

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

## FORM C/OH COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		1 ACCOUNT # (Ethics Commission Filers)	2 Total pages filed: <b>16</b>
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI <b>Mr Matthew</b>		OFFICE USE ONLY Date Received <b>2014 JUL 15 PM 10 21</b> AUSTIN CITY CLERK RECEIVED
	NICKNAME LAST SUFFIX <b>Matt Stillwell</b>		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> change of address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE <b>12500 Pintail Cove Austin TX 78729</b>		Date Hand-delivered or Postmarked
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER EXTENSION <b>(512) 422 4021</b>		Receipt #
6 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI <b>Mrs Jade</b>		Date Processed
	NICKNAME LAST SUFFIX <b>Chang Sheppard</b>		Date Imaged
7 CAMPAIGN TREASURER ADDRESS (residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE <b>12425 Dorsett Road Austin TX 78727</b>		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION <b>(512) 587 8612</b>		
9 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input checked="" type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final report (Attach C/OH - FR)		
10 PERIOD COVERED	Month Day Year    THROUGH    Month Day Year <b>4 / 16 / 2014</b> <b>6 / 30 / 14</b>		
11 ELECTION	ELECTION DATE    ELECTION TYPE Month Day Year <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input checked="" type="checkbox"/> General <input type="checkbox"/> Special <b>11 / 4 / 2014</b>		
12 OFFICE	OFFICE HELD (if any)		13 OFFICE SOUGHT (if known) <b>Austin City Council District 6</b>
GO TO PAGE 2			

# **CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS**

**FORM C/OH**  
**COVER SHEET PG 2**

**14 C/OH NAME** Matthew "Matt" Stillwell **15 ACCOUNT # (Ethics Commission Filers)**

**16 NOTICE FROM  
POLITICAL  
COMMITTEE(S)**

THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE 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**

☐ GENERAL

☐ SPECIFIC

COMMITTEE NAME

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

☐ additional pages

**17 CONTRIBUTION  
TOTALS**

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

\$ 0

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

\$ 7,451.00

**EXPENDITURE  
TOTALS**

3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED

\$ 0

4. TOTAL POLITICAL EXPENDITURES

\$ 4,077.70

**CONTRIBUTION  
BALANCE**

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

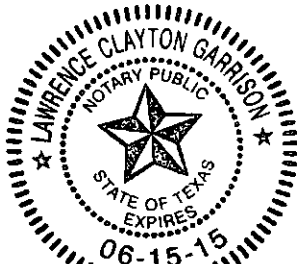
\$ 4,404.56

**OUTSTANDING  
LOAN TOTALS**

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

\$ 0

**18 AFFIDAVIT**



AFFIX NOTARY STAMP / SEAL ABOVE

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.

Matthew Stillwell

Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Matthew Stillwell, this the 14 day of July, 20 14, to certify which, witness my hand and seal of office.

Lawrence Garrison

Signature of officer administering oath

Lawrence Garrison

Printed name of officer administering oath

Barker

Title of officer administering oath

# **POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS**

## **SCHEDULE A**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: 11	
2 FILER NAME Matt Stillwell		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 5/8/14	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Elliot Kralj 6 Contributor address: City: State: Zip Code 1220 Colorado Ste 110 Austin TX 78701	7 Amount of contribution (\$) 100.00 (If travel outside of Texas, complete Schedule T)	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) consulting		10 Employer (See Instructions) Kralj Consulting	
Date 5/8/14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Hunter Nelson Contributor address: City: State: Zip Code 11102 Froke Cedar Trl Austin TX 78750	Amount of contribution (\$) 25.00 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) ID Theft Mitigation		Employer (See Instructions)	
Date 5/8/14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Julie Murphy Stillwell Contributor address: City: State: Zip Code 5703 Rain Creek Pkwy Austin TX 78759	Amount of contribution (\$) 350.00 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	
Date 5/8/14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Gary Stillwell Contributor address: City: State: Zip Code 5703 Rain Creek Pkwy Austin TX 78759	Amount of contribution (\$) 350.00 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) N/A	
Date 5/8/14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Greg Anderson Contributor address: City: State: Zip Code 11610 Quarter Horse Trl Austin TX 78750	Amount of contribution (\$) 50.00 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Program coordinator		Employer (See Instructions) APS	

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

# **POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS**

## **SCHEDULE A**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: 11	
2 FILER NAME Matt Stillwell		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 5/8/14	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#) David C Whitworth	7 Amount of contribution (\$) 350.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 3907 Edgerock Drive Austin TX 78731		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions) infill home builder		10 Employer (See Instructions)	
Date 5/8/14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#) Courtney Whitworth	Amount of contribution (\$) 350.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 3907 Edgerock Drive Austin TX 78731		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) N/A	
Date 5/8/14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#) Yvonne Case	Amount of contribution (\$) 30.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 8515 Foxhorn Trail Austin TX 78729		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) Mortgage lending		Employer (See Instructions) VFCU	
Date 5/8/14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#) Laurie Roberts	Amount of contribution (\$) 350.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 9405 Spring Hollow Austin TX 78750		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) VFCU executive		Employer (See Instructions) VFCU	
Date 5/8/14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#) Randall Stephens	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 10500 Avery Club Dr Unit 6 Austin TX 78717		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) Addis executive		Employer (See Instructions) self	

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# **POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS**

## **SCHEDULE A**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: 11	
2 FILER NAME Matt Stillwell		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 5/8/14	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#) Jefferson French	7 Amount of contribution (\$) 150 <sup>00</sup>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 11500 Kempwood Dr Austin TX 78750		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions) software consulting		10 Employer (See Instructions)	
Date 5/8/14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#) Molly Bucy	Amount of contribution (\$) 50 <sup>00</sup>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 9707 meadowheath Dr Austin TX 78729		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) teacher		Employer (See Instructions) Various	
Date 5/9/14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#) Jan Pelosi	Amount of contribution (\$) 25 <sup>00</sup>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 10020 Valera Dr Austin TX 78717		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)	
Date 5/9/14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#) Kendall Wayne Scudder	Amount of contribution (\$) 50 <sup>00</sup>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 555 Bowers Blvd #805 Huntsville TX 77340		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) leasing Manager		Employer (See Instructions) Atlantic Housing Mgmt	
Date 5/9/14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#) Tim Bishop	Amount of contribution (\$) 50 <sup>00</sup>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 2520 Bluebonnet Lane #36 Austin TX 78704		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) sports consulting		Employer (See Instructions) self	

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# **POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS**

## **SCHEDULE A**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: 11	
2 FILER NAME Matt Stillwell		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 5/11/14	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#) Phyllis Stillwell	7 Amount of contribution (\$) 350.00	8 In-kind contribution description (if applicable)
6 Contributor address: City: State: Zip Code Campus TX 76550		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions) retired		10 Employer (See Instructions)	
Date 5/15/14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#) Susan Cope Griffith	Amount of contribution (\$) 350.00	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 2415 Westlake Dr Austin TX 78746		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) realtor		Employer (See Instructions) Amelia Bullock	
Date 5/15/14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#) Curtis Faelberg	Amount of contribution (\$) 350.00	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 2415 Westlake Dr Austin TX 78746		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) consultant		Employer (See Instructions) Self	
Date 5/16/14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#) Darin Siefkes	Amount of contribution (\$) 200.00	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 1523 W Koenig Lane Austin TX 78756		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Law Offices of Darin Siefkes	
Date 5/19/14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#) Lisa Madry	Amount of contribution (\$) 30.00	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 2808 Nordham Dr Austin TX 78745		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) Education Director		Employer (See Instructions) National Wildlife Federation	

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# **POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS**

## **SCHEDULE A**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: 11	
2 FILER NAME Matt Stillwell		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 5/21/14	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#) Ann Brennan Gas	7 Amount of contribution (\$) 100.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 7800 Mowinkle Dr Austin TX 78736		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions) Director of Contracts		10 Employer (See Instructions) Southwest Housing Compliance Corp	
Date 5/27/14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#) Grace Chimene	Amount of contribution (\$) 50.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 11102 Leafwood Lane Austin TX 78750		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) RN CNP		Employer (See Instructions) none	
Date 5/27/14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#) Randy Wright	Amount of contribution (\$) 350.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 11901 Fitzhugh Rd Austin TX 78736		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) Apartment Manager		Employer (See Instructions) Self	
Date 5/27/14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#) Leslie Wingo	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 2222 Rio Grande Blvd C 3rd Fl Austin TX 78705		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) Advertising		Employer (See Instructions) Sunders/Wingo	
Date 5/31/14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#) Adam Coenly	Amount of contribution (\$) 350.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 101 Colorado St Apt 1602 Austin TX 78701		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Coenly Law Firm	

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# **POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS**

## **SCHEDULE A**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: <u>1</u>	
2 FILER NAME <u>Matt Stillwell</u>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <u>6/2/14</u>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#) <u>Mike Langley</u>	7 Amount of contribution (\$) <u>20000</u>	8 In-kind contribution description (if applicable)
	6 Contributor address: City: State: Zip Code <u>1206 Baylor St Austin TX 78703</u>	(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions) <u>Real Estate</u>		10 Employer (See Instructions) <u>Self</u>	
Date <u>6/2/14</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#) <u>Jesse Soliz</u>	Amount of contribution (\$) <u>5000</u>	In-kind contribution description (if applicable)
	Contributor address: City: State: Zip Code <u>2908 Taku Road Cedar Park TX 78613</u>	(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <u>retired</u>		Employer (See Instructions) <u>retired</u>	
Date <u>6/13/14</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#) <u>Leslie Cunningham</u>	Amount of contribution (\$) <u>3000</u>	In-kind contribution description (if applicable)
	Contributor address: City: State: Zip Code <u>11310 Spicewood Club #2 Austin TX 78750</u>	(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <u>retired</u>		Employer (See Instructions)	
Date <u>6/23/14</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#) <u>John McClellan</u>	Amount of contribution (\$) <u>35000</u>	In-kind contribution description (if applicable)
	Contributor address: City: State: Zip Code <u>7705 Flespar Dr Austin TX 78739</u>	(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <u>Mortgage Banker</u>		Employer (See Instructions) <u>Supreme Lending</u>	
Date <u>6/24/14</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#) <u>Natalie Cayer</u>	Amount of contribution (\$) <u>2500</u>	In-kind contribution description (if applicable)
	Contributor address: City: State: Zip Code <u>7800 San Felipe Blvd #1302</u>	(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <u>Marketing Manager</u>		Employer (See Instructions) <u>Cisco Systems</u>	

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# **POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS**

## **SCHEDULE A**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: 11	
2 FILER NAME Matt Stillwell		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 6/25/14	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#) Fred Southard	7 Amount of contribution (\$) 100.00	8 In-kind contribution description (if applicable)
6 Contributor address: City: State: Zip Code 10700 Falling Tree Cove Austin TX 78759		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions) owner		10 Employer (See Instructions) Neighborhood Realty	
Date 6/25/14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#) Brent Walton	Amount of contribution (\$) 50.00	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 8315 Campeche Bay Pl Round Rock TX 78681		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) Sales Manager		Employer (See Instructions) UFCU	
Date 6/25/14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#) Celeste Quesada	Amount of contribution (\$) 50.00	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 502 Rhonda Court Austin TX 78745		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) the Grill Agency	
Date 6/25/14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#) Lee Schultz	Amount of contribution (\$) 100-	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 9403 Spring Hollow Dr Austin TX 78750		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions) Self	
Date 6/25/14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#) Vim McCurdy	Amount of contribution (\$) 100-	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 1809 Nelson Ranch Loop Cedar Park TX 78613		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)	

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# **POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS**

## **SCHEDULE A**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: 11	
2 FILER NAME Matt Stillwell		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 6/30/14	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#) Mark Anderson	7 Amount of contribution (\$) 17500	8 In-kind contribution description (if applicable)
	6 Contributor address; City; State; Zip Code 713 Twin Oak Trail Cedar Park TX 78613	(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions) Software tester		10 Employer (See Instructions) Square Root	
Date 6/30/14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#) Kim Collins Gilby	Amount of contribution (\$) 2500	In-kind contribution description (if applicable)
	Contributor address; City; State; Zip Code 720 Nelson Ranch Road Cedar Park TX 78613	(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) Volunteer		Employer (See Instructions) none	
Date 6/30/14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#) Dean Hagere-Smith	Amount of contribution (\$) 5000	In-kind contribution description (if applicable)
	Contributor address; City; State; Zip Code 1724 Rocky Ridge Rd Austin TX 78734	(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) manager		Employer (See Instructions) TRG	
Date 6/30/14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#) Jade Chang Sheppard	Amount of contribution (\$) 35000	In-kind contribution description (if applicable)
	Contributor address; City; State; Zip Code 12425 Dorsett Rd Austin TX 78727	(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) president		Employer (See Instructions) Gideon	
Date 6/30/14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#) John Sheppard	Amount of contribution (\$) 35000	In-kind contribution description (if applicable)
	Contributor address; City; State; Zip Code 12425 Dorsett Rd Austin TX 78727	(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) N/A	

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# **POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS**

## **SCHEDULE A**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

11

2 FILER NAME

**Math Stillwell**

3 ACCOUNT # (Ethics Commission Filers)

4 Date

6/30/14

5 Full name of contributor

**Brad Clark**

☐ out-of-state PAC (ID#)

6 Contributor address; City; State; Zip Code

**10906 Tall Oak Trail  
Austin TX 78750**

7 Amount of contribution (\$)

**50.00**

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

**Founder**

10 Employer (See Instructions)

**Rigging Dojo**

Date

6/30/14

Full name of contributor

**Lise Renee Lucci**

☐ out-of-state PAC (ID#)

Contributor address; City; State; Zip Code

**11716 Springs Head Loop  
Austin TX 78717**

Amount of contribution (\$)

**30.00**

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

**Realtor**

Employer (See Instructions)

**Global Capital Realty**

Date

6/30/14

Full name of contributor

**Carol Strickland**

☐ out-of-state PAC (ID#)

Contributor address; City; State; Zip Code

**8610 Winding Walk  
Austin TX 78757**

Amount of contribution (\$)

**100.00**

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

**Realtor**

Employer (See Instructions)

**Self**

Date

6/30/14

Full name of contributor

**David Hartley**

☐ out-of-state PAC (ID#)

Contributor address; City; State; Zip Code

**12703 Marimba Trl  
Austin TX 78729**

Amount of contribution (\$)

**50.00**

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

**Retired**

Employer (See Instructions)

Date

6/30/14

Full name of contributor

**Lisa Cavble**

☐ out-of-state PAC (ID#)

Contributor address; City; State; Zip Code

**11421 Pradera Drive  
Austin TX 78759**

Amount of contribution (\$)

**50.00**

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

**Mom**

Employer (See Instructions)

**None**

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# **POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS**

## **SCHEDULE A**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

11

2 FILER NAME

Math Stillwell

3 ACCOUNT # (Ethics Commission Filers)

4 Date

6/30/14

5 Full name of contributor

☐ out-of-state PAC (ID#)

Blair Dancy

6 Contributor address; City; State; Zip Code

4933 Strass Drive  
Austin TX 78731

7 Amount of contribution (\$)

100.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

lawyer

10 Employer (See Instructions)

Buchanan Di Masi Dancy & Grabowski

Date

6/30/14

Full name of contributor

☐ out-of-state PAC (ID#)

Neil Faulkner

Contributor address; City; State; Zip Code

12440 Alameda Trace #1921  
Austin TX 78727

Amount of contribution (\$)

10.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

editor

Employer (See Instructions)

self

Date

6/30/14

Full name of contributor

☐ out-of-state PAC (ID#)

Nancy Nisson

Contributor address; City; State; Zip Code

8801 N FM 620 #633  
Austin TX 78726

Amount of contribution (\$)

20.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

food services

Employer (See Instructions)

Lake Travis ISD

Date

6/30/14

Full name of contributor

☐ out-of-state PAC (ID#)

Samir Gupta

Contributor address; City; State; Zip Code

15803 Windermere Dr #400  
Pflugerville TX 78660

Amount of contribution (\$)

25.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Dentist

Employer (See Instructions)

Pflugerville Dental

Date

6/30/14

Full name of contributor

☐ out-of-state PAC (ID#)

Pamela Oldham

Contributor address; City; State; Zip Code

2928 Clinton Place  
Round Rock TX 78665

Amount of contribution (\$)

51.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

writer

Employer (See Instructions)

self

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

# **POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS**

## **SCHEDULE A**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: 11	
2 FILER NAME Matt Stillwell		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 6/25/14	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Bob Elmore	7 Amount of contribution (\$) 350.00	8 In-kind contribution description (if applicable) house party expenses
6 Contributor address; City; State; Zip Code 9405 Spring Hollow Austin TX 78750		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions) none		10 Employer (See Instructions) N/A	
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Contributor address; City; State; Zip Code	Amount of contribution (\$)	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Contributor address; City; State; Zip Code	Amount of contribution (\$)	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Contributor address; City; State; Zip Code	Amount of contribution (\$)	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Contributor address; City; State; Zip Code	Amount of contribution (\$)	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By
Event Expense	Polling Expense	Travel Out Of District	Candidate/Officeholder/Political Committee
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: <b>2</b>		2 FILER NAME <b>Matt Stillwell</b>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <b>4/16/14</b>		5 Payee name <b>Littlefield Consulting</b>			
6 Amount (\$) <b>1,100.00</b>		7 Payee address; City; State; Zip Code <b>PO Box 90541 Austin TX 78709</b>			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) <b>polling expense</b>		(b) Description (If travel outside of Texas, complete Schedule T) <b>District 6 poll</b>	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought      Office held	
Date <b>5/27/14</b>		Payee name <b>Catalyst Design</b>			
Amount (\$) <b>100.00</b>		Payee address; City; State; Zip Code <b>PO Box 82811 Austin TX 78708</b>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <b>Advertising expense</b>		Description (If travel outside of Texas, complete Schedule T) <b>website revision</b>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought      Office held	
Date <b>6/17/14</b>		Payee name <b>Diaspora Vote</b>			
Amount (\$) <b>50.00</b>		Payee address; City; State; Zip Code <b>4132 E. 12th Austin TX 78721</b>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <b>Adv. expense</b>		Description (If travel outside of Texas, complete Schedule T) <b>club membership</b>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought      Office held	
Date <b>6/18/14</b>		Payee name <b>Super Cheap Signs</b>			
Amount (\$) <b>304.24</b>		Payee address; City; State; Zip Code <b>9804 Gray Blvd Austin TX 78758</b>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <b>Advertising expense</b>		Description (If travel outside of Texas, complete Schedule T) <b>signs</b>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought      Office held	

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**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gift/Awards/Memorials 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.

<b>1</b> Total pages Schedule F: <b>2</b>		<b>2</b> FILER NAME		<b>3</b> ACCOUNT # (Ethics Commission Filers)	
<b>4</b> Date <b>6/23/14</b>		<b>5</b> Payee name <b>Fed Ex Office</b>			
<b>6</b> Amount (\$) <b>10.70</b>		<b>7</b> Payee address; City; State; Zip Code <b>13729 N. Hwy 183 Austin TX 78750</b>			
<b>8</b> PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See categories listed at the top of this schedule) <b>printing expense</b>		<b>(b)</b> Description (If travel outside of Texas, complete Schedule T) <b>printed campaign material</b>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought      Office held	
<b>Date</b> <b>6/25/14</b>		<b>Payee name</b> <b>office Max</b>			
<b>Amount (\$)</b> <b>86.43</b>		<b>Payee address; City; State; Zip Code</b> <b>11066 Pecan Park Cedar Park TX 78613</b>			
<b>PURPOSE OF EXPENDITURE</b>		<b>Category (See categories listed at the top of this schedule)</b> <b>event expense</b>		<b>Description (If travel outside of Texas, complete Schedule T)</b> <b>house party materials</b>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought      Office held	
<b>Date</b> <b>6/26/14</b>		<b>Payee name</b> <b>Hotcards.com</b>			
<b>Amount (\$)</b> <b>206.92</b>		<b>Payee address; City; State; Zip Code</b> <b>2400 Superior Avenue Cleveland OH 44114</b>			
<b>PURPOSE OF EXPENDITURE</b>		<b>Category (See categories listed at the top of this schedule)</b> <b>printing expense</b>		<b>Description (If travel outside of Texas, complete Schedule T)</b> <b>push cards</b>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought      Office held	
<b>Date</b> <b>6/30/14</b>		<b>Payee name</b> <b>Pirya</b>			
<b>Amount (\$)</b> <b>147.70</b>		<b>Payee address; City; State; Zip Code</b> <b>144 2nd St 1st Floor San Francisco CA 94105</b>			
<b>PURPOSE OF EXPENDITURE</b>		<b>Category (See categories listed at the top of this schedule)</b> <b>fees</b>		<b>Description (If travel outside of Texas, complete Schedule T)</b> <b>transaction fees</b>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought      Office held	
<b>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</b>					

# **POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS**

## **SCHEDULE G**

### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By
Event Expense	Polling Expense	Travel Out Of District	Candidate/Officeholder/Political Committee
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: 1		2 FILER NAME Matt Stillwell		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 5/2/14		5 Payee name Office Depot #524			
6 Amount (\$) 21.64 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		7 Payee address; City; State; Zip Code 13201 RE 620 N Austin TX 78717			
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) map	
Date 5/8/14		Payee name Alamo Drafthouse Cinema Lakeline			
Amount (\$) 2950.07 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		Payee address; City; State; Zip Code 14028 N. US Highway 183 Austin TX 78717			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) event expense		Description (If travel outside of Texas, complete Schedule T) campaign kickoff	
Date		Payee name			
Amount (\$)		Payee address; City; State; Zip Code			
<input type="checkbox"/> Reimbursement from political contributions intended					
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule)		Description (If travel outside of Texas, complete Schedule T)	
Date		Payee name			
Amount (\$)		Payee address; City; State; Zip Code			
<input type="checkbox"/> Reimbursement from political contributions intended					
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule)		Description (If travel outside of Texas, complete Schedule T)	

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