CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction Guil	DE explains how to complete this form.	1 ACCOUNT # (Ethics Commission filers) 00000007	2 PAGE # 1 of 15	
3 CANDIDATE / OFFICEHOLDER NAME	MS/MRS/MR FIRST Jefferson E.	MI	OFFICE USE ONLY Date Received	
	NICKNAME LAST Jeb Boyt	SUFFIX		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; APT / SUITE #; 5423 Shoalwood	CITY; STATE; ZIP CODE	Date Hand-delivered of Date Postmand d	
Change of Address	Austin, TX 78756		N CIT	
5 0447041041	FIRST FOR THE PROPERTY OF THE		Receipt #	
5 CAMPAIGN TREASURER	MS/MRS/MR FIRST Sherri G.	MI	Date Processed	
NAME	nickname Last Powell	SUFFIX	Date Imaged	
6 CAMPAIGN TREASURER ADDRESS (Residence or business)	street address (no po box please); apt 1517 Pasadena Austin, TX 78757	'/SUITE#; CITY; STATE;	ZIP CODE	
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER (512) 656-1461	EXTENSION		
8 REPORT TYPE	January 15 30th day before	election X Runoff	15th day after campaign treasurer appointment (officeholder only)	
	July 15 8th day before 6	election Exceeded \$500 limit	Final report (Attach C/OH - FR)	
9 PERIOD COVERED	Month Day Year	Month Day	Year	
	10/26/2014	12/06/20	14	
10 ELECTION	ELECTION DATE ELECTION Month Day Year Pr	ON TYPE rimary X Runoff	General Special	
11 OFFICE	OFFICE HELD (if any)	12 OFFICE SOUGHT (If known City Council, District		
GO TO PAGE 2				

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET BG 2

SUPPORT	IUIALS		COVE	R SHEET PG Z		
13 C/OH NAME Boyt,	Jefferson E.		14 ACCOUNT # 00000007	(Ethics Commission filers)		
15 NOTICE FROM	This box is for notice of political expenditures by political committees to support the candidate / have been made without the candidate's or officeholder's knowledge or consent. Candidates and o information only if they receive notice of such expenditures					
POLITICAL COMMITTEE(S)	COMMITTEE TYPE	COMMITTEE NAME				
	GENERAL GENERAL	COMMITTEE ADDRESS				
	SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME				
additional pages		COMMITTEE CAMPAIGN TREASURER ADDRESS				
16 CONTRIBUTION TOTALS		POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN ES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$	710.00		
		POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	12,132.00		
EXPENDITURE TOTALS	3. TOTAL	POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZ	\$	0.00		
	4. TOTAL	POLITICAL EXPENDITURES	\$	9,245.10		
CONTRIBUTION BALANCE		POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE AY OF THE REPORTING PERIOD	\$	19,759.99		
OUTSTANDING LOAN TOTALS		PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE AY OF THE REPORTING PERIOD	\$	38,025.00		
17 AFFIDAVIT	17 AFFIDAVIT					
		I swear, or affirm, under penalt is true and correct and includes me under Title 15, Election Cod	all information req			
SUSAN C. HARRY Notary Public, State of Texas My Commission Expires May 16, 2015						
Signature/of/Candidate of Officeholder						
AFFIX NOTARY STAMP / SEAL ABOVE						
Sworn to and subscrib		he said	, this the _	<u> </u>		
Susan Harry Notarn						
Signature of efficer adm	inistering oath	Print name of officer administering oath	Title of officer adr	ninistering oath		

The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 1/9	9 Report: 3/15
2 FILER NAME	Boyt, Jefferson E.		3 ACCOUNT # 00000007	(Ethics Commission filers)
4 Date	5 Full name of contributor ☐ out-of-state PAC (ID≇ Ahmadi, Sean	y)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
11/09/2014	6 Contributor address; City; State; Zip Code 2011 Meadowridge Dr		\$150.00	
	Austin, TX 78704-3933		(If travel outside of	Texas, complete Schedule T)
9 Principal occup	pation / Job title (See Instructions)	10 Employer (See In:	structions)	
Date	Full name of contributor	;)	Amount of contribution (\$)	In-kind contribution description (if applicable)
11/11/2014	Contributor address; City; State; Zip Code 4107 Medical Pkwy Ste 100		\$350.00	
	Austin, TX 78756-3736		(If travel outside of	Texas, complete Schedule T)
Principal occup	Dation / Job title (See Instructions)	Employer (See In		
Date	Full name of contributor	¥)	Amount of contribution (\$)	In-kind contribution description (if applicable)
12/04/2014	Contributor address; City, State; Zip Code 4106 Medical Pkwy Austin, TX 78756-3722		\$350.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions)	Employer (See Ins	structions)	
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
12/02/2014	Contributor address; City; State; Zip Code 3917 Threadgill St Austin, TX 78723-4506		\$100.00	
Dringing oncu	pation / Job title (See Instructions)	Employer (See Ins	•	Texas, complete Schedule T)
Frincipal occup	Jation / Job line (See Instructions)	Employer (See IIIs	siructions)	
Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
11/20/2014	Contributor address; City; State; Zip Code 7140 Chimney Cors Austin, TX 78731-2100		\$100.00	
	<u></u>	<u></u>		Texas, complete Schedule T)
Principal occur	pation / Job title (See Instructions)	Employer (See Ins	structions)	

Texas Ethics Commission P.O.Box 12070 Austin, Texas 78711-2070 (512)463-5800 TDD 1-800-735-2989

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

	The Instruction	on Guide explains how to con	nplete this form.		1 PAGE # Schedule: 2/9	9 Report: 4/15
2	FILER NAME	Boyt, Jefferson E.			3 ACCOUNT# 00000007	(Ethics Commission filers)
4	Date	5 Full name of contributor Beuerlein, Steve	☐ out-of-state PAC (ID#	‡)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	11/13/2014	6 Contributor address; 801 W 38th St Ste 301 Austin, TX 78705-1169	City; State; Zip Code		\$100.00	! ! !
		743411, 12 70703-1103			(If travel outside of	Texas, complete Schedule T)
9	Principal occup	pation / Job title (See Instruction	ns)	10 Employer (See In	structions)	
	Date	Full name of contributor Boyt, Elizabeth	out-of-state PAC (ID#	‡)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/13/2014	Contributor address; 7606 Grove Crest Cir Austin, TX 78736-1902	City; State; Zip Code		\$350.00	
					(If travel outside of	Texas, complete Schedule T)
	Principal occup retired	pation / Job title (See Instruction	ns)	Employer (See In none	structions)	
	Date	Full name of contributor Boyt, Lila	☐ out-of-state PAC (ID#	‡)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/07/2014	Contributor address; PO Box 90127 Austin, TX 78709-0127	City; State; Zip Code		\$350.00	{
				<u>. </u>	1	Texas, complete Schedule T)
	Principal occup homemaker	pation / Job title (See Instruction	ns)	Employer (See In none	structions)	
	Date	Full name of contributor Boyt, Mark	☐ out-of-state PAC (ID#	;)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/07/2014	Contributor address; PO Box 90127 Austin, TX 78709-0127	City; State; Zip Code		\$350.00	F
						Texas, complete Schedule T)
	Principal occup Petroleum La	pation / Job title (See Instruction Indman	ns)	Employer (See In BBX Operating,		
	Date	Full name of contributor Boyt, P.	out-of-state PAC (ID#	·)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/13/2014	Contributor address; 7606 Grove Crest Cir Austin, TX 78736-1902	City; State; Zip Code		\$350.00	! [[
L						Texas, complete Schedule T)
	Principal occup Child Safety S	oation / Job title (See Instruction Specialist	ns}	Employer (See In City of Austin	structions)	

TDD 1-800-735-2989

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

The Instruction	אס Guide explains how to complete this form.		1 PAGE # Schedule: 3/9	9 Report: 5/15
2 FILER NAME	Boyt, Jefferson E.		3 ACCOUNT# 00000007	(Ethics Commission filers)
4 Date	5 Full name of contributor ut-of-state PAC (ID# Bullerman, Julie (Mr.))	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
11/09/2014	6 Contributor address; City; State; Zip Code 2011 Meadowridge Dr # B Austin, TX 78704-3933		\$350.00	
			(If travel outside of	Texas, complete Schedule T)
9 Principal occup IT Director	ation / Job title (See Instructions)	10 Employer (See In: USA Compress		
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
10/31/2014	Contributor address; City; State; Zip Code 6511 Hillside Hollow Dr Austin, TX 78750-8100		\$100.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	
Date	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable)
11/08/2014	Contributor address; City; State; Zip Code 4603 Lantana Holw Austin, TX 78731-3513		\$350.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occup Project Mana	ation / Job title (See Instructions) ger	Employer (See In Texas Workford	,	
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
11/08/2014	Contributor address; City; State; Zip Code 4603 Lantana Holw Austin, TX 78731-3513		\$350.00	
				Texas, complete Schedule T)
Attorney	ation / Job title (See Instructions)	Employer (See In: Hanna & Plaut I		
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
11/06/2014	Contributor address; City; State; Zip Code 2600 Pegram Ave Austin, TX 78757-2345		\$100.00	
				Texas, complete Schedule T)
Principal occup	eation / Job title (See Instructions)	Employer (See Ins	structions)	

SCHEDULE A

TDD 1-800-735-2989

-	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE#	Donati 6/45
2	FILER NAME	Boyt, Jefferson E.		3 ACCOUNT # 00000007	Report: 6/15 (Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Cody, Buck)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	10/30/2014	6 Contributor address; City; State; Zip Code 5708 Highland Hills Dr Austin, TX 78731-4233		\$100.00	
				(If travel outside of	Texas, complete Schedule T)
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/15/2014	Contributor address; City; State; Zip Code 2601 Great Oaks Pkwy Austin, TX 78756-2909		\$150.00]
		Austin, 12 76756-2909		(If traval autoido of	Texas, complete Schedule T)
	Principal occur	ation / Job title (See Instructions)	Employer (See In	L	Texas, complete Schedule 17
	T Titl Sipat Coop		Employor (cco in		
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/10/2014	Contributor address; City; State; Zip Code 4809 Woodview Ave Austin, TX 78756-2824		\$350.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In:	<u> </u>	Texas, complete series of 17
		sial Professional	Computer Hard		
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/14/2014	Contributor address; City; State; Zip Code 1016 Wild Basin Ledge Austin, TX 78746		\$350.00	i
				(If travel outside of	Texas, complete Schedule T)
-	Principal occup Engineer	ation / Job title (See Instructions)	Employer (See In: BAE Systems	structions)	
-	Date	Full name of contributor ut-of-state PAC (ID# Dunaway, Aspen)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/12/2014	Contributor address; City; State; Zip Code 1108 Lavaca St Suite 110 PO Box 103		\$100.00	
		Austin, TX 78701-2172			·
	Dringing!	ation / Joh title /Con Instructions	Emeteres (Co 1	· ·	Texas, complete Schedule T)
	-поправоссир	ation / Job title (See Instructions)	Employer (See In:	structions)	

SCHEDULE A

TDD 1-800-735-2989

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	The Instruction	אס Guide explains how to comp	lete this form.	·	1 PAGE # Schedule: 5/	9 Report: 7/15
2	FILER NAME	Boyt, Jefferson E.			3 ACCOUNT# 00000007	(Ethics Commission filers)
4	Date	5 Full name of contributor { Hoover, Joseph	out-of-state PAC (ID#	‡)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	11/24/2014	6 Contributor address; C 4203 N Hills Dr Austin, TX 78731-2827	City; State; Zip Code		\$200.00	
9	Principal occup Real Estate	eation / Job title (See Instructions	.)	10 Employer (See In Joseph Hoover	structions)	Texas, complete Schedule T)
	Date	Full name of contributor 【 Joslove, Scott	☐ out-of-state PAC (ID#	;)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/06/2014	Contributor address; C 2803 Clearview Dr Austin, TX 78703-2844	City; State; Zip Code		\$200.00	
					(If travel outside of	Texas, complete Schedule T)
	Principal occup President + C	ation / Job title (See Instructions EO)	Employer (See In Texas Hotel & L	,	· · · · · · · · · · · · · · · · · · ·
	Date	Full name of contributor 【 Keating, Heather	□ out-of-state PAC (ID#	<i>‡</i>)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/02/2014	Contributor address; C 2604 Stratford Dr Austin, TX 78746-4623	City; State; Zip Code		\$350.00	
					(If travel outside of	Texas, complete Schedule T)
	Principal оссир Оwпег	ation / Job title (See Instructions)	Employer (See In Granite ranch e		
	Date	Full name of contributor 【 Kim, Paul	out-of-state PAC (ID#	<i>‡</i>)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/21/2014	Contributor address; C 10524 Roy Butler Dr Austin, TX 78717-3905	City; State; Zip Code		\$200.00	
					(If travel outside of	Texas, complete Schedule T)
	Principal occup CEO	ation / Job title (See Instructions)	Employer (See In ATX Environme		
	Date	Full name of contributor 【 Kittleson, Susan	□ out-of-state PAC (ID#	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/05/2014	Contributor address; C 6212 Northern Dancer Dr Austin, TX 78746-2109	City; State; Zip Code		\$72.00	ı [.]
					(If travel outside of	Texas, complete Schedule T)
\vdash	Principal occup	ation / Job title (See Instructions)	Employer (See In	1	· · · · · · · · · · · · · · · · · · ·

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	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE#	9 Report: 8/15
2	FILER NAME	Boyt, Jefferson E.		3 ACCOUNT # 00000007	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# LeBlanc, Ellen	!)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	11/16/2014	6 Contributor address; City; State; Zip Code 823 Congress Ave Ste 1111 Austin, TX 78701-2401		\$350.00	Texas, complete Schedule T)
				•	rexes, complete confederation (
9	Principal occur muscian	pation / Job title (See Instructions)	10 Employer (See In self	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/16/2014	Contributor address; City; State; Zip Code 823 Congress Ave Ste 1111		\$350.00	
		Austin, TX 78701-2401		((64,00,00) 0,040,040,06	Texas, complete Schedule T)
<u> </u>				`	Texas, complete Schedule 1)
	Principal occus Investments	pation / Job title (See Instructions)	Employer (See In CapRidge Partr		
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/30/2014	Contributor address; City; State; Zip Code 3502 Lost Creek Blvd Austin, TX 78735-1506		\$350.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Real Estate	pation / Job title (See Instructions)	Employer (See In Land Strategies		
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/06/2014	Contributor address; City; State; Zip Code 1604 Cliffwood Dr Austin, TX 78733-1501		\$350.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup NA	pation / Job title (See Instructions)	Employer (See In NA	structions)	
-	Date	Full name of contributor ut-of-state PAC (ID# Marsh, Charles)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/05/2014	Contributor address; City; State; Zip Code 2408 Windsor Rd Austin, TX 78703-2413		\$350.00	!
				(If travel outside of	Texas, complete Schedule T)
\vdash	Principal assure	nation / Joh title (Con Instructions)	Employer /Co- I-	<u> </u>	
	Managing Pri	pation / Job title (See Instructions) incipal	Employer (See In Endeavor Real	· ·	

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The Instruction	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 7/9	9 Report: 9/15
2 FILER NAME	Boyt, Jefferson E.		3 ACCOUNT # 00000007	(Ethics Commission filers)
4 Date	5 Full name of contributor	¥) ·	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
11/04/2014	6 Contributor address; City; State; Zip Code 2402 Rockmoor Ave Austin, TX 78703-1517		\$250.00	
			(If travel outside of	Texas, complete Schedule T)
9 Principal occur Attorney	pation / Job title (See Instructions)	10 Employer (See In McLean & How		
Date	Full name of contributor	¥)	Amount of contribution (\$)	In-kind contribution description (if applicable)
11/04/2014	Contributor address; City; State; Zip Code 2402 Rockmoor Ave Austin, TX 78703-1517	• • • • • • • • • • • • • • • • • • • •	\$250.00	
			1	Texas, complete Schedule T)
Principal occup Broker	pation / Job title (See Instructions)	Employer (See In Land Advisors (
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
11/08/2014	Contributor address; City; State; Zip Code 5409 Woodrow Ave		\$150.00	
	Apt C Austin, TX 78756-2157		(If travel outside of	Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions)	Employer (See In	structions)	
Date	Full name of contributor	‡)	Amount of contribution (\$)	In-kind contribution description (if applicable)
10/29/2014	Contributor address; City; State; Zip Code 2908 Sparkling Brook Ln Austin, TX 78746-1987		\$350.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occup Real Estate	pation / Job title (See Instructions)	Employer (See In Endeavor Real		
Date	Full name of contributor	1)	Amount of contribution (\$)	In-kind contribution description (if applicable)
10/29/2014	Contributor address; City; State; Zip Code 2908 Sparkling Brook Ln Austin, TX 78746-1987		\$350.00	
			(If travel enteride -f	Texas, complete Schedule T)
Principal occup homemaker	pation / Job title (See Instructions)	Employer (See In: none		renda, complete achedule 1/

	The Instruction	ON GUIDE explains how to complete this fo	orm.		1 PAGE # Schedule: 8/9	9 Report: 10/15
2	FILER NAME	Boyt, Jefferson E.			3 ACCOUNT # 00000007	(Ethics Commission filers)
4	Date	5 Full name of contributor	tate PAC (ID#	<u> </u>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	11/13/2014	6 Contributor address; City; State PO Box 91055 Austin, TX 78709-1055			\$100.00	
					(If travel outside of	Texas, complete Schedule T)
9	Principal occup	ation / Job title (See Instructions)		10 Employer (See In	structions)	
	Date	Full name of contributor	tate PAC (ID#	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/26/2014	Contributor address; City; State 98 San Jacinto Blvd Ste 510	; Zip Code		\$350.00	
		Austin, TX 78701-4284			(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)		Employer (See In:	structions)	
	Date	Full name of contributor	tate PAC (ID#	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/11/2014	Contributor address; City; State 6220 W 3rd St Apt 401	; Zìp Code		\$350.00	
		Los Angeles, CA 90036-3172			(If travel outside of	Texas, complete Schedule T)
	Principal occup Real Estate	ation / Job title (See Instructions)		Employer (See Ins Sackman Enter		
	Date	Full name of contributor	tate PAC (ID#	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/21/2014	Contributor address; City; State 2815 Waterbank Cv Austin, TX 78746-4135	; Zip Code		\$100.00	
					(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)		Employer (See Ins	structions)	
	Date	Full name of contributor	tate PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/13/2014	Contributor address; City; State 604 W 11th St Austin, TX 78701-2007	; Zip Code		\$150.00 	
					(If travel outside of	Texas, complete Schedule T)
	Principal coors	ation / Job title (See Instructions)	Ţ	Employer (See In-		Todas, complete dellegale 1)
	т ппырагоссир	anon i soo tille (see instructions)		Emplayer (See Ins	su ucuons j	

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	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 9/9	9 Report: 11/15
2	FILER NAME	Boyt, Jefferson E.		3 ACCOUNT# 00000007	(Ethics Commission filers)
4	Date	5 Full name of contributor uut-of-state PAC (ID# Stoll, Garner	t)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	12/02/2014	6 Contributor address; City; State; Zip Code 12205 Edwards Hollow Run Austin, TX 78739-7624		\$100.00	
	J			(If travel outside of	Texas, complete Schedule T)
9	Principal occup	pation / Job title (See Instructions)	10 Employer (See Ins	structions)	
	Date	Full name of contributor ut-of-state PAC (ID# Streepy, Larry Jr.)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/10/2014	Contributor address; City; State; Zip Code 4809 Woodview Ave Austin, TX 78756-2824		\$350.00	l
				(If travel outside of	Texas, complete Schedule T)
		pation / Job title (See Instructions) tware Architect	Employer (See Ins National Securit	structions) ty Technologies, L	LC
	Date	Full name of contributor	:)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/05/2014	Contributor address; City; State; Zip Code 1902 Stamford Ln Austin, TX 78703-2942		\$350.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup homemaker	Deation / Job title (See Instructions)	Employer (See Ins		
	Date	Full name of contributor	:)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/05/2014	Contributor address; City; State; Zip Code 1902 Stamford Ln Austin, TX 78703-2942		\$350.00	} }
			•	(If travel outside of	Texas, complete Schedule T)
	Principal occup Attorney	pation / Job title (See Instructions)	Employer (See Ins Jackson Walker		
	Date	Full name of contributor	')	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/10/2014	Contributor address; City; State; Zip Code 2918 Ranch Road 620 N Apt 166 Austin, TX 78734-2251		\$250.00	
		Austin, 1X 78734-2251		diff tenural autoida af	Texas, complete Schedule T)
-	Dringing Lagran	Lating / John 1910 (Con Instructions)	Eleve-/E lev		Texas, complete schedule 1)
	Real Estate In	pation / Job title (See Instructions) nvestment	Employer (See Ins Simmons Vedde		

POLITICAL EXPENDITURES

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense

EXPENDITURE CATEGORIES Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense olling Expense

Candidate / Officeholder name

Complete ONLY if direct expenditure to benefit C/OH

1.

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

Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee

OTHER (enter a category not listed above) Printing Expense Office Overhead/Rental Expense The Instruction Guide explains how to complete this form. 3 ACCOUNT # (TEC filers) 1 PAGE# FILER NAME Boyt, Jefferson E. 00000007 Schedule: 1/3 Report: 13/15 4 Date 5 Payee name American Printing & Mailing 11/26/2014 Amount (\$) Pavee address City: State: Zip Code 1606 Headway Circle \$3,163,71 Austin, TX 78754 (a) Category (See Categories listed at the top of this schedule) (b) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Printing **Printing Expense QF EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate / Officeholder name Office held: 9 Complete ONLY if Office sought: direct expenditure to benefit C/OH Date Payee name 11/03/2014 At Large Partners Payee address City; State; Zip Code Amount (\$) 907 East 15th St. . . . \$300.00 Austin, TX 78702 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Consulting Consulting Expense OF EXPENDITURE Check if Austin, TX, officeholder living expense Complete ONLY if Office held: Candidate / Officeholder name Office sought: direct expenditure to benefit C/OH Date Payee name 11/03/2014 First Data Merchant Services Amount (\$) Payee address City; State; Zip Code 5565 Glenridge Connector NE Atlanta, GA 30342 \$109,35 (If travel outside of Texas, complete Schedule T) Category (See Categories listed at the top of this schedule) Description **PURPOSE** credit card processing fees Accounting/Banking OF EXPENDITURE Check if Austin, TX, officeholder living expense Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Pavee name 11/03/2014 First Data Merchant Services Payee address City; State; Zip Code Amount (\$) 5565 Glenridge Connector NE \$77.35 Atlanta, GA 30342 (If travel outside of Texas, complete Schedule T) Category (See Categories listed at the top of this schedule) Description PURPOSE credit card processing fees Accounting/Banking OF. **EXPENDITURE**

Office held:

Check if Austin, TX, officeholder living expense

Office sought:

POLITICAL EXPENDITURES

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense

EXPENDITURE CATEGORIES Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense Polling Expense

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

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

Fees	Printing Expense Office Overhead. The Instruction Guide explains ho	
1 PAGE#	2 FILER NAME	3 ACCOUNT # (TEC filers)
Schedule: 2/3 Re	- D . 1	0000007
4 Date	5 Payee name	0000001
12/03/2014	First Data Merchant Services	
6 Amount (\$)	7 Payee address City; State; Zip Code	
\$125.77	5565 Glenridge Connector NE	
	Atlanta, GA 30342	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule T) credit card processing fees
OF	Accounting/Banking	ordan dara processing rees
EXPENDITURE		Check if Austin, TX, officeholder living expense
9 Complete ONLY if	Candidate / Officeholder name	Office sought: Office held:
direct expenditure to benefit C/OH		C most noise.
Date	Payee name First Data Merchant Services	
12/03/2014		
Amount (\$)	Payee address City; State; Zip Code	
\$94.47	5565 Glenridge Connector NE Atlanta, GA 30342	
	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
PURPOSE OF	Accounting/Banking	credit card processing fees
EXPENDITURE		
		Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure	Candidate / Officeholder name	Office sought: Office held:
to benefit C/OH		
Date	Payee name	
12/03/2014	First Data Merchant Services	
Amount (\$)	Payee address City; State; Zip Code	
\$15.00	5565 Glenridge Connector NE Atlanta, GA 30342	
	Aliania, GA 30342	
	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
PURPOSE	Accounting/Banking	credit card processing fees
OF EXPENDITURE	,	
2777 277 277 277 277 277 277 277 277 27		Check if Austin, TX, officeholder living expense
Complete ONLY if	Candidate / Officeholder name	Office sought: Office held:
direct expenditure to benefit C/OH		
Date	Payee name	
12/03/2014	First Data Merchant Services	
Amount (\$)	Payee address City; State; Zip Code	
\$10.89	5565 Glenridge Connector NE	
Ψ10.00	Atlanta, GA 30342	
DUDDOCT	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
PURPOSE OF	Accounting/Banking	credit card processing fees
EXPENDITURE		
Complete ONLY if	Candidate / Officeholder name	Check if Austin, TX, officeholder living expense Office sought: Office held:
direct expenditure to benefit C/OH	Candidate / Officendider Haffle	Office sought. Office neid:

POLITICAL EXPENDITURES

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense

Complete ONLY if

direct expenditure to benefit C/OH

Candidate / Officeholder name

EXPENDITURE CATEGORIES Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense Polling Expense

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

Loan Repayment/Reimbursement Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

Printing Expense OTHER (enter a category not listed above) Fees Office Overhead/Rental Expense The Instruction Guide explains how to complete this form. 1 PAGE # 2 FILER NAME 3 ACCOUNT # (TEC filers) Boyt, Jefferson E. Schedule: 3/3 Report: 15/15 00000007 4 Date 5 Payee name NGP Van, Inc. 11/03/2014 6 Amount (\$) Payee address City; State; Zip Code 1105 15th Street NW, Ste. 500 \$150.00 Washington, DC 20005 (a) Category (See Categories listed at the top of this schedule) (b) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** database software Office Overhead/Rental Expense OF **EXPENDITURE** Check if Austin, TX, officeholder living expense 9 Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name 12/02/2014 NGP Van. Inc. Amount (\$) Payee address City; State; Zip Code 1105 15th Street NW, Ste. 500 \$150.00 Washington, DC 20005 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** database software Office Overhead/Rental Expense OF **EXPENDITURE** Check if Austin, TX, officeholder living expense Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name Susan Harry Consulting, LLC 11/03/2014 Amount (\$) Payee address City; State: Zip Code P.O. Box 301074 \$250.00 Austin, TX 78703 Category (See Categories listed at the top of this schedule) (If travel outside of Texas, complete Schedule T) Description **PURPOSE** Compliance consulting Consulting Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name YStrategy 10/31/2014 Amount (\$) Payee address City; State; Zip Code 3010 Manor Rd. \$4,798.56 Austin, TX 78723 (If travel outside of Texas, complete Schedule T) Category (See Categories listed at the top of this schedule) **PURPOSE** Phone calls, field services & general consulting Consulting Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense

Office held:

Office sought: