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: 50

2018 OCT 6 PM 3:10
AUSTIN CITY CLERK
RECEIVED

OFFICE USE ONLY
Date Received
Date Hand-delivered or Postmarked
Receipt #
Amount
Date Processed
Date Imaged

3 CANDIDATE / OFFICEHOLDER NAME
MS / MRS / MR: Mr.
FIRST: Jay
MI:
NICKNAME:
LAST: Wiley
SUFFIX:

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS
☐ change of address
ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
12300 Hymeadow Dr #115
Austin, TX 78750

5 CANDIDATE/ OFFICEHOLDER PHONE
AREA CODE: (512)
PHONE NUMBER: 914-8057
EXTENSION:

6 CAMPAIGN TREASURER NAME
MS / MRS / MR: Mrs.
FIRST: Evelyn
MI:
NICKNAME:
LAST: Stone
SUFFIX:

7 CAMPAIGN TREASURER ADDRESS (residence or business)
STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE
6403 Rusty Ridge Drive
Austin, TX 78731

8 CAMPAIGN TREASURER PHONE
AREA CODE: (512)
PHONE NUMBER: 454-6109
EXTENSION:

9 REPORT TYPE
☐ January 15
☒ 30th day before election
☐ Runoff
☐ 15th day after campaign treasurer appointment (officeholder only)
☐ July 15
☐ 8th day before election
☐ Exceeded $500 limit
☐ Final report (Attach C/OH - FR)

10 PERIOD COVERED
Month / Day / Year: 7 / 1 / 14
THROUGH
Month / Day / Year: 9 / 25 / 14

11 ELECTION
ELECTION DATE
Month / Day / Year: 11 / 4 / 14
ELECTION TYPE
☐ Primary
☐ Runoff
☒ General
☐ Special

12 OFFICE
OFFICE HELD (if any): N/A

13 OFFICE SOUGHT (if known): Austin City Council District 6

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

14 C/OH NAME

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)	$ 14,195.00

EXPENDITURE TOTALS

3.	TOTAL POLITICAL EXPENDITURES OF $100 OR LESS, UNLESS ITEMIZED	$ 0
4.	**TOTAL POLITICAL EXPENDITURES**	$ 11,529.22

CONTRIBUTION BALANCE

5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	$ 40,623.44

OUTSTANDING LOAN TOTALS

6.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	$ 32,270.54

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.

DEENA ESTRADA SALINAS
Notary Public, State of Texas
My Commission Expires
November 19, 2018

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Jay Willey, this the 6th day of October, 20 14, to certify which, witness my hand and seal of office.

Signature of officer administering oath	Printed name of officer administering oath	Title of officer administering oath
D Estrada-Salinas	Deena Estrada-Salinas	Notary Public

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

2 FILER NAME: Jay Wiley

3 ACCOUNT # (Ethics Commission Filers):

4 Date	5 Full name of contributor (☐ out-of-state PAC (ID#: ____)) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
7/1/14	Rick Lutowski 10053 Lachlan Drive Austin, TX 78717	$50	

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions): Realtor

10 Employer (See Instructions): Self

Date	Full name of contributor (☐ out-of-state PAC (ID#: ____)) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
7/16/14	Clarke Race 2811 Bowman Avenue Austin, TX 78703	$50	

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions): Physician

Employer (See Instructions): Texas Orthopedic

Date	Full name of contributor (☐ out-of-state PAC (ID#: ____)) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
7/19/14	Wen Chi & Joseph Burton 2113 Zach Scott Street Austin, TX 78723	$20	

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions): Best Efforts

Employer (See Instructions): Best Efforts

Date	Full name of contributor (☐ out-of-state PAC (ID#: ____)) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
7/20/14	James Guillory 10705 Doering Lane Austin, TX 78750	$25	

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions): Airports Ops Specialist

Employer (See Instructions): City of Austin

Date	Full name of contributor (☐ out-of-state PAC (ID#: ____)) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
7/21/14	John Killough 2108 Schuller Avenue Austin, TX 78703	$350	

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions): Professor

Employer (See Instructions): Texas A&M

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide foradditional 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:

2 FILER NAME: Jay Wiley

3 ACCOUNT # (Ethics Commission Filers):

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
7/21/14	Michael Lundgren 10908 Long Day Cove Austin, TX 78754	$15	

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions): Cartographer

10 Employer (See Instructions): State of Texas

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
7/28/14	David Procter 106 Lake Como Drive Austin, TX 78734	$25	

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions): Minister

Employer (See Instructions): Austin Baptist Church

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
7/31/14	Sami Abourmatar 5732 Merrywing Circle Austin, TX 78730	$10	

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions): Physician

Employer (See Instructions): Self

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
8/4/14	Pam Farley 12104 Jill Sue Court Austin, TX 78750	$50	

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions): N/A

Employer (See Instructions): N/A

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
8/5/14	Chad Wilbanks PO Box 342693 Austin, TX 78734	$100	

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions): CEO

Employer (See Instructions): Wilbanks Group

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide foradditional 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:

2 FILER NAME: Jay Wiley

3 ACCOUNT # (Ethics Commission Filers):

4 Date	5 Full name of contributor (☐ out-of-state PAC (ID#: ____)) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)	9 Principal occupation / Job title (See Instructions)	10 Employer (See Instructions)
8/5/14	Elaine & Scott Bussy 10404 Treasure Island Drive Austin, TX 78730	#25 (If travel outside of Texas, complete Schedule T)		Managing Director	Bearing Financial Advisors
8/12/14	Austin Kinghorn 12323 Limerick Avenue Austin, TX 78758	#50 (If travel outside of Texas, complete Schedule T)		Attorney	Supreme Court of Texas
8/12/14	Mark Murdock 11004 Plumewood Drive Austin, TX 78750	#105 (If travel outside of Texas, complete Schedule T)		N/A	N/A
8/14/14	Laurel Farrell 8706 Balcones Club Drive Austin, TX 78750	#25 (If travel outside of Texas, complete Schedule T)		Homemaker	N/A
8/20/14	Andrea & Dean McWilliams 12 Niles Road Austin, TX 78703	#700 (If travel outside of Texas, complete Schedule T)		Consultant	McWilliams Government Affairs

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide foradditional 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:

2 FILER NAME: Jay Wiley

3 ACCOUNT # (Ethics Commission Filers):

4 Date	5 Full name of contributor (☐ out-of-state PAC (ID#:_____)) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
8/20/14	Fred Davis 4803 River Place Blvd Austin, TX 78730	$250	

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions): Attorney & mediator

10 Employer (See Instructions): Self

Date	Full name of contributor (☐ out-of-state PAC (ID#:_____)) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
8/20/14	Thomas Radack 4316 Canoas Drive Austin, TX 78730	$150	

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions): Realtor

Employer (See Instructions): Self

Date	Full name of contributor (☐ out-of-state PAC (ID#:_____)) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
8/21/14	Gerald Daugherty 1403 Club Ridge Drive Austin, TX 78735	$100	

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions): Elected Official

Employer (See Instructions): Travis County

Date	Full name of contributor (☐ out-of-state PAC (ID#:_____)) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
8/22/14	Jeff Fleece 141 Quarterhorse Court Liberty Hill, TX 78642	$250	

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions): Technology Executive

Employer (See Instructions): Sungard

Date	Full name of contributor (☐ out-of-state PAC (ID#:_____)) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
8/26/14	Diane Archer 9518 Topridge Dr #37 Austin, TX 78750	$100	

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions): Retired

Employer (See Instructions): Retired

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide foradditional 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:

2 FILER NAME: Jay Wiley

3 ACCOUNT # (Ethics Commission Filers):

4 Date	5 Full name of contributor (☐ out-of-state PAC (ID#:_____)) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
8/26/14	Pamela & Patrick Nunnelly 1502 Wildcat Hollow Austin, TX 78746	$200	

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)	10 Employer (See Instructions)
Physician	Ob Gyn Group of Austin

Date	Full name of contributor (☐ out-of-state PAC (ID#:_____)) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
8/26/14	Wanda O'Leary 6800 Austin Center Blvd #850 Austin, TX 78731	$10	

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
N/A	N/A

Date	Full name of contributor (☐ out-of-state PAC (ID#:_____)) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
8/26/14	David & Mary Bowen 10817 Quarry Oaks Trail Austin, TX 78717	$50	

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Best Efforts	Best Efforts

Date	Full name of contributor (☐ out-of-state PAC (ID#:_____)) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
8/26/14	Susan & David Reve 1200 Barton Creek Blvd #11 Austin, TX 78735	$250	

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Physician	Ob Gyn Group of Austin

Date	Full name of contributor (☐ out-of-state PAC (ID#:_____)) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
8/26/14	George Willeford 1801 Raleigh Avenue Austin, TX 78703	$150	

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Physician	Austin Gastro

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide foradditional 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:

2 FILER NAME: Jay Wiley

3 ACCOUNT # (Ethics Commission Filers):

4 Date	5 Full name of contributor (☐ out-of-state PAC (ID#: ____)) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)	9 Principal occupation / Job title (See Instructions)	10 Employer (See Instructions)
8/27/14	Hershel & Chris Sale 8107 Foxhound Trail Austin, TX 78729	$50 (If travel outside of Texas, complete Schedule T)		Retired	Retired
8/27/14	Gregory & Cathleen McNelis 4412 Marathon Blvd, Unit S Austin, TX 78756	$700 (If travel outside of Texas, complete Schedule T)		Kolache Man	Kolache Factory
9/1/14	Whitney Huston Kutz 10409 Treasure Island Drive Austin, TX 78730	$50 (If travel outside of Texas, complete Schedule T)		Stay at Home Mom	N/A
9/3/14	Anita Bradberry 10804 Tall Oak Trail Austin, TX 78750	$100 (If travel outside of Texas, complete Schedule T)		Retired	Retired
9/3/14	Sue & James Orr 9903 Winding Oak Circle Austin, TX 78750	$400 (If travel outside of Texas, complete Schedule T)		Dentist	Self

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide foradditional 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:

2 FILER NAME: Jay Wiley

3 ACCOUNT # (Ethics Commission Filers):

4 Date	5 Full name of contributor (☐ out-of-state PAC (ID#: ____)) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)	9 Principal occupation / Job title (See Instructions)	10 Employer (See Instructions)
9/5/14	Matthew Brownfield 11904 Acorn Creek Trail Austin, TX 78750	$100 (If travel outside of Texas, complete Schedule T)		Consultant	Murphy Nasica & Assoc.
9/6/14	Steven Wroe Jackson 1715-A Karen Avenue Austin, TX 78757	$50 (If travel outside of Texas, complete Schedule T)		Attorney	State of Texas
9/6/14	Bob Avent 14003 Lakeview Drive Austin, TX 78732	$100 (If travel outside of Texas, complete Schedule T)		CPA	Self
9/9/14	Karen Arena 8917 Lewis Lane Galveston, TX 77554	$50 (If travel outside of Texas, complete Schedule T)		N/A	N/A
9/9/14	Cindy & Louis Costa 909 Parrot Creek Way Charleston, SC 29412	$150 (If travel outside of Texas, complete Schedule T)		Medicine	Southeastern Cosmetic Center

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide foradditional 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:

2 FILER NAME: Jay Wiley

3 ACCOUNT # (Ethics Commission Filers):

4 Date	5 Full name of contributor (☐ out-of-state PAC (ID#: ____)) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
9/9/14	Eddie Barr 41 Adler Circle Galveston, TX 77551	$100	

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)	10 Employer (See Instructions)
Retired	Retired

Date	Full name of contributor (☐ out-of-state PAC (ID#: ____)) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
9/9/14	Sandi & Ollie Crinklemeyer 1010a Talleyran Drive Austin, TX 78750	$150	Food and Beverages for Event

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Retired	Retired

Date	Full name of contributor (☐ out-of-state PAC (ID#: ____)) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
9/10/14	Amy Deane 2905 Richard Lane Austin, TX 78703	$100	

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Self	Self

Date	Full name of contributor (☐ out-of-state PAC (ID#: ____)) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
9/11/14	David Beckwith 2711 Bartons Bluff Lane Austin, TX 78746	$25	

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Retired	Retired

Date	Full name of contributor (☐ out-of-state PAC (ID#: ____)) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
9/12/14	Ann & Clay Slack 6 Steynen Lane Austin, TX 78746	$700	

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Banking	Big Bend Banks

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide foradditional 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:

2 FILER NAME: Jay Wiley

3 ACCOUNT # (Ethics Commission Filers)

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
9/12/14	Harvey Ring 66 Pascal Lane Austin, TX 78746	$350	

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)	10 Employer (See Instructions)
Retired	Retired

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
9/15/14	Mark Vanderberg 6201 River Place Blvd #7 Austin, TX 78730	$50	

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Marketing	Alea Corp.

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
9/15/14	Scott Farine 2382 Sabal Park Lane League City, TX 77573	$350	

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Owner	Pilgrims Cleaners

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
9/15/14	Karen & Dan Sieczowski 10103 Kieffer Court Austin, TX 78750	$200	

(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#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
9/15/14	Marieulla & Robert Cox 14 Sunset Trail Austin, TX 78745	$50	

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Best Efforts	Best Efforts

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide foradditional 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:

2 FILER NAME: Jay Wiley

3 ACCOUNT # (Ethics Commission Filers):

4 Date	5 Full name of contributor (☐ out-of-state PAC (ID#: ____)) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)	9 Principal occupation / Job title (See Instructions)	10 Employer (See Instructions)
9/15/14	Roger Bordeau 12514 Deer Falls Drive Austin, TX 78729	$50 (If travel outside of Texas, complete Schedule T)		Retired	Retired
9/16/14	Charles Jordan 1917 Sandy Lake Drive League City, TX 77546	$100 (If travel outside of Texas, complete Schedule T)		Attorney	Daughtry & Jordan, P.C.
9/15/14	Gilish Borlet 8901 Westminster Glen Ave Austin, TX 78730	$100 (If travel outside of Texas, complete Schedule T)		N/A	N/A
9/17/14	Stephanie & Todd Routh 1601 Palomino Drive Austin, TX 78733	$700 (If travel outside of Texas, complete Schedule T)		Self	Self
9/17/14	John Barclay IV 8400 Emerald Hill Drive Austin, TX 78759	$50 (If travel outside of Texas, complete Schedule T)		Insurance Agent	John A. Barclay Agency

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide foradditional 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:

2 FILER NAME: Jay Wiley

3 ACCOUNT # (Ethics Commission Filers):

4 Date	5 Full name of contributor (☐ out-of-state PAC (ID#:_____)) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)	9 Principal occupation / Job title (See Instructions)	10 Employer (See Instructions)
9/17/14	Michael Morrison 4211 Canoas Drive Austin, TX 78730	$100 (If travel outside of Texas, complete Schedule T)		Engineer	Retired
9/18/14	James Guillory 10705 Doering Lane Austin, TX 78750	$25 (If travel outside of Texas, complete Schedule T)		Airport Ops Specialist	City of Austin
9/18/14	Teri & Emmett Johnson 15500 Bandon Drive Austin, TX 78717	$200 (If travel outside of Texas, complete Schedule T)	Food & Beverages for event		
9/19/14	Kerry O'Brien 8017 Ladera Verde Drive Austin, TX 78739	$25 (If travel outside of Texas, complete Schedule T)		Attorney	O'Brien Law Firm
9/19/14	Michael Lundgren 10908 Long Day Cove Austin, TX 78754	$25 (If travel outside of Texas, complete Schedule T)		Cartographer	State of Texas

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide foradditional 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:

2 FILER NAME: Jay Wiley

3 ACCOUNT # (Ethics Commission Filers)

4 Date	5 Full name of contributor (☐ out-of-state PAC (ID#:_____)) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)	9 Principal occupation / Job title (See Instructions)	10 Employer (See Instructions)
9/19/14	Mark Murdock 11004 Plumewood Drive Austin, TX 78750	#100		Retired	Retired
9/19/14	John Duke 10801 El Salido Parkway Austin, TX 78750	#25		Project Manager	Beck
9/20/14	Mikki & Darren Spohn 9605 Corbe Drive Austin, TX 78726	#700		Business	Spohn
9/20/14	Bert Rubbright 4205 Love Bird Lane Austin, TX 78730	#50		Retired	Retired
9/20/14	Carol Sims 10501 Talleyran Drive Austin, TX 78750	#50		Best Efforts	Best Efforts

(If travel outside of Texas, complete Schedule T)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide foradditional 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:

2 FILER NAME: Jay Wiley

3 ACCOUNT # (Ethics Commission Filers):

4 Date	5 Full name of contributor (☐ out-of-state PAC (ID#:_____)) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
9/20/14	Lisa Thomas 1211 Richcreek Road Austin, TX 78757	$40	

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)	10 Employer (See Instructions)
Medicine	Best Efforts

Date	Full name of contributor (☐ out-of-state PAC (ID#:_____)) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
9/20/14	Catherine Van Arnam 1800 Edelweiss Drive Cedar Park, TX 78613	$25	

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
N/A	N/A

Date	Full name of contributor (☐ out-of-state PAC (ID#:_____)) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
9/21/14	Rosemary Edwards 6528 Heron Drive Austin, TX 78759	$100	

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Self	Self

Date	Full name of contributor (☐ out-of-state PAC (ID#:_____)) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
9/22/14	Deke Pierce 14917 Alpha Collier Drive Austin, TX 78728	$25	

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Deputy	Travis County

Date	Full name of contributor (☐ out-of-state PAC (ID#:_____)) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
9/22/14	Reggie Gibbs 1201 Washington Blvd, Apt. 320 Stamford, CT 06902	$150	

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Insurance	Starr Companies

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide foradditional 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:

2 FILER NAME: Jay Wiley

3 ACCOUNT # (Ethics Commission Filers):

4 Date	5 Full name of contributor (☐ out-of-state PAC (ID#: ____)) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)	9 Principal occupation / Job title (See Instructions)	10 Employer (See Instructions)
9/22/14	Dede Hebert 4821 Chesney Ridge Austin, TX 78749	#25 (If travel outside of Texas, complete Schedule T)		Homemaker	N/A
9/22/14	Austin Kinghorn 12323 Limerick Avenue Austin, TX 78758	#25 (If travel outside of Texas, complete Schedule T)		Attorney	Supreme Court of Texas
9/22/14	Edward Douglass 9721 Big View Austin, TX 78730	#100 (If travel outside of Texas, complete Schedule T)		N/A	N/A
9/23/14	Andrea Robertson 10215 Missel Thrush Drive Austin TX 78750	#25 (If travel outside of Texas, complete Schedule T)		Paralegal	The Bratton Firm
9/23/14	Cathy Tucci 1545 Windcreek Court Ft. Collins, CO 80626	#350 (If travel outside of Texas, complete Schedule T)		Homemaker	N/A

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide foradditional 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:

2 FILER NAME: Jay Wiley

3 ACCOUNT # (Ethics Commission Filers):

4 Date	5 Full name of contributor (☐ out-of-state PAC (ID#: ____)) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
9/23/14	Vik Vad 3331 Grimes Ranch Road Austin, TX 78732	$50	

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)	10 Employer (See Instructions)
Business Owner	Self

Date	Full name of contributor (☐ out-of-state PAC (ID#: ____)) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
9/23/14	Derek Hamilton 15300 Valderrama Court Austin, TX 78717	$100	

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Optometrist	Self

Date	Full name of contributor (☐ out-of-state PAC (ID#: ____)) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
9/23/14	James Wilson 24002 Doverwick Drive Tomball, TX 77375	$50	

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
President	Wilson Risk Management

Date	Full name of contributor (☐ out-of-state PAC (ID#: ____)) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
9/24/14	Milo Hamilton 3977 River Place Blvd Austin, TX 78730	$100	

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Business Owner	Best Efforts

Date	Full name of contributor (☐ out-of-state PAC (ID#: ____)) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
9/24/14	Erick Allen 6802 Edgefield Drive Austin, TX 78731	$50	

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Physician	Austin Anesthesiology Group

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide foradditional 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:

2 FILER NAME: Jay Wiley

3 ACCOUNT # (Ethics Commission Filers):

4 Date	5 Full name of contributor (☐ out-of-state PAC (ID#: ____)) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
9/24/14	Mike O'Dell 8810 Business Park Dr Ste.300 Austin, TX 78759	$50	

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions): Best Efforts

10 Employer (See Instructions): Best Efforts

Date	Full name of contributor (☐ out-of-state PAC (ID#: ____)) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
9/24/14	Kerry Cammack 919 Congress Ave #1400 Austin, TX 78701	$150	

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions): Attorney

Employer (See Instructions): Self

Date	Full name of contributor (☐ out-of-state PAC (ID#: ____)) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
9/24/14	Rick Lutowski 10053 Lachlan Drive Austin, TX 78717	$25	

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions): Realtor

Employer (See Instructions): Self

Date	Full name of contributor (☐ out-of-state PAC (ID#: ____)) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
9/24/14	Bob Bailey 2500 Barton Creek Blvd #1410 Austin, TX 78735	$10	

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions): Retired

Employer (See Instructions): Retired

Date	Full name of contributor (☐ out-of-state PAC (ID#: ____)) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
9/24/14	Carl Beck 7716 Basil Drive Austin, TX 78750	$100	

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions): Property Management

Employer (See Instructions): Beck & Co.

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide foradditional 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:

2 FILER NAME: Jay Wiley

3 ACCOUNT # (Ethics Commission Filers)

4 Date	5 Full name of contributor (☐ out-of-state PAC (ID#: ____)) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
9/24/14	Chris Stacy 11502 Santa Cruz Drive Austin, TX 78759	$50	(If travel outside of Texas, complete Schedule T)
9 Principal occupation / Job title (See Instructions): Attorney	10 Employer (See Instructions): Self		
9/24/14	David Nelson 6611 Sitio Del Rio Austin, TX 78730	$100	(If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions): Orthodontist	Employer (See Instructions): Self		
9/24/14	Holly & Joel Hinkhouse 5217 Keene Cove Austin, TX 78730	$50	(If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions): Portfolio Manager	Employer (See Instructions): Teacher Retirement Systems		
9/24/14	John Jasso 2304 Lancaster Drive Austin, TX 78748	$50	(If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions): Photogrammetrist	Employer (See Instructions): Self		
9/24/14	Lyle Grimes 2307 Mayfield Way Cedar Park, TX 78613	$100	(If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions): Corporate Sales Manager	Employer (See Instructions): American Airlines		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide foradditional 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:

2 FILER NAME: Jay Wiley

3 ACCOUNT # (Ethics Commission Filers):

4 Date	5 Full name of contributor (☐ out-of-state PAC (ID#:_____)) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)	9 Principal occupation / Job title (See Instructions)	10 Employer (See Instructions)
9/24/14	Lano Cox 10012 Brightling Lane Austin, TX 78750	$100 (If travel outside of Texas, complete Schedule T)		Consulting Engineer	NIMBOXX
9/24/14	Sandi Crinklemeyer 10109 Talleyran Drive Austin, TX 78750	$25 (If travel outside of Texas, complete Schedule T)		N/A	N/A
9/24/14	Lynne & Tom Winterton 4414 Canoas Drive Austin, TX 78730	$700 (If travel outside of Texas, complete Schedule T)		N/A	N/A
9/24/14	Rex Gore 1304 West Oltorf Street Austin, TX 78704	$350 (If travel outside of Texas, complete Schedule T)		President	PJS of Texas, Inc.
9/24/14	Joe Hootman 11919 Meadowfire Austin, TX 78758	$10 (If travel outside of Texas, complete Schedule T)		Director of Systems Development	Sport Clips

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide foradditional 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:

2 FILER NAME: Jay Wiley

3 ACCOUNT # (Ethics Commission Filers):

4 Date	5 Full name of contributor (☐ out-of-state PAC (ID#:_____)) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
9/25/14	John Sepehri 5817 Mount Bonnell Road Austin, TX 78731	$25	

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See instructions): Attorney

10 Employer (See Instructions): Texas Apartment Assoc.

Date	Full name of contributor (☐ out-of-state PAC (ID#:_____)) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
9/25/14	Austin Firefighters Assn PAC 7537 Cameron Road Austin, TX 78752	$350	

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions): N/A

Employer (See Instructions): N/A

Date	Full name of contributor (☐ out-of-state PAC (ID#:_____)) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
9/25/14	Diane & Chris Hurst 8008 Big View Drive Austin, TX 78730	$300	

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions): Sales Management

Employer (See Instructions): Cisco Systems

Date	Full name of contributor (☐ out-of-state PAC (ID#:_____)) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
9/25/14	Gene Hall 4905 China Garden Drive Austin, TX 78730	$25	

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions): Consultant

Employer (See Instructions): Self

Date	Full name of contributor (☐ out-of-state PAC (ID#:_____)) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
9/25/14	Julie Alspaw 12212 Brigadoon Lane Austin, TX 78727	$50	

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See instructions): Admin

Employer (See Instructions): Hoar Construction

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide foradditional 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:

2 FILER NAME: Jay Wiley

3 ACCOUNT # (Ethics Commission Filers):

4 Date	5 Full name of contributor (☐ out-of-state PAC (ID#:_____)) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
9/25/14	William Christian 210 SW M street Washington, D.C. 20024	$25	

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions): Director of Government Affairs

10 Employer (See Instructions): Citizens Against Gov't Waste

Date	Full name of contributor (☐ out-of-state PAC (ID#:_____)) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
9/25/14	James Casey 10123 Treasure Island Drive Austin, TX 78730	$50	

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions): N/A

Employer (See Instructions): N/A

Date	Full name of contributor (☐ out-of-state PAC (ID#:_____)) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
9/25/14	Sami Aboumatar 5732 Merrywing Circle Austin, TX 78730	$50	

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions): Physician

Employer (See Instructions): AECC

Date	Full name of contributor (☐ out-of-state PAC (ID#:_____)) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
9/25/14	Chris Wilson 3410 Windy Harbor Drive Austin, TX 78734	$50	

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions): Sales

Employer (See Instructions): Self

Date	Full name of contributor (☐ out-of-state PAC (ID#:_____)) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
9/25/14	Patsy Wimmer 7802 Stoneywood Drive Austin, TX 78731	$50	

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions): Realtor

Employer (See Instructions): Kuper Sotheby's International

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide foradditional 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:

2 FILER NAME: Jay Wiley

3 ACCOUNT # (Ethics Commission Filers):

4 Date	5 Full name of contributor (☐ out-of-state PAC (ID#: ____)) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
9/25/14	Pam Farley 12104 Jill Sue Court Austin, TX 78750	$50	

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)	10 Employer (See Instructions)
N/A	N/A

Date	Full name of contributor (☐ out-of-state PAC (ID#: ____)) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
9/25/14	Celeste Hubert 1905 West 34th Street Austin, TX 78703	$50	

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Wife & Mother	N/A

Date	Full name of contributor (☐ out-of-state PAC (ID#: ____)) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
9/25/14	Melanie & Bobby Frank 9204 Cedar Forest Drive Austin, TX 78750	$150	Food & Beverages for Event

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Best Efforts	Best Efforts

Date	Full name of contributor (☐ out-of-state PAC (ID#: ____)) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
9/25/14	Ken Heroy 15500 Belfin Drive Austin, TX 78717	$25	

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Engineer	Jones-Heroy & Assoc.

Date	Full name of contributor (☐ out-of-state PAC (ID#: ____)) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
9/25/14	Pat Wimberley 15713 Edenderry Drive Austin, TX 78717	$250	

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
Technology Director	TX Assoc. of Realtors

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide foradditional 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:

2 FILER NAME: Jay Wiley

3 ACCOUNT # (Ethics Commission Filers)

4 Date	5 Full name of contributor (☐ out-of-state PAC (ID#: ____)) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
9/25/14	Kelly Bryan 312 Entrada Way Round Rock, TX 78681	$25	

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions): Sales

10 Employer (See Instructions): Dell

Date	Full name of contributor (☐ out-of-state PAC (ID#: ____)) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
9/25/14	Reb Wayne 6505 Corpus Christi Drive Austin, TX 78729	$100	

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions): Best Efforts

Employer (See Instructions): Best Efforts

Date	Full name of contributor (☐ out-of-state PAC (ID#: ____)) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
9/25/14	Tanya & John Busch 3800 Far View Drive Austin, TX 78730	$100	

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions): Best Efforts

Employer (See Instructions): Best Efforts

Date	Full name of contributor (☐ out-of-state PAC (ID#: ____)) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
9/25/14	George A. Humphrey 2603 Tanglewood Trail Austin, TX 78703	$100	

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions): Best Efforts

Employer (See Instructions): Best Efforts

Date	Full name of contributor (☐ out-of-state PAC (ID#: ____)) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
8/5/14	Michael Joyce 4404 Alta Loma Drive Austin, TX 78749	$50	

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions): Director of Special Events

Employer (See Instructions): Texas Public Policy Foundation

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.

1 Total pages Schedule E:

2 FILER NAME: Jay Wiley

3 ACCOUNT # (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED LOANS: ⇨ ⇨ ⇨ ⇨ ⇨ ⇨ $ 14,000.00

5 Date of loan: 9/25/14

7 Name of lender: Jay Wiley ☐ out-of-state PAC (ID#: _____)

9 Loan Amount ($): $14,000.00

6 Is lender a financial Institution? Y (N)

8 Lender address; City; State; Zip Code: 12300 Hymeadow Dr #115 Austin, TX 78750

10 Interest rate: 0

11 Maturity date

12 Principal occupation / Job title (See Instructions): Attorney

13 Employer (See Instructions): Self

14 Description of Collateral: ☒ none

15 Check if personal funds were deposited into political account: ☒

16 GUARANTOR INFORMATION ☐ not applicable

17 Name of guarantor

18 Guarantor address; City; State; Zip Code

19 Amount Guaranteed ($)

20 Principal Occupation (See Instructions)

21 Employer (See Instructions)

Date of loan

Name of lender ☐ out-of-state PAC (ID#: _____)

Loan Amount ($)

Is lender a financial Institution? Y N

Lender address; City; State; Zip Code

Interest rate

Maturity date

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Description of Collateral ☐ none

Check if personal funds were deposited into political account ☐

GUARANTOR INFORMATION ☐ not applicable

Name of guarantor

Guarantor address; City; State; Zip Code

Amount Guaranteed ($)

Principal Occupation (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If lender 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 Candidate/Officeholder/Political Committee
Event Expense	Polling Expense	Travel Out Of District	
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:	2 FILER NAME Jay Wiley	3 ACCOUNT # (Ethics Commission Filers)

4 Date 7/3/14	5 Payee name Facebook
6 Amount ($) $6.99	7 Payee address; City; State; Zip Code Menlo Park, CA
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising (b) Description (If travel outside of Texas, complete Schedule T) Social Media Promotion ☐ Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name — Office sought — Office held

Date 7/7/14	Payee name Nationbuilder
Amount ($) $19	Payee address; City; State; Zip Code Los Angeles, CA
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Fees Description (If travel outside of Texas, complete Schedule T) Website Maintenance ☐ Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name — Office sought — Office held

Date 7/15/14	Payee name Borgelt Law
Amount ($) $195	Payee address; City; State; Zip Code 614 S. Capital of Texas Hwy Austin, TX 78746
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Legal Services Description (If travel outside of Texas, complete Schedule T) City Code Compliance ☐ Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name — Office sought — Office held

Date 7/21/14	Payee name Facebook
Amount ($) $26.13	Payee address; City; State; Zip Code Menlo Park, CA
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Description (If travel outside of Texas, complete Schedule T) Social Media Promotion ☐ Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name — Office sought — Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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 Candidate/Officeholder/Political Committee
Event Expense	Polling Expense	Travel Out Of District	
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:	2 FILER NAME Jay Wiley	3 ACCOUNT # (Ethics Commission Filers)

4 Date	5 Payee name
7/22/14	Facebook
6 Amount ($)	**7 Payee address; City; State; Zip Code**
$50.71	Menlo Park, CA

8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule T)
	Advertising	Social Media Promotion ☐ Check if Austin, TX, officeholder living expense

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

Date	Payee name
7/22/14	Texans for Accountable Government
Amount ($)	**Payee address; City; State; Zip Code**
$50	306 Baronets Trail Austin, TX 78753
PURPOSE OF EXPENDITURE	**Category (See categories listed at the top of this schedule)** / **Description (If travel outside of Texas, complete Schedule T)**
	Fees / Membership ☐ Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

Date	Payee name
7/28/14	Mad Mimi
Amount ($)	**Payee address; City; State; Zip Code**
$42	1562 First Avenue #205-6464 New York, NY 10028
PURPOSE OF EXPENDITURE	**Category (See categories listed at the top of this schedule)** / **Description (If travel outside of Texas, complete Schedule T)**
	Advertising / Email Maintenance ☐ Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

Date	Payee name
8/1/14	Facebook
Amount ($)	**Payee address; City; State; Zip Code**
$112.06	Menlo Park, CA
PURPOSE OF EXPENDITURE	**Category (See categories listed at the top of this schedule)** / **Description (If travel outside of Texas, complete Schedule T)**
	Advertising / Social Media Promotion ☐ Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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 Candidate/Officeholder/Political Committee
Event Expense	Polling Expense	Travel Out Of District	
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:	2 FILER NAME Jay Wiley	3 ACCOUNT # (Ethics Commission Filers)

4 Date	5 Payee name
8/1/14	Thomas Graphics
6 Amount ($)	**7 Payee address; City; State; Zip Code**
$6,392.00	9501 N. IH 35 Austin, TX 78753
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): Signs ☐ Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name: Office sought: Office held:

Date	Payee name
8/5/14	Nationbuilder
Amount ($)	**Payee address; City; State; Zip Code**
$19	Los Angeles, CA
PURPOSE OF EXPENDITURE	**Category** (See categories listed at the top of this schedule): Advertising
	Description (If travel outside of Texas, complete Schedule T): Website Maintenance ☐ Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name: Office sought: Office held:

Date	Payee name
8/11/14	Conviction Digital
Amount ($)	**Payee address; City; State; Zip Code**
$50	919 Congress Avenue Austin, TX 78701
PURPOSE OF EXPENDITURE	**Category** (See categories listed at the top of this schedule): Consulting
	Description (If travel outside of Texas, complete Schedule T): Collateral Materials ☐ Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name: Office sought: Office held:

Date	Payee name
8/19/14	Charles Carter
Amount ($)	**Payee address; City; State; Zip Code**
$1800.00	
PURPOSE OF EXPENDITURE	**Category** (See categories listed at the top of this schedule): Contract Labor
	Description (If travel outside of Texas, complete Schedule T): Sign Distribution ☐ Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name: Office sought: Office held:

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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 Candidate/Officeholder/Political Committee
Event Expense	Polling Expense	Travel Out Of District	
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:	2 FILER NAME Jay Wiley	3 ACCOUNT # (Ethics Commission Filers)

4 Date 8/21/14	5 Payee name Facebook	
6 Amount ($) $250.27	7 Payee address; City; State; Zip Code Menlo Park, CA	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising	(b) Description (If travel outside of Texas, complete Schedule T) Social Media Promotion ☐ Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

Date 8/27/14	Payee name Mad Mimi	
Amount ($) $42.00	Payee address; City; State; Zip Code 1562 First Avenue #205-6464 New York, NY 10028	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising	Description (If travel outside of Texas, complete Schedule T) Email Maintenance ☐ Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

Date 9/2/14	Payee name Facebook	
Amount ($) $283.54	Payee address; City; State; Zip Code Menlo Park, CA	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising	Description (If travel outside of Texas, complete Schedule T) Social Media Promotion ☐ Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

Date 9/4/14	Payee name Nationbuilder	
Amount ($) $19	Payee address; City; State; Zip Code Los Angeles, CA	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising	Description (If travel outside of Texas, complete Schedule T) Web Maintenance ☐ Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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 Candidate/Officeholder/Political Committee
Event Expense	Polling Expense	Travel Out Of District	
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:	2 FILER NAME Jay Wiley	3 ACCOUNT # (Ethics Commission Filers)

4 Date 9/8/14	5 Payee name Local Voice Solutions
6 Amount ($) $568.00	7 Payee address; City; State; Zip Code 3700 Thompson Street Austin, TX 78702
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Consulting Expense (b) Description (If travel outside of Texas, complete Schedule T) Phone Banks and Data ☐ Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name — Office sought — Office held

Date 9/8/14	Payee name Conviction Digital
Amount ($) $50	Payee address; City; State; Zip Code 919 Congress Ave. Austin, TX 78701
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Consulting Description (If travel outside of Texas, complete Schedule T) Design work ☐ Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name — Office sought — Office held

Date 9/9/14	Payee name Facebook
Amount ($) $500.78	Payee address; City; State; Zip Code Menlo Park, CA
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Description (If travel outside of Texas, complete Schedule T) Social Media Promotion ☐ Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name — Office sought — Office held

Date 9/12/14	Payee name Borgelt Law
Amount ($) $552.50	Payee address; City; State; Zip Code 614 S. Cap of Tx Hwy Austin, TX 78746
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Legal Services Description (If travel outside of Texas, complete Schedule T) City Code Compliance ☐ Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name — Office sought — Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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 Candidate/Officeholder/Political Committee
Event Expense	Polling Expense	Travel Out Of District	
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:	2 FILER NAME Jay Wiley	3 ACCOUNT # (Ethics Commission Filers)
4 Date 7/20/14	5 Payee name Pay Pal	
6 Amount ($) $1.03	7 Payee address; City; State; Zip Code San Jose, CA	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Fees	(b) Description (If travel outside of Texas, complete Schedule T) Transaction Online Fee ☐ Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

Date 7/21/14	Payee name Pay Pal	
Amount ($) $10.45	Payee address; City; State; Zip Code San Jose, CA	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Fees	Description (If travel outside of Texas, complete Schedule T) Online Transaction ☐ Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

Date 7/21/14	Payee name Pay Pal	
Amount ($) $0.74	Payee address; City; State; Zip Code San Jose, CA	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Fees	Description (If travel outside of Texas, complete Schedule T) Online Transaction ☐ Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

Date 7/28/14	Payee name Pay Pal	
Amount ($) $1.03	Payee address; City; State; Zip Code San Jose, CA	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Fees	Description (If travel outside of Texas, complete Schedule T) Online Transaction ☐ Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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 Candidate/Officeholder/Political Committee
Event Expense	Polling Expense	Travel Out Of District	
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:	2 FILER NAME Jay Wiley	3 ACCOUNT # (Ethics Commission Filers)
4 Date 7/31/14	5 Payee name Pay Pal	
6 Amount ($) $0.45	7 Payee address; City; State; Zip Code San Jose, CA	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Fees	(b) Description (If travel outside of Texas, complete Schedule T) Online Transaction ☐ Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

Date 7/31/14	Payee name Pay Pal	
Amount ($) $0.45	Payee address; City; State; Zip Code San Jose, CA	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Fees	Description (If travel outside of Texas, complete Schedule T) Online Transaction ☐ Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

Date 8/4/14	Payee name Pay Pal	
Amount ($) $1.75	Payee address; City; State; Zip Code San Jose, CA	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Fees	Description (If travel outside of Texas, complete Schedule T) Online Transaction ☐ Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

Date 8/6/14	Payee name Pay Pal	
Amount ($) $1.03	Payee address; City; State; Zip Code San Jose, CA	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Fees	Description (If travel outside of Texas, complete Schedule T) Online Transaction ☐ Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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 Candidate/Officeholder/Political Committee
Event Expense	Polling Expense	Travel Out Of District	
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:

2 FILER NAME: Jay Wiley

3 ACCOUNT # (Ethics Commission Filers)

4 Date: 8/12/14

5 Payee name: Pay Pal

6 Amount ($): $0.45

7 Payee address; City; State; Zip Code: San Jose, CA

8 PURPOSE OF EXPENDITURE

(a) Category (See categories listed at the top of this schedule): Fees

(b) Description (If travel outside of Texas, complete Schedule T): Online Transaction

☐ Check if Austin, TX, officeholder living expense

9 Complete ONLY if direct expenditure to benefit C/OH — Candidate / Officeholder name — Office sought — Office held

---

Date: 8/12/14

Payee name: Pay Pal

Amount ($): $3.20

Payee address; City; State; Zip Code: San Jose, CA

PURPOSE OF EXPENDITURE

Category (See categories listed at the top of this schedule): Fees

Description (If travel outside of Texas, complete Schedule T): Online Transaction

☐ Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH — Candidate / Officeholder name — Office sought — Office held

---

Date: 8/14/14

Payee name: Pay Pal

Amount ($): $1.03

Payee address; City; State; Zip Code: San Jose, CA

PURPOSE OF EXPENDITURE

Category (See categories listed at the top of this schedule): Fees

Description (If travel outside of Texas, complete Schedule T): Online Transaction

☐ Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH — Candidate / Officeholder name — Office sought — Office held

---

Date: 8/20/14

Payee name: Pay Pal

Amount ($): $20.60

Payee address; City; State; Zip Code: San Jose, CA

PURPOSE OF EXPENDITURE

Category (See categories listed at the top of this schedule): Fees

Description (If travel outside of Texas, complete Schedule T): Online Transaction

☐ Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH — Candidate / Officeholder name — Office sought — Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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 Candidate/Officeholder/Political Committee
Event Expense	Polling Expense	Travel Out Of District	
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:	2 FILER NAME Jay Wiley	3 ACCOUNT # (Ethics Commission Filers)
4 Date 8/20/14	5 Payee name Pay Pal	
6 Amount ($) $7.55	7 Payee address; City; State; Zip Code San Jose, CA	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Fees	(b) Description (If travel outside of Texas, complete Schedule T) Online Transaction ☐ Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

Date 8/20/14	Payee name Pay Pal	
Amount ($) $4.65	Payee address; City; State; Zip Code San Jose, CA	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Fees	Description (If travel outside of Texas, complete Schedule T) Online Transaction ☐ Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

Date 8/22/14	Payee name Pay Pal	
Amount ($) $7.55	Payee address; City; State; Zip Code San Jose, CA	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Fees	Description (If travel outside of Texas, complete Schedule T) Online Transaction ☐ Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

Date 9/1/14	Payee name Pay Pal	
Amount ($) $1.75	Payee address; City; State; Zip Code San Jose, CA	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Fees	Description (If travel outside of Texas, complete Schedule T) Online Transaction ☐ Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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 Candidate/Officeholder/Political Committee
Event Expense	Polling Expense	Travel Out Of District	
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:	2 FILER NAME Jay Wiley	3 ACCOUNT # (Ethics Commission Filers)
4 Date 9/4/14	5 Payee name Pay Pal	
6 Amount ($) $3.20	7 Payee address; City; State; Zip Code San Jose, CA	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Fees	(b) Description (If travel outside of Texas, complete Schedule T) Online Transaction ☐ Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

Date 9/10/14	Payee name Pay Pal	
Amount ($) $3.20	Payee address; City; State; Zip Code San Jose, CA	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Fees	Description (If travel outside of Texas, complete Schedule T) Online Transaction ☐ Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

Date 9/11/14	Payee name Pay Pal	
Amount ($) $1.03	Payee address; City; State; Zip Code San Jose, CA	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Fees	Description (If travel outside of Texas, complete Schedule T) Online Transaction ☐ Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

Date 9/12/14	Payee name Pay Pal	
Amount ($) $10.45	Payee address; City; State; Zip Code San Jose, CA	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Fees	Description (If travel outside of Texas, complete Schedule T) Online Transaction ☐ Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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 Candidate/Officeholder/Political Committee
Event Expense	Polling Expense	Travel Out Of District	
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:	2 FILER NAME Jay Wiley	3 ACCOUNT # (Ethics Commission Filers)
4 Date 9/15/14	5 Payee name Pay Pal	
6 Amount ($) $1.75	7 Payee address; City; State; Zip Code San Jose, CA	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Fees	(b) Description (If travel outside of Texas, complete Schedule T) Online Transaction ☐ Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

Date 9/15/14	Payee name Pay Pal	
Amount ($) $10.45	Payee address; City; State; Zip Code San Jose, CA	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Fees	Description (If travel outside of Texas, complete Schedule T) Online Transaction ☐ Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

Date 9/15/14	Payee name Pay Pal	
Amount ($) $3.20	Payee address; City; State; Zip Code San Jose, CA	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Fees	Description (If travel outside of Texas, complete Schedule T) Online Transaction ☐ Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

Date 9/15/14	Payee name Pay Pal	
Amount ($) $1.75	Payee address; City; State; Zip Code San Jose, CA	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Fees	Description (If travel outside of Texas, complete Schedule T) Online Transaction ☐ Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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 Candidate/Officeholder/Political Committee
Event Expense	Polling Expense	Travel Out Of District	
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:	2 FILER NAME Jay Wiley	3 ACCOUNT # (Ethics Commission Filers)
4 Date 9/16/14	5 Payee name Pay Pal	
6 Amount ($) $3.20	7 Payee address; City; State; Zip Code San Jose, CA	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Fees	(b) Description (If travel outside of Texas, complete Schedule T) Online Transaction ☐ Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

Date 9/17/14	Payee name Pay Pal	
Amount ($) $20.60	Payee address; City; State; Zip Code San Jose, CA	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Fees	Description (If travel outside of Texas, complete Schedule T) Online Transaction ☐ Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

Date 9/17/14	Payee name Pay Pal	
Amount ($) $1.75	Payee address; City; State; Zip Code San Jose, CA	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Fees	Description (If travel outside of Texas, complete Schedule T) Online Transaction ☐ Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

Date 9/17/14	Payee name Pay Pal	
Amount ($) $3.20	Payee address; City; State; Zip Code San Jose, CA	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Fees	Description (If travel outside of Texas, complete Schedule T) Online Transaction ☐ Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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 Candidate/Officeholder/Political Committee
Event Expense	Polling Expense	Travel Out Of District	
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:	2 FILER NAME Jay Wiley	3 ACCOUNT # (Ethics Commission Filers)
4 Date 9/18/14	5 Payee name Pay Pal	
6 Amount ($) $1.03	7 Payee address; City; State; Zip Code San Jose, CA	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Fees	(b) Description (If travel outside of Texas, complete Schedule T) Online Transaction ☐ Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

Date 9/19/14	Payee name Pay Pal	
Amount ($) $1.03	Payee address; City; State; Zip Code San Jose, CA	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Fees	Description (If travel outside of Texas, complete Schedule T) Online Transaction ☐ Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

Date 9/19/14	Payee name Pay Pal	
Amount ($) $1.03	Payee address; City; State; Zip Code San Jose, CA	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Fees	Description (If travel outside of Texas, complete Schedule T) Online Transaction ☐ Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

Date 9/19/14	Payee name Pay Pal	
Amount ($) $3.20	Payee address; City; State; Zip Code San Jose, CA	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Fees	Description (If travel outside of Texas, complete Schedule T) Online Transaction ☐ Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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 Candidate/Officeholder/Political Committee
Event Expense	Polling Expense	Travel Out Of District	
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:	2 FILER NAME Jay Wiley	3 ACCOUNT # (Ethics Commission Filers)
4 Date 9/19/14	5 Payee name Pay Pal	
6 Amount ($) $1.03	7 Payee address; City; State; Zip Code San Jose, CA	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Fees	(b) Description (If travel outside of Texas, complete Schedule T) Online Transaction ☐ Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

Date 9/20/14	Payee name Pay Pal	
Amount ($) $1.03	Payee address; City; State; Zip Code San Jose, CA	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Fees	Description (If travel outside of Texas, complete Schedule T) Online Transaction ☐ Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

Date 9/20/14	Payee name Pay Pal	
Amount ($) $3.20	Payee address; City; State; Zip Code San Jose, CA	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Fees	Description (If travel outside of Texas, complete Schedule T) Online Transaction ☐ Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

Date 9/22/14	Payee name Pay Pal	
Amount ($) $1.03	Payee address; City; State; Zip Code San Jose, CA	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Fees	Description (If travel outside of Texas, complete Schedule T) Online Transaction ☐ Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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 Candidate/Officeholder/Political Committee
Event Expense	Polling Expense	Travel Out Of District	
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:	2 FILER NAME Jay Wiley	3 ACCOUNT # (Ethics Commission Filers)
4 Date 9/22/14	5 Payee name Pay Pal	
6 Amount ($) $4.65	7 Payee address; City; State; Zip Code San Jose, CA	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Fees	(b) Description (If travel outside of Texas, complete Schedule T) Online Transaction ☐ Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

Date 9/22/14	Payee name Pay Pal	
Amount ($) $1.03	Payee address; City; State; Zip Code San Jose, CA	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Fees	Description (If travel outside of Texas, complete Schedule T) Online Transaction ☐ Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

Date 9/22/14	Payee name Pay Pal	
Amount ($) $1.03	Payee address; City; State; Zip Code San Jose, CA	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Fees	Description (If travel outside of Texas, complete Schedule T) Online Transaction ☐ Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

Date 9/22/14	Payee name Pay Pal	
Amount ($) $13.20	Payee address; City; State; Zip Code San Jose, CA	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Fees	Description (If travel outside of Texas, complete Schedule T) Online Transaction ☐ Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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 Candidate/Officeholder/Political Committee
Event Expense	Polling Expense	Travel Out Of District	
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:	2 FILER NAME Jay Wiley	3 ACCOUNT # (Ethics Commission Filers)
4 Date 9/23/14	5 Payee name Pay Pal	
6 Amount ($) $1.03	7 Payee address; City; State; Zip Code San Jose, CA	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Fees	(b) Description (If travel outside of Texas, complete Schedule T) Online Transaction ☐ Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

Date 9/23/14	Payee name Pay Pal	
Amount ($) $10.45	Payee address; City; State; Zip Code San Jose, CA	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Fees	Description (If travel outside of Texas, complete Schedule T) Online Transaction ☐ Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

Date 9/23/14	Payee name Pay Pal	
Amount ($) $1.75	Payee address; City; State; Zip Code San Jose, CA	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Fees	Description (If travel outside of Texas, complete Schedule T) Online Transaction ☐ Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

Date 9/23/14	Payee name Pay Pal	
Amount ($) $1.75	Payee address; City; State; Zip Code San Jose, CA	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Fees	Description (If travel outside of Texas, complete Schedule T) Online Transaction ☐ Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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 Candidate/Officeholder/Political Committee
Event Expense	Polling Expense	Travel Out Of District	
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:	2 FILER NAME Jay Wiley	3 ACCOUNT # (Ethics Commission Filers)
4 Date 9/23/14	5 Payee name Pay Pal	
6 Amount ($) $3.20	7 Payee address; City; State; Zip Code San Jose, CA	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Fees	(b) Description (If travel outside of Texas, complete Schedule T) Online Transaction ☐ Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

Date 9/23/14	Payee name Pay Pal	
Amount ($) $1.03	Payee address; City; State; Zip Code San Jose, CA	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Fees	Description (If travel outside of Texas, complete Schedule T) Online Transaction ☐ Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

Date 9/24/14	Payee name Pay Pal	
Amount ($) $0.59	Payee address; City; State; Zip Code San Jose, CA	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Fees	Description (If travel outside of Texas, complete Schedule T) Transaction Online ☐ Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

Date 9/24/14	Payee name Pay Pal	
Amount ($) $3.20	Payee address; City; State; Zip Code San Jose, CA	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Fees	Description (If travel outside of Texas, complete Schedule T) Online Transaction ☐ Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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 Candidate/Officeholder/Political Committee
Event Expense	Polling Expense	Travel Out Of District	
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:	2 FILER NAME Jay Wiley	3 ACCOUNT # (Ethics Commission Filers)
4 Date 9/24/14	5 Payee name Pay Pal	
6 Amount ($) $1.75	7 Payee address; City; State; Zip Code San Jose, CA	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Fees	(b) Description (If travel outside of Texas, complete Schedule T) Online Transaction ☐ Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

Date 9/24/14	Payee name Pay Pal	
Amount ($) $3.20	Payee address; City; State; Zip Code San Jose, CA	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Fees	Description (If travel outside of Texas, complete Schedule T) Online Transaction ☐ Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

Date 9/24/14	Payee name Pay Pal	
Amount ($) $1.75	Payee address; City; State; Zip Code San Jose, CA	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Fees	Description (If travel outside of Texas, complete Schedule T) Online Transaction ☐ Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

Date 9/24/14	Payee name Pay Pal	
Amount ($) $1.75	Payee address; City; State; Zip Code San Jose, CA	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Fees	Description (If travel outside of Texas, complete Schedule T) Online Transaction ☐ Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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 Candidate/Officeholder/Political Committee
Event Expense	Polling Expense	Travel Out Of District	
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:	2 FILER NAME Jay Wiley	3 ACCOUNT # (Ethics Commission Filers)
4 Date 9/24/14	5 Payee name Pay Pal	
6 Amount ($) $3.20	7 Payee address; City; State; Zip Code San Jose, CA	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Fees	(b) Description (If travel outside of Texas, complete Schedule T) Online Transaction ☐ Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

Date 9/24/14	Payee name Pay Pal	
Amount ($) $3.20	Payee address; City; State; Zip Code San Jose, CA	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Fees	Description (If travel outside of Texas, complete Schedule T) Online Transaction ☐ Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

Date 9/24/14	Payee name Pay Pal	
Amount ($) $1.07	Payee address; City; State; Zip Code San Jose, CA	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Fees	Description (If travel outside of Texas, complete Schedule T) Online Transaction ☐ Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

Date 9/24/14	Payee name Pay Pal	
Amount ($) $29.30	Payee address; City; State; Zip Code San Jose, CA	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Fees	Description (If travel outside of Texas, complete Schedule T) Online Transaction ☐ Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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 Candidate/Officeholder/Political Committee
Event Expense	Polling Expense	Travel Out Of District	
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:	2 FILER NAME: Jay Wiley	3 ACCOUNT # (Ethics Commission Filers)
4 Date: 9/24/14	5 Payee name: Pay Pal	
6 Amount ($): $10.45	7 Payee address; City; State; Zip Code: San Jose, CA	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule): Fees	(b) Description (If travel outside of Texas, complete Schedule T): Online Transaction ☐ Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

Date: 9/24/14	Payee name: Pay Pal	
Amount ($): $0.59	Payee address; City; State; Zip Code: San Jose, CA	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule): Fees	Description (If travel outside of Texas, complete Schedule T): Online Transaction ☐ Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

Date: 9/25/14	Payee name: Pay Pal	
Amount ($): $1.03	Payee address; City; State; Zip Code: San Jose, CA	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule): Fees	Description (If travel outside of Texas, complete Schedule T): Online Transaction ☐ Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

Date: 9/25/14	Payee name: Pal Pal	
Amount ($): $1.03	Payee address; City; State; Zip Code: San Jose, CA	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule): Fees	Description (If travel outside of Texas, complete Schedule T): Online Transaction ☐ Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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 Candidate/Officeholder/Political Committee
Event Expense	Polling Expense	Travel Out Of District	
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:	2 FILER NAME Jay Wiley	3 ACCOUNT # (Ethics Commission Filers)
4 Date 9/25/14	5 Payee name Pay Pal	
6 Amount ($) $1.75	7 Payee address; City; State; Zip Code San Jose, CA	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Fees	(b) Description (If travel outside of Texas, complete Schedule T) Online Transactions ☐ Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

Date 9/25/14	Payee name Pay Pal	
Amount ($) $1.03	Payee address; City; State; Zip Code San Jose, CA	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Fee	Description (If travel outside of Texas, complete Schedule T) Online Transactio ☐ Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

Date 9/25/14	Payee name Pay Pal	
Amount ($) $1.75	Payee address; City; State; Zip Code San Jose, CA	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Fees	Description (If travel outside of Texas, complete Schedule T) Transaction ☐ Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

Date 9/25/14	Payee name Pay Pal	
Amount ($) $1.75	Payee address; City; State; Zip Code San Jose, CA	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Fees	Description (If travel outside of Texas, complete Schedule T) Online Transaction ☐ Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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 Candidate/Officeholder/Political Committee
Event Expense	Polling Expense	Travel Out Of District	
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:	2 FILER NAME Jay Wiley	3 ACCOUNT # (Ethics Commission Filers)
4 Date 9/25/14	5 Payee name Pay Pal	
6 Amount ($) $1.75	7 Payee address; City; State; Zip Code San Jose, CA	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Fees	(b) Description (If travel outside of Texas, complete Schedule T) Online Transaction ☐ Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

Date 9/25/14	Payee name Pay Pal	
Amount ($) $1.75	Payee address; City; State; Zip Code San Jose, CA	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Fees	Description (If travel outside of Texas, complete Schedule T) Online Transaction ☐ Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

Date 9/25/14	Payee name Pay Pal	
Amount ($) $1.75	Payee address; City; State; Zip Code San Jose, CA	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Fees	Description (If travel outside of Texas, complete Schedule T) Online Transaction ☐ Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

Date 9/25/14	Payee name Pay Pal	
Amount ($) $1.75	Payee address; City; State; Zip Code San Jose, CA	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Fees	Description (If travel outside of Texas, complete Schedule T) Online Transaction ☐ Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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 Candidate/Officeholder/Political Committee
Event Expense	Polling Expense	Travel Out Of District	
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:	2 FILER NAME Jay Wiley	3 ACCOUNT # (Ethics Commission Filers)
4 Date 9/25/14	5 Payee name Pay Pal	
6 Amount ($) $1.03	7 Payee address; City; State; Zip Code San Jose, CA	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Fees	(b) Description (If travel outside of Texas, complete Schedule T) Online Transaction ☐ Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

Date 9/25/14	Payee name Pay Pal	
Amount ($) $7.55	Payee address; City; State; Zip Code San Jose, CA	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Fees	Description (If travel outside of Texas, complete Schedule T) Online Transaction ☐ Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

Date ~~9/25~~	Payee name	
Amount ($) ~~$1.03~~	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T) ☐ Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

Date	Payee name	
Amount ($)	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T) ☐ Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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 Candidate/Officeholder/Political Committee
Event Expense	Polling Expense	Travel Out Of District	
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:

2 FILER NAME: Jay Wiley

3 ACCOUNT # (Ethics Commission Filers):

4 Date	5 Payee name	6 Amount ($)	7 Payee address; City; State; Zip Code	8 PURPOSE OF EXPENDITURE (a) Category (See categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule T)
7/18/14	Local Voice Solutions	$885.00 ☒ Reimbursement from political contributions intended	3700 Thompson Street Austin, TX 78702	Consulting Expense	Data Management ☐ Check if Austin, TX, officeholder living expense
7/21/14	City of Austin Clerk	$500 ☒ Reimbursement from political contributions intended	301 W. 2nd Street Austin, TX 78701	Fees	Ballot Filing Fee ☐ Check if Austin, TX, officeholder living expense
7/30/14	Paragon Printing	$399.59 ☒ Reimbursement from political contributions intended	10423 McKalla Place Austin, TX 78758	Printing	Collateral Materials ☐ Check if Austin, TX, officeholder living expense
8/1/14	Thomas Graphics	$4,000.00 ☒ Reimbursement from political contributions intended	9501 N. IH 35 Austin, TX 78753	Printing	Yard Signs ☐ Check if Austin, TX, officeholder living expense

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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 Candidate/Officeholder/Political Committee
Event Expense	Polling Expense	Travel Out Of District	
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:

2 FILER NAME: Jay Wiley

3 ACCOUNT # (Ethics Commission Filers):

4 Date: 8/1/14

5 Payee name: Local Voice Solutions

6 Amount ($): $450.00

☒ Reimbursement from political contributions intended

7 Payee address; City; State; Zip Code: 3700 Thompson Street Austin, TX 78702

8 PURPOSE OF EXPENDITURE

(a) Category (See categories listed at the top of this schedule): Consulting

(b) Description (If travel outside of Texas, complete Schedule T): Data Management

☐ Check if Austin, TX, officeholder living expense

Date: 8/5/14

Payee name: Borgelt Law

Amount ($): $552.50

☒ Reimbursement from political contributions intended

Payee address; City; State; Zip Code: 614 S. Cap of TX Hwy Austin, TX 78746

PURPOSE OF EXPENDITURE

Category (See categories listed at the top of this schedule): Legal Services

Description (If travel outside of Texas, complete Schedule T): City Code Compliance

☐ Check if Austin, TX, officeholder living expense

Date: 8/5/14

Payee name: Paragon Printing

Amount ($): $458.45

☒ Reimbursement from political contributions intended

Payee address; City; State; Zip Code: 10423 McKalla Place Austin, TX 78758

PURPOSE OF EXPENDITURE

Category (See categories listed at the top of this schedule): Printing

Description (If travel outside of Texas, complete Schedule T): Collateral Materials

☐ Check if Austin, TX, officeholder living expense

Date:

Payee name:

Amount ($):

☐ Reimbursement from political contributions intended

Payee address; City; State; Zip Code:

PURPOSE OF EXPENDITURE

Category (See categories listed at the top of this schedule):

Description (If travel outside of Texas, complete Schedule T):

☐ Check if Austin, TX, officeholder living expense

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED