

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		1 Filer ID	2 Total pages filed: 8
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI	OFFICE USE ONLY	
	NICKNAME LAST SUFFIX		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS  <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE		Date Received
	1310 San Anonio #1 Austin, TX 78701		Date Hand-delivered or Date Postmarked
			Receipt # Amount
			Date Processed
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI	Date Imaged	
	NICKNAME LAST SUFFIX		
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE		
	4120 Lawless St. Austin, TX 78723		
7 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION
8 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)		
	<input checked="" type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final Report (Attach C/OH-FR)		
9 PERIOD COVERED	Month Day Year	THROUGH	Month Day Year
10 ELECTION	ELECTION DATE		ELECTION TYPE
	Month Day Year	<input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special	
11 OFFICE	OFFICE HELD (if any)		12 OFFICE SOUGHT (if known)

GO TO PAGE 2

# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH  
COVER SHEET PG 2

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13 C / OH NAME Riley, Chris	14 Filer ID
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15 NOTICE FROM POLITICAL COMMITTEE(S)  <input type="checkbox"/> Additional Pages	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	COMMITTEE NAME
	<input type="checkbox"/> GENERAL	COMMITTEE ADDRESS
	<input type="checkbox"/> SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME
		COMMITTEE CAMPAIGN TREASURER ADDRESS

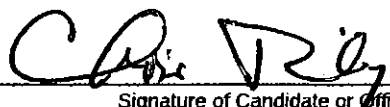
16 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$	0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	1,625.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$	69.39
	4. TOTAL POLITICAL EXPENDITURES	\$	1,491.67
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	2,175.00
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	33,872.29

17 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.

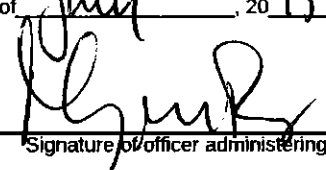


AFFIX NOTARY STAMP / SEAL ABOVE



Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Chris Riley, this the 15 day of July, 2015, to certify which, witness my hand and seal of office.



Signature of officer administering

Myrna Rios

Printed name of officer administering

Notary

Title of officer administering oath

**SUBTOTALS - C/OH****FORM C/OH**  
**COVER SHEET PG 3**

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<b>18 FILER NAME</b> Riley, Chris		<b>19 Filer ID</b>
<b>20 SCHEDULE SUBTOTALS</b> NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 1,625.00
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input checked="" type="checkbox"/> SCHEDULE E: LOANS	\$ 872.29
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 1,491.67
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$
9.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
10.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
11.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 1/3 Rpt: 4/8
<b>2</b> FILER NAME Riley, Chris		<b>3</b> Filer ID
<b>4</b> Date 06/14/2015	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson, Teresa <b>6</b> Contributor address; City; State; Zip Code 5205 Martin Ave Austin, TX 78751	<b>7</b> Amount of Contribution (\$) \$50.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
<b>Date</b> 01/30/2015	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Auten, Roseanna <b>Contributor address; City; State; Zip Code</b> 1507 Yaupon Valley Rd Austin, TX 78746	<b>Amount of Contribution (\$)</b> \$350.00
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>
<b>Date</b> 06/06/2015	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Blodgett, Terrell <b>Contributor address; City; State; Zip Code</b> 4100 Jackson Avenue # 250 AUSTIN, TX 78731	<b>Amount of Contribution (\$)</b> \$100.00
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>
<b>Date</b> 06/07/2015	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Compton, Sean <b>Contributor address; City; State; Zip Code</b> 2601 Great Oaks Pkwy Austin, TX 78756	<b>Amount of Contribution (\$)</b> \$250.00
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>
<b>Date</b> 06/08/2015	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Duhon, Kolby <b>Contributor address; City; State; Zip Code</b> 600 S. 1st #108 austin, TX 78704	<b>Amount of Contribution (\$)</b> \$25.00
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/3 Rpt: 5/8
2 FILER NAME Riley, Chris		3 Filer ID
4 Date 06/02/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Einsweiler, Lee	7 Amount of Contribution (\$) \$50.00
	6 Contributor address; City; State; Zip Code 1200 East 11th Street #209  Austin, TX 78702	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 06/18/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gins, Jonathon	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code 2917 East 14th St.  Austin, TX 78702	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/14/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hilton, Elizabeth	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code 4001 Mendez St.  Austin, TX 78723	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/02/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kasper, Ann	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code 1200 East 11th Street #209  Austin, TX 78702	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/26/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mauzy, Catherine	Amount of Contribution (\$) \$150.00
	Contributor address; City; State; Zip Code 5203 Shoal Creek Blvd  Austin, TX 78756	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

**MONETARY POLITICAL CONTRIBUTIONS****SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 3/3 Rpt: 6/8
<b>2</b> FILER NAME Riley, Chris		<b>3</b> Filer ID
<b>4</b> Date 06/02/2015	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sullivan, David <b>6</b> Contributor address; City; State; Zip Code 1710 Waterston Ave Austin, TX 78703	<b>7</b> Amount of Contribution (\$) \$100.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
<b>Date</b> 01/30/2015	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Swenson, Roland <b>Contributor address; City; State; Zip Code</b> 1507 Yaupon Valley Rd Austin, TX 78746	<b>Amount of Contribution (\$)</b> \$350.00
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>

# LOANS

## SCHEDULE E

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E: Sch: 1/1 Rpt: 7/8	
2 FILER NAME Riley, Chris		3 Filer ID	
4 TOTAL OF UNITEMIZED LOANS			\$
5 Date of loan 01/30/2015	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) Riley, Christopher		9 Loan Amount (\$) \$872.29
6 Is lender a financial institution? No	8 Lender address; City; State; Zip Code 1310 San Antonio #1 Austin, TX 78701		10 Interest Rate
			11 Maturity Date
12 Principal occupation / Job title (See Instructions) <del>attorney</del> student		13 Employer (See Instructions) self	
14 Description of Collateral <input checked="" type="checkbox"/> None		15 Check if personal funds were deposited into political account (See Instructions) <input checked="" type="checkbox"/>	
16 GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	17 Name of guarantor		19 Amount Guaranteed (\$)
	18 Guarantor address; City; State; Zip Code		
20 Principal occupation		21 Employer (See Instructions)	

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/ Donations Made By -  
Candidate/Officeholder/Political Committee

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 1/1 Rpt: 8/8	<b>2</b> FILER NAME Riley, Chris	<b>3</b> Filer ID
<b>4</b> Date 01/30/2015	<b>5</b> Payee name Texas Workforce Commission	
<b>6</b> Amount (\$) \$1,422.28	<b>7</b> Payee address; City; State; Zip Code 101 E 15th St.  Austin, TX 78778	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense payroll taxes
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate/Officeholder name		
Office sought		
Office held		