

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) 00000007	2 PAGE # 1 of 22
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI Jefferson E.		OFFICE USE ONLY Date Received Date Hand-delivered or Date Postmarked Receipt # Amount Date Processed Date Imaged
	NICKNAME LAST SUFFIX Jeb Boyt		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX: APT / SUITE #: CITY: STATE: ZIP CODE 5423 Shoalwood Austin, TX 78756		<div style="writing-mode: vertical-rl; transform: rotate(180deg);"> OCT 6 PM 4 36 RECEIVED AUSTIN CITY CLERK </div>
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Sherri G.		
	NICKNAME LAST SUFFIX Powell		
6 CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE): APT / SUITE #: CITY: STATE: ZIP CODE 1517 Pasadena Austin, TX 78757		
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (512) 656-1461		
8 REPORT TYPE	<input type="checkbox"/> January 15 <input checked="" type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final report (Attach C/OH - FR)		
9 PERIOD COVERED	Month Day Year Month Day Year 07/01/2014 THROUGH 09/25/2014		
10 ELECTION	ELECTION DATE ELECTION TYPE Month Day Year <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input checked="" type="checkbox"/> General <input type="checkbox"/> Special 11/04/2014		
11 OFFICE	OFFICE HELD (if any)		12 OFFICE SOUGHT (if known) City Council District 7
GO TO PAGE 2			

**CANDIDATE / OFFICEHOLDER REPORT:
SUPPORT & TOTALS****FORM C/OH
COVER SHEET PG 2****13 C/OH NAME** Boyt, Jefferson E.**14 ACCOUNT #** (Ethics Commission filers)
00000007**15 NOTICE
FROM
POLITICAL
COMMITTEE(S)**

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

COMMITTEE TYPE☐ **GENERAL**☐ **SPECIFIC****COMMITTEE NAME****COMMITTEE ADDRESS****COMMITTEE CAMPAIGN TREASURER NAME****COMMITTEE CAMPAIGN TREASURER ADDRESS**☐ additional pages**16 CONTRIBUTION
TOTALS**1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN
PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED

\$

1,037.00

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

\$

11,636.00

**EXPENDITURE
TOTALS**

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

\$

177.42

4. TOTAL POLITICAL EXPENDITURES

\$

27,661.62

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

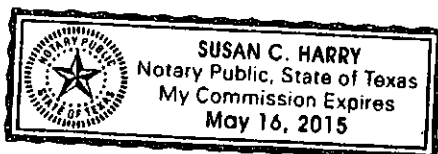
\$

10,302.78

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

\$

10,025.00

17 AFFIDAVITI 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.

AFFIX NOTARY STAMP / SEAL ABOVE

Signature of Candidate or Officeholder

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

Signature of officer administering oath

Print name of officer administering oath

Title of officer administering oath

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 1/11 Report: 3/22

2 FILER NAME Boyt, Jefferson E.

3 ACCOUNT # (Ethics Commission filers)

00000007

4 Date

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

Alam, Jamil

7 Amount of
contribution (\$)8 In-kind contribution
description (if applicable)

09/23/2014

6 Contributor address; City; State; Zip Code

1401 Gaston Ave
Austin, TX 78703-2513

\$350.00

(If travel outside of Texas, complete Schedule T) ☐9 Principal occupation / Job title (See Instructions)
Principal10 Employer (See Instructions)
Endeavor Real Estate

Date

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

Apil, Ali

Amount of
contribution (\$)In-kind contribution
description (if applicable)

08/19/2014

Contributor address; City; State; Zip Code

11900 Stonehollow Dr
Apt 731
Austin, TX 78758-3142

\$150.00

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

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

Beall, Jonathan

Amount of
contribution (\$)In-kind contribution
description (if applicable)

09/24/2014

Contributor address; City; State; Zip Code

2503 Flora Cv
Austin, TX 78746-6902

\$100.00

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

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

Boykin, Cue

Amount of
contribution (\$)In-kind contribution
description (if applicable)

09/10/2014

Contributor address; City; State; Zip Code

3621 Windsor Rd
Austin, TX 78703-1537

\$350.00

(If travel outside of Texas, complete Schedule T) ☐Principal occupation / Job title (See Instructions)
RetiredEmployer (See Instructions)
Retired

Date

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

Boykin, Dorothy

Amount of
contribution (\$)In-kind contribution
description (if applicable)

09/10/2014

Contributor address; City; State; Zip Code

3621 Windsor Rd
Austin, TX 78703-1537

\$350.00

(If travel outside of Texas, complete Schedule T) ☐Principal occupation / Job title (See Instructions)
RetiredEmployer (See Instructions)
Retired

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 2/11 Report: 4/22

2 FILER NAME Boyt, Jefferson E.

3 ACCOUNT # (Ethics Commission filers)

00000007

4 Date

07/25/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Byers, Julie

6 Contributor address; City; State; Zip Code
4516 Balcones Dr
Austin, TX 78731-5220

7 Amount of
contribution (\$)

\$15.00

8 In-kind contribution
description (if applicable)

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

9 Principal occupation / Job title (See Instructions)
retired

10 Employer (See Instructions)
retired

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Byers, Julie

08/10/2014

Contributor address; City; State; Zip Code
4516 Balcones Dr
Austin, TX 78731-5220

Amount of
contribution (\$)

\$335.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
retired

Employer (See Instructions)
retired

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Canaday, Nicholas III

09/21/2014

Contributor address; City; State; Zip Code
4603 Lantana Holw
Austin, TX 78731-3513

Amount of
contribution (\$)

\$200.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Attorney

Employer (See Instructions)
Hanna & Plaut LLP

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Carpenter, James

09/24/2014

Contributor address; City; State; Zip Code
1700 Palisades Pointe Ln
Austin, TX 78738-5351

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Real Estate

Employer (See Instructions)
Carpenter & Associates, Inc.

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Compton, Sean

09/06/2014

Contributor address; City; State; Zip Code
2601 Great Oaks Pkwy
Austin, TX 78756-2909

Amount of
contribution (\$)

\$150.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 3/11 Report: 5/22

2 FILER NAME Boyt, Jefferson E.

3 ACCOUNT # (Ethics Commission filers)

00000007

4 Date

09/25/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Curtis, Matthew

6 Contributor address; City; State; Zip Code
807 Blanco St
Apt 203
Austin, TX 78703-4956

7 Amount of
contribution (\$)

\$200.00

8 In-kind contribution
description (if applicable)

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

9 Principal occupation / Job title (See Instructions)
Director

10 Employer (See Instructions)
Homeaway

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Doty, Hope

09/22/2014

Contributor address; City; State; Zip Code
12202 Antoinette Pl
Austin, TX 78727-5320

Amount of
contribution (\$)

\$250.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Veteran

Employer (See Instructions)
USAF

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Elliott, Chris

08/01/2014

Contributor address; City; State; Zip Code
1705 Rabb Rd
Austin, TX 78704-2811

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Gadbois, Glenn

08/21/2014

Contributor address; City; State; Zip Code
5616 Bull Creek Rd
Austin, TX 78756-1010

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Gadbois, Glenn

09/20/2014

Contributor address; City; State; Zip Code
5616 Bull Creek Rd
Austin, TX 78756-1010

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 4/11 Report: 6/22

2 FILER NAME Boyt, Jefferson E.

3 ACCOUNT # (Ethics Commission filers)

00000007

4 Date

09/25/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Gosselink, Paul

6 Contributor address; City; State; Zip Code
903 W 16th St
Austin, TX 78701-1521

7 Amount of
contribution (\$)

\$100.00

8 In-kind contribution
description (if applicable)

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

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Graham, Lawrence

09/17/2014

Contributor address; City; State; Zip Code
5909 Bull Creek Rd
Austin, TX 78757-3101

Amount of
contribution (\$)

\$150.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Green, Robert

09/10/2014

Contributor address; City; State; Zip Code
3001 Gilbert St
Austin, TX 78703-2219

Amount of
contribution (\$)

\$300.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Professor

Employer (See Instructions)
UT Austin

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Hanna, Anna

09/11/2014

Contributor address; City; State; Zip Code
1111 W. 12th, Unit 116
Austin, TX 78703

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)
food & beverages for
event

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

Principal occupation / Job title (See Instructions)
retired

Employer (See Instructions)
none

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Harding, Annie

09/13/2014

Contributor address; City; State; Zip Code
4428 Gillis St
Austin, TX 78745-1018

Amount of
contribution (\$)

\$250.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Associate Producer

Employer (See Instructions)
Armadillo Christmas Bazaar

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 5/11 Report: 7/22

2 FILER NAME Boyt, Jefferson E.

3 ACCOUNT # (Ethics Commission filers)

00000007

4 Date

08/22/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Hatfield, Theodore

6 Contributor address; City; State; Zip Code
2104 Cullen Ave
Apt 219
Austin, TX 78757-2454

7 Amount of
contribution (\$)

\$100.00

8 In-kind contribution
description (if applicable)

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

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Hayden, Tim

09/16/2014

Contributor address; City; State; Zip Code
6702 Hardy Dr
Austin, TX 78757-2822

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Heffington, John

08/25/2014

Contributor address; City; State; Zip Code
3101 White Rock Dr
Austin, TX 78757-4441

Amount of
contribution (\$)

\$199.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Hoover, Joseph

08/22/2014

Contributor address; City; State; Zip Code
4203 N Hills Dr
Austin, TX 78731-2827

Amount of
contribution (\$)

\$200.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Owner

Employer (See Instructions)
Joseph Hoover Co

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Jackson, Keith

09/25/2014

Contributor address; City; State; Zip Code
504 E 42nd St
Austin, TX 78751-4302

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Engineer

Employer (See Instructions)
RS&H, Inc.

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 6/11 Report: 8/22

2 FILER NAME Boyt, Jefferson E.

3 ACCOUNT # (Ethics Commission filers)

00000007

4 Date

09/23/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Jamieson, Mark

6 Contributor address; City; State; Zip Code
1803 Stone Ridge Cir
Austin, TX 78746-7809

7 Amount of contribution (\$)

\$100.00

8 In-kind contribution description (if applicable)

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

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

07/14/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Knight, Robert

Contributor address; City; State; Zip Code
307 E 2nd St
Austin, TX 78701-4011

Amount of contribution (\$)

\$350.00

In-kind contribution description (if applicable)

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

Principal occupation / Job title (See Instructions)
Realtor

Employer (See Instructions)
Knight Real Estate

Date

09/01/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Knorp, Darren

Contributor address; City; State; Zip Code
5350 Burnet Rd
Apt 129
Austin, TX 78756-2050

Amount of contribution (\$)

\$100.00

In-kind contribution description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

08/24/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Krueger, Karen

Contributor address; City; State; Zip Code
623 Elm Ave
Takoma Park, MD 20912-5431

Amount of contribution (\$)

\$350.00

In-kind contribution description (if applicable)

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

Principal occupation / Job title (See Instructions)
Office Manager

Employer (See Instructions)
Zinn Chiropractic

Date

09/23/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Lee, Mark

Contributor address; City; State; Zip Code
508 Zennia St
Austin, TX 78751-1932

Amount of contribution (\$)

\$200.00

In-kind contribution description (if applicable)

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

Principal occupation / Job title (See Instructions)
Manager

Employer (See Instructions)
LCRA

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 7/11 Report: 9/22

2 FILER NAME Boyt, Jefferson E.

3 ACCOUNT # (Ethics Commission filers)

00000007

4 Date

09/22/2014

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

Meyer, Tory

6 Contributor address; City; State; Zip Code

1108 Exton Cv
Austin, TX 78733-3429

7 Amount of
contribution (\$)

\$100.00

8 In-kind contribution
description (if applicable)

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

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

09/23/2014

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

Miller, Bryce

Contributor address; City; State; Zip Code

221 W 6th St
Ste 1300
Austin, TX 78701-3415

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Principal

Employer (See Instructions)
Endeavor Real Estate

Date

09/25/2014

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

Minors, Steve

Contributor address; City; State; Zip Code

4006 S Lamar Blvd
Austin, TX 78704-8802

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

09/11/2014

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

Morrison, Dick

Contributor address; City; State; Zip Code

1111 W. 12th, Unit 116
Austin, TX 78703

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)
food & beverages for
event

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

Principal occupation / Job title (See Instructions)
attorney

Employer (See Instructions)
self

Date

09/05/2014

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

Mullins, Alise

Contributor address; City; State; Zip Code

1502 Garner Ave
Austin, TX 78704-2849

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 8/11 Report: 10/22

2 FILER NAME Boyt, Jefferson E.

3 ACCOUNT # (Ethics Commission filers)

00000007

4 Date

09/22/2014

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

Myer, Thomas

6 Contributor address; City; State; Zip Code

12202 Antoinette Pl

Austin, TX 78727-5320

7 Amount of
contribution (\$)

\$250.00

8 In-kind contribution
description (if applicable)

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

9 Principal occupation / Job title (See Instructions)
Consultant

10 Employer (See Instructions)
Triple Dog Dare Media

Date

08/21/2014

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

OConnor, Brendan

Contributor address; City; State; Zip Code

4214 Avenue C

Austin, TX 78751-3707

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

09/25/2014

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

O'Keefe, Jacqueline

Contributor address; City; State; Zip Code

5413 Shoalwood Ave

Austin, TX 78756-1619

Amount of
contribution (\$)

\$200.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Owner

Employer (See Instructions)
Gone to Seed

Date

09/25/2014

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

Patterson, Angie Hartel

Contributor address; City; State; Zip Code

4800 W Frances Pl

Austin, TX 78731-5528

Amount of
contribution (\$)

\$200.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Investment management

Employer (See Instructions)
Liberty Clyde Partnership, Ltd.

Date

09/18/2014

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

Riggs, Jennifer

Contributor address; City; State; Zip Code

PO Box 280

Austin, TX 78767-0280

Amount of
contribution (\$)

\$250.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Attorney

Employer (See Instructions)
Riggs Aleshire & Ray P.C.

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.				1 PAGE # Schedule: 9/11 Report: 11/22	
2 FILER NAME Boyt, Jefferson E.				3 ACCOUNT # (Ethics Commission filers) 00000007	
4 Date 07/30/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Schwartz, Aaron		7 Amount of contribution (\$) \$150.00	8 In-kind contribution description (if applicable)	
6 Contributor address; City; State; Zip Code 1122 Colorado St Apt 2102 Austin, TX 78701-2142			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
9 Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)		
Date 09/11/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Shipman, Bob		Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code 2985 Highway 39 Hunt, TX 78024-3415			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions) retired			Employer (See Instructions) Hanscomb, Faithful & Gould		
Date 09/22/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Siff, Ted		Amount of contribution (\$) \$150.00	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code 604 W 11th St Austin, TX 78701-2007			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date 09/03/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Simpler, Jeff		Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code 1408 Patterson Rd Austin, TX 78733-6503			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date 09/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Stallings, Robin		Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code 2208 Santa Rosa St Austin, TX 78702-4628			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions) Executive Director			Employer (See Instructions) BikeTexas		

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 10/11 Report: 12/22

2 FILER NAME Boyt, Jefferson E.

3 ACCOUNT # (Ethics Commission filers)

00000007

4 Date

09/23/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Stuart, Donald

6 Contributor address; City; State; Zip Code
4105 Long Champ Dr
Austin, TX 78746-1150

7 Amount of contribution (\$)

\$100.00

8 In-kind contribution description (if applicable)

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

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Tomlinson, Mykle

09/25/2014

Contributor address; City; State; Zip Code
5102 Delores Ave
Austin, TX 78721-2110

Amount of contribution (\$)

\$100.00

In-kind contribution description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Wilkins, Timothy

09/18/2014

Contributor address; City; State; Zip Code
4610 Via Media
Austin, TX 78746-2444

Amount of contribution (\$)

\$100.00

In-kind contribution description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Williams, Talley

09/25/2014

Contributor address; City; State; Zip Code
8209 Dark Ridge Cv
Austin, TX 78737-3511

Amount of contribution (\$)

\$100.00

In-kind contribution description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Wimberley, Lane

09/25/2014

Contributor address; City; State; Zip Code
4810 Shoal Creek Blvd
Austin, TX 78756-2813

Amount of contribution (\$)

\$100.00

In-kind contribution description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The **INSTRUCTION GUIDE** explains how to complete this form.

1 PAGE #

Schedule: 11/11 Report: 13/22

2 FILER NAME Boyt, Jefferson E.

3 ACCOUNT # (Ethics Commission filers)

00000007

4 Date

09/24/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Wolff, David

6 Contributor address; City; State; Zip Code
1206 W 8th St
Austin, TX 78703-5279

7 Amount of contribution (\$)

\$100.00

8 In-kind contribution description (if applicable)

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

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Woods Martin, Patsy

09/25/2014

Contributor address; City; State; Zip Code
PO Box 5543
Austin, TX 78763-5543

Amount of contribution (\$)

\$350.00

In-kind contribution description (if applicable)

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

Principal occupation / Job title (See Instructions)
Executive Director

Employer (See Instructions)
Annie's List

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Woody, Bob

09/25/2014

Contributor address; City; State; Zip Code
504B Trinity St
Austin, TX 78701-3714

Amount of contribution (\$)

\$100.00

In-kind contribution description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
YStrategy, LLC

09/04/2014

Contributor address; City; State; Zip Code
3010 Manor Rd.
Austin, TX 78723

Amount of contribution (\$)

\$350.00

In-kind contribution description (if applicable)
phone calls

(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# _____)
Zirih, John

08/19/2014

Contributor address; City; State; Zip Code
4025 Duval Rd
Apt 2635
Austin, TX 78759-3440

Amount of contribution (\$)

\$100.00

In-kind contribution description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

LOANS**SCHEDULE E**

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 1/1 Report: 14/22	
2 FILER NAME Boyt, Jefferson E.		3 ACCOUNT # (Ethics Commission filers) 00000007	
4 TOTAL OF UNITEMIZED LOANS: ⇄⇄⇄⇄⇄⇄		\$	
5 Date of loan 09/03/2014	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID# _____) Boyt, Jefferson		9 Loan Amount (\$) \$5,000.00
6 Is lender a financial institution? No	8 Lender address; City; State; Zip Code 5423 Shoalwood Austin, TX 78756		10 Interest rate
			11 Maturity date 11/04/2014
12 Principal occupation / Job title (See Instructions)		13 Employer (See Instructions)	
14 Description of Collateral <input checked="" type="checkbox"/> none		15 Check if personal funds were deposited into political account <input checked="" type="checkbox"/>	
16 GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	17 Name of guarantor 18 Guarantor address; City; State; Zip Code		19 Amount Guaranteed (\$)
20 Principal Occupation		21 Employer	

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

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 1/7 Report: 15/22		2 FILER NAME Boyt, Jefferson E.		3 ACCOUNT # (TEC filers) 00000007	
4 Date 09/11/2014		5 Payee name 34th Street Catering of Austin			
6 Amount (\$) \$223.16		7 Payee address City: State: Zip Code 1013 W. 34th St. Austin, TX 78705			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Event Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Food & beverage for event <input type="checkbox"/> 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 07/22/2014		Payee name Allandale Neighborhood Association			
Amount (\$) \$232.00		Payee address City: State: Zip Code 2212 White Horse Trail Austin, TX 78757			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Political print adversiting <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 09/25/2014		Payee name Austin AFL-CIO Council			
Amount (\$) \$215.00		Payee address City: State: Zip Code PO Box 87 Austin, TX 78767			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Political print adversiting <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 08/12/2014		Payee name Checkmark Typesetting			
Amount (\$) \$3,177.32		Payee address City: State: Zip Code 3217 N. IH 35 Austin, TX 78722			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Printing Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> printing and yardsigns <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	

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

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 2/7 Report: 16/22		2 FILER NAME Boyt, Jefferson E.		3 ACCOUNT # (TEC filers) 00000007	
4 Date 07/03/2014		5 Payee name First Data Merchant Services			
6 Amount (\$) \$15.90		7 Payee address City: State: Zip Code 5565 Glenridge Connector NE 30342			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Accounting/Banking		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> credit card processing fees <input type="checkbox"/> 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 07/03/2014		Payee name First Data Merchant Services			
Amount (\$) \$76.49		Payee address City: State: Zip Code 5565 Glenridge Connector NE 30342			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Accounting/Banking		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> credit card processing fees <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 07/03/2014		Payee name First Data Merchant Services			
Amount (\$) \$97.51		Payee address City: State: Zip Code 5565 Glenridge Connector NE 30342			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Accounting/Banking		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> credit card processing fees <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 08/04/2014		Payee name First Data Merchant Services			
Amount (\$) \$11.40		Payee address City: State: Zip Code 5565 Glenridge Connector NE 30342			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Accounting/Banking		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> credit card processing fees <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	

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

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 3/7 Report: 17/22		2 FILER NAME Boyt, Jefferson E.		3 ACCOUNT # (TEC filers) 00000007	
4 Date 08/04/2014	5 Payee name First Data Merchant Services				
6 Amount (\$) \$26.98	7 Payee address City; State; Zip Code 5565 Glenridge Connector NE 30342				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> credit card processing fees		
	<input type="checkbox"/> 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 08/04/2014	Payee name First Data Merchant Services				
Amount (\$) \$108.20	Payee address City; State; Zip Code 5565 Glenridge Connector NE 30342				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Accounting/Banking		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> credit card processing fees		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 09/03/2014	Payee name First Data Merchant Services				
Amount (\$) \$7.00	Payee address City; State; Zip Code 5565 Glenridge Connector NE 30342				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Accounting/Banking		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> credit card processing fees		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 09/03/2014	Payee name First Data Merchant Services				
Amount (\$) \$15.72	Payee address City; State; Zip Code 5565 Glenridge Connector NE 30342				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> credit card processing fees		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:

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

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 4/7 Report: 18/22		2 FILER NAME Boyt, Jefferson E.		3 ACCOUNT # (TEC filers) 00000007	
4 Date 09/03/2014		5 Payee name First Data Merchant Services			
6 Amount (\$) \$55.47		7 Payee address City; State; Zip Code 5565 Glenridge Connector NE 30342			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Accounting/Banking		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> credit card processing fees <input type="checkbox"/> 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 07/02/2014		Payee name NGP Van, Inc.			
Amount (\$) \$150.00		Payee address City; State; Zip Code 1105 15th Street NW, Ste. 500 Washington, DC 20005			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> database software <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name Office sought: Office held:			
Date 08/04/2014		Payee name NGP Van, Inc.			
Amount (\$) \$150.00		Payee address City; State; Zip Code 1105 15th Street NW, Ste. 500 Washington, DC 20005			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> database software <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name Office sought: Office held:			
Date 09/02/2014		Payee name NGP Van, Inc.			
Amount (\$) \$150.00		Payee address City; State; Zip Code 1105 15th Street NW, Ste. 500 Washington, DC 20005			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> database software <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name Office sought: Office held:			

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

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 5/7 Report: 19/22		2 FILER NAME Boyt, Jefferson E.		3 ACCOUNT # (TEC filers) 00000007	
4 Date 09/25/2014	5 Payee name Rick's Refills				
6 Amount (\$) \$108.25	7 Payee address City: State: Zip Code 6800 West Gate Blvd. #133 Austin, TX 78745				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> office supplies <input type="checkbox"/> 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 07/01/2014	Payee name Susan Harry Consulting, LLC				
Amount (\$) \$450.00	Payee address City: State: Zip Code P.O. Box 301074 Austin, TX 78703				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Compliance consulting <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 07/01/2014	Payee name Susan Harry Consulting, LLC				
Amount (\$) \$1,325.00	Payee address City: State: Zip Code P.O. Box 301074 Austin, TX 78703				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Fundraising & compliance consulting <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 08/01/2014	Payee name Susan Harry Consulting, LLC				
Amount (\$) \$1,325.00	Payee address City: State: Zip Code P.O. Box 301074 Austin, TX 78703				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Fundraising & compliance consulting <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:

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

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 6/7 Report: 20/22		2 FILER NAME Boyt, Jefferson E.		3 ACCOUNT # (TEC filers) 00000007	
4 Date 07/24/2014		5 Payee name Worley Printing			
6 Amount (\$) \$423.80		7 Payee address City; State; Zip Code 3217 North IH 35 Austin, TX 78722			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Printing Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> printing <input type="checkbox"/> 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 07/01/2014		Payee name YStrategy			
Amount (\$) \$8,000.00		Payee address City; State; Zip Code 3010 Manor Rd. Austin, TX 78723			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Consulting Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> General consulting <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 08/01/2014		Payee name YStrategy			
Amount (\$) \$4,000.00		Payee address City; State; Zip Code 3010 Manor Rd. Austin, TX 78723			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Consulting Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> General consulting <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 08/04/2014		Payee name YStrategy			
Amount (\$) \$1,425.00		Payee address City; State; Zip Code 3010 Manor Rd. Austin, TX 78723			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Printing Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Printing <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 7/7 Report: 21/22		2 FILER NAME Boyt, Jefferson E.		3 ACCOUNT # (TEC filers) 00000007
4 Date 09/04/2014	5 Payee name YStrategy			
6 Amount (\$) \$4,000.00	7 Payee address City: State: Zip Code 3010 Manor Rd. Austin, TX 78723			
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) <input type="checkbox"/> General consulting	
			<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Office sought: Office held:			

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 1/1 Report: 22/22		2 FILER NAME Boyt, Jefferson E.		3 ACCOUNT # (TEC filers) 00000007
4 Date 09/18/2014	5 Payee name Postmaster			
6 Amount (\$) \$1,715.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address City; State; Zip Code Northcross Station Austin, TX 78757			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> postage	
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense			

PERSONAL FUNDS - LOANS AND EXPENDITURES

This report is for a candidate or officeholder who loans personal funds to his or her campaign or makes expenditures from personal funds in support of his or her campaign. The amounts loaned or expended shall be reported as follows.

Beginning on the date an individual becomes a candidate in a City election and continuing until midnight on the tenth day before a City election, a candidate shall report the new loans or expenditures cumulating to \$25,000 or more within seven business days after the total reaches \$25,000. Additional loans or expenditures cumulating \$25,000 or more shall be reported within seven business days each time the total reaches \$25,000. [City Code, Section 2-2-27(A)(1)]

If the loans or expenditures cumulating to \$25,000 or more occur during the period beginning on midnight on the 10th day before an election and ending at midnight on the day before the election, the report shall be filed with the City Clerk within twenty-four hours after the total reaches \$25,000. Additional loans or expenditures totaling \$25,000 or more shall be reported within twenty-four hours each time the total reaches \$25,000. [City Code, Section 2-2-27(A)(2)]

Name of candidate/officeholder: **Jefferson "Jeb" Boyt**

Reporting Period:

- ☐ First day of candidacy – Midnight on the 10th day prior to City election
- ☐ Midnight on the 10th day before City election – Midnight on the day before election

Enter the following information concerning loans of personal funds to the campaign:

Amount of loan	Date of loan
\$5,000	6-30-14
\$25	4-24-14
\$5,000	9-3-14
\$18,000	9-30-14

Enter the following information concerning the person or persons to whom expenditures were made from personal funds and the total amount, purpose and date of each expenditure:

Name	Street Address	Amount	Purpose	Date
Postmaster	Northcross Station, Austin, TX 78757	\$1715	Postage	9-18-14

SCHEDULE ATX. 2

Reference § 2-2-27, Austin City Code

STATE OF TEXAS

VERIFICATION

I swear that the preceding disclosure of loans and expenditures from personal funds of a candidate or officeholder filed herewith is in all things true and correct and fully shows all information required to be reported by me pursuant to City Code, Section 2-2-27 for the reporting period indicated.



Signature of Candidate/Officeholder