CORRECTION/AMENDMENT AFFIDAVITFOR **CANDIDATE/OFFICEHOLDER** FORM COR-C/OH 1 Filer ID (Ethics Commission Filers) 2 Total pages filed: OFFICEUSEONLY MS/MRS/MR FIRST 3 CANDIDATE/ **OFFICEHOLDER** Christopher NAME NICKNAME LAST SUFFIX 4 ORIGINAL Runoff January 15 Other (specify) REPORT TYPE Exceeded \$500 limit 15th day after July 15 treasurer 30th day before election appointment (officeholderonly) Final report 8th day before election Receipt Date Processed 5 ORIGINAL PERIOD Month Year COVERED THROUGH 2014 Date Imaged 6 EXPLANATION OF CORRECTION I recently reviewed my personal checking account bank statements from last year, and noticed charges that appeared to have been made by the campaign. Because both my campaign account and personal account were at the same bank, we believe that I inadvertently gave the campaign a debit card associated with my personal account, believing it was associated with my campaign account. I do not seek reimbursement for any of these additional charges. The additional reportable expenses are included on Schedule G of this report, and each is marked with an asterisk to identify the information that has changed. All the additional expenses are included on Page 2, Line 4. 7 AFFIDAVIT I swear, or affirm, under penalty of periury, that this corrected report is true and correct. Check ONLY if applicable: Semiannual reports: I swear, or affirm, that the original report was made in good faith and without an intent to mislead or to misrepre- sent ROBERTO ACOSTA Notary Public, State of Texas the information contained in the report. My Commission Expires Other reports: I swear, or affirm, that I am filing this corrected April 21, 2019 report not later than the 14th business day after the date I learned that the report as originally filed is inaccurate or incomplete. I swear, or affirm, that any error or omission in the report as originally filed was made in good faith. AFFIX NOTARY STAMP / SEAL ABOVE Sworn to and subscribed before me, by the said Christopher Ru to certify which, witness my hand and seal of office. Signature of officer administering oath Printed name of officer administering oath Remember To Attach Any Part Of The Campaign Finance Report Form **Needed To Report And Explain Corrections**

CORRECTION/AMENDMENT AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

All Reports: A filer who files a corrected report must submit a correction affidavit. The affidavit must identify the information that has changed.

Reports filed with Texas Ethics Commission: A corrected report (other than a report due 8 days before an election or a special report near election) filed with the Ethics Commission after its due date is not considered late for purposes of late-filing penalties if: (1) any error or omission in the report as originally filed was made in good faith, and (2) the person filing the report files a corrected report and a good-faith affidavit not later than the 14th business day after the date the person learns that the report as originally filed is inaccurate or incomplete.

Semiannual Reports: Effective September 1, 2011, a semiannual report (due January 15 or July 15) that is amended/corrected <u>before</u> the eighth day after the original report was filed is considered to have been filed on the date the original report was filed. A semiannual report that is amended/corrected <u>on or after</u> the eighth day after the original report was filed is considered to have been filed on the date the original report was filed if: (1) the amendment/correction is made before any complaint is filed with regard to the subject of the amendment/correction; and (2) the original report was made in good faith and without intent to mislead or misrepresent the information contained in the report.

Attach additional pages as necessary.

INSTRUCTIONS FOR COMPLETING THIS FORM

The following numbers correspond to the numbered boxes on the other side.

- 1. Filer ID. If you file with the Ethics Commission, you should have received a letter acknowledging receipt of your campaign treasurer appointment and assigning you a Filer ID. Put that number in this box. If you do not file with the Ethics Commission, skip this box.
- 2. Total Pages Filed. After completing this form and any attachments, count the number of pages. Enter that number in this box. Each side of a two-sided form counts as a page. In other words, this form is two pages.
- 3. Candidate/Officeholder Name. Put your full name here. Enter your name in the same way as on the report you are correcting.
- 4. Original Report Type. Mark the type of report you are correcting.
- **5. Original Period Covered.** Enter the period covered by the report you are correcting. The year is important because filers sometimes correct reports years after filing the original.
- **6. Explanation of Correction.** Attach any part of the campaign finance report form needed to report and explain corrections. Explain why there was an error on the original report. Also explain what information is being corrected and how the new information is different from the information on the original report. (Use additional pages if you need more space.) You may also use this area to request a waiver or reduction of a late-filing penalty and state the basis of your request.
- 7. Affidavit. Read the affidavit before signing. You must sign the affidavit in the presence of an individual authorized to take oaths. If signed before a notary public, the affidavit must include the notary's signature and seal.

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

		<u>-</u>			·	
The C/OH Instruction Guil	DE explains how to complete this for	m. 1 A	CCOUNT # thics Commission filers)	2 PAGE#		
		ے، ا	0010009	1 of 82		
3 CANDIDATE / OFFICEHOLDER	MS/MRS/MR FIRST Christoph	her	MI	OFFICE	USE ONLY	
NAME	NICKNAME LAST Chris Riley		SUFFIX	Date Received		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX: APT / SUITE #; P.O. Box 30062	CITY;	STATE; ZIP COD		22	
Change of Address	Austin, TX 78703			Date Hand-deliver	ed or Date Postmarked	
				Receipt #	Amount	
5 CAMPAIGN TREASURER	MS/MRS/MR FIRST Cora		MI	Date Processed	_	
NAME	NICKNAME LAST		SUFFIX	Date Imaged		
	Corky Hilliard		JOFFIA.			
6 CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE); 4120 Lawless St. Austin, TX 78723	APT / SUITE #;	CITY; STATE;	ZIP CODE		
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER (512) 459-6342		EXTENSION			
8 REPORT TYPE	January 15 X 30th day b	pefore election	Runoff		r campaign treasurer (officeholder only)	
	July 15 Sth day be	efore election	Exceeded \$500 lin	nit Final report (/	Attach C/OH - FR)	
9 PERIOD COVERED	Month Day Year		Month	Day Year		
	07/01/2014	THROUGH	09/2	5/2014		
10 ELECTION	ELECTION DATE ELE Month Day Year 11/04/2014	Primary	Runoff	X General	Special	
11 OFFICE	OFFICE HELD (if any) City Council, Place 1		12 OFFICE SOUGHT (if City Council, Di			
	GO TO PAGE 2					

P.O. Box 12070

Austin, Texas 78711-2070

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

13 C/OH NAME Riley,	Christopher		14 ACCOUNT # 00010009	(Ethics Commission filers)
15 NOTICE FROM	have been made with	tice of political expenditures by political committees to support the ca out the candidate's or officeholder's knowledge or consent, Candida y receive notice of such expenditures	andidate / officeholder. tes and officeholders a	These expenditures may re required to report this
POLITICAL COMMITTEE(S)	COMMITTEE TYPE	COMMITTEE NAME		
	GENERAL	COMMITTEE ADDRESS		
	SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME		
additional pages		COMMITTEE CAMPAIGN TREASURER ADDRESS		
16 CONTRIBUTION TOTALS		OLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN S, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$	3,091.00
		OLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	49,975.98
EXPENDITURE TOTALS	3. TOTAL F	OLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZE	\$	365.44
	4. TOTAL I	OLITICAL EXPENDITURES	\$	87,798.20
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD \$ 53,0			
OUTSTANDING LOAN TOTALS		RINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE Y OF THE REPORTING PERIOD	\$	25,000.00
17 AFFIDAVIT		I swear, or affirm, under penalty is true and correct and includes me under Title 15, Election Cod	all information requ	
		Signature of C	andidate or Officeho	older
AFFIX NOTARY S	TAMP / SEAL ABOV	Ē		
		e said	, this the	day
of, 2	0, to cer	tify which, witness my hand and seal of office.		
Signature of officer admir	nistering oath	Print name of officer administering oath	Title of officer adm	inistering oath

				
The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 1/4	45 Report: 3/82
2 FILER NAME	Riley, Christopher		3 ACCOUNT # 00010009	(Ethics Commission filers)
4 Date	5 Full name of contributor ut-of-state PAC (ID# Adair, Craig	<u> </u>	7 Amount of contribution (\$)	8
09/14/2014	6 Contributor address; City; State; Zip Code 204 Park Ln Austin, TX 78704-2411		\$100.00	
		!	(If travel outside of	Texas, complete Schedule T)
9 Principal occup	pation / Job title (See Instructions)	10 Employer (See In:		
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/21/2014	Contributor address; City; State; Zip Code 2827 Salado St Austin, TX 78705-3624		\$125.00	f
Signification on the second		- · · · · · · · · · · · · · · · · · · ·		Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions)	Employer (See Ins	structions)	
		<u>. </u>		
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
08/12/2014	Contributor address; City; State; Zip Code 3221 Stevenson Ave Austin, TX 78703-2241		\$350.00 	
			(If travel outside of	Texas, complete Schedule T)
	ation / Job title (See Instructions)	Employer (See Ins	structions)	<u> </u>
Attorney			burn & Dickie, LLF	2
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
08/09/2014	Contributor address; City; State; Zip Code 2610 Saint Anthony St Austin, TX 78703-1746		350.00 	
	1		(If travel outside of	Texas, complete Schedule T)
Principal occupa	ation / Job title (See Instructions)	Employer (See Ins Jackson Walker	structions)	
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
08/29/2014	Contributor address; City; State; Zip Code 11490 Westheimer Rd Ste 600		\$250.00 	
İ	Houston, TX 77077-6841			
Principal occupy	Alice / Joh Billo (Con Institutions)			Texas, complete Schedule T)
Рппсіраї оссира	ation / Job title (See Instructions)	Employer (See Ins	itructions)	:

	The Instruction	אס Guide explains how to complete this form.		1 PAGE # Schedule: 2/4	45 Report: 4/82
2	FILER NAME	Riley, Christopher		3 ACCOUNT # 00010009	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Ausley, Tom	#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	07/21/2014	6 Contributor address; City; State; Zip Code 3707 Laurel Ledge Ln Austin, TX 78731-4049	i	\$150.00	 Texas, complete Schedule T)
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In:	<u> </u>	Texas, complete scriedule 1)
					
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/25/2014	Contributor address; City; State; Zip Code 7537 Cameron Rd Austin, TX 78752-2013		\$350.00	
		j		(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See Ins	<u> </u>	
	Date	Full name of contributor	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	07/24/2014	Contributor address; City; State; Zip Code 2100 Hartford Rd Austin, TX 78703-3125		\$100.00 	
					- · · · · · · · · · · · · · · · · · · ·
	Principal occup	ation / Job title (See Instructions)	Employer/See lev		Texas, complete Schedule T)
	- Нисіраї оссора	on 7 Journal (See Histractions)	Employer (See Ins	structions)	
_	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/25/2014	Contributor address; City; State; Zip Code 2508 Friar Tuck Ln Austin, TX 78704-5612		\$100.00 	
				(If travel outside of 1	Texas, complete Schedule T)
	Principal occupa	ation / Job title (See Instructions)	Employer (See Ins	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	08/25/2014	Contributor address; City; State; Zip Code 201 Lavaca St Apt 320 Austin, TX 78701-3969		\$100.00 	
		Austin, TA 10101-0303		Of travel outside of 1	Texas, complete Schedule T)
				(11 110101 0010100 01 1	exas, complete scriedare ()
	Principal occupa	ation / Job title (See Instructions)	Employer (See Ins	structions)	

The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 3/4	45 Report: 5/82
2 FILER NAME	Riley, Christopher	3	3 ACCOUNT # 00010009	(Ethics Commission filers)
4 Date	5 Full name of contributor ☐ out-of-state PAC (ID# Bailey, Brian	t)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
09/08/2014	6 Contributor address; City; State; Zip Code 2509 Harris Blvd Austin, TX 78703-2451		\$156.12	 -
			<u> </u>	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)
08/18/2014	Contributor address; City; State; Zip Code 7706 Stoneywood Dr Austin, TX 78731-1443	•••••	\$250.00	
Principal occur	pation / Job title (See Instructions)	Employer/Coo lo	<u> </u>	Texas, complete Schedule T)
Architect	ation / Job title (See Instructions)	Employer (See In: White, Dolce &		
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/23/2014	Contributor address; City; State; Zip Code 7706 Stoneywood Dr Austin, TX 78731-1443		\$100.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occup Architect	pation / Job title (See Instructions)	Employer (See Ins White, Dolce &	structions)	
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
07/09/2014	Contributor address; City; State; Zip Code 3009 Breeze Ter Austin, TX 78722-1907		\$100.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occupa	ation / Job title (See Instructions)	Employer (See Ins		
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/07/2014	Contributor address; City; State; Zip Code 901 W 9th St Apt 605 Austin, TX 78703-4636		\$250.00	
}	Auguit, 177 10700 4000	ļ	(If travel outside of	Texas, complete Schedule T)
Principal occup	ation / Job title (See Instructions)	Employer (See Ins		
Consultant Ph		Benton assisted		

	The Instruction	N GUIDE explains how to complete this form.		1 PAGE # Schedule: 4/4	45 Report: 6/82
2	FILER NAME	Riley, Christopher		3 ACCOUNT # 00010009	(Ethics Commission filers)
4	Date	5 Full name of contributor)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	09/22/2014	6 Contributor address; City; State; Zip Code 11116 Miramar Dr Austin, TX 78726-2415		\$175.00	 - -
				(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)
	09/22/2014	Contributor address; City; State; Zip Code 602 W 7th St Austin, TX 78701-2741		\$350.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Real Estate	ation / Job title (See Instructions)	Employer (See In Roscoe Propert		
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	08/24/2014	Contributor address; City; State; Zip Code 820 W 3rd St Apt 2114		\$100.00	[
		Austin, TX 78701-3861			Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	
	Date I	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/15/2014	Contributor address; City; State; Zip Code 805 Theresa Ave Austin, TX 78703-4733		\$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)
	09/25/2014	Contributor address; City; State; Zip Code 4100 Bradwood Rd Austin, TX 78722-1133		\$200.00	!
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Realtor	ation / Job title (See Instructions)	Employer (See In Kuper Sotheby	<u>'</u>	<u>. </u>
		. <u> </u>			

	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE #	45. Poport: 7/92
2	FILER NAME	Riley, Christopher	·····	3 ACCOUNT # 00010009	45 Report: 7/82 (Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Boduch, Michael	<u> </u>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	09/25/2014	6 Contributor address; City; State; Zip Code 111 Sandra Muraida Way Unit 7O Austin, TX 78703-4995		\$100.00	
				<u> </u>	Texas, complete Schedule T)
9	Principal occup	eation / Job title (See Instructions)	10 Employer (See In:	structions)	
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/16/2014	Contributor address; City; State; Zip Code 5000 Woodcreek Rd Austin, TX 78749-2239		\$100.00	! !
				1	Texas, complete Schedule T)
	Principal occup	eation / Job title (See Instructions)	Employer (See In:	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
,	09/25/2014	Contributor address; City; State; Zip Code 505 E Mary St Austin, TX 78704-3142		\$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		Amount of contribution (\$)	In-kind contribution description (if applicable)
(09/01/2014	Contributor address; City; State; Zip Code 510 E Monroe St Ste 330 Austin, TX 78704-3130		\$350.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occupa software	ation / Job title (See Instructions)	Employer (See Ins TaxPro, LLC	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
(08/27/2014	Contributor address; City; State; Zip Code 1310 San Antonio St Apt 2		\$100.00	i
		Austin, TX 78701-1642		///	Taura - a malata Cabastala T
	Principal occurs	ation / Job title (See Instructions)	Employer (See Inc	L '	Texas, complete Schedule T)
	i moipai occupa	ZUON / JOO UIB (OEE INSUUCIONS)	Employer (See Ins	saucuoris <i>)</i>	

	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 6/4	45 Report: 8/82		
2	FILER NAME	Riley, Christopher	,	3 ACCOUNT # 00010009	(Ethics Commission filers)		
4	Date	5 Full name of contributor ut-of-state PAC (ID Braunberg, Andrew	#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
	09/07/2014	6 Contributor address; City; State; Zip Code 909 W Johanna St Apt A Austin, TX 78704-4097		\$350.00	 		
		Austria, 17, 17, 17, 17, 17, 17, 17, 17, 17, 17	!	(If travel outside of	Texas, complete Schedule T)		
9	Principal occup Analyst	pation / Job title (See Instructions)	10 Employer (See Ins NSS Labs	1 -			
	Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	08/08/2014	Contributor address; City; State; Zip Code 1309 Lost Creek Blvd Austin, TX 78746-6316		\$100.00	! 		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup	Dation / Job title (See Instructions)	Employer (See In:		, <u> </u>		
				·			
	Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	08/10/2014	Contributor address; City; State; Zip Code 2800 Robbs Run Austin, TX 78703-1637		\$350.00	 		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup	pation / Job title (See Instructions)	Employer (See Ins	<u> </u>	Texas, complete schedule 1/		
	President and		Lynxs Group, Ll				
	Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	08/30/2014	Contributor address; City; State; Zip Code 308 Ridgewood Rd Austin, TX 78746-4619		\$350.00	 		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occupa Chemist	ation / Job title (See Instructions)	Employer (See Ins Retired	1 '	· · · · · · · · · · · · · · · · · · ·		
	Date	Full name of contributor ut-of-state PAC (ID: Brown, Charles	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	08/01/2014	Contributor address; City; State; Zip Code 3624 N Hills Dr B-100		\$100.00	l 		
		Austin, TX 78731-2415			l		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup	eation / Job title (See Instructions)	Employer (See Ins	structions)			

	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE#	45 Report: 9/82
2	FILER NAME	Riley, Christopher		3 ACCOUNT # 00010009	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID: Burton, Ted	*)	7 Amount of contribution (\$)	8
	09/17/2014	6 Contributor address; City; State; Zip Code 1118 Mission Rdg Austin, TX 78704-2632	••••••	\$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)
	09/22/2014	Contributor address; City; State; Zip Code 221 W 6th St Ste 600	• • • • • • • • • • • • • • • • • • • •	\$350.00	[
		Austin, TX 78701-3411			Texas, complete Schedule T)
	Principal occup President	ation / Job title (See Instructions)	Employer (See In Bury & Partners		
	Date	Full name of contributor ut-of-state PAC (ID: Butler, Edward	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	07/25/2014	Contributor address; City; State; Zip Code 301 Hillcrest Ct West Lake Hills, TX 78746-5491	• • • • • • • • • • • • • • • • • • • •	\$350.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup VP	ation / Job title (See Instructions)	Employer (See In Enterprise		
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	07/26/2014	Contributor address; City; State; Zip Code 301 Hillcrest Ct West Lake Hills, TX 78746-5491		\$350.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Homemaker	ation / Job title (See Instructions)	Employer (See In Not Employed	structions)	
	Date	Full name of contributor	·)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/20/2014	Contributor address; City; State; Zip Code 2103 Schulle Ave Austin, TX 78703-2141		\$350.00	
				<u> </u>	Texas, complete Schedule T)
	Principal occup Farm Manage	ation / Job title (See Instructions)	Employer (See In Self Employed	structions)	

	The Instruction	אס Guide explains how to complete this form.		1 PAGE # Schedule: 8/4	45 Report: 10/82
2	FILER NAME	Riley, Christopher		3 ACCOUNT # 00010009	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Byars, Paul)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	08/15/2014	6 Contributor address; City; State; Zip Code 4641 Ruiz St Austin, TX 78723-3333		\$100.00	
		,		(if travel outside of	Texas, complete Schedule T)
9	Principal occur	ation / Job title (See Instructions)	10 Employer (See In	structions)	
3	· · · · · · · · · · · · · · · · · · ·	authors are test mentaliste,	10 Employa (300 m)	J. 1010175,	
	Date	Full name of contributor	1	Amount of	In-kind contribution
	Date	Byers, Brent and Deena	/	contribution (\$)	description (if applicable)
			• • • • • • • • • • • • • • • • • • • •		1
	08/17/2014	Contributor address; City; State; Zip Code 4303 Farhills Dr Austin, TX 78731-2815		\$150.00	[
				(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	In-kind contribution
		Byers, Julie		contribution (\$)	description (if applicable)
	09/16/2014	Contributor address; City; State; Zip Code		\$350.00	
	09/10/2014	4516 Balcones Dr		\$330.00	
		Austin, TX 78731-5220			
				(If travel outside of	Texas, complete Schedule T)
_	Principal occup	ation / Job title (See Instructions)	Employer (See In	<u> </u>	
	retired		none		
	Date	Full name of contributor)	Amount of	In-kind contribution
		Bynum, Grover		contribution (\$)	description (if applicable)
			• • • • • • • • • • • • • • • • • • • •		İ
	09/15/2014	Contributor address; City; State; Zip Code PO Box 80		\$350.00	
		Bastrop, TX 78602-0080			
i				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	
	Advisor		Austin Tech Co	uncil	
	Date	Full name of contributor)	Amount of	In-kind contribution
		Campbell, Jack		contribution (\$)	description (if applicable)
	09/08/2014	Contributor address; City; State; Zip Code		\$100.00	[
		901 W 9th St Apt 302			.
	ĺ	Austin, TX 78703-4633		 '	
				L `	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	

The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 9/4	45 Report: 11/82
2 FILER NAME	Riley, Christopher	*****	3 ACCOUNT # 00010009	(Ethics Commission filers)
4 Date	5 Full name of contributor ut-of-state PAC (ID Capochiano, Michael	#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
07/02/2014	6 Contributor address; City; State; Zip Code 4707 Avenue F Austin, TX 78751-3114		\$200.00	
			(If travel outside of	Texas, complete Schedule T)
9 Principal occup	Dation / Job title (See Instructions)	10 Employer (See In		
Small busine		Self employed		
Date	Full name of contributor ut-of-state PAC (ID: Castro, Nicole	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
08/27/2014	Contributor address; City; State; Zip Code PO Box 1085 Round Rock, TX 78680-1085		\$100.00	
	HOURG HOUR, 1A 70000-1005			
			L.	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)
09/13/2014	Contributor address; City; State; Zip Code	• • • • • • • • • • • • • • • • • • • •	\$150.00	
	Austin, TX 78759-8022		(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)
08/15/2014	Contributor address; City; State; Zip Code 10610 Morado Cir Apt 2622 Austin, TX 78759-5559		\$200.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occup General Man	ation / Job title (See Instructions) ager	Employer (See In: Winthrop mana		
Date	Full name of contributor	‡)	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/19/2014	Contributor address; City; State; Zip Code		\$350.00	
	200 W Cesar Chavez St Ste 250			
	Austin, TX 78701-4049		(If travel outside of	Texas, complete Schedule T)
Principal occup	vation / Job title (See Instructions)	Employer (See In:	` _	,,
Real Estate			kefield Oxford C	ommercial

	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 10	0/45 Report: 12/82
2	FILER NAME	Riley, Christopher		3 ACCOUNT # 00010009	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Coleman, Aan	#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	09/25/2014	6 Contributor address; City; State; Zip Code 9890 Sitver Mountain Dr Austin, TX 78737-3103		\$350.00	
			_	(If travel outside of	Texas, complete Schedule T)
9	Principal occup Landscape Ar	pation / Job title (See Instructions) rchitect	10 Employer (See Ins Coleman and As		
	Date	Full name of contributor	<u>*</u>)	Amount of contribution (\$)	In-kind contribution description (if applicable)
1	09/06/2014	Contributor address; City; State; Zip Code 2601 Great Oaks Pkwy Austin, TX 78756-2909		\$150.00	
			j	(If travel outside of	Texas, complete Schedule T)
	Principal occup	pation / Job title (See Instructions)	Employer (See Ins	<u>'</u>	
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	07/13/2014	Contributor address; City; State; Zip Code 6717 Valburn Dr Austin, TX 78731-1803		\$100.00	
		1	İ	(If travel outside of	Texas, complete Schedule T)
	Principal occup	pation / Job title (See Instructions)	Employer (See Ins		
	•	,			
	Date	Full name of contributor	<u>'</u>)	Amount of contribution (\$)	In-kind contribution description (if applicable)
(07/19/2014	Contributor address; City; State; Zip Code 3607 Thompson St Austin, TX 78702-3129		\$100.00	I I
				(If travel outside of	Texas, complete Schedule T)
	Principal occupa	ation / Job title (See Instructions)	Employer (See Ins	structions)	-
	Date	Full name of contributor	·)	Amount of contribution (\$)	In-kind contribution description (if applicable)
(08/24/2014	Contributor address; City; State; Zip Code 1502 Norris Dr Austin, TX 78704-2021		\$100.00 	
				(If travel outside of	Texas, complete Schedule T)
	Principal occupa	ation / Job title (See Instructions)	Employer (See Ins	structions)	
					· ·

	The INSTRUCTION	on Guide explains how to comp	lete this form.		1 PAGE # Schedule: 11	/45 Report: 13/82	
2	FILER NAME	Riley, Christopher			3 ACCOUNT # 00010009	(Ethics Commission filers)	
4	Date	5 Full name of contributor [Covington, Sid	☐ out-of-state PAC (ID#	·)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)	
	09/25/2014	6 Contributor address; C 4810 Placid Pl Austin, TX 78731-5519	City; State; Zip Code		\$100.00	! ! !	
					(If travel outside of	Texas, complete Schedule T)	
9	Principal occup	ation / Job title (See Instructions	5)	10 Employer (See In	structions)		
	Date	Full name of contributor [Crosnoe, Rob	☐ out-of-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	08/17/2014	Contributor address; C 808 Park Blvd Austin, TX 78751-4319	City; State; Zip Code		\$75.00	 	
					(If travel outside of	Texas, complete Schedule T)	
	Principal occup	ation / Job title (See Instructions)	Employer (See Ins	·		
		`		· · · · · · · · · · · · · · · · · · ·	,		
	Date	Full name of contributor [Crowley, Tim	☐ out-of-state PAC (ID#	:)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
ı	07/31/2014	Contributor address; C 5902 Lonesome Valley Trl Austin, TX 78731-3746	City; State; Zip Code		\$150.00	[
					(If travel outside of	Texas, complete Schedule T)	
	Principal occup	ation / Job title (See Instructions	<u>) </u>	Employer (See Ins			
			,				
	Date	Full name of contributor [Cuppett, Tim	☐ out-of-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	09/25/2014	Contributor address; C 4300 Marathon Blvd Austin, TX 78756-3427	City; State; Zip Code		\$100.00	 	
					· •	Texas, complete Schedule T)	
	Principal occup	ation / Job title (See Instructions	s)	Employer (See In:	structions)		
	Date	Full name of contributor [Curtis, Matthew	ut-of-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	09/25/2014	807 Blanco St Apt 203	City; State; Zip Code		\$250.00	 	
	i	Austin, TX 78703-4956					
					<u> </u>	Texas, complete Schedule T)	
	Principal occup Director	ation / Job title (See Instructions	i) 	Employer (See Ins Homeaway	structions)		

Texas Ethics Commission

	The INSTRUCTION	אס Guide explains how to complete this form.		1 PAGE # Schedule: 12	/45 Report: 14/82		
2	FILER NAME	Riley, Christopher		3 ACCOUNT # 00010009	(Ethics Commission filers)		
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Danze, Elizabeth)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
	08/25/2014	6 Contributor address; City; State; Zip Code 4701 Spicewood Springs Rd Austin, TX 78759-8402		\$150.00	 		
				(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)		
	07/03/2014	Contributor address; City; State; Zip Code 2604 Stratford Dr Austin, TX 78746-4623	• • • • • • • • • • • • • • • • • • • •	\$350.00	 		
				•	Texas, complete Schedule T)		
	Principal occup VP Marketing	ation / Job title (See Instructions)	Employer (See In Market Hardwa				
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	07/30/2014	Contributor address; City; State; Zip Code 11231 Tracton Ln Austin, TX 78739-1401	•••••	\$300.00	 		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup Realtor	ation / Job title (See Instructions)	Employer (See In: Self	structions)			
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	08/26/2014	Contributor address; City; State; Zip Code 503 Brookhaven Trl Austin, TX 78746-5452		\$100.00	 		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup Attorney	ation / Job title (See Instructions)	Employer (See In: Almanza, Black	structions) burn and Dickie L	LP		
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	09/16/2014	Contributor address; City; State; Zip Code 503 Brookhaven Trl Austin, TX 78746-5452	*************	\$100.00			
				/// Annual			
_	Principal occup	ation / Job title (See Instructions)	Employer (See Ins	•	Texas, complete Schedule T)		
	Attorney			burn and Dickie L	LP		

				<u> </u>
The Instruction	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 13	3/45 Report: 15/82
2 FILER NAME	Riley, Christopher		3 ACCOUNT # 00010009	(Ethics Commission filers)
4 Date	5 Full name of contributor ut-of-state PAC (ID#	¥)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
07/31/2014	6 Contributor address; City; State; Zip Code 3422 Mount Barker Dr Austin, TX 78731-5725		\$100.00	
			(If travel outside of	Texas, complete Schedule T)
	pation / Job title (See Instructions)	10 Employer (See In:	structions)	
Date	Full name of contributor ut-of-state PAC (ID# Doolittle, Theodore	ŧ)	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/25/2014	Contributor address; City; State; Zip Code 2440 Sunset Farm Rd Ellicott City, MD 21042-1632		\$100.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions)	Employer (See In:	structions)	
Date	Full name of contributor ut-of-state PAC (ID# Draper, Charles	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
07/21/2014	Contributor address; City; State; Zip Code 4609 Trail Crest Cir Austin, TX 78735-6344		\$100.00	
			(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)
09/25/2014	Contributor address; City; State; Zip Code 30 Adams St NW Washington, DC 20001-1026		\$100.00 I	
				Texas, complete Schedule T)
Principal occup	eation / Job title (See Instructions)	Employer (See Ins	atructions)	
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
07/29/2014	Contributor address; City; State; Zip Code 4101 Avenue C Austin, TX 78751-4605		\$100.00 	
			(If travel outside of	Texas, complete Schedule T)
Principal occup	ation / Job title (See Instructions)	Employer (See Ins	structions)	
	· ·	, , ,	,	

	_	·- ·-				
	The Instruction	N GUIDE explains how to complete th	nis form.		1 PAGE # Schedule: 14	l/45 Report: 16/82
2	FILER NAME	Riley, Christopher			3 ACCOUNT # 00010009	(Ethics Commission filers)
4	Date	5 Full name of contributor	t-of-state PAC (ID#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	09/23/2014	6 Contributor address; City; 2715 Wooldridge Dr Austin, TX 78703-1953	State; Zip Code		\$100.00	
					(If travel outside of	Texas, complete Schedule T)
9	Principal occup	ation / Job title (See Instructions)		10 Employer (See Ins	structions)	
	Date	Full name of contributor	t-of-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/24/2014	Contributor address; City; 1608 Preston Ave Austin, TX 78703-1906	State; 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	t-of-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	07/15/2014	2020 E 2nd St	State; Zip Code		\$50.00	[[
		B Austin, TX 78702-4563			(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)		Employer (See Ins		Toxas, complete schedule ()
	Date	Full name of contributor	of state BAC (ID#		A 4 4	1 1-1:
	Date	Full name of contributor ut	t-of-state PAC (ID#		Amount of contribution (\$)	In-kind contribution description (if applicable)
	08/04/2014	Contributor address; City; S 2020 E 2nd St B	State; Zip Code		\$50.00	
		Austin, TX 78702-4563			(If travel outside of	Texas, complete Schedule T)
	Principal occupa	ation / Job title (See Instructions)		Employer (See Ins	structions)	
	Date	Full name of contributor	-of-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/23/2014	Contributor address; City; 5 1402 Preston Ave Austin, TX 78703-1902	State; Zip Code		\$200.00	! !
					(If travel outside of	Texas, complete Schedule T)
		ation / Job title (See Instructions)		Employer (See Ins		
	CPA			Erickson Demel		

				· · · · · · · · · · · · · · · · · · ·	
-	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 15	i/45 Report: 17/82
2 F	ILER NAME	Riley, Christopher		3 ACCOUNT # 00010009	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID Falkenberg, Howard)#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
0	7/24/2014	6 Contributor address; City; State; Zip Code PO Box 123 Austin, TX 78767-0123		\$100.00	
				(If travel outside of	Texas, complete Schedule T)
9 F	Principal occup	ation / Job title (See Instructions)	10 Employer (See In	<u> </u>	
				·	
	Date	Full name of contributor)#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
0	8/27/2014	Contributor address; City; State; Zip Code 3921 Threadgill St Austin, TX 78723-4506		\$350.00	1
				`	Texas, complete Schedule T)
	rincipal occup CEO/COO	ation / Job title (See Instructions)	Employer (See In Texas Star Brad		
	Date	Full name of contributor	.)	Amount of contribution (\$)	In-kind contribution description (if applicable)
0	8/02/2014	Contributor address; City; State; Zip Code 703B E 50th St No B		\$100.00	
		Austin, TX 78751-2615		:	'
		aria / Inh Cha (Oca hada aria)		<u>'</u>	Texas, complete Schedule T)
	rincipal occup Event Planne	ation / Job title (See Instructions) r	Employer (See In SXSW	structions)	
	Date	Full name of contributor ut-of-state PAC (ID Forrest, Hugh)	Amount of contribution (\$)	In-kind contribution description (if applicable)
0	9/25/2014	Contributor address; City; State; Zip Code 703B E 50th St Austin, TX 78751-2615		\$100.00	i ! !
				(If travel outside of	Texas, complete Schedule T)
	rincipal occup vent Planne	ation / Job title (See Instructions) r	Employer (See In SXSW	structions)	
	Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
01	8/18/2014	Contributor address; City; State; Zip Code 3401 Glenview Ave Austin, TX 78703-1448		\$100.00	
				(If travel outside of	Texas, complete Schedule T)
P	rincipal occup	ation / Job title (See Instructions)	Employer (See In	<u> </u>	,,

The Instruction Guide explains how to complete this form.				1 PAGE # Schedule: 16	5/45 Report: 18/82			
2	FILER NAME	Riley, Christopher		3 ACCOUNT # 00010009	(Ethics Commission filers)			
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Friese, Karen	<u> </u>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)			
	09/10/2014	6 Contributor address; City; State; Zip Code 6603 Cat Creek Trl Austin, TX 78731-2600		\$350.00	 			
1				(If travel outside of	Texas, complete Schedule T)			
9	Principal occup Senior Projec	ation / Job title (See Instructions) t Manager	10 Employer (See In K. Friese & Ass					
	Date	Full name of contributor	<u>+)</u>	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	08/21/2014	Contributor address; City; State; Zip Code 5616 Bull Creek Rd Austin, TX 78756-1010		\$100.00	 			
				,	Texas, complete Schedule T)			
	Principal occup Executive Dir	ation / Job title (See Instructions) ector	Employer (See In Movability Austi					
	Date	Full name of contributor ut-of-state PAC (ID# Gadbois, Glenn	<u></u>)	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	09/20/2014	Contributor address; City; State; Zip Code 5616 Bull Creek Rd Austin, TX 78756-1010		\$100.00	 			
				(If travel outside of	Texas, complete Schedule T)			
	Principal occup Executive Dir	ation / Job title (See Instructions) ector	Employer (See In Movability Austi					
	Date	Full name of contributor	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	09/13/2014	Contributor address; City; State; Zip Code 5508 Chadwyck Dr Austin, TX 78723-5414		\$125.00	 			
				(If travel outside of	Texas, complete Schedule T)			
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)				
	Date	Full name of contributor	<u>; </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)			
	09/24/2014	Contributor address; City; State; Zip Code 5508 Chadwyck Dr Austin, TX 78723-5414		\$20.00	 			
				(If travel outside of	Texas, complete Schedule T)			
\vdash	Principal occup	ation / Job title (See Instructions)	Employer (See In	1 .	.,,			
		•		•				

	The Instruction	N GUIDE explains how to complete thi	is form.		1 PAGE#	7/45 Report: 19/82
2	FILER NAME	Riley, Christopher			3 ACCOUNT # 00010009	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out- Gayle, Dewitt	of-state PAC (ID#	!)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	09/08/2014	6 Contributor address; City; S 1609 Scenic Dr Austin, TX 78703-2054	itate; Zip Code		\$350.00	
						Texas, complete Schedule T)
9	Principal occup Architect	ation / Job title (See Instructions)		10 Employer (See In STG Design, In		
	Date	Full name of contributor	of-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	08/04/2014	Contributor address; City; S 3036 Thrushwood Dr Austin, TX 78757-6811	itate; Zip Code	• • • • • • • • • • • • • • • • • • • •	\$100.00	
		Ausiii, 1X 70/3/-0011				
	Principal occup	ation / Job title (See Instructions)		Employer (See In:] `	Texas, complete Schedule T)
				p.sys. (555		
	Date	Full name of contributor	of-state PAC (ID#)	Amount of contribution (\$)	in-kind contribution description (if applicable)
	08/27/2014	Contributor address; City; S 55 Main St Ste 340	tate; Zip Code		\$250.00	
		Colleyville, TX 76034-2959				· · · · · · · · · · · · · · · · · · ·
	Principal occur	ation / Job title (See Instructions)		Employer (See In	<u> </u>	Texas, complete Schedule T)
	Managing dire			Global Real Est		
	Date	Full name of contributor	of-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	07/16/2014	Contributor address; City; S 5221 S Scout Island Cir Austin, TX 78731-3378	tate; Zip Code		\$350.00	
1		Ausun, 17 70701-0070				ı
	Dringing on any n	otion (Joh tilla (Coa Jackwations)		Employer (Cools		Texas, complete Schedule T)
	Homemaker	ation / Job title (See Instructions)		Employer (See In: Self	structions)	
	Date	Full name of contributor	of-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	07/16/2014	Contributor address; City; S 5221 S Scout Island Cir Austin, TX 78731-3378	tate; Zip Code		\$350.00	1
					(If travel outside of	Texas, complete Schedule T)
		ation / Job title (See Instructions)		Employer (See In:	,	
	Doctor and Pr	esident		Mirabel Medical	Systems, Inc.	

_					-
	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 18	3/45 Report: 20/82
2	FILER NAME	Riley, Christopher		3 ACCOUNT # 00010009	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Goldston, Carolyn	<u> </u>)	7 Amount of contribution (\$)	In-kind contribution description (if applicable)
	07/01/2014	6 Contributor address; City; State; Zip Code 3521 Starline Dr Austin, TX 78759-8941		\$100.00	1
_			=	(If travel outside of	Texas, complete Schedule T)
9	Principal occup	oation / Job title (See Instructions)	10 Employer (See In	structions)	
	Date	Full name of contributor	·)	Amount of contribution (\$)	In-kind contribution description (if applicable) (\$9 refunded on 10/6/14)
	09/25/2014	Contributor address; City; State; Zip Code 1408 S 3rd St Austin, TX 78704-2308		\$250.00	! !
	Discipal seems	- Company (Company)	S	1 '	Texas, complete Schedule T)
	CEO	ation / Job title (See Instructions)	Employer (See In: Highview Ventu		
<u>-</u> -	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/22/2014	Contributor address; City; State; Zip Code 9309 Leaning Rock Cir Austin, TX 78730-2731		\$350.00	
	J			(If travel outside of	Texas, complete Schedule T)
	Principal occupa CEO	ation / Job title (See Instructions)	Employer (See Ins Buildasign.com		
_	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/22/2014	Contributor address; City; State; Zip Code 9309 Leaning Rock Cir Austin, TX 78730-2731		\$350.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occupa homemaker	ation / Job title (See Instructions)	Employer (See Ins	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	08/14/2014	Contributor address; City; State; Zip Code 2006 Wychwood Dr Austin, TX 78746-7800		\$150.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See Ins	structions)	, , ,

					<u></u>
	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 19	0/45 Report: 21/82
2	FILER NAME	Riley, Christopher		3 ACCOUNT # 00010009	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# GSD Enterprises, LP	<u>; </u>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
ı	08/05/2014	6 Contributor address; City; State; Zip Code 513 E Monroe St		\$250.00	
		Austin, TX 78704-3129		life francol acceptately and	Towns commission Subadiula TV
•	Principal occur	pation / Job title (See Instructions)	10 Employer (See In	<u></u>	Texas, complete Schedule T)
, 	- mapar occup	autom too like (See matractions)	10 Employer (Gee in	structions)	
	Date	Full name of contributor	;)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/10/2014	Contributor address; City; State; Zip Code 2107 Key West Cv Austin, TX 78746-7257		\$250.00	[
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Engineer	ation / Job title (See Instructions)	Employer (See In Jose I. Guerra,		1 - 100
	Date	Full name of contributor	;)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	07/01/2014	Contributor address; City; State; Zip Code 30 Sangre De Cristo Dr Santa Fe, NM 87506-1108		\$350.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup President	ation / Job title (See Instructions)	Employer (See In Santa Fe Comn		_
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	07/18/2014	Contributor address; City; State; Zip Code PO Box 163164 Austin, TX 78716-3164		\$350.00	
				(If travel outside of	Texas, complete Schedule T)
		ation / Job title (See Instructions) affairs consultant	Employer (See In: Sel f	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	07/18/2014	Contributor address; City; State; Zip Code PO Box 163164 Austin, TX 78716-3164		\$350.00	
				//4 ***********************************	Taura aamulata Sahaa
	Principal occur	ation / Job title (See Instructions)	Employer (See In:	-	Texas, complete Schedule T)
		affairs consultant	Office of Clint H		

<u> — </u>					<u> </u>
	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 20	0/45 Report: 22/82
2	FILER NAME	Riley, Christopher		3 ACCOUNT # 00010009	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Hagemann, Jody	#)	7 Amount of contribution (\$)	8
	07/03/2014	6 Contributor address; City; State; Zip Code 1808 Barton Pkwy Austin, TX 78704-3210		\$150.00	
				(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 ut-of-state PAC (ID# Hailey, Royce Jr.	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	08/27/2014	Contributor address; City; State; Zip Code 3408 Mount Bonnell Rd Austin, TX 78731-5850		\$150.00	
	ļ		!	(If travel outside of	Texas, complete Schedule T)
	Principal occup	L Dation / Job title (See Instructions)	Employer (See Ins	L'	
	· · ·				
	Date	Full name of contributor	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/10/2014	Contributor address; City; State; Zip Code 1201 N Bowser Rd Richardson, TX 75081-2220		\$350.00	
				1 '	Texas, complete Schedule T)
	Principal occupa	ation / Job title (See Instructions)	Employer (See Ins	structions)	
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/13/2014	Contributor address; City; State; Zip Code 4428 Gillis St Austin, TX 78745-1018		\$250.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occupa Associate Pro	ation / Job title (See Instructions) oducer	Employer (See Ins Armadillo Christ	structions)	· · · · -
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/10/2014	Contributor address; City; State; Zip Code 220 Bowlin Cv Dripping Springs, TX 78620-5019		\$250.00	
	I	ı		lif travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See Ins		Texas, complete schedule 1)
	Engineer		Brown & Gay Er		

The Instruc	TION GUIDE explains how to complete this form.		1 PAGE # Schedule: 21	/45 Report: 23/82
2 FILER NAM	E Riley, Christopher		3 ACCOUNT # 00010009	(Ethics Commission filers)
4 Date	5 Full name of contributor ut-of-state PAC (ID Harriss, June	#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
09/25/2014	6 Contributor address; City; State; Zip Code 5333 Tortuga Trl Austin, TX 78731-4545		\$350.00	1 ! !
			(If travel outside of	Texas, complete Schedule T)
9 Principal occ research as	upation / Job title (See Instructions) ssociate	10 Employer (See In The University	structions) of Texas at Austin	
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/25/2014	Contributor address; City; State; Zip Code 5333 Tortuga Trl Austin, TX 78731-4545	• • • • • • • • • • • • • • • • • • • •	\$350.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occ Chief Finan	upation / Job title (See Instructions) cial Officer	Employer (See In Butler Family In		
Date	Full name of contributor ut-of-state PAC (ID# Harutunian, Anne)	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/09/2014	Contributor address; City; State; Zip Code PO Box W Austin, TX 78713-8923		\$350.00	f
			(If travel outside of	Texas, complete Schedule T)
Principal occ Contractor	upation / Job title (See Instructions)	Employer (See In: Harutunian Eng		<u> </u>
Date	Full name of contributor ut-of-state PAC (ID# Harutunian, Kegham	·)	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/09/2014	Contributor address; City; State; Zip Code PO Box W Austin, TX 78713-8923		\$350.00	 - -
			(If travel outside of	Texas, complete Schedule T)
	pation / Job title (See Instructions) / technical coordination	Employer (See Ind Harutunian Engi		<u> </u>
Date	Full name of contributor ut-of-state PAC (ID# Harutunian, Shant)	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/09/2014	Contributor address; City; State; Zip Code PO Box W Austin, TX 78713-8923		\$350.00 	
		ļ	, , , , , , , , , , , , , , , , , , ,	
Principal occi	pation / Job title (See Instructions)	Employer (See Ins	<u></u>	Texas, complete Schedule T)
Technical C		Harutunian Engi		

The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 22	/45 Report: 24/82			
2 FILER NAME	Riley, Christopher		3 ACCOUNT # 00010009	(Ethics Commission filers)			
4 Date	5 Full name of contributor ☐ out-of-state PAC (ID: Harutunian, Takoohy)	7 Amount of contribution (\$)	8			
09/09/2014	6 Contributor address; City; State; Zip Code PO Box W Austin, TX 78713-8923		\$350.00	 			
			(If travel outside of	Texas, complete Schedule T)			
9 Principal occup President	pation / Job title (See Instructions)	10 Employer (See In Harutunian Eng					
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)			
09/09/2014	Contributor address; City; State; Zip Code PO Box W Austin, TX 78713-8923		\$350.00				
			(If travel outside of	Texas, complete Schedule T)			
Principal occur	pation / Job title (See Instructions)	Employer (See In:	i	· · · · · · · · · · · · · · · · · · ·			
	technical coordination	Harutunian Eng					
Date 	Full name of contributor	/)	Amount of contribution (\$)	In-kind contribution description (if applicable)			
09/10/2014	Contributor address; City; State; Zip Code 602 Palo Alto Ln Cedar Park, TX 78613-2941		\$250.00	 			
			•	Texas, complete Schedule T)			
Principal occur Engineer	pation / Job title (See Instructions)	Employer (See In: Cobb Fendley &	structions) Associates, Inc.				
Date	Full name of contributor	<u>; </u>	Amount of contribution (\$)	In-kind contribution description (if applicable) food & beverage for			
08/27/2014	Contributor address; City; State; Zip Code 7701 Bramblewood Cir. Austin, TX 78731		\$350.00	l event			
			(If travel outside of	Texas, complete Schedule T)			
Principal occup Attorney	ation / Job title (See Instructions)	Employer (See In: Husch Blackwel					
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable) food & beverage for			
08/27/2014	Contributor address; City; State; Zip Code 7701 Bramblewood Cir. Austin, TX 78731		\$350.00	event 			
			(If travel outside of	Texas, complete Schedule T)			
Principal occup Teacher	ation / Job title (See Instructions)	Employer (See In: UT Charter Sch					

	The Instruction	ท Guide explains how to comp	elete this form.		1 PAGE # Schedule: 23	i/45 Report: 25/82
2	FILER NAME	Riley, Christopher			3 ACCOUNT # 00010009	(Ethics Commission filers)
4	Date	5 Full name of contributor [Haynes, Lanny	out-of-state PAC (ID#	·)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	09/11/2014	6 Contributor address; C PO Box 2117 Austin, TX 78768-2117	City; State; Zip Code		\$350.00	
					(If travel outside of	Texas, complete Schedule T)
9	Principal occup investor	ation / Job title (See Instructions	s)	10 Employer (See In Self Employed	structions)	
	Date	Full name of contributor [Head, William Sr.	□ out-of-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/07/2014	1130 Camino La Costa Apt 314	City; State; Zip Code		\$200.00	!
	Discipal accus	Austin, TX 78752-3956	<u> </u>		`	Texas, complete Schedule T)
	Retired	ation / Job title (See Instructions)	Employer (See In Retired	structions)	
	Date	Full name of contributor [Hildreth, John	out-of-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/02/2014	Contributor address; C 1801 Lavaca St Apt 12C Austin, TX 78701-1331	City; State; Zip Code		\$250.00	
					(If travel outside of	Texas, complete Schedule T)
	Principal occup Consultant	ation / Job title (See Instructions)	Employer (See In IssueLink	structions)	
	Date	Full name of contributor [Honts, Robert	out-of-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	08/10/2014	Contributor address; C 1402 San Antonio St Ste 102 Austin, TX 78701-1606	City; State; Zip Code		\$350.00	
		7.400.07			(If travel outside of	Texas, complete Schedule T)
	Principal occup President	ation / Job title (See Instructions)	Employer (See In BHP	,	
	Date	Full name of contributor 【 Hopkins, Bill	out-of-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable) food & beverage for
	08/27/2014	Contributor address; C 3324 Silkgrass Bend Austin, TX 78748	City; State; Zip Code		\$243.23	event
					(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions) 1	Employer (See In:	_`	
	Attorney	·		Husch Blackwel		

	The Instruction	on Guide explains how to complete this form.		1 PAGE # Schedule: 24	I/45 Report: 26/82		
2	FILER NAME	Riley, Christopher		3 ACCOUNT # 00010009	(Ethics Commission filers)		
4	Date	5 Full name of contributor ut-of-state PAC (ID#	<u> </u>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
	08/24/2014	6 Contributor address; City; State; Zip Code 3403 Taylors Dr Austin, TX 78703-1047		\$300.00	 		
				(If travel outside of	Texas, complete Schedule T)		
9	Principal occup architect	ation / Job title (See Instructions)	10 Employer (See In Michael Hsu Of	structions) fice of Architectur	e		
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	09/24/2014	Contributor address; City; State; Zip Code 11901 Palisades Pkwy Austin, TX 78732-1242		\$100.00	 		
				[·	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)		
	09/10/2014	Contributor address; City; State; Zip Code 504 E 42nd St Austin, TX 78751-4302		\$350.00	 		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup Engineer	ation / Job title (See Instructions)	Employer (See In: RS&H	structions)			
	Date	Full name of contributor	·)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	08/27/2014	Contributor address; City; State; Zip Code 901 Forest View Dr West Lake Hills, TX 78746-4521		\$100.00	 		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup	ation / Job title (See Instructions)	Employer (See In	<u></u>	, <u> </u>		
	Date	Full name of contributor out-of-state PAC (ID# Johnson, Christie	·)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	09/05/2014	Contributor address; City; State; Zip Code 4600 Mueller Blvd		\$100.00	 		
		1057 Austin, TX 78723-3186			I		
					Texas, complete Schedule T)		
	Principal occup	ation / Job title (See Instructions)	Employer (See In:	structions)			

The Instruc	TION GUIDE explains how to complete this form.		1 PAGE # Schedule: 2	5/45 Report: 27/82
2 FILER NAME	E Riley, Christopher		3 ACCOUNT # 00010009	(Ethics Commission filers)
4 Date	5 Full name of contributor ut-of-state PAC (ID Jones, Jennifer)#)	7 Amount of contribution (\$)	8
08/01/2014	6 Contributor address; City; State; Zip Code 555 E 5th St #917 Austin, TX 78701		\$115.63	l event
	7.25, 77.75.01		(If travel outside of	f Texas, complete Schedule T)
9 Principal occ	upation / Job title (See Instructions)	10 Employer (See In	<u> </u>	
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/02/2014	360 Nueces St Apt 1602		\$100.00	
	Austin, TX 78701-4264		(16 4	·
Principal occu	upation / Job title (See Instructions)	Employer (See In		Texas, complete Schedule T)
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/10/2014	Contributor address; City; State; Zip Code 6335 Gulfton St Ste 100 Houston, TX 77081-1112	•••••••••••	\$350.00	
			(If travel outside of	Texas, complete Schedule T)
Principal occu	pation / Job title (See Instructions)	Employer (See In:	<u> </u>	
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/08/2014	Contributor address; City; State; Zip Code 515 Congress Ave 1500 Austin, TX 78701-3504		\$350.00	
				Texas, complete Schedule T)
Managing Di	pation / Job title (See Instructions) irector	Employer (See Ins Avison Young	structions)	
Date	Full name of contributor	‡)	Amount of contribution (\$)	In-kind contribution description (if applicable)
08/26/2014	Contributor address; City; State; Zip Code 4401 Avenue H Austin, TX 78751-3821		\$100.00	[
				Texas, complete Schedule T)
Principal occu	pation / Job title (See Instructions)	Employer (See Ins	structions)	

Texas Ethics Commission

The Instructi	ON GUIDE explains how to complete this form.	1 PAGE # Schedule: 26	s/45 Report: 28/82				
2 FILER NAME	Riley, Christopher		3 ACCOUNT # 00010009	(Ethics Commission filers)			
4 Date	5 Full name of contributor out-of-state PAC (IE Knight, Joe)#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)			
07/01/2014	6 Contributor address; City; State; Zip Code 3200 Kittowa Cv Austin, TX 78746-2002		\$200.00	 			
			(If travel outside of	Texas, complete Schedule T)			
9 Principal occu Attorney	oation / Job title (See Instructions)	10 Employer (See In Baker Botts LLI					
Date	Full name of contributor)#)	Amount of contribution (\$)	In-kind contribution description (if applicable)			
08/28/2014	Contributor address; City; State; Zip Code 300 Bowie St 602		\$100.00	[
	Austin, TX 78703-4661		(If travel outside of	Texas, complete Schedule T)			
Principal occur	Dation / Job title (See Instructions)	Employer (See In	,				
General Man		Balcones Reso					
Date	Full name of contributor)#)	Amount of contribution (\$)	In-kind contribution description (if applicable)			
09/18/2014	Contributor address; City; State; Zip Code 300 Bowie St		\$100.00	 			
	602 Austin, TX 78703-4661		(If travel outside of	Texas, complete Schedule T)			
Principal occup General Man	pation / Job title (See Instructions) ager	Employer (See In Balcones Reso		-			
Date	Full name of contributor)#)	Amount of contribution (\$)	In-kind contribution description (if applicable)			
09/25/2014	Contributor address; City; State; Zip Code 96 Chicon St Austin, TX 78702-4457		\$100.00	 			
			(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) food & beverage for event			
08/27/2014	Contributor address; City; State; Zip Code 1009 Ellingson Lane Austin, TX 78751		\$350.00				
			(If travel outside of	Texas, complete Schedule T)			
Principal occup Attorney	pation / Job title (See Instructions)	Employer (See In Texas Classroo	structions) m Teachers Asso	ciation			

	The Instruction Guide explains how to complete this form.				7/45 Report: 29/82		
2	FILER NAME	Riley, Christopher		3 ACCOUNT # 00010009	(Ethics Commission filers)		
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Laves, Harold)	7 Amount of contribution (\$)	In-kind contribution description (if applicable)		
1	07/30/2014	6 Contributor address; City; State; Zip Code 7508 Stonecliff Cir Austin, TX 78731-1515		\$150.00			
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In	`	rexas, complete scriedule 1)		
	Date	Full name of contributor	:)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	09/24/2014	Contributor address; City; State; Zip Code 7201 Mesa Dr Austin, TX 78731-2103		\$200.00	 		
		Addan, 17.70701-2100		(If travel outside of	Texas, complete Schedule T)		
	Principal occupa Registered Nu	ation / Job title (See Instructions) urse	Employer (See In: Austin Endosco	•			
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	08/04/2014	Contributor address; City; State; Zip Code 1305 W 22nd St Austin, TX 78705-5332		\$350.00	 		
				•	Texas, complete Schedule T)		
	Principal occupa Founder	ation / Job title (See Instructions)	Employer (See In: Alamo Draft Ho				
	Date	Full name of contributor	:)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	08/24/2014	Contributor address; City; State; Zip Code 4005 Idlewild Rd Austin, TX 78731-6146	••••	\$100.00	 		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occupa	ation / Job title (See Instructions)	Employer (See In	structions)			
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	07/26/2014	Contributor address; City; State; Zip Code 1509 Wild Cat Holw West Lake Hills, TX 78746-3640		\$250.00	1		
				<u> </u>	Texas, complete Schedule T)		
	Principal occupa manager	ation / Job title (See Instructions)	Employer (See Ins Applied material				

	The Instruction Guide explains how to complete this form.				1 PAGE # Schedule: 28	i/45 Report: 30/82
2	FILER NAME	Riley, Christopher			3 ACCOUNT # 00010009	(Ethics Commission filers)
4	Date	5 Full name of contributor Lightsey, Rebecca	out-of-state PAC (ID	<u> </u>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	09/17/2014	6 Contributor address; 520 Academy Dr Austin, TX 78704-1815	City; State; Zip Code		\$100.00	! ! !
					(If travel outside of	Texas, complete Schedule T)
9	Principal occup	ation / Job title (See Instruction	ns)	10 Employer (See In	structions)	
	Date	Full name of contributor Linehan, Paul	out-of-state PAC (ID#	;)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	08/21/2014	Contributor address; 3502 Lost Creek Blvd Austin, TX 78735-1506	City; State; Zip Code	•••••	\$350.00	
					<u> </u>	Texas, complete Schedule T)
	Principal occup President	ation / Job title (See Instruction	ns)	Employer (See In Land Strategies		
	Date	Full name of contributor Lofton, Michael	out-of-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/09/2014	Contributor address; 10119 Willfield Dr Austin, TX 78753-4043	City; State; Zip Code		\$75.00	
					(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instruction	ns)	Employer (See In	structions)	· · · · · · · · · · · · · · · · · · ·
	Date	Full name of contributor Macklin, Caitlin	out-of-state PAC (ID#	;)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	08/09/2014	Contributor address; 2006 E 9th St Austin, TX 78702-3438	City; State; Zip Code		\$100.00	 - -
					(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instruction	ns)	Employer (See In:	structions)	
	Date	Full name of contributor Mandel, Jacob	out-of-state PAC (ID#	;)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	07/15/2014	Contributor address; 4550 N Braeswood Blvd Apt 218 Houston, TX 77096-2880	City; State; Zip Code		\$350.00	! ! !
	[·			(If travel outside of	Texas, complete Schedule T)
	Principal occup Physician	ation / Job title (See Instruction	ns)	Employer (See In: Baylor college o		

The Instruction Guide explains how to con	nplete this form.		1 PAGE # Schedule: 29	1/45 Report: 31/82		
2 FILER NAME Riley, Christopher			3 ACCOUNT # 00010009	(Ethics Commission filers)		
4 Date 5 Full name of contributor Martinez, Roberto	ut-of-state PAC (ID	*)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
09/08/2014 6 Contributor address; 5905 Thames Dr Austin, TX 78723-3232	City; State; Zip Code		\$100.00	 - -		
			(if travel outside of	Texas, complete Schedule T)		
9 Principal occupation / Job title (See Instructio	ns)	10 Employer (See In	structions)			
Date Full name of contributor Mauro, Carmelo	☐ out-of-state PAC (IDi	#)	Amount of contribution (\$)	In-kind contribution description (if applicable) food & beverage for		
09/16/2014 Contributor address; 504 East 5th St. Austin, TX 78701	City; State; Zip Code		\$350.00	event 		
Dringing against in / Joh title /Con Instruction		Employer (See In	<u> </u>	Texas, complete Schedule T)		
Principal occupation / Job title (See Instruction Owner	ns)	Employer (See In Carmelo's Rest				
Date Full name of contributor Mauro, Hilary	out-of-state PAC (ID	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
07/20/2014 Contributor address; 13711 Bay Front Dr Houston, TX 77077-1947	City; State; Zip Code	• • • • • • • • • • • • • • • • • • • •	\$350.00	 		
				Texas, complete Schedule T)		
Principal occupation / Job title (See Instruction Owner & Marketing Director	ns)	Employer (See In Carmelo's Risto	,			
Date Full name of contributor Mauzy, Catherine	out-of-state PAC (ID#	;)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
08/27/2014 Contributor address; 5203 Shoal Creek Blvd Austin, TX 78756-1812	City; State; Zip Code		\$150.00	 		
			(If travel outside of	Texas, complete Schedule T)		
Principal occupation / Job title (See Instruction	ns)	Employer (See In:	-			
Date Full name of contributor McDevitt, Patrick	out-of-state PAC (ID#	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)		
07/20/2014 Contributor address; 101 Colorado St Apt 2302	City; State; Zip Code		\$100.00	[
Austin, TX 78701-4140			,			
			(If travel outside of	Texas, complete Schedule T)		
Principal occupation / Job title (See Instruction	ns)	Employer (See Ins	structions)			

The Instruct	non Guide explains how to complete this form.		1 PAGE#	NAS - Daniel - 00/00
2 FILER NAME	Riley, Christopher		3 ACCOUNT # 00010009	0/45 Report: 32/82 (Ethics Commission filers)
4 Date	5 Full name of contributor ut-of-state PAC (ID# Muskin, Ellen	#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
09/24/2014	6 Contributor address; City; State; Zip Code 4009 Knollwood Dr Austin, TX 78731-2916	•••••	\$350.00	
			(If travel outside of	Texas, complete Schedule T)
9 Principal occu Commercial	pation / Job title (See Instructions) Real Estate	10 Employer (See In Muskin Comme		
Date	Full name of contributor ut-of-state PAC (ID: Naeve, Pat and Chuck	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/19/2014	Contributor address; City; State; Zip Code 6507 Lost Cv	• • • • • • • • • • • • • • • • • • • •	\$100.00	
	Austin, TX 78746-7128		(If travel outside of	Texas, complete Schedule T)
Principal occu	pation / Job title (See Instructions)	Employer (See In	structions)	· · ·
Date	Full name of contributor ut-of-state PAC (ID# Naiser, Marcus	*)	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/10/2014	Contributor address; City; State; Zip Code 115 Pine Vly Portland, TX 78374-4137	• • • • • • • • • • • • • • • • • • • •	\$350.00	
	Poniand, 1X /83/4-413/			l –
Dringing aggr	notion / Joh title /Coe Instructions)	Cooleyes (Coole		Texas, complete Schedule T)
VP	pation / Job title (See Instructions)	Employer (See In LNV	structions)	
Date	Full name of contributor ut-of-state PAC (ID# Nichols, Michael	*)	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/10/2014	Contributor address; City; State; Zip Code 513 Kodiak Trl Cedar Park, TX 78613-4109	• • • • • • • • • • • • • • • • • • • •	\$150.00	
	Codal + alix, 17,70010 4103			
Principal occu	pation / Job title (See Instructions)	Employer (See In:	,	Texas, complete Schedule T)
	pallotty ood dae (eee mendellotte)	Employer (Geo III	ou doubles,	
Date	Full name of contributor ut-of-state PAC (ID# Norton, E. K. III	<u>;)</u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
08/27/2014	Contributor address; City; State; Zip Code 512 E Riverside Dr		\$350.00	
	Ste 200 Austin, TX 78704-1306			·
Dulm et1		Frants (C.)		Texas, complete Schedule T)
Lawyer	pation / Job title (See Instructions)	Employer (See In: Norton Rose Fu		

	The Instruction	אס Guide explains how to complete this form.		1 PAGE # Schedule: 31	/45 Report: 33/82		
2	FILER NAME	Riley, Christopher		3 ACCOUNT # 00010009	(Ethics Commission filers)		
4	Date	5 Full name of contributor	#)	7 Amount of contribution (\$)	In-kind contribution description (if applicable)		
	07/01/2014	6 Contributor address; City; State; Zip Code 30 Sangre De Cristo Dr Santa Fe, NM 87506-1108		\$350.00	 		
				(If travel outside of	Texas, complete Schedule T)		
9	Principal occup Corporate Co	ation / Job title (See Instructions) mmunication	10 Employer (See In Ocanas Group	structions)			
	Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	08/11/2014	Contributor address; City; State; Zip Code 3600 Hillbrook Dr Austin, TX 78731-4040	• • • • • • • • • • • • • • • • • • • •	\$100.00	 		
				(If travel outside of	Texas, complete Schedule T)		
	Principal occup	ation / Job title (See Instructions)	Employer (See In				
			,	· 			
	Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
	09/19/2014	Contributor address; City; State; Zip Code 6202 Burk Burnett Ct Austin, TX 78749-1876		\$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)		
	09/01/2014	Contributor address; City; State; Zip Code 604 W 12th St Austin, TX 78701-1718		\$100.00			
				,	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)		
	07/27/2014	Contributor address; City; State; Zip Code 3708 Grayson Ln Austin, TX 78722-1314		\$75.00	 		
				(If travel outside of	Texas, complete Schedule T)		
Principal occupation / Job title (See Instructions)			Employer (See In	structions)			

Texas Ethics Commission

_							
	The Instruction	งห Guide explains how to com	plete this form.		1 PAGE # Schedule: 32	/45 Report: 34/82	
2	FILER NAME	Riley, Christopher			3 ACCOUNT # 00010009	(Ethics Commission filers)	
4	Date	5 Full name of contributor Pasztor, David	out-of-state PAC (ID	;)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)	
	07/20/2014	6 Contributor address; 2214 Alta Vista Ave Austin, TX 78704-5227	City; State; Zip Code		\$350.00	 	
					(If travel outside of	Texas, complete Schedule T)	
9	Principal occup Chief Executi	ation / Job title (See Instruction ve Officer	ns)	10 Employer (See In David Patszor F	structions) Fine Woodworking		
	Date	Full name of contributor Perry, James Jr.	☐ out-of-state PAC (ID#	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	08/24/2014	Contributor address; 500 Chicon St Austin, TX 78702-2754	City; State; Zip Code		\$100.00	 	
		ridolin, TX FOR ELECT			/// A	 	
_	Principal occur	ation / Job title (See Instruction	ne\	Employer (See In	1	Texas, complete Schedule T)	
	- Trincipal occup	audity sook title foce institution		Employer (occ in			
	Date	Full name of contributor Pomeroy, John II	out-of-state PAC (ID#	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	08/24/2014	Contributor address; 800 W 5th St Apt 1206 Austin, TX 78703-5447	City; State; Zip Code		\$100.00	 - -	
	Dringing occur	ation / Job title (See Instruction	20)	Employer (See In	l '	Texas, complete Schedule T)	
	-ппорагоссор	auon / Job lide (See Mshuchoi	i5)	Employer (See iii	Sil Delioris)		
	Date	Full name of contributor Potter, Joseph	out-of-state PAC (ID#	;)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	07/01/2014	Contributor address; 1630 Waterston Ave Austin, TX 78703-3935	City; State; Zip Code		\$100.00	 	
					l '	Texas, complete Schedule T)	
	Principal occup	ation / Job title (See Instructior	ns)	Employer (See In	structions)		
	Date	Full name of contributor Potter-Miller, Jennifer	out-of-state PAC (ID#	<u>; </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	09/24/2014	Contributor address; 3909 Grayson Ln Austin, TX 78722-1327	City; State; Zip Code		\$100.00	 	
	,				<u> </u>	Texas, complete Schedule T)	
	Principal occup	ation / Job title (See Instruction	ns)	Employer (See In:	structions)		

The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 33	1/45 Report: 35/82		
2 FILER NAME	Riley, Christopher		3 ACCOUNT # 00010009	(Ethics Commission filers)		
4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#Raba-Kistner PAC Inc.	<u> </u>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
08/29/2014	6 Contributor address; City; State; Zip Code PO Box 690287 San Antonio, TX 78269-0287		\$250.00	! ! !		
•			(If travel outside of	Texas, complete Schedule T)		
9 Principal occup	pation / Job title (See Instructions)	10 Employer (See In	<u> </u>			
Date	Full name of contributor ut-of-state PAC (ID# Ramirez, Andrew)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
09/25/2014	Contributor address; City; State; Zip Code 10301 River Plantation Dr Austin, TX 78747-1130		\$200.00	I I I		
			(If travel outside of	Texas, complete Schedule T)		
Principal occup CEO	ation / Job title (See Instructions)	Employer (See In: Rz Communica				
Date	Full name of contributor	·)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
07/07/2014	Contributor address; City; State; Zip Code 510 W 15th St Austin, TX 78701-1512		\$250.00	 		
	Traduit, TX70701 TOTE		(If travel outside of	Texas, complete Schedule T)		
Principal occup President	pation / Job title (See Instructions)	Employer (See In Development 20				
Date	Full name of contributor	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
09/25/2014	Contributor address; City; State; Zip Code 6605 Woodcrest Dr Austin, TX 78759-3827		\$100.00	 		
			(If travel outside of	Texas, complete Schedule T)		
Principal occup	eation / Job title (See Instructions)	Employer (See In:	structions)			
Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
09/10/2014	Contributor address; City; State; Zip Code 2905 Brian Wood Ct Cedar Park, TX 78613-5143		\$350.00	 		
			(If travel outside of	Texas, complete Schedule T)		
Principal occup Engineer	ation / Job title (See Instructions)	Employer (See In: Binkley & Barfie	structions)			

L					
	The Instruction	on Guide explains how to complete this form.		1 PAGE # Schedule: 34	1/45 Report: 36/82
2	FILER NAME	Riley, Christopher		3 ACCOUNT # 00010009	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Richards, Daniel	<u> </u>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	07/31/2014	6 Contributor address; City; State; Zip Code 816 Congress Ave 1200 Austin, TX 78701-2442		\$350.00	
L				-	Texas, complete Schedule T)
9	Principal occup Attorney	eation / Job title (See Instructions)	10 Employer (See In Self	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/18/2014	Contributor address; City; State; Zip Code 8115 Greenslope Dr Austin, TX 78759-8731		\$350.00	! ! !
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	· · · · · · · · · · · · · · · · · · ·
	Software Eng	ineer	Self employed		
	Date	Full name of contributor	<u>+)</u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/25/2014	Contributor address; City; State; Zip Code 2404 Forest Bend Dr Austin, TX 78704-4526		\$200.00	
}				(If travel outside of	Texas, complete Schedule T)
├─	Principal occup	ation / Job title (See Instructions)	Employer (See In	<u>. </u>	Toxas, semplete conteste 1,
	Attorney	, , , , , , , , , , , , , , , , , , ,	Husch Blackwe		
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/16/2014	Contributor address; City; State; Zip Code 203 E 47th St Austin, TX 78751-3106		\$250.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Attorney	ation / Job title (See Instructions)	Employer (See In Duggins Wren I	structions) Mann & Romero	
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	08/26/2014	Contributor address; City; State; Zip Code 627 W San Antonio St San Marcos, TX 78666-4319		\$350.00	1
				(If travel outside of	Texas, complete Schedule T)
\vdash	Principal occup	ation / Job title (See Instructions)	Employer (See In	<u> </u>	
	Real Estate		Corridor Title	•	

	The Instruction	on Guide explains how to complete this form.		1 PAGE # Schedule: 35	6/45 Report: 37/82
2	FILER NAME	Riley, Christopher		3 ACCOUNT # 00010009	(Ethics Commission filers)
4	Date	5 Full name of contributor ut-of-state PAC (ID# Roth, Danny)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	08/11/2014	6 Contributor address; City; State; Zip Code 1503 Wild Cat Holw West Lake Hills, TX 78746-3640		\$250.00	
				(If travel outside of	Texas, complete Schedule T)
9	Principal occup real estate	ation / Job title (See Instructions)	10 Employer (See In Southwest Strai	structions) tegies Group, Inc.	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/11/2014	Contributor address; City; State; Zip Code 300 Bowie St Apt 2602		\$350.00	
i		Austin, TX 78703-4665		(If travel outside of	Texas, complete Schedule T)
	Principal occup Volunteer	ation / Job title (See Instructions)	Employer (See In None	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/25/2014	Contributor address; City; State; Zip Code 10801 Yucca Dr Austin, TX 78759-6037		\$250.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Attorney	ation / Job title (See Instructions)	Employer (See In Winstead PC	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	08/15/2014	Contributor address; City; State; Zip Code 6117 Highlandale Dr Austin, TX 78731-4005		\$100.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	l. '	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/16/2014	Contributor address; City; State; Zip Code 1004 E 7th St Austin, TX 78702-3219		\$150.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In:	structions)	

	OIILI	THAN FEEDGES ON EGA	10		
	The Instruction	אס Guide explains how to complete this form.		1 PAGE # Schedule: 36	/45 Report: 38/82
2	FILER NAME	Riley, Christopher		3 ACCOUNT # 00010009	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Schmandt, Phillip	<u> </u>	7 Amount of contribution (\$)	In-kind contribution description (if applicable)
	07/17/2014	6 Contributor address; City; State; Zip Code 11 Hull Circle Dr West Lake Hills, TX 78746-3709		\$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)
	09/09/2014	Contributor address; City; State; Zip Code 203 Corona Ave San Antonio, TX 78209-4524		\$350.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup attorney	ation / Job title (See Instructions)	Employer (See In self	'	
	Date	Full name of contributor	¥)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/09/2014	Contributor address; City; State; Zip Code 404 Rio Grande St Apt 401 Austin, TX 78701-2861		\$350.00	
			5	•	Texas, complete Schedule T)
	Principal occup Arbol Lindo L	ation / Job title (See Instructions) LC	Employer (See In Co-Founder	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	08/14/2014	Contributor address; City; State; Zip Code 6824 Bay City Bnd Austin, TX 78725-2935		\$150.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor ut-of-state PAC (ID# Scroggs, Jane	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/04/2014	Contributor address; City; State; Zip Code 1714 Summit View Pl Apt 1		\$350.00	
		Austin, TX 78703-3336		(if travel outside of	Texas, complete Schedule T)
	Principal occur	ation / Job title (See Instructions)	Employer (See In		
		school librarian	retired	,	

	The Instruction	on Guide explains how to com	nplete this form.		1 PAGE # Schedule: 37	7/45 Report: 39/82
2	FILER NAME	Riley, Christopher			3 ACCOUNT # 00010009	(Ethics Commission filers)
4	Date	5 Full name of contributor Shade, Randi	out-of-state PAC (ID#	;)	7 Amount of contribution (\$)	8
	09/23/2014	6 Contributor address; 1822 W 10th St Austin, TX 78703-3910	City; State; Zip Code	•••••	\$100.00	
					(If travel outside of	Texas, complete Schedule T)
9	Principal occup	eation / Job title (See Instruction	ns)	10 Employer (See In	structions)	
	Date	Full name of contributor Shands, Rob	out-of-state PAC (ID#	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	08/26/2014	Contributor address; 2525 S Lamar Blvd 304	City; State; Zip Code		\$100.00	
		Austin, TX 78704-4743			<u> </u>	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instruction	ns)	Employer (See In	structions)	
	Date	Full name of contributor Shapiro, Robert	Out-of-state PAC (ID#	<u>+)</u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	07/31/2014	Contributor address; 42 Sundown Pkwy Austin, TX 78746-5258	City; State; Zip Code		\$100.00	
		7,000.11, 777.707.10 0200				' -
						Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instruction	ns)	Employer (See In	structions)	
	Date	Full name of contributor Sheppard, David	out-of-state PAC (ID#	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	08/15/2014	Contributor address; 1304 Nueces St Austin, TX 78701-1722	City; State; Zip Code		\$350.00	1
					(if travel outside of	Texas, complete Schedule T)
	Principal occup Attorney	ation / Job title (See Instruction	ns)	Employer (See In Self	l `	<u> </u>
	5					1
	Date	Full name of contributor Shieh, James	☐ out-of-state PAC (ID#	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	08/13/2014	Contributor address; 2901 Windsor Rd Austin, TX 78703-2345	City; State; Zip Code		\$150.00	1
					(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instruction	ns)	Employer (See In	structions)	

	The Instruction	พ Guide explains how to com	plete this form.		1 PAGE # Schedule: 38	i/45 Report: 40/82
2	FILER NAME	Riley, Christopher			3 ACCOUNT # 00010009	(Ethics Commission filers)
4	Date	5 Full name of contributor Siff, Ted	out-of-state PAC (ID#	<u> </u>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	09/22/2014	6 Contributor address; 604 W 11th St Austin, TX 78701-2007	City; State; Zip Code		\$150.00	
					(If travel outside of	Texas, complete Schedule T)
9	Principal occup	ation / Job title (See Instruction	ns)	10 Employer (See In	structions)	
	Date	Full name of contributor Simms, Cicily	out-of-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	08/27/2014	Contributor address; 707 W 10th St Austin, TX 78701-2033	City; State; Zip Code		\$100.00	
	i				(If travel outside of	Texas, complete Schedule T)
	Principal occup attorney	ation / Job title (See Instruction	ns)	Employer (See In	structions)	
	Date	Full name of contributor Simms, Cicily	out-of-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/16/2014	707 W 10th St	City; State; Zip Code	•••••	\$100.00	
		Austin, TX 78701-2033			<u></u>	Texas, complete Schedule T)
	Principal occup attorney	ation / Job title (See Instruction	ns)	Employer (See In	structions)	
	Date	Full name of contributor Skaggs, Stephen	out-of-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/25/2014	Contributor address; 1108 Toyath St Austin, TX 78703-3921	City; State; Zip Code		\$250.00	
ĺ					(If travel outside of	Texas, complete Schedule T)
		ation / Job title (See Instruction sor / investment banker	ns)	Employer (See In The Bank Advis	structions) ory Group, L.L.C.	*
	Date	Full name of contributor Smith, Bea Ann	out-of-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/11/2014	Contributor address; 1610 Hartford Rd Austin, TX 78703-3314	City; State; Zip Code		\$100.00	
					(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instruction	ns)	Employer (See In:	`	

Texas Ethics Commission

	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 39	9/45 Report: 41/82
2	FILER NAME	Riley, Christopher		3 ACCOUNT # 00010009	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Smith, Jason	<u> </u>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	07/26/2014	6 Contributor address; City; State; Zip Code 2230 College Ave Fort Worth, TX 76110-1950		\$250.00	
				(If travel outside of	Texas, complete Schedule T)
9	Principal occup Attorney	ation / Job title (See Instructions)	10 Employer (See In Law Offices of		
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/10/2014	Contributor address; City; State; Zip Code PO Box 5902 Austin, TX 78763-5902		\$200.00	!
				·	Texas, complete Schedule T)
	Principal occup Engineer	ation / Job title (See Instructions)	Employer (See In Smith Turrieta E		
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/01/2014	Contributor address; City; State; Zip Code 510 E Monroe St Ste 330 Austin, TX 78704-3130		\$350.00	 -
	D			<u></u>	Texas, complete Schedule T)
	Attorney	ation / Job title (See Instructions)	Employer (See In The Snell Law I		
	Date	Full name of contributor	;)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/16/2014	Contributor address; City; State; Zip Code 231 Luther Dr San Antonio, TX 78212-2020		\$350.00	
				(if travel outside of	Texas, complete Schedule T)
	Principal occup Physician	ation / Job title (See Instructions)	Employer (See In Self	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/16/2014	Contributor address; City; State; Zip Code 231 Luther Dr San Antonio, TX 78212-2020		\$350.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In:	l `	,
	Visiting Senio		State of Texas	,	

	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 40	9/45 Report: 42/82
2	FILER NAME	Riley, Christopher	1	3 ACCOUNT # 00010009	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Steiner, Anna)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	08/23/2014	6 Contributor address; City; State; Zip Code 3132 Eanes Cir Austin, TX 78746-6741		\$150.00	
				(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 ut-of-state PAC (ID# Stuart, Donald)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	08/27/2014	Contributor address; City; State; Zip Code 4105 Long Champ Dr Austin, TX 78746-1150		\$350.00	
				1 '	Texas, complete Schedule T)
	Principal occup Lawyer	ation / Job title (See Instructions)	Employer (See In: Metcalfe Wolff S	structions) Stuart & Williams,	LLP
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/25/2014	Contributor address; City; State; Zip Code 208 Barton Springs Rd Austin, TX 78704-1211	••••	\$200.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup G.M.	ation / Job title (See Instructions)	Employer (See In: Hyatt Regency		
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	07/24/2014	Contributor address; City; State; Zip Code 1710 Waterston Ave Austin, TX 78703-3937		\$100.00	{ ! {
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In:		
-	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/02/2014	Contributor address; City; State; Zip Code 1613 W 9th 1/2 St Austin, TX 78703-4711	•••••	\$250.00	1
				(if travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See Ins	<u> </u>	complete concedere 17
	Retired	·	Austin Fire Dept		

	The Instruction	on Guide explains how to complete this form.		1 PAGE# Schedule: 41	/45 Report: 43/82
2	FILER NAME	Riley, Christopher		3 ACCOUNT # 00010009	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Summers, Jim	!)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	08/27/2014	6 Contributor address; City; State; Zip Code 8901 Chisholm Ln Austin, TX 78748-6381		\$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 ut-of-state PAC (ID# Susman, Jim	!)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	08/24/2014	Contributor address; City; State; Zip Code 2108 Lakeshore Dr Austin, TX 78746-2909		\$350.00	
				1	Texas, complete Schedule T)
	Principal occup Architect	ation / Job title (See Instructions)	Employer (See In STG Design	structions)	
	Date	Full name of contributor ut-of-state PAC (ID# Tashnick, Walt	:)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/25/2014	Contributor address; City; State; Zip Code 1200 Castle Hill St Apt H		\$100.00	
		Austin, TX 78703-4165			
				<u></u>	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor ut-of-state PAC (ID# Terkel, Tom)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/23/2014	Contributor address; City; State; Zip Code 3105 Bowman Ave Austin, TX 78703-2253		\$350.00]
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Real Estate D	ation / Job title (See Instructions) levelopment	Employer (See In FourT Realty	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	08/25/2014	Contributor address; City; State; Zip Code 5905 Tumbling Cir Austin, TX 78731-4053		\$100.00	†
				(18 augus) A-1-1	Tavan aamalala Dabadala T
	Principal occurs	ation / Job title (See Instructions)	Employer (See In:	<u> </u>	Texas, complete Schedule T)
	тинограг оссор	audin doc and loce mandendra)	Employer (See III	ou doublis/	

P.O.Box 12070

The histraction Globe explains how to complete this form. 1 PAGE F Schedule: 42/45 Report: 44/82 2 FILER NAME Riley, Christopher 3 ACCOUNT # (Ethics Commission Riles) 00010009 4 Date 5 Full name of contributor out-of-state PAC (IO9 10 Employer (See Instructions) 1 description (fl applicable) 07/21/2014 5 Contributor address; City: State: Zip Code \$100.00 10 Principal occupation / Job title (See Instructions) In-kind contribution (S) description (fl applicable) 10 Principal occupation / Job title (See Instructions) In-kind contribution (S) description (fl applicable) 10 Principal occupation / Job title (See Instructions) In-kind contribution (S) In-kind contribution (S) description (fl applicable) 10 Principal occupation / Job title (See Instructions) In-kind contribution (S) In-kind contribu	ᆫ							
Date Full name of contributor out-of-state PAC (ID#) 7		The Instruction	ON GUIDE explains how to com	plete this form.			2/45 Report: 44/82	
Tobias, Vanessa O7/21/2014	2	FILER NAME	Riley, Christopher			1	(Ethics Commission filers)	
2012 Ford St. Austin. TX 78704-2838	4	Date		Out-of-state PAC (ID)	7 Amount of contribution (\$)		
Principal occupation / Job title (See Instructions) 10 Employer (See Instructions)		07/21/2014	2012 Ford St	City; State; Zip Code			 	
Date Full name of contributor out-of-state PAC (ID#							Texas, complete schedule 1)	
Tobias, Vanessa O7/21/2014 Contributor address; 2012 Ford St Austin, TX 78704-2838 City: State; Zip Code \$100.00 Principal occupation / Job title (See Instructions) Employer (See Instructions) Employer (See Instructions) Employer (See Instructions) Date Full name of contributor address; 22 Congress Ave Ste 1505 Austin, TX 78701-2457 Principal occupation / Job title (See Instructions) Employer (See Instructions) Employer (See Instructions) Employer (See Instructions) Employer (See Instructions) Employer (See Instructions) Employer (See Instructions) Date Full name of contributor address; City: State: Zip Code \$100.00 Date Full name of contributor address; City: State: Zip Code \$100.00 O8/15/2014 Contributor address; City: State: Zip Code \$100.00 O8/15/2014 Contributor address: City: State: Zip Code \$100.00 Apt 256 Austin, TX 78704-1343 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Employer (See Instructions) Employer (See Instructions) Amount of contribution (if applicable) Principal occupation / Job title (See Instructions) Employer (See Instructions) Employer (See Instructions) Amount of contribution (if applicable) O9/25/2014 Contributor address; City: State: Zip Code \$100.00 Amount of contribution (if applicable) O9/25/2014 Contributor address; City: State: Zip Code \$100.00 O9/25/2014 Contributor address: City: State: Zip Code \$50.00 O9/25/2014 Contributor Address: City: S	9	Principal occup	eation / Job title (See Instruction	ns)	10 Employer (See In	structions)		
2012 Ford St. Austin. TX 78704-2838 (if travel outside of Texas, complete Schedule T)		Date		☐ out-of-state PAC (ID#	#)			
Principal occupation / Job title (See Instructions) Date		07/21/2014	2012 Ford St	City; State; Zip Code		\$100.00	I I I	
Date Full name of contributor out-of-state PAC (ID#						(If travel outside of	Texas, complete Schedule T)	
Date Full name of contributor out-of-state PAC (ID#		Principal occup	ation / Job title (See Instruction	ns)	Employer (See In	structions)		
Todd, Bruce Contribution (S) description (if applicable)		•	·			,		
B23 Congress Ave Ste 1505 Austin, TX 78701-2457		Date		out-of-state PAC (ID#	*)			
Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor		09/25/2014	823 Congress Ave Ste 1505	City; State; Zip Code	· · · · · · · · · · · · · · · · · · ·	\$100.00	 	
Principal occupation / Job title (See Instructions) Employer (See Instructions) Employer (See Instructions) Date Full name of contributor contribution contribution description (if applicable) O8/15/2014 Contributor address; City; State; Zip Code 500 E Riverside Dr Apt 256 Austin, TX 78704-1343 Principal occupation / Job title (See Instructions) Employer (See Instructions) Employer (See Instructions) Employer (See Instructions) O9/25/2014 Contributor address; City; State; Zip Code 500 E Riverside Dr Apt 256 Austin, TX 78704-1343 (If travel outside of Texas, complete Schedule T) O9/25/2014 Contributor address; City; State; Zip Code 500 E Riverside Dr Apt 256 Austin, TX 78704-1343 (If travel outside of Texas, complete Schedule T) O9/25/2014 Contributor address; City; State; Zip Code 500 E Riverside Dr Apt 256 Austin, TX 78704-1343 (If travel outside of Texas, complete Schedule T) O9/25/2014			Austin, 1X /8/01-245/			/// A	Towns committee Subserve To	
Date Full name of contributor Todd, Patricia Contributor South Full name of contributor Date Principal occupation / Job title (See Instructions) Date Full name of contributor Out-of-state PAC (ID# State; Zip Code South Principal occupation / Job title (See Instructions) Employer (See Instructions) Employer (See Instructions) Date Full name of contributor Out-of-state PAC (ID# Out-of-state			e 211 en 19 1 1 1 1	,		<u> </u>	iexas, complete Schedule 1)	
Todd, Patricia Contributor address; City; State; Zip Code S00 E Riverside Dr Apt 256 Austin, TX 78704-1343 Contributor Job title (See Instructions) Employer (See Instructions) Employer (See Instructions) Contributor of Todd, Patricia Contributor address; City; State; Zip Code S100.00 (If travel outside of Texas, complete Schedule T) Amount of contribution (\$) description (if applicable) Contributor address; City; State; Zip Code S00 E Riverside Dr Apt 256 Austin, TX 78704-1343 (If travel outside of Texas, complete Schedule T)		Principal occup	ation / Job title (See Instruction	ns)	Employer (See In	structions)		
S00 E Riverside Dr		Date		out-of-state PAC (ID#	*)			
Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor	-	08/15/2014	500 E Riverside Dr Apt 256	City; State; Zip Code			 	
Date Full name of contributor							Texas, complete Schedule T)	
Todd, Patricia Contribution (\$) description (if applicable) Contributor address; City; State; Zip Code \$50.00 \$50.00 Apt 256 Austin, TX 78704-1343 (If travel outside of Texas, complete Schedule T)		Principal occup	ation / Job title (See Instruction	ns)	Employer (See In	structions)		
500 E Riverside Dr Apt 256 Austin, TX 78704-1343 (If travel outside of Texas, complete Schedule T)		Date		out-of-state PAC (ID#	ŧ)			
Austin, TX 78704-1343 (If travel outside of Texas, complete Schedule T)		09/25/2014	500 E Riverside Dr	City; State; Zip Code		\$50.00	 	
							_	
Principal occupation / Job title (See Instructions) Employer (See Instructions)						(If travel outside of	Texas, complete Schedule T)	
		Principal occup	ation / Job title (See Instruction	ns)	Employer (See In	structions)		

SCHEDULE A

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

	The INSTRUCTION	on Guide explains how to complete this form.		1 PAGE # Schedule: 43	3/45 Report: 45/82
2	FILER NAME	Riley, Christopher		3 ACCOUNT # 00010009	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Trickey, Christopher	<u> </u>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	08/27/2014	6 Contributor address; City; State; Zip Code 401 Congress Ave Ste 2200 Austin, TX 78701-3790		\$100.00	
				(If travel outside of	Texas, complete Schedule T)
9	Principal occup	eation / Job title (See Instructions)	10 Employer (See In	structions)	
	Date	Full name of contributor	<u>+</u>)	Amount of contribution (\$)	In-kind contribution description (if applicable)
:	09/24/2014	Contributor address; City; State; Zip Code 3712 Meredith St Austin, TX 78703-2021		\$250.00	!
				(If travel outside of	Texas, complete Schedule T)
Г	Principal occup	pation / Job title (See Instructions)	Employer (See In	structions)	
	Real Estate F	Professional	Tynberg LLC		
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	08/30/2014	Contributor address; City; State; Zip Code 308 Ridgewood Rd Austin, TX 78746-4619		\$350.00	!
				(if travel outside of	Texas, complete Schedule T)
	Principal occup Attorney	ation / Job title (See Instructions)	Employer (See In Norton Rose Fu		
Г	Date	Full name of contributor	‡)	Amount of	In-kind contribution
		Waltz, Steffen		contribution (\$)	description (if applicable)
	09/25/2014	Contributor address; City; State; Zip Code 1301 W 25th St 510 Austin, TX 78705-4254		\$350.00	
		742011, 77 70700 1201		(If travel outside of	Texas, complete Schedule T)
	Principal occup President	pation / Job title (See Instructions)	Employer (See In Dominion Advis		
-	Date	Full name of contributor ut-of-state PAC (ID#	<u> </u>	Amount of	In-kind contribution
	Date	Watkins, Karen	·/	contribution (\$)	description (if applicable)
	08/03/2014	Contributor address; City; State; Zip Code 9005 Heiden Ln Austin, TX 78749-4175	, , , , , , , , , , , , , , , , , , ,	\$350.00	!
				(If travel outside of	Texas, complete Schedule T)
\vdash	Principal occur	Leation / Job title (See Instructions)	Employer (See In	<u></u>	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	Attorney	, , ,,	Office of the Att		

<u> </u>					
	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 44	/45 Report: 46/82
2	FILER NAME	Riley, Christopher	•	3 ACCOUNT # 00010009	(Ethics Commission filers)
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Weber, Andrew)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	08/27/2014	6 Contributor address; City; State; Zip Code 301 Congress Ave Ste 2000 Austin, TX 78701-2960		\$250.00	
┝	Oringinal coour	pation / Job title (See Instructions)	10 Employer (See In	,	, ,
9	Attorney Part		Kelly Hart & Ha		
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	07/01/2014	Contributor address; City; State; Zip Code 1707 E 38th 1/2 St Austin, TX 78722-1211		\$100.00	
				(If travel outside of	Texas, complete Schedule T)
⊢	Principal occur	pation / Job title (See Instructions)	Employer (See In	L:	
	- tinoipai occap	audity des title (des inclusions)	Zinployot (ess in		
	Date	Full name of contributor ut-of-state PAC (ID# Wheelus, C. Daniel	<u>; </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
:	09/25/2014	Contributor address; City; State; Zip Code 3103 Bee Caves Rd Ste 201 Austin, TX 78746-5580		\$350.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup attorney	ation / Job title (See Instructions)	Employer (See In self	structions)	
	Date	Full name of contributor)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	07/19/2014	Contributor address; City; State; Zip Code 7104 Doral Pl Tyler, TX 75703-5754		\$100.00	
					Texas, complete Schedule T)
	Principal occup	eation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor	<u> </u>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/24/2014	Contributor address; City; State; Zip Code 1206 W 8th St Austin, TX 78703-5279		\$350.00	
				(If travel outside of	Texas, complete Schedule T)
\vdash	Principal occurs	ation / Job title (See Instructions)	Employer (See In:	l '	The state of the s
	attorney			len Stuart Wolff LI	_P

SCHEDULE A

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

The Instruct	non Guide explains how to complete this form.		1 PAGE # Schedule: 45	6/45 Report: 47/82
2 FILER NAME	Riley, Christopher		3 ACCOUNT # 00010009	(Ethics Commission filers)
4 Date	5 Full name of contributor ☐ out-of-state PAC (ID# Wolff, Leslie	<u> </u>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
09/24/2014	6 Contributor address; City; State; Zip Code 1206 W 8th St Austin, TX 78703-5279		\$350.00	Texas, complete Schedule T)
9 Principal occurnone	upation / Job title (See Instructions)	10 Employer (See In none		Texas, complete scriedule ()
Date	Full name of contributor ut-of-state PAC (ID# Wynne, Anne	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
08/26/2014	Contributor address; City; State; Zip Code 1036 Liberty Park Dr House 49		\$350.00	! !
	Austin, TX 78746-6990		(if travel outside of	Texas, complete Schedule T)
Principal occu attorney	upation / Job title (See Instructions)	Employer (See In: IkardWynneLLF		
Date	Full name of contributor ut-of-state PAC (ID# Zoom, Carole	<u>*</u>)	Amount of contribution (\$)	In-kind contribution description (if applicable)
09/25/2014	Contributor address; City; State; Zip Code 2037 S Kihei Rd Apt 10 Kihei, HI 96753-9704		\$100.00	
Principal occu	upation / Job title (See instructions)	Employer (See In	<u> </u>	

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense

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

P.O.Box 12070

EXPENDITURE CATEGORIES Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District

Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By

PAGE # Schedule: 1/29 Report: 49/82 2 FillER NAME 2 Fillery, Christopher 3 ACCOUNT # (TEC filters) 00010009	Event Expense Fees	Polling Expense Travel Out Of Di Printing Expense Office Overhead	strict Candidate/Officeholder/Political Committee //Rental Expense OTHER (enter a category not listed above)
Schedule: 1/29 Report: 4/9/22 Filley, Christopher 00010009	1 003		, , , , , , , , , , , , , , , , , , , ,
4 Date 5 Payee name 77/10/2014 6 Amount (6) 7 Payee address City: State; Zip Code Addo Monterey Class Bivd. #613 Austin. 17. 78749 Candidate / Officeholder name Office sought: Office held: Office	1 PAGE#	2 FILER NAME	3 ACCOUNT # (TEC filers)
6 Ancount (8) \$400.00 8 PURPOSE EXPENDITURE 9 Correlete ONLY it discharders \$400.00 Ancidate / Office held: Candidate	Schedule: 1/29 F	Report: 49/82 Riley, Christopher	00010009
6 Amount (s) \$400.00 8 PURPOSE EXPENDITURE 9 Complete ONLY is consistent of the schedule of	4 Date	⁻	
## A00.00 ## A00 Monterey Oaks Blvd. #613 Austin, TX 78749 ## PURPOSE EXPENDITURE Candidate / Officeholder name Candidate / Officeholder name Office sought Officeholder name Officeholder name Office sought Officeholder name Off		• *	
Austin, TX 78749			
8 PURPOSE EXPENDITURE 9 Compete ONLY if direct expenditure of benefit Circl Payse andress City. State. Zip Code 4600 Monterey Caks Blvd. #613 Austin, TX, 78749 PURPOSE OF EXPENDITURE Candidate / Officeholder name Candidate / Officeholder name Candidate / Officeholder name Candidate / Officeholder name Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor Category (See Categories listed at the top of this schedule) Contract labor Category (See Categories listed at the top of this schedule) Contract labor Category (See Categories listed at the top of this schedule) Contract labor Category (See Categories listed at the top of this schedule) Contract labor Category (See Categories listed at the top of this schedule) Contract labor Category (See Categories listed at the top of this schedule) Contract labor Category (See Categories listed at the top of this schedule) Contract labor Category (See Categories listed at the top of this schedule) Contract labor Category (See Categories listed at the top of this schedule) Contract labor Category (See Categories listed at the top of this schedule) Contract labor Category (See Categories listed at the top of this schedule) Contract labor Category (See Categories listed at the top of this schedule) Contract labor Category (See Categories listed at the top of this schedule) Contract labor Category (See Categories listed at the top of this schedule) Check if Austin, TX, officeholder living expense Check if Austin, TX, officeholder living expense Check if Austin, TX, officeholder living expense Check if Austin, TX, officeholder living expense Check if Austin, TX, officeholder living expense Category (See Category (See Categories listed at the top of this schedule) Contract labor Contract labor Contract labor Contract labor Contract labor Contract labor Contract labor Contract labor Contract labor Contract labor Contract labor Contract labor Contract labor Contract labor Contract labor Contract labor Co	\$400.00	4600 Monterey Oaks Blvd. #613 Austin TX 78749	
Salaries/Wages/Contract Labor Complete ONLY if client operation of the contract labor Check if Austin, TX, officeholder living expense		7,400,11, 17,707,10	
Salaries/Wages/Contract Labor Complete ONLY if client operation of the contract labor Check if Austin, TX, officeholder living expense	8	(a) Category (See Categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule T)
9 Complete ONLY if candidate / Officeholder name Check if Austin, TX, officeholder fiving expense Office sought: Office held:	PURPOSE	, ,	
9 Complete ONLY if clared personal control of the page and the page an			
Date O7/15/2014		0 51 105 111	
Date O7/15/2014 Ahuja, Jason Ahuja, Jason Payee address City; State; Zip Code 4600 Monterey Oaks Blvd. #613 Austin, TX 78749 PURPOSE OF EXPENDITURE Complete ONLy if Ideal Payee address City; State; Zip Code Ahuja, Jason Office holder name Office sought: Office held: Office holder name Office sought: Office held: Office holder name Office sought: Office held: Office held: Office holder name Office sought: Office held: Office held: Office holder name Office sought: Office held: Office held: Office holder name Office sought: Office held: Office held: Office holder name Office sought: Office held: Office held: Office holder name Office sought: Office held: Office held: Office holder name Office sought: Office held: Office held: Office holder name Office sought: Office held: Office held: Office holder name Office sought: Office held: Office held: Office held: Office holder name Office sought: Office held: Office held: Office held: Office holder name Office sought: Office held: Offi		Candidate / Officeholder name	Office sought: Office held:
Anunt (5) \$400.00 Anunt (5) \$400.00 Anunt (5) \$400.00 Anunt (5) \$400.00 Anunt (5) Anustin, TX 78749 PURPOSE EXPENDITURE Cardidate / Officeholder name Anunt (5) Anustin, TX 78749 Candidate / Officeholder name Anunt (5) Anustin, TX 78749 Data Anunt (5) Anustin, TX 78749 Payee name Anula, Jason Payee address City, State; Zip Code Anunt (5) Anustin, TX 78749 PURPOSE EXPENDITURE Category (See Categories listed at the top of this schedule) Candidate / Officeholder name Office sought: Office sought: Office held: Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor Description (If travel outside of Texas, complete Schedule T) Contract labor Contract lab	to benefit C/OH		
Amount (\$) \$400.00 Page address City; State; Zip Code 4600 Moniterey Oaks Blvd. #613 Austin, TX 78749 PURPOSE EXPENDITURE Cardegory (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor Complete ONLY if direct expenditure to benefit COH O731/2014 Amount (\$) Page address City; State; Zip Code 4600 Moniterey Oaks Blvd. #613 Austin, TX, officeholder living expense Candidate / Office hold: Candidate / Office hold: Date O731/2014 Amount (\$) Page address City; State; Zip Code 4600 Moniterey Oaks Blvd. #613 Austin, TX 78749 PURPOSE OF EXPENDITURE Candidate / Officeholder name Candidate / Officeholder name Office sought: Description (If travel outside of Texas, complete Schedule T) Contract labor Contract labor Office sought: Office hold: Contract labor Office sought: Office hold: Contract labor Office sought: Office hold: Contract labor Office sought: Office hold: Contract labor Contract labor Office sought: Office hold: Contract labor Office sought: Office hold: Contract labor Office sought: Office hold: Contract labor Office sought: Office hold: Contract labor Office sought: Office hold: Contract labor Office sought: Office hold: Contract labor Office sought: Office hold: Contract labor Office hold: Contract labor Office hold: Contract labor Office hold: Contract labor Office hold: Contract labor Office hold: Contract labor Office hold: Contract labor Office hold: Contract labor Office hold: Contract labor Office hold: Contract labor Office hold: Contract labor Office hold: Contract labor Office hold: Contract labor Office hold: Contract labor Office hold: Contract labor Office hold: Contract labor Office hold: Contract labor Office hold: Contract labor Office hold: Contract labor Office hold:		l	
### Augustin		• •	
Austin, TX 78749 PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OH PURPOSE OF EXPENDITURE Candidate / Office older name Candidate / Office study # Abruja, Jason Payee address City, State; Zip Code 4600 Monterey Oaks Blvd. # 613 Austin, TX, officeholder living expense Candidate / Office hold: Candidate / Officeholder name Date Office sought: Payee name Abruja, Jason Payee address City, State; Zip Code 4600 Monterey Oaks Blvd. # 613 Austin, TX 78749 Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor Complete ONLY if direct expenditure to benefit C/OH Date OBAL Payee name Office sought: Office sought: Office sought: Office hold: Candidate / Officeholder name Description (if travel outside of Texas, complete Schedule T) Contract labor Contract labor Check if Austin, TX, officeholder living expense Office sought: Office hold: Date OBAL Payee name Abruja, Jason Amount (\$) \$300.00 Austin, TX 78749 Purpose OF EXPENDITURE Calegory (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor Calegory (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor Check if Austin, TX, officeholder living expense Office sought: Office hold: Contract labor Check if Austin, TX, officeholder living expense Office hold: Office hold: Office hold: Check if Austin, TX, officeholder living expense Office hold:	, , ,		
PURPOSE OF EXPENDITURE Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor Camplete ONLY if direct expenditure to benefit C/OH Date OF EXPENDITURE Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor Check if Austin, TX, officeholder living expense Office held: Check if Austin, TX, officeholder living expense Office held: Check if Austin, TX, officeholder living expense Office held:	\$400.00		
PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Complete only I if direct expenditure to benefit C/OH Date O7/31/2014 Amount (\$) Payee address City; State; Zip Code 4600 Monterey Oaks Blvd. #613 Austin, TX 78749 Candidate / Officeholder name Complete ONLY if direct expenditure to benefit C/OH Date OF EXPENDITURE Candidate / Officeholder name Candidate / Officeholder name Complete ONLY if direct expenditure to benefit C/OH Payee address City; State; Zip Code 4600 Monterey Oaks Blvd. #613 Austin, TX 78749 Candidate / Officeholder name Complete ONLY if travel outside of Texas, complete Schedule T) Check if Austin, TX, officeholder living expense Office sought: Office held: Complete ONLY if travel outside of Texas, complete Schedule T) Check if Austin, TX, officeholder living expense Office sought: Office held: Payee name 08/12/2014 Amount (\$) Payee address City; State; Zip Code 4600 Monterey Oaks Blvd. #613 Austin, TX 78749 Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor Contract			
OF EXPENDITURE Complete ONLY if direct expenditure to benefit COH Date O7/31/2014 Amount (S) \$510.00 Payee address City; State; Zip Code 4600 Monterey Oaks Blvd. #613 Austin, TX 78749 PURPOSE OF EXPENDITURE Candidate / Officeholder name Office sought: Office sought: Office held: Office sought: Office held: Office sought: Office held: Office sought: Office held: Office sought: Office held: Office held: Office held: Office held: Office sought: Office held: Office held: Office held: Office held: Office sought: Office held:		Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH Date OF Complete ONLY if direct expenditure to benefit C/OH Purpose OF EXPENDITURE Candidate / Officeholder name Check if Austin, TX, officeholder living expense Office sought: Office held: Office sought: Office held: Office sought: Office held: Office sought: Officeholder living expense Office sought: Officeholder living expense Complete ONLY if direct expenditure to benefit C/OH Amount (\$) Payee name Ahuja, Jason Candidate / Officeholder name Office sought: Officeholder living expense Office sought: Office held: Description (if travel outside of Texas, complete Schedule T) Check if Austin, TX, officeholder living expense Office sought: Office held: Date 08/12/2014 Amount (\$) \$300.00 Payee name Ahuja, Jason Amount (\$) \$300.00 Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor Purpose OF EXPENDITURE Candidate / Officeholder name Office sought: Officeholder living expense Contract labor Contract labor Contract labor Contract labor Contract labor Check if Austin, TX, officeholder living expense Office sought: Officeholder living expense Contract labor Cont		Salaries/Wages/Contract Labor	Contract labor
Complete ONLY if direct expenditure to benefit C/OH Date O7/31/2014 Payee name Ahuja, Jason Complete ONLY if direct expenditure to benefit C/OH Date O8/12/2014 Amount (S) Description (Ill travel outside of Texas, complete Schedule T) Complete ONLY if direct expenditure to benefit C/OH Date O8/12/2014 Amount (S) Payee address City; State; Zip Code 4600 Monterey Oaks Blvd. #613 Austin, TX 78749 Candidate / Officeholder name Description (Ill travel outside of Texas, complete Schedule T) Contract labor Contract labor Office sought: Office held: Candidate / Officeholder name Office sought: Office held: Date O8/12/2014 Amount (S) \$300.00 Amount (S) \$300.00 Salaries/Wages/Contract Labor Date OFFICE Salaries/Wages/Contract Labor Description (Ill travel outside of Texas, complete Schedule T) Contract labor Office sought: Office held: Date O8/12/2014 Amount (S) \$300.00 Description (Ill travel outside of Texas, complete Schedule T) Contract labor Contract labor Contract labor Office held: Category (See Categories listed at the top of this schedule) Category (See Categories listed at the top of this schedule) Category (See Categories listed at the top of this schedule) Contract labor Contract labor Office held:	• •		
Date O7/31/2014 Ahuja, Jason Amount (\$) Payee address City: State: Zip Code 4600 Monterey Oaks Blvd. #613 Austin, TX 78749 PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure Complete ONLY if direct expenditure Candidate / Office holder name Office sought: Office held:			Check if Austin TV officeholder living evenes
Date O7/31/2014 Ahuja, Jason Amount (\$)	O1-1- OND 36 %	Condidate / Office helder name	- 11.11
O7/31/2014 Ahuja, Jason Amount (\$) Payee address City; State; Zip Code 4600 Monterey Oaks Blvd. #613 Austin, TX 78749 PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure of Payee name 08/12/2014 Ahuja, Jason Purpose O8/12/2014 Ahuja, Jason Purpose O8/12/2014 Ahuja, Jason Purpose O8/12/2014 Ahuja, Jason Purpose OF EXPENDITURE Candidate / Office Subject is the top of this schedule) Office sought: Office held: Date O8/12/2014 Ahuja, Jason Purpose OF Salaries/Wages/Contract Labor Purpose OF Salaries/Wages/Contract Labor Category (See Categories listed at the top of this schedule) Office held: Date O8/12/2014 Ahuja, Jason Amount (\$) Payee address City; State; Zip Code 4600 Monterey Oaks Blvd. #613 Austin, TX 78749 Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor Contract labor Category (See Categories listed at the top of this schedule) Contract labor Contract labor	direct expenditure	Candidate / Officeholder name	- 11.11
Amount (\$) \$510.00 Purpose OF EXPENDITURE Candidate / Officeholder name OB/12/2014 Amount (\$) \$300.00 Purpose OF EXPENDITURE Candidate / Officeholder name Candidate / Officeholder name Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor Check if Austin, TX, officeholder living expense Office sought: Office held: Description (If travel outside of Texas, complete Schedule T) Check if Austin, TX, officeholder living expense Office sought: Office held: Description (If travel outside of Texas, complete Schedule T) Check if Austin, TX, officeholder living expense Office sought: Office held: Description (if travel outside of Texas, complete Schedule T) Contract labor Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor Contract labor Check if Austin, TX, officeholder living expense Office sought: Office held:	direct expenditure	Candidate / Officeholder name	- 11.11
\$510.00 ### Addo Monterey Oaks Blvd. #613 ### Austin, TX 78749 PURPOSE OF EXPENDITURE	direct expenditure to benefit C/OH	Payee name	- 11.11
Austin, TX 78749 PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OH Amount (\$) Payee name Ahuja, Jason PURPOSE OF EXPENDITURE PURPOSE OBJECTION OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OH Contract labor Check if Austin, TX, officeholder fiving expense Office sought: Office held: Check if Austin, TX, officeholder fiving expense Office sought: Office held: Check if Austin, TX, officeholder fiving expense Office held: Check if Austin, TX, officeholder fiving expense Office held: Check if Austin, TX, officeholder living expense Office held: Check if Austin, TX, officeholder living expense Office held: Check if Austin, TX, officeholder living expense Office held: Check if Austin, TX, officeholder living expense Office held:	direct expenditure to benefit C/OH Date 07/31/2014	Payee name Ahuja, Jason	- 11.11
PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OH Date O8/12/2014 Ahuja, Jason Amount (\$) Payee address City: State; Zip Code 4600 Monterey Oaks Blvd. #613 Austin, TX 78749 PURPOSE OF EXPENDITURE Candidate / Officeholder name Complete ONLY if direct expenditure Complete ONLY if direct expenditure Complete ONLY if direct expenditure Candidate / Officeholder name Contract labor Check if Austin, TX, officeholder living expense Contract labor Check if Austin, TX, officeholder living expense Office sought: Contract labor Contract labor Check if Austin, TX, officeholder living expense Office sought: Office held:	Date 07/31/2014 Amount (\$)	Payee name Ahuja, Jason Payee address City; State; Zip Code	- 11.11
PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OH Date O8/12/2014 Ahuja, Jason Amount (\$) Payee address City: State; Zip Code 4600 Monterey Oaks Blvd. #613 Austin, TX 78749 PURPOSE OF EXPENDITURE Candidate / Officeholder name Complete ONLY if direct expenditure Complete ONLY if direct expenditure Complete ONLY if direct expenditure Candidate / Officeholder name Contract labor Check if Austin, TX, officeholder living expense Contract labor Check if Austin, TX, officeholder living expense Office sought: Contract labor Contract labor Check if Austin, TX, officeholder living expense Office sought: Office held:	Date 07/31/2014 Amount (\$)	Payee name Ahuja, Jason Payee address City; State; Zip Code 4600 Monterey Oaks Blvd. #613	- 11.11
OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OH Date 08/12/2014 Payee name Ahuja, Jason Amount (\$) Payee address City; State; Zip Code 4600 Monterey Oaks Blvd. #613 Austin, TX 78749 PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure Complete ONLY if direct expenditure Complete ONLY if direct expenditure Complete ONLY if direct expenditure Candidate / Officeholder name Check if Austin, TX, officeholder living expense Check if Austin, TX, officeholder living expense Office sought: Office held:	Date 07/31/2014 Amount (\$)	Payee name Ahuja, Jason Payee address City; State; Zip Code 4600 Monterey Oaks Blvd. #613	- 11.11
Complete ONLY if direct expenditure to benefit C/OH Date	Date 07/31/2014 Amount (\$) \$510.00	Payee name Ahuja, Jason Payee address City; State; Zip Code 4600 Monterey Oaks Blvd. #613 Austin, TX 78749	Office sought: Office held: Description (If travel outside of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH Date 08/12/2014 Amount (\$) \$300.00 Payee address City: State; Zip Code 4600 Monterey Oaks Blvd. #613 Austin, TX 78749 Category (See Categories listed at the top of this schedule) OF EXPENDITURE Complete ONLY if direct expenditure Candidate / Officeholder name Office sought: Office sought: Office held: Office sought: Office held: Office sought: Office held: Office sought: Office held: Office sought: Office held: Office sought: Office held: Office sought: Office held:	Date 07/31/2014 Amount (\$) \$510.00	Payee name Ahuja, Jason Payee address City; State; Zip Code 4600 Monterey Oaks Blvd. #613 Austin, TX 78749 Category (See Categories listed at the top of this schedule)	Office sought: Office held: Description (If travel outside of Texas, complete Schedule T)
direct expenditure to benefit C/OH Date 08/12/2014 Ahuja, Jason Amount (\$) \$300.00 Payee address City; State; Zip Code 4600 Monterey Oaks Blvd. #613 Austin, TX 78749 Category (See Categories listed at the top of this schedule) OF EXPENDITURE Complete ONLY if direct expenditure Candidate / Officeholder name Office sought: Office held:	Date 07/31/2014 Amount (\$) \$510.00	Payee name Ahuja, Jason Payee address City; State; Zip Code 4600 Monterey Oaks Blvd. #613 Austin, TX 78749 Category (See Categories listed at the top of this schedule)	Office sought: Office held: Description (If travel outside of Texas, complete Schedule T) Contract labor
Date 08/12/2014	Date 07/31/2014 Amount (\$) \$510.00 PURPOSE OF EXPENDITURE	Payee name Ahuja, Jason Payee address City; State; Zip Code 4600 Monterey Oaks Blvd. #613 Austin, TX 78749 Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Office sought: Office held: Description (If travel outside of Texas, complete Schedule T) Contract labor Check if Austin, TX, officeholder living expense
Amount (\$) \$300.00 Purpose OF EXPENDITURE Amount (\$) Candidate / Officeholder name Payee address City; State; Zip Code 4600 Monterey Oaks Blvd. #613 Austin, TX 78749 Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor Check if Austin, TX, officeholder living expense Office sought: Office held:	Date 07/31/2014 Amount (\$) \$510.00 PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure	Payee name Ahuja, Jason Payee address City; State; Zip Code 4600 Monterey Oaks Blvd. #613 Austin, TX 78749 Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Office sought: Office held: Description (If travel outside of Texas, complete Schedule T) Contract labor Check if Austin, TX, officeholder living expense
Amount (\$) \$300.00 Payee address City; State; Zip Code 4600 Monterey Oaks Blvd. #613 Austin, TX 78749 Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor Complete ONLY if direct expenditure Candidate / Officeholder name Candidate / Officeholder name City; State; Zip Code Description (If travel outside of Texas, complete Schedule T) Contract labor Check if Austin, TX, officeholder living expense Office sought: Office held:	direct expenditure to benefit C/OH Date 07/31/2014 Amount (\$) \$510.00 PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OH	Payee name Ahuja, Jason Payee address City; State; Zip Code 4600 Monterey Oaks Blvd. #613 Austin, TX 78749 Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor Candidate / Officeholder name	Office sought: Office held: Description (If travel outside of Texas, complete Schedule T) Contract labor Check if Austin, TX, officeholder living expense
\$300.00	Date 07/31/2014 Amount (\$) \$510.00 PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OH Date	Payee name Ahuja, Jason Payee address City; State; Zip Code 4600 Monterey Oaks Blvd. #613 Austin, TX 78749 Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor Candidate / Officeholder name	Office sought: Office held: Description (If travel outside of Texas, complete Schedule T) Contract labor Check if Austin, TX, officeholder living expense
Austin, TX 78749 PURPOSE OF EXPENDITURE Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor Complete ONLY if direct expenditure Candidate / Officeholder name Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) Contract labor Check if Austin, TX, officeholder living expense Office sought: Office held:	direct expenditure to benefit C/OH Date 07/31/2014 Amount (\$) \$510.00 PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OH Date 08/12/2014	Payee name Ahuja, Jason Payee address City; State; Zip Code 4600 Monterey Oaks Blvd. #613 Austin, TX 78749 Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor Candidate / Officeholder name Payee name Ahuja, Jason	Office sought: Office held: Description (If travel outside of Texas, complete Schedule T) Contract labor Check if Austin, TX, officeholder living expense
PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure Salaries/Wages/Contract Labor Check if Austin, TX, officeholder living expense Office sought: Office held:	direct expenditure to benefit C/OH Date 07/31/2014 Amount (\$) \$510.00 PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OH Date 08/12/2014 Amount (\$)	Payee name Ahuja, Jason Payee address City; State; Zip Code 4600 Monterey Oaks Blvd. #613 Austin, TX 78749 Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor Candidate / Officeholder name Payee name Ahuja, Jason Payee address City; State; Zip Code	Office sought: Office held: Description (If travel outside of Texas, complete Schedule T) Contract labor Check if Austin, TX, officeholder living expense
PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure Salaries/Wages/Contract Labor Check if Austin, TX, officeholder living expense Office sought: Office held:	direct expenditure to benefit C/OH Date 07/31/2014 Amount (\$) \$510.00 PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OH Date 08/12/2014 Amount (\$)	Payee name Ahuja, Jason Payee address City; State; Zip Code 4600 Monterey Oaks Blvd. #613 Austin, TX 78749 Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor Candidate / Officeholder name Payee name Ahuja, Jason Payee address City; State; Zip Code 4600 Monterey Oaks Blvd. #613	Office sought: Office held: Description (If travel outside of Texas, complete Schedule T) Contract labor Check if Austin, TX, officeholder living expense
OF EXPENDITURE Complete ONLY if direct expenditure Candidate / Officeholder name Complete ONLY if direct expenditure	direct expenditure to benefit C/OH Date 07/31/2014 Amount (\$) \$510.00 PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OH Date 08/12/2014 Amount (\$)	Payee name Ahuja, Jason Payee address City; State; Zip Code 4600 Monterey Oaks Blvd. #613 Austin, TX 78749 Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor Candidate / Officeholder name Payee name Ahuja, Jason Payee address City; State; Zip Code 4600 Monterey Oaks Blvd. #613	Office sought: Office held: Description (If travel outside of Texas, complete Schedule T) Contract labor Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure Candidate / Officeholder name Office sought: Office held:	Date 07/31/2014 Amount (\$) \$510.00 PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OH Date 08/12/2014 Amount (\$) \$300.00	Payee name Ahuja, Jason Payee address City; State; Zip Code 4600 Monterey Oaks Blvd. #613 Austin, TX 78749 Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor Candidate / Officeholder name Payee name Ahuja, Jason Payee address City; State; Zip Code 4600 Monterey Oaks Blvd. #613 Austin, TX 78749 Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T) Contract labor Check if Austin, TX, officeholder living expense Office sought: Office held: Description (If travel outside of Texas, complete Schedule T)
Complete ONLY if direct expenditure Candidate / Officeholder name Office sought: Office held:	Date 07/31/2014 Amount (\$) \$510.00 PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OH Date 08/12/2014 Amount (\$) \$300.00 PURPOSE OF	Payee name Ahuja, Jason Payee address City; State; Zip Code 4600 Monterey Oaks Blvd. #613 Austin, TX 78749 Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor Candidate / Officeholder name Payee name Ahuja, Jason Payee address City; State; Zip Code 4600 Monterey Oaks Blvd. #613 Austin, TX 78749 Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T) Contract labor Check if Austin, TX, officeholder living expense Office sought: Office held: Description (If travel outside of Texas, complete Schedule T)
direct expenditure	Date 07/31/2014 Amount (\$) \$510.00 PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OH Date 08/12/2014 Amount (\$) \$300.00 PURPOSE OF	Payee name Ahuja, Jason Payee address City; State; Zip Code 4600 Monterey Oaks Blvd. #613 Austin, TX 78749 Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor Candidate / Officeholder name Payee name Ahuja, Jason Payee address City; State; Zip Code 4600 Monterey Oaks Blvd. #613 Austin, TX 78749 Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T) Contract labor Check if Austin, TX, officeholder living expense Office sought: Office held: Description (If travel outside of Texas, complete Schedule T) Contract labor
to delient coort	direct expenditure to benefit C/OH Date 07/31/2014 Amount (\$) \$510.00 PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/OH Date 08/12/2014 Amount (\$) \$300.00 PURPOSE OF EXPENDITURE	Payee name Ahuja, Jason Payee address City; State; Zip Code 4600 Monterey Oaks Blvd. #613 Austin, TX 78749 Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor Candidate / Officeholder name Payee name Ahuja, Jason Payee address City; State; Zip Code 4600 Monterey Oaks Blvd. #613 Austin, TX 78749 Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description (If travel outside of Texas, complete Schedule T) Contract labor Check if Austin, TX, officeholder living expense Office sought: Office held: Description (If travel outside of Texas, complete Schedule T) Contract labor Check if Austin, TX, officeholder living expense

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense Polling Expense

P.O.Box 12070

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

rees	The Instruction Guide explains how	• • • • • • • • • • • • • • • • • • • •
1 PAGE#	2 FILER NAME	3 ACCOUNT # (TEC filers)
Schedule: 2/29 F	T Black Obsistantia	00010009
4 Date	5 Payee name	
08/29/2014	Ahuja, Jason	
6 Amount (\$)	7 Payee address City; State; Zip Code	
\$200.00	l' ' ' ' ' '	
\$ 200.00	Austin, TX 78749	
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule T) Contract labor
PURPOSE OF	Salaries/Wages/Contract Labor	Contract labor
EXPENDITURE		□ a
9 Complete ONLY if	Candidate / Officeholder name	Check if Austin, TX, officeholder living expense Office sought: Office held:
direct expenditure	Sandidate / Sinconodor Hario	Cinco coogni.
to benefit C/OH		
Date	Payee name	
09/15/2014	Ahuja, Jason	
Amount (\$)	Payee address City; State; Zip Code	
\$400.00	4600 Monterey Oaks Blvd. #613 Austin, TX 78749	
	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
PURPOSE	Salaries/Wages/Contract Labor	Contract labor
OF EXPENDITURE	-	<u> </u> _
		Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure	Candidate / Officeholder name	Office sought: Office held:
to benefit C/OH		<u> </u>
Date	Payee name	
08/29/2014	Austin AFL-CIO	
Amount (\$)	Payee address City; State; Zip Code	
\$310.00	PO Box 87	
	Austin, TX 78767	
	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
PURPOSE	Advertising Expense	Political print advertising
OF EXPENDITURE	3	
		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	
07/01/2014	Bean, Samuel	
Amount (\$)	Payee address City; State; Zip Code	
\$480.00	2604 Paramont Ave.	
	Austin, TX 78704	
		Description of the second of t
PURPOSE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description (If travel outside of Texas, complete Schedule T) Contract labor
OF	Garanes/wages/Contract Labor	
EXPENDITURE		Check if Austin, TX, officeholder living expense
Complete ONLY if	Candidate / Officeholder name	Office sought: Office held:
direct expenditure to benefit C/OH		-
to perient O(O) I		

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense Politing Expense

EXPENDITURE CATEGORIES

Prise Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out of District
Office Outper/Pental Expense

rees	The Instruction Guide explains ho	· · · · · · · · · · · · · · · · · · ·
1 PAGE#	2 FILER NAME	3 ACCOUNT # (TEC filers)
Schedule: 3/29 F	Dilan Obsistantas	00010009
4 Date	5 Payee name	
07/15/2014	Bean, Samuel	
6 Amount (\$)	7 Payee address City; State; Zip Code	
\$480.00	2604 Paramont Ave.	
*	Austin, TX 78704	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule T) Contract labor
OF	Salaries/Wages/Contract Labor	Contract labor
EXPENDITURE		Charles Access TV and and a living access
9 Complete ONLY if	Candidate / Officeholder name	Check if Austin, TX, officeholder living expense Office sought: Office held:
direct expenditure	- Canada	Cined badgin.
to benefit C/OH		
Date	Payee name	
07/31/2014	Bean, Samuel	188
Amount (\$)	Payee address City; State; Zip Code	
\$420.00	2604 Paramont Ave. Austin, TX 78704	
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
PURPOSE	Salaries/Wages/Contract Labor	Contract labor
OF 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	
08/15/2014	Bean, Samuel	
Amount (\$)	Payee address City; State; Zip Code	
\$540.00	2604 Paramont Ave.	
	Austin, TX 78704	
	Cotomon: (Con Cotomonica listed at the transition and adula)	Description /// we release to Taxon assembly Cabarina Ti
PURPOSE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description (If travel outside of Texas, complete Schedule T) Contract labor
OF EXPENDITURE	Guidines Wagos Contract Lubor	
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	
08/29/2014	Bean, Samuel	
Amount (\$)	Payee address City; State; Zip Code	
\$480.00		
Ψ+00.00	Austin, TX 78704	
DUDDOG	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
PURPOSE OF	Salaries/Wages/Contract Labor	Contract labor
EXPENDITURE		
Complete CALLA	Condidate / Officeholder name	Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure	Candidate / Officeholder name	Office sought: Office held:
to benefit C/OH		

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense

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

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

	_	The Instruction Guide explains he	ow to complete this form.	
1 PAGE#		2 FILER NAME		3 ACCOUNT # (TEC filers)
Schedule: 4/29 F	Report: 52/82	Riley, Christopher		00010009
4 Date	5 Payee name			
09/15/2014	Bean, Samu	el		
6 Amount (\$)	7 Payee addres	s City; State; Zip Code		
\$300.00	2604 Param			
	Austin, TX 7	78704		
	(=) C=1==== (0	Out of the first day the face of the carbon day	(h) Description (Manual extension	(T
8 PURPOSE		e Categories listed at the top of this schedule) ges/Contract Labor	(b) Description (If travel outside of Contract labor	f Texas, complete Schedule T)
OF	Culanes, Wa	ges/comact Labor		
EXPENDITURE			Check if Austin, TX, officeholder	living expense
9 Complete ONLY if	Candidate / O	fficeholder name	Office sought:	Office held:
direct expenditure to benefit C/OH				
	Davis a mares			
Date 07/01/2014	Payee name Blome, Bill			
Amount (\$)	Pavee addres	s City; State; Zip Code		
, ,		-		
\$2,000.00	Austin, TX 7			
	Category (See	Categories listed at the top of this schedule)		f Texas, complete Schedule T)
PURPOSE OF	Salaries/Wa	ges/Contract Labor	Salary	
EXPENDITURE				
	0	Wash ald a same	Check if Austin, TX, officeholder	
Complete ONLY if direct expenditure	Candidate / O	fficeholder name	Office sought:	Office held:
to benefit C/OH				••
Date	Payee name			
07/14/2014	Blome, Bill			
Amount (\$)	Payee addres	s City; State; Zip Code		
\$2,000.00	1405 Waller Austin, TX 7			
	Austill, 177	0702		
	Category (Sec	a Categories listed at the top of this schedule)	Description (If travel outside o	f Texas, complete Schedule T)
PURPOSE	• •	ges/Contract Labor	Salary	Tondo, complete concede ()
OF EXPENDITURE				
		<u> </u>	Check if Austin, TX, officeholder	living expense
Complete ONLY if direct expenditure	Candidate / O	fficeholder name	Office sought:	Office held:
to benefit C/OH				
Date	Payee name	, .	· -	
07/31/2014	Blome, Bill			
Amount (\$)	Payee addres	s City; State; Zip Code		
\$2,000.00	1405 Waller			
	Austin, TX 7	78/02		
			- 1 <u>5</u>	<u> </u>
PURPOSE	• • •	e Categories listed at the top of this schedule)	Description (If travel outside o Salary	f Texas, complete Schedule T)
OF	Salaries/Wa	ges/Contract Labor		
EXPENDITURE			Check if Austin, TX, officeholder	living expense
Complete ONLY if	Candidate / O	fficeholder name	Office sought:	Office held:
direct expenditure to benefit C/OH			Ť	
IO Delite III O/OFI				Fig. 1. Sec. 1

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees

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

P.O.Box 12070

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

		The Instruction Guide explains h	ow to complete this form.	
1 PAGE# 2 FILER NAME				3 ACCOUNT # (TEC filers)
Schedule: 5/29 F	leport: 53/82	Riley, Christopher		00010009
4 Date	5 Payee name			
08/15/2014	Blome, Bill			
6 Amount (\$)	7 Payee addres	s City; State; Zip Code		
\$2,000.00	1405 Waller			
·	Austin, TX 7	8702		
	_		Tuesday	
8 PURPOSE		Categories listed at the top of this schedule)	(b) Description (If travel outside Salary	of Texas, complete Schedule T)
OF	Salaries/wa	ges/Contract Labor	Calary	
EXPENDITURE				
9 Complete ONLY if	Candidate / O	fficeholder name	Check if Austin, TX, officehold Office sought:	or living expense Office held:
direct expenditure	Oandidate / O	metroder name	Office Sought.	Office field.
to benefit C/OH				
Date	Payee name			
08/29/2014	Blome, Bill			
Amount (\$)	Payee addres	s City; State; Zip Code		
\$2,000.00	1405 Waller			
	Austin, TX 7	8702		
	C-1 (C		December 1997	
PURPOSE		Categories listed at the top of this schedule)	Description (If travel outside Salary	of Texas, complete Schedule T)
OF	Salaties/Wai	ges/Contract Labor		
EXPENDITURE			Check if Austin, TX, officehold	or living expanse
Complete ONLY if	Candidate / O	fficeholder name	Office sought:	Office held:
direct expenditure				
to benefit C/OH				
Date	Payee name			
09/15/2014	Blome, Bill			
Amount (\$)	Payee address	**		
\$2,000.00	1405 Waller Austin, TX 7			
	Austri, TX I	0702		
	Category (See	Categories listed at the top of this schedule)	Description (If travel outside	of Texas, complete Schedule T)
PURPOSE		ges/Contract Labor	Salary	e, result, complete constant ()
OF EXPENDITURE		-		
3 2			Check if Austin, TX, officehold	· · · · · · · · · · · · · · · · · · ·
Complete ONLY if	Candidate / O	fficeholder name	Office sought:	Office held:
direct expenditure to benefit C/OH				
Date	Payee name			
07/01/2014	Bray, Timoth	V		
Amount (\$)	Payee addres	s City; State; Zip Code		
\$120.00	-	sant Valley Rd. #107		
Ψ120.00	Austin, TX 7	8741-4601		
	Category (See	Categories listed at the top of this schedule)		of Texas, complete Schedule T)
PURPOSE OF	Salaries/Wag	ges/Contract Labor	Contract labor	
EXPENDITURE				
			Check if Austin, TX, officehold	
Complete ONLY if direct expenditure	Candidate / O	fficeholder name	Office sought:	Office held:
to benefit C/OH			<u> </u>	

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees

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

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

		The Instruction Guide explains he	ow to complete this form.	
1 PAGE#		2 FILER NAME		3 ACCOUNT # (TEC filers)
Schedule: 6/29 F	Report: 54/82	Riley, Christopher		00010009
4 Date	5 Payee name			
07/15/2014	Bray, Timoth	v		
6 Amount (\$)	7 Pavee addres	<u> </u>		
	l'	isant Valley Rd. #107		•
\$400.00	Austin, TX 7			
	''			
	(a) Cotogge (Co	Catagoring listed at the top of this sale of the	(h) Description (if would as write	of Toyon, gamplata Cabadula Ti
8 PURPOSE	' ' ' ' '	e Categories listed at the top of this schedule)	(b) Description (If travel outside Contract labor	of Texas, complete Schedule T)
OF	Salanes/waj	ges/Contract Labor	[
EXPENDITURE				P. San awaran
O Complete OM V.	Candidate / C	fficeholder name	Check if Austin, TX, officeholds	Office held:
9 Complete ONLY if direct expenditure	Candidate / O	nicenoider name	Office sought:	Office field:
to benefit C/OH				
Date	Payee name			
07/31/2014	Bray, Timoth	v		
Amount (\$)	Payee addres	*		
	1 1			
\$450.00	2200 S. Piea Austin, TX 7	sant Valley Rd. #107 '8741-4601		
	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
	Cotococido	Catagorian listed at the tax of this pale of the	Description (If trough cutoids	of Toyan, complete Schedule T\
PURPOSE		e Categories listed at the top of this schedule)	Description (If travel outside Contract labor	of Texas, complete Schedule T)
OF	j Salaries/wa	ges/Contract Labor		
EXPENDITURE			[m -,	
Occupies Office	000000000000000000000000000000000000000		Check if Austin, TX, officeholds	
Complete ONLY if direct expenditure	Candidate / O	fficeholder name	Office sought:	Office held:
to benefit C/OH				
Date	Payee name			
08/15/2014	Bray, Timoth	v		
Amount (\$)	Payee addres	<u> </u>		
``'	,	isant Valley Rd. #107		
\$450.00	Austin, TX 7			
	Category (90)	Categories listed at the top of this schedule)	Description (If travel outside	of Texas, complete Schedule T)
PURPOSE		ges/Contract Labor	Contract labor	5. Todad, complete beneatie 1)
OF	Guidinos/ Waj	goo comicor cacor		
EXPENDITURE			Check if Austin, TX, officeholds	er living expense
Complete ONLY if	Candidate / O	fficeholder name	Office sought:	Office held:
direct expenditure	0	The second section of the second section of the second section of the second section s	oaag	
to benefit C/OH				
Date	Payee name			
08/29/2014	Bray, Timoth	у		
Amount (\$)	Payee addres	s City; State; Zip Code		
\$450.00	2200 S. Plea	sant Valley Rd. #107		j
φ450.00	Austin, TX 7			
	Category (See	c Categories listed at the top of this schedule)	Description (If travel outside	of Texas, complete Schedule T)
PURPOSE		ges/Contract Labor	Contract labor	,
OF EVDENDITUBE		g	İ	
EXPENDITURE			Check if Austin, TX, officeholds	er living expense
Complete ONLY if	Candidate / O	fficeholder name	Office sought:	Office held:
direct expenditure	Janarate / O		2 300g/it.	aaa tiatat
to benefit C/OH				. <u>-</u> -

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense Polling Expense

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

Fees	Printing Expense Office Overhead The Instruction Guide explains ho	· · · · · · · · · · · · · · · · · · ·
1 PAGE#	2 FILER NAME	3 ACCOUNT # (TEC filers)
Schedule: 7/29 F	Dilan Christopher	00010009
4 Date	5 Payee name	•
09/15/2014	Bray, Timothy	
6 Amount (\$)	7 Payee address City; State; Zip Code	
\$825.00	2200 S. Pleasant Valley Rd. #107	
	Austin, TX 78741-4601	
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule T)
PURPOSE	Salaries/Wages/Contract Labor	Contract labor
OF EXPENDITURE		
		Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure	Candidate / Officeholder name	Office sought: Office held:
to benefit C/OH		
Date	Payee name	
07/31/2014	Checkmark Typesetting	·
Amount (\$)	Payee address City; State; Zip Code	
\$119.08	3217 N. IH 35	
	Austin, TX 78722	
	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
PURPOSE	Printing Expense	printing
OF EXPENDITURE	, mang anpones	
EXI ENDITORIE		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	-
09/08/2014	Debellis, Rudy	
Amount (\$)	Payee address City; State; Zip Code	
\$120.00	907 E 15th St Austin, TX 78702	;
	Austill, 1X 76702	
	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
PURPOSE	Salaries/Wages/Contract Labor	Contract labor
OF EXPENDITURE		<u> </u>
		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	
07/01/2014	Diaz, Robert	
Amount (\$)	Payee address City; State; Zip Code	
\$1,250.00	1016 Camino La Costa, Apt 2115 Austin, TX 78752	
	AMBUH, 1A 10102	
	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
PURPOSE	Salaries/Wages/Contract Labor	Salary
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		

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees Gitts/Awards/Memorial Expense Legal Services Food/Beverage Expense Polling Expense

EXPENDITURE CATEGORIES

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

rees	The Instruction Guide explains ho	
1 PAGE#	2 FILER NAME	3 ACCOUNT # (TEC filers)
Schedule: 8/29 F	Diller Obstantantan	00010009
4 Date	5 Payee name	
07/17/2014	Diaz, Robert	
6 Amount (\$)	7 Payee address City; State; Zip Code	
\$1,250.00	1016 Camino La Costa, Apt 2115	
Ψ1,200.00	Austin, TX 78752	
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule T)
PURPOSE	Salaries/Wages/Contract Labor	Salary
EXPENDITURE		
	O The Company	Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure	Candidate / Officeholder name	Office sought: Office held:
to benefit C/OH		
Date	Payee name	
07/31/2014	Diaz, Robert	
Amount (\$)	Payee address City; State; Zip Code	
\$1,250.00	1016 Camino La Costa, Apt 2115	
·	Austin, TX 78752	
PURPOSE	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
OF	Salaries/Wages/Contract Labor	Galary
EXPENDITURE		Check If Austin, TX, officeholder living expense
Complete ONLY if	Candidate / Officeholder name	Office sought: Office held:
direct expenditure		-
to benefit C/OH		<u> </u>
Date	Payee name	
08/15/2014	Diaz, Robert	
Amount (\$)	Payee address City; State; Zip Code	
\$1,250.00	1016 Camino La Costa, Apt 2115 Austin, TX 78752	
	Addin, TATOTOL	
	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
PURPOSE	Salaries/Wages/Contract Labor	Salary
OF EXPENDITURE	, and the second	
		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	
08/29/2014	Diaz, Robert	
Amount (\$)	Payee address City; State; Zip Code	-
\$1,250.00	1016 Camino La Costa, Apt 2115	
Ψ1,200.00	Austin, TX 78752	
	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
PURPOSE OF	Salaries/Wages/Contract Labor	Salary
EXPENDITURE		
		Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure	Candidate / Officeholder name	Office sought: Office held:
to benefit C/OH		

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense Polling Expense Printing Expense

EXPENDITURE CATEGORIES

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

	The Instruction Guide explains he	ow to complete this form.
1 PAGE#	2 FILER NAME	3 ACCOUNT # (TEC filers)
Schedule: 9/29 F	eport: 57/82 Riley, Christopher	00010009
4 Date	5 Payee name	
09/15/2014	Diaz, Robert	
6 Amount (\$)	7 Payee address City; State; Zip Code	
\$625.00	1016 Camino La Costa, Apt 2115	
	Austin, TX 78752	
	to Cotomon (C. O.) in the latest to the latest to	(h) December 1997 of the state
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description (If travel outside of Texas, complete Schedule T) Salary
OF	Salaties/Wages/Contract Labor	'
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	
08/01/2014	Facebook City State 7ia Code	
Amount (\$)	Payee address City; State; Zip Code	
\$11.08	1601 Willow Road Menlo Park, CA 94025	
	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
PURPOSE	Advertising Expense	Political online advertising
OF 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	
08/07/2014	Facebook	
Amount (\$)	Payee address City; State; Zip Code	
\$250.73	1601 Willow Road	
7	Menlo Park, CA 94025	i
PURPOSE	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T) Political online advertising
OF	Advertising Expense	1 Shired Shire advertising
EXPENDITURE		Charlett Austin TV officeholder finites accesses
Complete ONLY if	Candidate / Officeholder name	Check if Austin, TX, officeholder living expense Office sought: Office held:
direct expenditure to benefit C/OH		3
Date	Payee name	
08/18/2014	Facebook	
Amount (\$)	Payee address City; State; Zip Code	
\$500.23	1601 Willow Road Menlo Park, CA 94025	
	mone ran, or orozo	
	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
PURPOSE	Advertising Expense	Political online advertising
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		

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense

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

P.O.Box 12070

EXPENDITURE CATEGORIES 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 Fees		Expense The Instruction		ad/Rental Expense	OTHER (en	ter a category not listed above)
. 5465 "			Guide explains i	now to complete thi	s torm.	T- +000 (NT # GEO (I)
1 PAGE#		2 FILER NAME Riley, Christopher				3 ACCOUNT # (TEC filers)
Schedule: 10/29	, ·	rilley, Offisiopher				00010009
4 Date	5 Payee name					
09/02/2014	Facebook	00.00	7: 0:1:			·
6 Amount (\$)	7 Payee addres		; Zip Code			
\$45.15 	1601 Willow Menlo Park,					
8 51155005	1	e Categories listed at the top	of this schedule)	(b) Description	n (If travel outsi	de of Texas, complete Schedule T)
PURPOSE OF	Advertising I	Expense		Political	online advertisi	ng
EXPENDITURE						
						Ider living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / C	fficeholder name		Опісе	sought:	Office held:
Date	Payee name					
09/24/2014	Facebook					
Amount (\$)	Payee addres	s City; State	Zip Code			
\$751.12	1601 Willow					
	Menlo Park,	CA 94025				
PURPOSE		e Categories listed at the top	of this schedule)	Description	on (II travel outsi Online advertisir	de of Texas, complete Schedule T)
OF	Advertising	Expense		Political	onnio agronion	•9
EXPENDITURE						
Complete ONLY if	Candidate / O	fficeholder name			ustin, 1x, omiceno sought:	Ider living expense Office held:
direct expenditure	Candidate / C	iliceriolaer riame		Onice	Sought.	Onice field.
to benefit C/OH	<u>.</u>					
Date	Payee name					
07/01/2014	FedEx Office	9				
Amount (\$)	Payee addres	s City; State;	Zip Code			
\$8.56	2711 Guada					
	Austin, TX	78705				
				I Busines		11.01.11.77
PURPOSE		e Categories listed at the top	of this schedule)	Descriptio copies	n (It travel outsi	de of Texas, complete Schedule T)
OF	Printing Exp	ense				
EXPENDITURE				Chankisa	untin TV afficaba	Ider living expense
Complete ONLY if	Candidate / O	fficeholder name			ustin, 1 x, omiceno sought:	Office held:
direct expenditure				2.000	- 3	 -
to benefit C/OH	<u> </u>					<u> </u>
Date	Payee name					
07/02/2014	FedEx Office					
Amount (\$)	Payee addres	-	Zip Code			
\$76.43	2711 Guada	lupe St				
	Austin, TX	CU 101				
			***	1 5	- 46.	
PURPOSE	• • •	e Categories listed at the top	of this schedule)	Descriptio copies	n (II travel outsi	de of Texas, complete Schedule T)
OF	Printing Exp	ense		000100		
EXPENDITURE						below the town over
Complete ONLY if	Candidate / O	efficeholder name			ustin, TX, officeho sought:	older living expense Office held:
direct expenditure	Candidate / C	miceroler riditie		Office	sought.	Office field.
to benefit C/OH						

Austin, Texas 78711-2070

POLITICAL EXPENDITURES

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense

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

EXPENDITURE CATEGORIES 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 hor	Rental Expense OTHER (enter a category not listed above)
1 PAGE#	2 FILER NAME	3 ACCOUNT # (TEC filers)
Schedule: 11/29	I =	00010009
4 Date	5 Payee name	00010000
07/11/2014	FedEx Office	•
6 Amount (\$)	7 Payee address City; State; Zip Code	
•		;
\$37.49	Austin, TX 78705	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule T) Copies
OF	Printing Expense	Jopies
EXPENDITURE		Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date	Payee name	
07/11/2014	FedEx Office	
Amount (\$)	Payee address City; State; Zip Code	
\$38.02	2711 Guadalupe St Austin, TX 78705	
PURPOSE	Category (See Categories listed at the top of this schedule) Printing Expense	Description (If travel outside of Texas, complete Schedule T) Copies
OF	Filliang 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		, and the second
Date	Payee name	-
07/15/2014	FedEx Office	
Amount (\$)	Payee address City; State; Zip Code	
\$54.45	2711 Guadalupe St	
ψο το	Austin, TX 78705	
	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
PURPOSE OF	Printing Expense	copies
EXPENDITURE		
		Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date	Payee name	
07/16/2014	FedEx Office	
Amount (\$)	Payee address City; State; Zip Code	
\$48.43	2711 Guadalupe St	j
• · - · · -	Austin, TX 78705	
	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
PURPOSE	Printing Expense	copies
OF EXPENDITURE		
an enonone		Check if Austin, TX, officeholder living expense
Complete ONLY if	Candidate / Officeholder name	Office sought: Office held:
direct expenditure to benefit C/OH		

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees

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

P.O.Box 12070

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

	The INSTRUCTION GOIDE expla	ins now to complete this form.
1 PAGE#	2 FILER NAME	3 ACCOUNT # (TEC filers)
Schedule: 12/29	Report: 60/82 Riley, Christopher	00010009
4 Date	5 Payee name	*
07/17/2014	FedEx Office	
6 Amount (\$)	7 Payee address City; State; Zip Code	
\$30.91	2711 Guadalupe St	
φου. <i>9</i> ι	Austin, TX 78705	
	,	
8	(a) Category (See Categories listed at the top of this schedu	le) (b) Description (If travel outside of Texas, complete Schedule T)
PURPOSE	Printing Expense	copies
OF	Timing Expenses	
EXPENDITURE		Check if Austin, TX, officeholder living expense
9 Complete ONLY if	Candidate / Officeholder name	Office sought: Office held:
direct expenditure	Candidate / Officeriolder frame	Office sought.
to benefit C/OH		
Date	Payee name	
07/18/2014	FedEx Office	
Amount (\$)	Payee address City; State; Zip Code	
	2711 Guadalupe St	
\$63.78	Austin, TX 78705	
	,	
	Category (See Categories listed at the top of this schedu	le) Description (If travel outside of Texas, complete Schedule T)
PURPOSE	Printing Expense	Copies
OF	Tilling Expense	·
EXPENDITURE		Charlest Associated TV attituded listing associated
Complete ONLY if	Candidate / Officeholder name	Check if Austin, TX, officeholder living expense Office sought: Office held:
direct expenditure	Candidate / Officeriolder flame	Office sought.
to benefit C/OH		
Date	Payee name	
07/19/2014	FedEx Office	
Amount (\$)	Payee address City; State; Zip Code	
	2711 Guadalupe St	
\$25.16	Austin, TX 78705	
	,	
	Category (See Categories listed at the top of this schedul	le) Description (If travel outside of Texas, complete Schedule T)
PURPOSE	Printing Expense	copies
OF	Triking 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	
07/20/2014	FedEx Office	
Amount (\$)	Payee address City; State; Zip Code	
\$13.17	2711 Guadalupe St	
Ψίο.	Austin, TX 78705	
	Category (See Categories listed at the top of this schedul	le) Description (If travel outside of Texas, complete Schedule T)
PURPOSE	Printing Expense	copies
OF EXPENDITURE		
LAFENDITURE		Check if Austin, TX, officeholder living expense
Complete ONLY if	Candidate / Officeholder name	Office sought: Office held:
direct expenditure		9
to benefit C/OH		

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense

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

EXPENDITURE CATEGORIES 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	/Rental Expense OTHER (enter a category not listed above)
1 PAGE#	2 FILER NAME	3 ACCOUNT # (TEC filers)
Schedule: 13/29	Ditario Obsidentalian	00010009
4 Date	5 Payee name	
07/22/2014	FedEx Office	
6 Amount (\$)	7 Payee address City; State; Zip Code	
\$19.77	2711 Guadalupe St	
\$.5.7.	Austin, TX 78705	
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule T)
PURPOSE OF	Printing Expense	copies
EXPENDITURE		
		Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure	Candidate / Officeholder name	Office sought: Office held:
to benefit C/OH		
Date	Payee name	
07/24/2014	FedEx Office	
Amount (\$)	Payee address City; State; Zip Code	
\$42.00	2711 Guadalupe St	
·	Austin, TX 78705	
DUDGGG	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
PURPOSE OF	Printing Expense	copies
EXPENDITURE		
Complete CNI Wife	C	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	
07/25/2014	FedEx Office	
Amount (\$)	Payee address City; State; Zip Code	
\$35.49	2711 Guadalupe St	
,	Austin, TX 78705	
PURPOSE	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T) Copies
OF	Printing Expense	Capios
EXPENDITURE		
Complete ONLY if	Candidate / Officeholder name	Check if Austin, TX, officeholder living expense Office sought: Office held:
direct expenditure		Cinco coagni
to benefit C/OH		
Date		
	Payee name	
07/26/2014	FedEx Office	
07/26/2014 Amount (\$)	FedEx Office Payee address City; State; Zip Code	
	FedEx Office Payee address City; State; Zip Code 2711 Guadalupe St	
Amount (\$)	FedEx Office Payee address City; State; Zip Code	
Amount (\$)	FedEx Office Payee address City; State; Zip Code 2711 Guadalupe St Austin, TX 78705	
Amount (\$) \$82.61	FedEx Office Payee address City; State; Zip Code 2711 Guadalupe St Austin, TX 78705 Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
Amount (\$) \$82.61 PURPOSE OF	FedEx Office Payee address City; State; Zip Code 2711 Guadalupe St Austin, TX 78705	Description (If travel outside of Texas, complete Schedule T)
Amount (\$) \$82.61 PURPOSE	FedEx Office Payee address City; State; Zip Code 2711 Guadalupe St Austin, TX 78705 Category (See Categories listed at the top of this schedule)	copies
Amount (\$) \$82.61 PURPOSE OF	FedEx Office Payee address City; State; Zip Code 2711 Guadalupe St Austin, TX 78705 Category (See Categories listed at the top of this schedule)	

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees

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

EXPENDITURE CATEGORIES Salaries/Wages/Contract Labor Solicitation/Fundraising Expense

Travel In District
Travel Out Of District
Office Overhead/Rental Expense

		The Instruction Guide explains ho	w to complete this form.
1 PAGE#		2 FILER NAME	3 ACCOUNT # (TEC filers)
Schedule: 14/29	Report: 62/82	Riley, Christopher	00010009
4 Date	5 Payee name		
07/29/2014	FedEx Office		
6 Amount (\$)	7 Payee address		
\$36.38	2711 Guadal Austin, TX 7		
	Austili, TAT	0.00	
8	(a) Category (See	Categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule T)
PURPOSE	Printing Expense Copies		
OF EXPENDITURE			
			Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure			
to benefit C/OH			
Date	Payee name		
07/31/2014	FedEx Office		
Amount (\$)	Payee address		· · · · · · · · · · · · · · · · · · ·
\$46.02	2711 Guadal Austin, TX 7	upe St	
	Austin, 17.7	8703	
	Category (See	Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
PURPOSE	Printing Expe		copies
OF EXPENDITURE			
			Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure	Candidate / Of	ficeholder name	Office sought: Office held:
to benefit C/OH			
Date	Payee name		
08/01/2014	FedEx Office		· · · · · · · · · · · · · · · · · · ·
Amount (\$)	Payee address		
\$144.45	2711 Guadal Austin, TX 7		
	Austin, IX I	67.00	
	Category (See	Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
PURPOSE OF	Printing Expe	nse	copies
EXPENDITURE			
Complete ONLY if	Condidate / Of	ficeholder name	Check if Austin, TX, officeholder living expense Office sought: Office held:
direct expenditure	Candidate / Oi	icenoider name	Office sought. Office field.
to benefit C/OH			
Date	Payee name		
08/04/2014	FedEx Office		
Amount (\$)	Payee address 2711 Guadal	•	
\$20.51	Austin, TX 7	8705	
	,		
	Category (See	Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
PURPOSE OF	Printing Expe	nse	copies
EXPENDITURE	ı		
Complete ONLY	Condidate / Of	fischalder name	Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure	Candidate / Of	ficeholder name	Office sought: Office held:
to benefit C/OH			

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense Polling Expense

EXPENDITURE CATEGORIES

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

Fees	Printing Expense Office Overhead The Instruction Guide explains hore	, , , , , , , , , , , , , , , , , , , ,
1 PAGE#	2 FILER NAME	3 ACCOUNT # (TEC filers)
Schedule: 15/29	Dilaco Objecta alla co	00010009
4 Date	5 Payee name	00010000
08/05/2014	FedEx Office	
6 Amount (\$)	7 Payee address City; State; Zip Code	
\$7.90		
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) copies
		Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date	Payee name	
08/06/2014	FedEx Office	
Amount (\$)	Payee address City; State; Zip Code	
\$8.24	2711 Guadalupe St Austin, TX 78705	
PURPOSE	Category (See Categories listed at the top of this schedule) Printing Expense	Description (If travel outside of Texas, complete Schedule T) Copies
EXPENDITURE		
0 1 2 01 20	0	Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date	Payee name	
08/07/2014	FedEx Office	
Amount (\$)	Payee address City; State; Zip Code	•
\$79.25	2711 Guadalupe St Austin, TX 78705	
	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
PURPOSE OF	Printing Expense	copies
EXPENDITURE		Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date	Payee name	
08/08/2014	FedEx Office	
Amount (\$)	Payee address City; State; Zip Code	
\$86.36	2711 Guadalupe St Austin, TX 78705	
PURPOSE OF	Category (See Categories listed at the top of this schedule) Printing Expense	Description (If travel outside of Texas, complete Schedule T) Copies
EXPENDITURE		
		Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees

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

EXPENDITURE CATEGORIES

salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out of District
Office Overhead/Rental Expense

	The Instruction Guide explains ho	ow to complete this form.		
1 PAGE#	2 FILER NAME	3 ACCOUNT # (TEC filers)		
Schedule: 16/29	Report: 64/82 Riley, Christopher	00010009		
4 Date 08/09/2014	5 Payee name FedEx Office			
6 Amount (\$)	7 Payee address City; State; Zip Code			
\$61.63				
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) Copies		
2.0 1. 000.00	O-dila- (Off-ab-lda	Check if Austin, TX, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:		
Date	Payee name			
08/12/2014	FedEx Office			
Amount (\$)	Payee address City; State; Zip Code			
\$52.67	2711 Guadalupe St Austin, TX 78705			
DUDDOOF	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)		
PURPOSE OF	Printing Expense	copies		
EXPENDITURE				
Complete ONLY if	Candidate / Officeholder name	Check if Austin, TX, officeholder living expense Office sought: Office held:		
direct expenditure to benefit C/OH	Canadate / Cincerciati Name			
Date	Payee name			
08/13/2014	FedEx Office			
Amount (\$)	Payee address City; State; Zip Code			
\$8.97	2711 Guadalupe St Austin, TX 78705			
PURPOSE OF	Category (See Categories listed at the top of this schedule) Printing Expense	Description (If travel outside of Texas, complete Schedule T) Copies		
EXPENDITURE		Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:		
Date	Payee name			
08/23/2014	FedEx Office			
Amount (\$)	Payee address City; State; Zip Code			
\$16.56	2711 Guadalupe St Austin, TX 78705			
PURPOSE	Category (See Categories listed at the top of this schedule) Printing Expense	Description (If travel outside of Texas, complete Schedule T) Copies		
OF EXPENDITURE	* *	Check if Austin TV officeholder finites assessed		
Complete ONLY if	Candidate / Officeholder name	Check if Austin, TX, officeholder living expense Office sought: Office held:		
direct expenditure to benefit C/OH				

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense

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

Polling Expense Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Office Overhead/Rental Expense Fees Printing Expense The Instruction Guide explains how to complete this form. PAGE # 2 FILER NAME 3 ACCOUNT # (TEC filers) Riley, Christopher Schedule: 17/29 Report: 65/82 00010009 Date Payee name 07/03/2014 First Data Payee address 6 Amount (\$) City; State; Zip Code 5565 Glenridge Connector NE \$36.10 Atlanta, GA 30342 8 (a) Category (See Categories listed at the top of this schedule) (b) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** credit card processing fees Accounting/Banking OF **EXPENDITURE** Check if Austin, TX, officeholder living expense Office held: Complete ONLY if Candidate / Officeholder name Office sought: direct expenditure to benefit C/OH Payee name 07/03/2014 First Data Amount (\$) Pavee address City; State; Zip Code 5565 Glenridge Connector NE \$262.72 Atlanta, GA 30342 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** credit card processing fees Accounting/Banking OF **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate / Officeholder name Office sought: Office held: Complete ONLY if direct expenditure to benefit C/OH Date Payee name First Data 07/03/2014 Amount (\$) Payee address City; State; Zip Code 5565 Glenridge Connector NE \$611.11 Atlanta, GA 30342 Category (See Categories listed at the top of this schedule) (If travel outside of Texas, complete Schedule T) Description **PURPOSE** credit card processing fees Accounting/Banking QF **EXPENDITURE** Check if Austin, TX, officeholder living expense Complete ONLY if Office sought: Candidate / Officeholder name Office held: direct expenditure to benefit C/OH Date Payee name First Data 08/04/2014 Amount (\$) Payee address State: Zip Code 5565 Glenridge Connector NE \$230.25 Atlanta, GA 30342 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Credit card processing fees Accounting/Banking OF **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate / Officeholder name Office held: Complete ONLY if Office sought: direct expenditure to benefit C/OH

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees

EXPENDITURE CATEGORIES 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

	3	The INSTRUCTION GUIDE explains he	ow to complete this form.	
1 PAGE#		2 FILER NAME		3 ACCOUNT # (TEC filers)
Schedule: 18/29	Report: 66/82	Riley, Christopher		00010009
4 Date 08/04/2014	5 Payee name First Data			
6 Amount (\$)	7 Payee address	s City; State; Zip Code		
\$64.45	[
	(a) Catagoni (Car	. Protogramina linka di ak Alim dana af dhiin nahimuli da l	(th) Depositation (the sound outside	4T
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking (b) Description (If travel outside of Texas, complete Schedule T) Credit card processing fees			
OF EXPENDITURE			Check if Austin, TX, officeholde	r living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Candidate / Officeholder name Office sought: Office held:			
Date	Payee name			
08/04/2014	First Data			
Amount (\$)	Payee address	s City; State; Zip Code		
\$529.11	5565 Glenrid Atlanta, GA	lge Connector NE 30342		
BURBOOK		Categories listed at the top of this schedule)		of Texas, complete Schedule T)
PURPOSE OF	Accounting/E	Accounting/Banking Credit card processing fees		
EXPENDITURE			Charlest Associal TV office helder	. W. dan a
Complete ONLY if	Candidate / Ot	fficeholder name	Check if Austin, TX, officeholde Office sought:	Office held:
direct expenditure to benefit C/OH				
Date	Payee name			
09/03/2014	First Data			
Amount (\$)	Payee address			
\$19.20	5565 Glenrid Atlanta, GA	ge Connector NE 30342		
PURPOSE OF	Category (See Accounting/E	Categories listed at the top of this schedule) Sanking	Description (If travel outside of Credit card processing feet	of Texas, complete Schedule T)
EXPENDITURE			Check if Austin, TX, officeholder	r livina expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Of	ficeholder name	Office sought:	Office held:
Date	Payee name	-		
09/03/2014	First Data			
Amount (\$)	Payee address	S City; State; Zip Code		
\$104.92	5565 Glenrid Atlanta, GA	ge Connector NE 30342		
PURPOSE		Categories listed at the top of this schedule)	Description (If travel outside of Credit card processing feet	of Texas, complete Schedule T)
OF	Accounting/E	panking	2.22. Said proceeding foo	-
EXPENDITURE			Check if Austin, TX, officeholde	r living experse
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Of	ficeholder name	Office sought:	Office held:

EXPENDITURE CATEGORIES

POLITICAL EXPENDITURES

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense

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

Salaries/Wages/Contract Labor Solicitation/Fundraising Expense 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) Office Overhead/Rental Expense Printing Expense Fees The Instruction Guide explains how to complete this form. 3 ACCOUNT # (TEC filers) PAGE # 2 FILER NAME Riley, Christopher 00010009 Schedule: 19/29 Report: 67/82 5 Payee name 4 Date First Data 09/03/2014 Payee address 6 Amount (\$) City; State; Zip Code 5565 Glenridge Connector NE \$318.39 Atlanta, GA 30342 8 (a) Category (See Categories listed at the top of this schedule) (b) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Credit card processing fees Accounting/Banking 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 Payee name Date Goss, Delwin 08/26/2014 Amount (\$) Payee address City; State; Zip Code 6410 Ponca St. \$450.00 Austin, TX 78741 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** contract labor Salaries/Wages/Contract Labor OF **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate / Officeholder name Office sought: Office held: Complete ONLY if direct expenditure to benefit C/OH Date Payee name Goss, Delwin 09/22/2014 Payee address Amount (\$) City; State; Zip Code 6410 Ponca St. \$180.00 Austin, TX 78741 Description Category (See Categories listed at the top of this schedule) (If travel outside of Texas, complete Schedule T) PURPOSE contract labor Salaries/Wages/Contract Labor OF **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate / Officeholder name Office sought: Office held: Complete ONLY if direct expenditure to benefit C/OH Date Pavee name 09/15/2014 Green, Joseph Amount (\$) Payee address City; State; Zip Code 300 Crockett #121 \$200.00 Austin, TX 78704 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Contract labor Salaries/Wages/Contract Labor OF **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate / Officeholder name Complete ONLY if Office sought: Office held: direct expenditure to benefit C/QH

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense

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

EXPENDITURE CATEGORIES

Pase Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District Travel Out 01 District

Fees	Printing Expense Office Overhead The Instruction Guide explains hore	, , ,
1 PAGE#	2 FILER NAME	3 ACCOUNT # (TEC filers)
Schedule: 20/29	I - pr - or	00010009
4 Date	5 Payee name	00010009
07/31/2014	Heideman, Brian	
6 Amount (\$)	7 Payee address City; State; Zip Code	
\$250.00		
4_00.00	Harker Heights, TX 76548	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule T) Website services
OF	Advertising Expense	Website services
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 Heideman, Brian	
09/21/2014 Amount (\$)	Payee address City; State; Zip Code	
` '	1	
\$50.00	Harker Heights, TX 76548	
	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
PURPOSE OF	Advertising Expense	Website services
EXPENDITURE		
0	Candidata (Officely et de	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	
08/15/2014	Ivory, J'vona	· <u>·</u> ···
Amount (\$)	Payee address City; State; Zip Code	
\$650.00	150 Klattenhoff Lane #5207 Hutto, TX 78634	
	11010, 17,70004	
	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
PURPOSE	Salaries/Wages/Contract Labor	Salary
OF 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	
08/29/2014	Ivory, J'vona	
Amount (\$)	Payee address City; State; Zip Code	
\$650.00	150 Klattenhoff Lane #5207	
	Hutto, TX 78634	
	Catagony (See Catagories listed at the ten of this selection	Description //throughoutside of Tables of Cale of Tables
PURPOSE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description (If travel outside of Texas, complete Schedule T) Salary
OF EYBENDITUBE	Salahoor Hagoor Cornitate Eabor	·
EXPENDITURE		Check If Austin, TX, officeholder living expense
Complete ONLY if	Candidate / Officeholder name	Office sought: Office held:
direct expenditure to benefit C/OH		

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense

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

EXPENDITURE CATEGORIES Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District

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

Fees	Printing Expense I raver Out Or District Candidate/Officenoide//Political Committee Printing Expense Office Overhead/Rental Expense OTHER (enter a category not listed above) The INSTRUCTION GUIDE explains how to complete this form.			
A DAGE #				
1 PAGE#	Penort: 69/82 Riley, Christopher	3 ACCOUNT # (TEC filers)		
Schedule: 21/29	1100011: 00/02	00010009		
4 Date	5 Payee name			
09/15/2014	Ivory, J'vona			
6 Amount (\$)	7 Payee address City; State; Zip Code			
\$650.00	150 Klattenhoff Lane #5207 Hutto, TX 78634			
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description (If travel outside of Texas, complete Schedule T) Salary		
EXPENDITURE		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 Kelly Graphics	·		
Amount (\$)	Payee address City; State; Zip Code			
\$4,887.02	1409 Quaker Ridge Austin, TX 78746			
BUBBOOK	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)		
PURPOSE OF	Printing Expense	Printing		
EXPENDITURE	·			
		Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:		
Date	Payee name			
08/13/2014	Kelly Graphics			
Amount (\$)	Payee address City; State; Zip Code			
\$11,349.55	1409 Quaker Ridge Austin, TX 78746			
	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)		
PURPOSE OF	Printing Expense	Printing, postage and mailing services		
EXPENDITURE				
		Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:		
Date	Payee name			
08/20/2014	Kelly Graphics			
Amount (\$)	Payee address City; State; Zip Code			
\$1,798.03	1409 Quaker Ridge Austin, TX 78746			
	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)		
PURPOSE OF	Printing Expense	Yard signs		
EXPENDITURE		<u> </u> _		
		Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:		

EXPENDITURE CATEGORIES

POLITICAL EXPENDITURES

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense

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# FILER NAME 3 ACCOUNT # (TEC filers) Riley, Christopher 00010009 Schedule: 22/29 Report: 70/82 4 Date 5 Payee name Kelly Graphics 09/15/2014 6 Amount (\$) Pavee address City; State; Zip Code 1409 Quaker Ridge \$5,346.58 Austin, TX 78746 (b) Description 8 (a) Category (See Categories listed at the top of this schedule) (If travel outside of Texas, complete Schedule T) **PURPOSE** Printing, postage and mailing services Printing 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 Live Oak Gottesman 07/29/2014 Amount (\$) Payee address City; State; Zip Code San Gabriel, Ltd. \$2,400,00 Austin, TX 78735 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Office rent 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 Pavee name 07/31/2014 Nalley, Jamie Amount (\$) Payee address Zip Code City; State: 3413 Cedar St. Unit A \$500.00 Austin, TX 78705 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Contract labor Salaries/Wages/Contract Labor 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 Nalley, Jamie 08/15/2014 Amount (\$) Payee address City; State; Zip Code 3413 Cedar St. Unit A \$500.00 Austin, TX 78705 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Contract labor Salaries/Wages/Contract Labor **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

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense **Event Expense**

Texas Ethics Commission

EXPENDITURE CATEGORIES Gifts/Awards/Memorial Expense Legal Services Food/Beverage 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 OTHER (enter a category not listed above)

Polling Expense Printing Expense Office Overhead/Rental Expense The Instruction Guide explains how to complete this form. PAGE # FILER NAME 3 ACCOUNT # (TEC filers) Riley, Christopher Schedule: 23/29 Report: 71/82 00010009 4 Date 5 Payee name 08/29/2014 Nalley, Jamie 6 Amount (\$) Payee address City: State: Zip Code 3413 Cedar St. Unit A \$500.00 Austin, TX 78705 (a) Category (See Categories listed at the top of this schedule) 8 (b) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Contract labor Salaries/Wages/Contract Labor 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 09/15/2014 Nalley, Jamie Amount (\$) Payee address City; State: Zip Code 3413 Cedar St. Unit A \$500.00 Austin, TX 78705 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Contract labor Salaries/Wages/Contract Labor 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 Payee name 07/02/2014 NGP Van, Inc. Amount (\$) Payee address City; State; Zip Code 1105 15th Street NW, Ste. 500 \$320.00 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 Payee name NGP Van, Inc. 08/04/2014 Amount (\$) Payee address City; State; Zip Code 1105 15th Street NW, Ste. 500 \$320.00 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

(512)463-5800 TDD 1-800-735-2989 SCHEDULE F

POLITICAL EXPENDITURES

Advertising Expense Accounting/Banking Consulting Expense Event Expense

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

EXPENDITURE CATEGORIES 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	WRental Expense OTHER (enter a category not listed above)
1 PAGE#	2 FILER NAME	•
Schedule: 24/29	I = 0 - 0 - 1 - 1	3 ACCOUNT # (TEC filers) 00010009
4 Date	5 Payee name	} 00010009
09/02/2014	NGP Van, Inc.	
6 Amount (\$)	7 Payee address City; State; Zip Code	
\$320.00	l	
ψ320.00	Washington, DC 20005	
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule T)
PURPOSE OF	Office Overhead/Rental Expense	database software
EXPENDITURE		n
9 Complete ONLY if	Candidate / Officeholder name	Check if Austin, TX, officeholder living expense Office sought: Office held:
direct expenditure	Canadate / Officeriolest Harris	Office sought.
to benefit C/OH		
Date	Payee name	
07/18/2014	Office Max	
Amount (\$)	Payee address City; State; Zip Code	
\$10.78	907 West 5th Street Austin, TX 78703	
	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
PURPOSE OF	Office Overhead/Rental Expense	Office supplies
EXPENDITURE		<u>_</u>
		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	
07/18/2014	Office Max	
Amount (\$)	Payee address City; State; Zip Code	
\$21.30	907 West 5th Street	
	Austin, TX 78703	
	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
PURPOSE	Office Overhead/Rental Expense	Office supplies
OF 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	
08/01/2014	Office Max	
Amount (\$)	Payee address City; State; Zip Code	
\$130.59	907 West 5th Street	
	Austin, TX 78703	j
	0-1	Description (II)
PURPOSE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description (If travel outside of Texas, complete Schedule T) Office supplies
OF EXPENDITURE	Omoe Overneau/Nemai 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		-

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense

direct expenditure to benefit C/OH

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

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

EXPENDITURE CATEGORIES

Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By

Polling Expense
Printing Expense Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Travel Out Of District Office Overhead/Rental Expense Fees The Instruction Guide explains how to complete this form. 1 PAGE# 2 FILER NAME 3 ACCOUNT # (TEC filers) Riley, Christopher 00010009 Schedule: 25/29 Report: 73/82 4 Date 5 Payee name Orr, Baxter 08/27/2014 6 Amount (\$) Pavee address City: State: Zip Code 531 Virginia Ave. #404 \$1,000,00 Indianapolis, IN 46203 8 (a) Category (See Categories listed at the top of this schedule) (b) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** graphic design Printing 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 Payee name Date Postmaster 07/10/2014 Amount (\$) Pavee address City; State; Zip Code 3507 N. Lamar Blvd \$98.00 Austin, TX 78703 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** postage Solicitation/Fundraising 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 Postmaster 07/12/2014 Payee address Amount (\$) State; Zip Code City; 3507 N. Lamar Blvd \$39.20 Austin, TX 78703 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Postage Printing 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 Pavee name Postmaster 07/16/2014 Amount (\$) Payee address City; State; Zip Code 3507 N. Lamar Blvd \$490.00 Austin, TX 78703 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** postage Solicitation/Fundraising Expense OF **EXPENDITURE** Check if Austin, TX, officeholder living expense Complete ONLY if Candidate / Officeholder name Office sought: Office held:

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense

to benefit C/OH

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

EXPENDITURE CATEGORIES 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/Rental Expense OTHER (enter a category not listed above) The INSTRUCTION GUIDE explains how to complete this form. 2 FILER NAME 1 PAGE# 3 ACCOUNT # (TEC filers) Riley, Christopher Schedule: 26/29 Report: 74/82 00010009 5 Payee name Date Postmaster 08/13/2014 6 Amount (\$) Payee address City; State; Zip Code 3507 N. Lamar Blvd \$49.00 Austin, TX 78703 8 (a) Category (See Categories listed at the top of this schedule) (b) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Postage Printing 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 09/15/2014 Reese, Melissa Amount (\$) Payee address State: Zip Code City; 2503 Bridle Path Apt. B \$750.00 Austin, TX 78703 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Videography Consulting 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 San Gabriel, Ltd. 08/29/2014 Payee address Amount (\$) City; State: Zip Code Live Oak Gottesman \$1,200.00 Austin, TX 78735 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Office rent 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 07/01/2014 Amount (\$) Payee address City; State; Zip Code P.O. Box 301074 \$3,000.00 Austin, TX 78704 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Fundraising & compliance consulting Consulting Expense OF **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate / Officeholder name Complete ONLY if Office sought: Office held: direct expenditure

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense Polling Expense

EXPENDITURE CATEGORIES
ense 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)

Fees	Printing Expense Office Overhead The Instruction Guide explains ho	t/Rental Expense OTHER (enter a category not listed above)
1 PAGE#	2 FILER NAME	3 ACCOUNT # (TEC filers)
Schedule: 27/29	D'I OLIVE	00010009
4 Date	5 Payee name	
08/01/2014	Susan Harry Consulting, LLC	
6 Amount (\$)	7 Payee address City; State; Zip Code	
\$3,000.00	P.O. Box 301074	
	Austin, TX 78704	
	(2) October (2) October (3)	I the Description of the Land
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description (If travel outside of Texas, complete Schedule T) Fundraising & compliance consulting
OF EXPENDITURE	Conditing Expense	
EXPENDITORE		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	
08/15/2014	Susan Harry Consulting, LLC	
Amount (\$)	Payee address City; State; Zip Code	
\$360.00	P.O. Box 301074	
	Austin, TX 78704	
	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
PURPOSE	Consulting Expense	compliance consulting
OF 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	
09/01/2014	Susan Harry Consulting, LLC	
Amount (\$)	Payee address City; State; Zip Code	
\$3,000.00	P.O. Box 301074 Austin, TX 78704	
	Austin, TA 10704	
	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
PURPOSE OF	Consulting Expense	Fundraising & compliance consulting
EXPENDITURE		
Complete ONLY if	Candidate / Officeholder name	Check if Austin, TX, officeholder living expense Office sought: Office held:
direct expenditure	Candidate / Officeriolder harrie	Office sought. Office field.
to benefit C/OH		
Date	Payee name	
08/14/2014	The University of Texas at Austin Payee address City; State; Zip Code	
Amount (\$)	Payee address City; State; Zip Code P.O. Box 8058	
\$130.40	Austin, TX 78713-8058	
	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
PURPOSE OF	Fees	Data
EXPENDITURE		
Complete Chill V 7	Candidate / Officeholder name	Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure	Candidate / Officeriologi Harrie	Office sought: Office held:
to benefit C/OH		

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense Polling Expense

EXPENDITURE CATEGORIES

ense 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)

rees	The Instruction Guide explains hor	
1 PAGE#	2 FILER NAME	3 ACCOUNT # (TEC filers)
Schedule: 28/29	I - pa	00010009
4 Date	5 Payee name	00010000
07/03/2014	Tulchin Research	
6 Amount (\$)	7 Payee address City; State; Zip Code	
\$5,000.00	182 2nd Street	
ψο,σσσ.σσ	San Francisco, CA 94105	
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule T)
PURPOSE OF	Polling Expense	polling
EXPENDITURE		<u> </u>
		Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure	Candidate / Officeholder name	Office sought: Office held:
to benefit C/OH		
Date	Payee name	
08/15/2014	Wooding, John	
Amount (\$)	Payee address City; State; Zip Code	
\$400.00	3601 Willow Springs Rd. Apt. 104	
,	Austin, TX 78704	
PURPOSE	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T) Contract labor
OF	Salaries/Wages/Contract Labor	Contract labor
EXPENDITURE		
Complete ONLY if	Candidate / Officeholder name	Check if Austin, TX, officeholder living expense Office sought: Office held:
direct expenditure	Candidate / Officer older flame	Onice sought. Onice field.
to benefit C/OH		
Date	Payee name	
08/29/2014	Wooding, John	
Amount (\$)	Payee address City; State; Zip Code	
\$300.00	3601 Willow Springs Rd. Apt. 104	
	Austin, TX 78704	
	Cotonon (Cotononia listad at the top of this coton day)	Description (Value de Aldre VIII)
PURPOSE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description (If travel outside of Texas, complete Schedule T) Contract labor
OF	Salanes/Wages/Contract Labor	
EXPENDITURE		Check if Austin, TX, officeholder tiving expense
Complete ONLY if	Candidate / Officeholder name	Office sought: Office held:
direct expenditure to benefit C/OH		·
	Davis and	
Date 00/15/0014	Payee name Wooding, John	
09/15/2014 Amount (\$)	Payee address City; State; Zip Code	
' '		
\$400.00	3601 Willow Springs Rd. Apt. 104 Austin, TX 78704	
	,	
	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
PURPOSE	Salaries/Wages/Contract Labor	Contract labor
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		

SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense

EXPENDITURE CATEGORIES 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. PAGE # 2 FILER NAME 3 ACCOUNT # (TEC filers) Riley, Christopher Schedule: 29/29 Report: 77/82 00010009 4 Date 5 Payee name 07/23/2014 Worley Printing 6 Amount (\$) Payee address State; Zip Code City; 3217 North IH 35 \$1,149.62 Austin, TX 78722 (a) Category (See Categories listed at the top of this schedule) 8 (b) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Printing Printing 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 08/25/2014 Wortham Insurance & Risk Management Amount (\$) Pavee address City; State; Zip Code PO Box 301819 \$541.34 Dallas, TX 75303 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** rental insurance 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

SCHEDULE G

Advertising Expense Accounting/Banking Consulting Expense Event Expense

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

EXPENDITURE CATEGORIES 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) Polling Expense Printing Expense Office Overhead/Rental Expense Fees The Instruction Guide explains how to complete this form. 3 ACCOUNT # 1 PAGE# 2 FILER NAME (TEC filers) Riley, Christopher 00010009 Schedule: 1/5 Report: 78/82 4 Date 5 Payee name AIO Wireless* 09/08/2014 6 Amount (\$) Payee address City: State; Zip Code 1552 FM 685 \$125.00 Pflugerville, TX 78660 **Reimburgement** from political contributions intended (a) Category (See Categories listed at the top of this schedule) (b) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Office Overhead/Rental Expense campaign phones OF **EXPENDITURE** Check if Austin, TX, officeholder living expense Payee name Best Buy* 08/13/2014 Amount (\$) Payee address City; State; Zip Code 1201 Barbara Jordan Blvd \$254.36 Austin, TX 78723 Reimbursement from political contributions intended Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Office Overhead/Rental Expense office equipment OF **EXPENDITURE** Check if Austin, TX, officeholder living expense Date Payee name 08/06/2014 DeMayo Cellular* Amount (\$) Payee address City; State; Zip Code 9027 Northgate Blvd. \$237.30 Austin, TX 78758 Reimbursement from political contributions intended Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Office Overhead/Rental Expense campaign phones **EXPENDITURE** Check if Austin, TX, officeholder living expense Date Payee name 09/08/2014 Grande Communications* State; Amount (\$) Payee address City; Zip Code 1923 E 7th St #100 \$275.04 Austin, TX 78702 Reimbursement from political contributions intended Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Office Overhead/Rental Expense campaign office utilities OF **EXPENDITURE** Check if Austin, TX, officeholder living expense

SCHEDULE G

EXPENDITURE CATEGORIES

Advertising Expense Accounting/Banking Consulting Expense Event Expense Gilts/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 OTHER (enter a category not listed above)

Office Overhead/Rental Expense Fees Printing Expense The Instruction Guide explains how to complete this form. PAGE # 2 FILER NAME 3 ACCOUNT# (TEC filers) Riley, Christopher Schedule: 2/5 Report: 79/82 00010009 5 Payee name 4 Date 07/22/2014 Guero's Taco Bar* 6 Amount (\$) Pavee address City; State; Zip Code 1412 S Congress Ave \$500.00 Austin, TX 78704 Reimbursement from political contributions intended (a) Category (See Categories listed at the top of this schedule) (b) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Food/Beverage Expense food for event OF **EXPENDITURE** Check if Austin, TX, officeholder living expense Date Payee name Office Max* 07/21/2014 Amount (\$) Payee address City; State: Zip Code 907 W 5th St. \$10.78 Austin, TX 78703 Reimbursement from political contributions intended (If travel outside of Texas, complete Schedule T) Category (See Categories listed at the top of this schedule) Description **PURPOSE** Office Overhead/Rental Expense office supplies OF **EXPENDITURE** Check if Austin, TX, officeholder living expense Date Pavee name Office Max* 07/21/2014 Amount (\$) Payee address City; State; Zip Code 907 W 5th St. \$21.30 Austin, TX 78703 Reimbursement from political contributions intended Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Office Overhead/Rental Expense office supplies OF **EXPENDITURE** Check if Austin, TX, officeholder living expense Date Payee name Office Max* 08/04/2014 Amount (\$) Payee address City; State; Zip Code 907 W 5th St. \$130.59 Austin, TX 78703 Reimbursement from political contributions intended Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Office Overhead/Rental Expense office supplies OF **EXPENDITURE** Check if Austin, TX, officeholder living expense

EXPENDITURE CATEGORIES

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

Advertising Expense Accounting/Banking Consulting Expense Event Expense

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 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)

Polling Expense Printing Expense OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. 1 PAGE# FILER NAME 3 ACCOUNT # (TEC filers) Riley, Christopher Schedule: 3/5 Report: 80/82 00010009 4 Date 5 Payee name Office Max* 08/11/2014 6 Amount (\$) City; State; Pavee address Zip Code 907 W 5th St. \$60.31 Austin, TX 78703 Reimbursement from political contributions intended 8 (a) Category (See Categories listed at the top of this schedule) (b) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Office Overhead/Rental Expense office supplies **OF EXPENDITURE** Check if Austin, TX, officeholder living expense Date Payee name Office Max* 08/14/2014 Amount (\$) Payee address State; Zip Code 907 W 5th St. \$24.11 Austin, TX 78703 Reimbursement from political contributions intended Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Office Overhead/Rental Expense office supplies OF **EXPENDITURE** Check if Austin, TX, officeholder living expense Date Payee name 08/21/2014 Office Max* Amount (\$) Payee address City; State; Zip Code 907 W 5th St. \$78.36 Austin, TX 78703 Reimbursement from political contributions intended Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Office Overhead/Rental Expense office supplies OF **EXPENDITURE** Check if Austin, TX, officeholder living expense Date Payee name Office Max* 09/04/2014 Amount (\$) Payee address City; State; Zip Code 907 W 5th St. \$123.93 Austin, TX 78703 Reimbursement from political contributions intended Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Office Overhead/Rental Expense office supplies OF **EXPENDITURE** Check if Austin, TX, officeholder living expense

SCHEDULE G

Advertising Expense Accounting/Banking Consulting Expense Event Expense

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

EXPENDITURE CATEGORIES

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)

OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. PAGE # 2 FILER NAME 3 ACCOUNT # (TEC filers) Riley, Christopher Schedule: 4/5 Report: 81/82 00010009 4 Date 5 Payee name Office Max* 09/15/2014 6 Amount (\$) City; State: Payee address Zip Code 907 W 5th St. \$74.14 Austin, TX 78703 Reimbursement from political contributions intended (a) Category (See Categories listed at the top of this schedule) 8 (b) Description (If travel outside of Texas, complete Schedule T) PURPOSE Office Overhead/Rental Expense office supplies OF **EXPENDITURE** Check if Austin, TX, officeholder living expense Date Payee name Office Max* 09/22/2014 Amount (\$) Payee address State; Zip Code City; 907 W 5th St. \$148.28 Austin, TX 78703 Reimbursement from political contributions intended Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Office Overhead/Rental Expense office supplies OF EXPENDITURE Check if Austin, TX, officeholder living expense Date Payee name Phoneburner* 09/15/2014 Amount (\$) Payee address City; State; Zip Code 27702 Crown Valley Parkway \$149.00 Ladera Ranch, CA 92694 Reimbursement from political contributions intended Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Office Overhead/Rental Expense office supplies OF EXPENDITURE Check if Austin, TX, officeholder living expense Date Payee name 08/28/2014 Voter Activation* Amount (\$) Payee address City; State; Zip Code 1101 15th St. NW \$140.00 Ste. 500 Reimbursement from political contributions intended Washington, DC 20005 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Advertising Expense VAN robodialer OF **EXPENDITURE** Check if Austin, TX, officeholder living expense

SCHEDULE G

Advertising Expense Accounting/Banking

Gifts/Awards/Memorial Expense Legal Services

P.O.Box 12070

EXPENDITURE CATEGORIES Salaries/Wages/Contract Labor Solicitation/Fundraising Expense

Loan Repayment/Reimbursement Transportation Equipment & Related Expense

Consulting Expe Event Expense Fees	Polling Expense Travel Out Of Di	
	The Instruction Guide explains ho	w to complete this form.
1 PAGE # Schedule: 5/5 Re	2 FILER NAME eport: 82/82 Riley, Christopher	3 ACCOUNT # (TEC filers) 00010009
4 Date	5 Payee name	
08/28/2014	Voter Activation*	
6 Amount (\$)	7 Payee address City; State; Zip Code	
\$140.00	1101 15th St. NW	
Reimbursement from political contributions intended		
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule T)
PURPOSE OF	Advertising Expense	VAN robodialer
EXPENDITURE		
		Check if Austin, TX, officeholder living expense
Date	Payee name	
09/12/2014	Voter Activation*	
Amount (\$)	Payee address City; State; Zip Code	
\$140.00		
Reimbursement from political contributions intended	Washington, DC 20005	
contributions intended	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
PURPOSE	Advertising Expense	Description (If travel outside of Texas, complete Schedule T) VAN robodialer
OF	Advertising Expense	VAIN TODOUIAIET
EXPENDITURE		
		Cheat if Austin TV officeholder living eveness
	<u> </u>	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: Christopher "Chris" Riley

Repor	Reporting Period:					
	First day of candidacy – Midnight on the 10 th day prior to City election					
	Midnight on the 10 th 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		
\$25,000	9-25-14		
\$25	4-28-14		

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
Brian Heideman	700 Nacona Trail Harker Heights, TX 76548	\$1,025.00	Website design	4-11-14
Bill Blome	1405 Waller St. Austin, TX 78702	\$1,500.00	Salary	4-25-14
Texas Democratic Party	4818 E. Ben White Blvd. Ste. 104 Austin, TX 78741	\$550.00	Voter Data	4-27-14
Melissa Carper	c/o The American Agency 2708 Augusta Drive Durham, NC 27707	\$500.00	Music For Kick-Off Event	5-27-14
Office Max	907 W 5th St., Austin, TX	10.78	office supplies	20140721

	78703			ļ
Office Max	907 W 5th St., Austin, TX 78703	21.3	office supplies	201407
Guero's Taco Bar	1412 S Congress Ave, Austin, TX 78704	500	food for event	201407
Sweetish Hill	1120 W 6th St, Austin, TX 78703	34	food for volunteers	201407
HEB	1000 East 41st Street, Austin, TX 78751	26.7	food for volunteers	201408
Taco Shack	2825 Guadalupe St, Austin, TX 78705	41.82	food for volunteers	201408
WM SuperCenter	5017 W Hwy 290, Austin, TX 78746	69,27	office furniture/supplies	201408
CVS Pharmacy	2927 Guadalupe St, Austin, TX 78705	24.67	office supplies	201408
Office Max	907 W 5th St., Austin, TX 78703	130.59	office supplies	201408
DeMayo Cellular	9027 Northgate Blvd, Austin, TX 78758	237.3	campaign phones	201408
Office Max	907 W 5th St., Austin, TX 78703	60.31	office supplies	201408
Idealist.org	302 Fifth Avenue, 11th Floor, New York, NY 10001	80	canvasser recruitment ad	201408
Best Buy	1201 Barbara Jordan Blvd, Austin, TX 78723	254.36	office equipment	201408
Office Max	907 W 5th St., Austin, TX 78703	24.11	office supplies	201408
Jack in the Box	Austin, TX	3.78	food for volunteers	201408
Staples	1201 Barbara Jordan Blvd Suite 700, Austin, TX 78703	36.79	office supplies	201408
Office Max	907 W 5th St., Austin, TX 78703	78.36	office supplies	201408
Voter Activation	1101 15th St. NW, Ste. 500 Washington, DC 20005	140	VAN robodialer	201408
Voter Activation	1101 15th St. NW, Ste. 500 Washington, DC 20005	140	VAN robodialer	201408
Office Max	907 W 5th St., Austin, TX 78703	123.93	office supplies	201409
Grande Communications	1923 E 7th St #100, Austin, TX 78702	275.04	campaign office utilities	201409
AIO Wireless	1552 FM 685, Pflugerville, TX 78660	125	campaign phones	201409
Voter Activation	1101 15th St. NW, Ste. 500 Washington, DC 20005	140	VAN robodialer	201409
Office Max	907 W 5th St., Austin, TX 78703	74.14	office supplies	201409
Phoneburner	27702 Crown Valley Parkway, Ladera Ranch, CA 92694	149	office supplies	201409
Office Max	907 W 5th St., Austin, TX 78703	148.28	office supplies	201409

Craigslist.org 222 Sutter St., San Francisco, CA 94108 25 advertisement 20140923

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

BUNDLING REPORT

Name of candidate/officeholder: Chris Riley

1. For each person/bundler who has solicited and obtained campaign contributions on your behalf of \$200 or more per person from five (5) or more individuals during the reporting period, provide the following information. (This requirement does not apply to an individual who raises funds in total amount of \$5,000 or less for a candidate through a fundraising event held at the individual's residence.)

Name of	Address	Occupation	Employer	Total Amount
Individual/Bundler			l	Bundled
		Executive Director	American Council of Engineering Companies of Central Texas	\$2,300

2. For each person identified above, enter the name and address of each individual contributor whose contribution was bundled by that individual. Attach additional sheets if necessary.

Dianne	Benton	901 W 9th St #605	Austin	TX	78703- 4636	Benton assisted living	Consultant Pharmacist	\$250.00	Amanda DeAngelis
Karen	Friese	6603 Cat Creck Trl	Austin	TX	78731- 2600	K. Friese & Associates	Senior Project Manager	\$350.00	Amanda DeAngelis
Rick	Guerra	2107 Key West Cv	Austin	TX	78746- 7257	Jose I. Guerra, Inc.	Engineer	\$250.00	Amanda DeAngelis
	Halff Associates State PAC	1201 N Bowser Rd	Richardson	TX	75081- 2220			\$350,00	Amanda DeAngelis
Julie	Hastings	602 Palo Alto Ln	Cedar Park	TX	78613- 2941	Cobb Fendley & Associates, Inc.	Engineer	\$250.00	Amanda DeAngelis
Rob	Harris	220 Bowlin Cv	Dripping Springs	TX	78620- 5019	Brown & Gay Engineers	Engineer	\$250.00	Amanda DeAngelis
Keith	Jackson	504 E 42nd St	Austin	TX	78751- 4302	RS&H	Engineer	\$350.00	Amanda DeAngelis
	Jones & Carter, Inc. PAC	6335 Gulfton St, Ste. 100	Houston	TX	77081- 1112			\$350,00	Amanda DeAngelis
Michael	Nichols	513 Kodiak Trl	Cedar Park	TX	78613- 4109	Freese & Nichols, Inc.	Senior Vice President	\$150.00	Amanda DeAngelis
Brian	Rice	2905 Brian Wood Ct	Cedar Park	TX	78613- 5143	Binkley & Barfield	Engineer	\$350.00	Amanda DeAngelis
Susan	Smith Turrieta	PO Box 5902	Austin	TX	78763- 5902	Smith Turrieta Engineering	Engineer	\$200,00	Amanda DeAngelis

SCHEDULE ATX. 5 - attach to form C/OH (C & E) Reference § 2-2-22, Austin City Code

	Lobbyists) employed by, business association thro	•		•	•
			····		
-					

Note: It is important to remember that contributions to you are from the <u>actual donor</u>, <u>not</u> from the individual who solicited the donations on your behalf. Therefore, on form C/OH you must identify the actual donor as the contributor.

STATE OF TEXAS VERIFICATION

I certify that the total amount bundled on my behalf in the campaign period by all partners, shareholders, principals, employees, and persons who conduct business through a business association that is subject to City Code, Section 2-2-22(E), when added together, does not exceed ten (10) times the contribution limit set by City Charter, Article III, Section 8(A)(1) for the entire business association.

Signature of Affiant