

FORM C/OH
COVER SHEET PG 1

Electronic Filing Version 3.4.2

**CANDIDATE / OFFICEHOLDER REPORT:
SUPPORT & TOTALS****FORM C/OH
COVER SHEET PG 2****14 C/OH NAME** Riley, Chris**15 ACCOUNT #** (Ethics Commission filers)
00010009**16 NOTICE
FROM
POLITICAL
COMMITTEE(S)**

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

COMMITTEE TYPE**COMMITTEE NAME**☐ **GENERAL****COMMITTEE ADDRESS**☐ **SPECIFIC****COMMITTEE CAMPAIGN TREASURER NAME**☐ additional pages**COMMITTEE CAMPAIGN TREASURER ADDRESS****17 CONTRIBUTION
TOTALS**1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN
PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED

\$ 365.00

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

\$ 9,785.00

**EXPENDITURE
TOTALS**

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

\$ 84.00

4. TOTAL POLITICAL EXPENDITURES

\$ 34,506.50

**CONTRIBUTION
BALANCE**5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE
LAST DAY OF THE REPORTING PERIOD

\$ 20,818.20

**OUTSTANDING
LOAN TOTALS**6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE
LAST DAY OF THE REPORTING PERIOD

\$ 0.00

18 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Chris Riley, this the 15th day of July, 20 11, to certify which, witness my hand and seal of office.

Signature of officer administering oath
Susan C. Harry
Print name of officer administering oathNotary
Title of officer administering oath

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 1/7 Report: 3/14	
2 FILER NAME Riley, Chris		3 ACCOUNT # (Ethics Commission filers) 00010009	
4 Date 05/14/2011	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Compton, Sean 6 Contributor address; City; State; Zip Code 2601 Great Oaks Pkwy. Austin, TX 78756	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 05/11/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Contros, Tina Contributor address; City; State; Zip Code 2213 E. Windsor Rd. Austin, TX 78703	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/14/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Fuselier, James Contributor address; City; State; Zip Code 5804 Garden Oaks Austin, TX 78745	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) General Manager		Employer (See Instructions) The RK Group	
Date 05/11/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Greenberg, Leigh (*1) Contributor address; City; State; Zip Code 1522 S. Congress Ave. Austin, TX 78704	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) student		Employer (See Instructions) none	
Date 05/11/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Greenberg, Sean (*1) Contributor address; City; State; Zip Code 330 Eanes School Rd. Austin, TX 78746	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) retail manager		Employer (See Instructions) Allen's Boots	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 2/7 Report: 4/14

2 FILER NAME Riley, Chris

3 ACCOUNT # (Ethics Commission filers)
00010009

4 Date

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Greenberg, Stephen (*1)

7 Amount of
contribution (\$)

8 In-kind contribution
description (if applicable)

05/11/2011

6 Contributor address; City; State; Zip Code
1522 S. Congress Ave.
Austin, TX 78704

\$350.00

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)
Owner

10 Employer (See Instructions)
Allen's Boots

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Harutunian, Anne

Amount of
contribution (\$)

In-kind contribution
description (if applicable)

05/08/2011

Contributor address; City; State; Zip Code
P.O. Box W
Austin, TX 78713

\$300.00

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
Engineer

Employer (See Instructions)
Harutunian Engineers

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Harutunian, Takooohy

Amount of
contribution (\$)

In-kind contribution
description (if applicable)

05/08/2011

Contributor address; City; State; Zip Code
P.O. Box W
Austin, TX 78713

\$300.00

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
Engineer

Employer (See Instructions)
Harutunian Engineers

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
HDR PAC

Amount of
contribution (\$)

In-kind contribution
description (if applicable)

05/14/2011

Contributor address; City; State; Zip Code
8404 Indian Hills Dr.
Omaha, NE 68114

\$300.00

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Hilgers, David (*1)

Amount of
contribution (\$)

In-kind contribution
description (if applicable)

05/14/2011

Contributor address; City; State; Zip Code
701 Yaupon Valley Drive
Austin, TX 78746

\$250.00

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
Attorney

Employer (See Instructions)
Brown McCarroll LLP

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 3/7 Report: 5/14	
2 FILER NAME Riley, Chris		3 ACCOUNT # (Ethics Commission filers) 00010009	
4 Date 05/14/2011	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hilgers, Joan (*1) 6 Contributor address; City; State; Zip Code 701 Yaupon Valley Drive Austin, TX 78746	7 Amount of contribution (\$) \$250.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions) homemaker		10 Employer (See Instructions) none	
Date 05/05/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Huber, Karen Contributor address; City; State; Zip Code 23020 Pedernales Canyon Trail Spicewood, TX 78669-6431	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Commissioner		Employer (See Instructions) Travis County	
Date 05/12/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hughes, Christopher Contributor address; City; State; Zip Code 3205 Indian Canyon Dr. Austin, TX 78746	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Partner		Employer (See Instructions) Brown McCarroll LLP	
Date 05/11/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Johnson, Rodman (*1) Contributor address; City; State; Zip Code 4204 Venado Drive Austin, TX 78731	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) attorney		Employer (See Instructions) Brown McCarroll LLP	
Date 05/11/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Larson, Dohn (*1) Contributor address; City; State; Zip Code 1008 East 44th St. Austin, TX 78751	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Texas Classroom Teachers Association	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 4/7 Report: 6/14	
2 FILER NAME Riley, Chris		3 ACCOUNT # (Ethics Commission filers) 00010009	
4 Date 05/10/2011	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lehman, Chris 6 Contributor address; City; State; Zip Code 1914 Larchmont Dr. Austin, TX 78704	7 Amount of contribution (\$) \$350.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions) Appraiser		10 Employer (See Instructions) Chris Lehman Co.	
Date 05/09/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lippincott, Rob Contributor address; City; State; Zip Code 2322 Townes Ln Austin, TX 78703-2332	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Guero's Restaurant	
Date 05/10/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Marwitz, David Contributor address; City; State; Zip Code 1703 Palma Plaza Austin, TX 78703	Amount of contribution (\$) \$120.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/12/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) McGinnis, Larry Contributor address; City; State; Zip Code 4908 Rollingwood Dr. Austin, TX 78746	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/14/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) McWilliams, Andrea Contributor address; City; State; Zip Code 1710 Windsor Rd. Austin, TX 78703	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) governmental affairs consultant		Employer (See Instructions) McWilliams Governmental Affairs	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 5/7 Report: 7/14	
2 FILER NAME Riley, Chris		3 ACCOUNT # (Ethics Commission filers) 00010009	
4 Date 05/14/2011	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) McWilliams, Dean 6 Contributor address; City; State; Zip Code 1710 Windsor Rd. Austin, TX 78703	7 Amount of contribution (\$) \$350.00	8 In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions) governmental affairs consultant		10 Employer (See Instructions) McWilliams Governmental Affairs	
Date 05/11/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Oliver, Guy (*1) Contributor address; City; State; Zip Code 3119 Honey Tree Lane Austin, TX 78746	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) General Manager		Employer (See Instructions) V&S Enterprises	
Date 05/11/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Oliver, Jason (*1) Contributor address; City; State; Zip Code 3267 Bee Cave Rd. #107 #92 Austin, TX 78746	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Land Manager		Employer (See Instructions) V & S Enterprises	
Date 05/11/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Oliver, Kerianne (*1) Contributor address; City; State; Zip Code 3119 Honey Tree Lane Austin, TX 78746	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) homemaker		Employer (See Instructions) none	
Date 05/11/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Oliver, Stacy (*1) Contributor address; City; State; Zip Code 3267 Bee Cave Rd. #107 #92 Austin, TX 78746	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) V & S Enterprises	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 6/7 Report: 8/14	
2 FILER NAME Riley, Chris		3 ACCOUNT # (Ethics Commission filers) 00010009	
4 Date 05/11/2011	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Oliver, Vicki (*1) 6 Contributor address; City; State; Zip Code 3267 Bee Cave Rd. #107 PMB # 92 Austin, TX 78746	7 Amount of contribution (\$) \$350.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions) Owner		10 Employer (See Instructions) V&S Enterprises	
Date 05/10/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Pike, Mac Jr. Contributor address; City; State; Zip Code 3512 Riva Ridge Austin, TX 78746	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/14/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Sharples, Brian Contributor address; City; State; Zip Code 8501 North Madrone Trail Austin, TX 78737	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/14/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Sharples, Tracey Contributor address; City; State; Zip Code 8501 North Madrone Trail Austin, TX 78737	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/14/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Shepherd, Carl Contributor address; City; State; Zip Code 301 Briarwood Trl Austin, TX 78746	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Executive		Employer (See Instructions) HomeAway	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 7/7 Report: 9/14	
2 FILER NAME Riley, Chris		3 ACCOUNT # (Ethics Commission filers) 00010009	
4 Date 05/06/2011	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Sibley, Jane 6 Contributor address; City; State; Zip Code 2210 Windsor Rd. Austin, TX 78703	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 05/10/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Vaught, James Contributor address; City; State; Zip Code 4707 Chiappero Trl. Austin, TX 78731	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) attorney		Employer (See Instructions) McCullar Vaught, P.C.	
Date 05/14/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Wallace, Dalton Contributor address; City; State; Zip Code 9505 Johnny Morris Rd. Austin, TX 78724	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Executive		Employer (See Instructions) Safesite Inc	
Date 05/11/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Watkins, Tom (*1) Contributor address; City; State; Zip Code 1918 East Side Dr. Austin, TX 78704	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Brown McCarroll LLP	
Date 05/10/2011	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Williams, Melanie Contributor address; City; State; Zip Code 3901 Dry Ledge Cove Austin, TX 78731	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 1/5 Report: 10/14		2 FILER NAME Riley, Chris		3 ACCOUNT # (TEC filers) 00010009	
4 Date 05/09/2011	5 Payee name Austin Chronicle				
6 Amount (\$) \$1,370.00	7 Payee address City; State; Zip Code P.O. Box 49066 Austin, TX 78765				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Political advertising		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 06/24/2011	Payee name Butts, David				
Amount (\$) \$1,200.00	Payee address City; State; Zip Code 1914 Patton Lane Austin, TX 78723				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> General consulting		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 05/09/2011	Payee name Hall, Garrett				
Amount (\$) \$2,000.00	Payee address City; State; Zip Code 3012 University Ave. Austin, TX 78705				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract Labor		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 05/05/2011	Payee name Harry, Susan				
Amount (\$) \$3,000.00	Payee address City; State; Zip Code P.O. Box 301074 Austin, TX 78703				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Fundraising & compliance consulting		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:

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

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 2/5 Report: 11/14		2 FILER NAME Riley, Chris		3 ACCOUNT # (TEC filers) 00010009	
4 Date 05/09/2011	5 Payee name Kelly Graphics				
6 Amount (\$) \$12,001.82	7 Payee address City; State; Zip Code 1409 Quaker Ridge Austin, TX 78746				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Printing, postage & mailing services		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 05/10/2011	Payee name Mailchimp.com				
Amount (\$) \$75.00	Payee address City; State; Zip Code 512 Means Street, Ste. 404 Atlanta, GA 30318				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) OTHER - Communications		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Email list management		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 06/13/2011	Payee name Mailchimp.com				
Amount (\$) \$75.00	Payee address City; State; Zip Code 512 Means Street, Ste. 404 Atlanta, GA 30318				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) OTHER		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Email list management		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 05/11/2011	Payee name NOKOA Newspaper				
Amount (\$) \$200.00	Payee address City; State; Zip Code P.O. Box 1131 Austin, TX 78767				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Political advertising		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:

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

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 3/5 Report: 12/14		2 FILER NAME Riley, Chris		3 ACCOUNT # (TEC filers) 00010009	
4 Date 05/11/2011	5 Payee name NOKOA Newspaper				
6 Amount (\$) \$100.00	7 Payee address City; State; Zip Code P.O. Box 1131 Austin, TX 78767				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Political advertising		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 05/31/2011	Payee name Parkerson, Matt				
Amount (\$) \$5,000.00	Payee address City; State; Zip Code 806 Kinney Ave. Austin, TX 78704				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> General consulting		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 06/30/2011	Payee name Pirya				
Amount (\$) \$86.19	Payee address City; State; Zip Code 401 W. 15th St. Ste. 520 Austin, TX 78701				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Accounting/Banking		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Credit card processing fees for reporting period		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 05/09/2011	Payee name Ranes, Jim				
Amount (\$) \$434.85	Payee address City; State; Zip Code 1501 Barton Springs Rd. #233 Austin, TX 78704				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Graphic design		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 4/5 Report: 13/14		2 FILER NAME Riley, Chris		3 ACCOUNT # (TEC filers) 00010009	
4 Date 05/09/2011	5 Payee name Salazar, Vicki				
6 Amount (\$) \$269.64	7 Payee address City; State; Zip Code requested				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> repair windshield damaged by yardsign		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 05/05/2011	Payee name Texas Ethics Commission				
Amount (\$) \$500.00	Payee address City; State; Zip Code P. O. Box 12070 Austin, TX 78711				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Fine		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 06/03/2011	Payee name Thompson & Knight LLP				
Amount (\$) \$594.00	Payee address City; State; Zip Code 98 San Jacinto Blvd., Ste. 1900 Austin, TX 78701				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Legal Services		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Legal Fees		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 06/24/2011	Payee name Thompson & Knight LLP				
Amount (\$) \$416.00	Payee address City; State; Zip Code 98 San Jacinto Blvd., Ste. 1900 Austin, TX 78701				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Legal Services		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Legal Fees		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:

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

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 5/5 Report: 14/14		2 FILER NAME Riley, Chris		3 ACCOUNT # (TEC filers) 00010009	
4 Date 05/16/2011	5 Payee name Tomlinson, Mykle				
6 Amount (\$) \$2,100.00	7 Payee address City; State; Zip Code 5102 Delores Austin, TX 78721				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Salary		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 05/31/2011	Payee name Tomlinson, Mykle				
Amount (\$) \$2,500.00	Payee address City; State; Zip Code 5102 Delores Austin, TX 78721				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Salary		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 05/10/2011	Payee name Zocalo Cafe				
Amount (\$) \$2,500.00	Payee address City; State; Zip Code 1110 West Lynn Street Austin, TX 78703				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Election Night Party		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:

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.)

Denoted on Schedule A:	Name of person soliciting contributions	Address
*1	Nikelle Meade	8834 Honeysuckle Tr., Austin, TX 78759

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).