 | Stowell | 700.00 |
| 12/31/2010 | John Bird | 25.00 |
| 12/31/2010 | Andrew Bucknall | 10.00 |
| 12/31/2010 | Susan Reid | 100.00 |
| 12/31/2010 | Janet McQuaid | 50.00 |
| 12/31/2010 | Michael Holleran | 50.00 |
| 12/31/2010 | Judith Morrow Sanders | 50.00 |
| 12/31/2010 | John Adcock | 50.00 |

| 12/31/2010 | Hunter Ellinger | 200.00 |
|------------|------------------|--------|
| 12/31/2010 | Laurie Limbacher | 350.00 |
| 12/31/2010 | Kenneth Kramer | 100.00 |

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