

CORRECTION/AMENDMENT AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

FORM COR-
C/OH

1 Filer ID (Ethics Commission Filers)		2 Total pages filed: 89		OFFICE USE ONLY		
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST	MI	Date Received	FILED IN THE OFFICE OF CITY CLERK ON 6th DAY OF MAY 2015 AT 4:56 PM CITY CLERK	
	NICKNAME	LAST	SUFFIX	Date Delivered or Mailed		
4 ORIGINAL REPORT TYPE	<input type="checkbox"/> January 15	<input type="checkbox"/> Runoff	<input type="checkbox"/> Other (specify)	Receipt #	Amount \$	
	<input type="checkbox"/> July 15	<input type="checkbox"/> Exceeded \$500 limit 15th day after				
	<input checked="" type="checkbox"/> 30th day before election	<input type="checkbox"/> treasurer appointment (officeholder only)				
	<input type="checkbox"/> 8th day before election	<input type="checkbox"/> Final report				
5 ORIGINAL PERIOD COVERED	Month	Day	Year	Month	Day	Year
	07	01	2014	THROUGH	09	25
				Date Processed		
				Date Imaged		

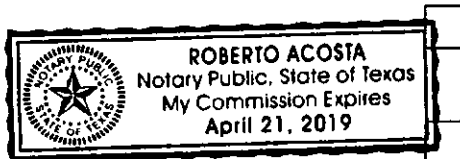
6 EXPLANATION OF CORRECTION

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 perjury, 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 misrepresent the information contained in the report.

Other reports: I swear, or affirm, that I am filing this corrected 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

Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Christopher Riley, this the 6th day of MAY, 2015

_____ to certify which, witness my hand and seal of office.

R. Acosta
Signature of officer administering oath

ROBERTO ACOSTA
Printed name of officer administering oath

NOTARY Public
Title 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 before 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 on or after 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

The C/OH INSTRUCTION GUIDE explains how to complete this form.		1 ACCOUNT # (Ethics Commission filers) 00010009	2 PAGE # 1 of 82
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI Christopher NICKNAME LAST SUFFIX Chris Riley		OFFICE USE ONLY Date Received Date Hand-delivered or Date Postmarked Receipt # Amount Date Processed Date Imaged
	4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE P.O. Box 30062 Austin, TX 78703		
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Cora NICKNAME LAST SUFFIX Corky Hilliard		
	6 CAMPAIGN TREASURER ADDRESS (Residence or business) STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 4120 Lawless St. Austin, TX 78723		
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (512) 459-6342		
8 REPORT TYPE	<input type="checkbox"/> January 15 <input checked="" type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final report (Attach C/OH - FR)		
9 PERIOD COVERED	Month Day Year Month Day Year 07/01/2014 THROUGH 09/25/2014		
10 ELECTION	ELECTION DATE Month Day Year 11/04/2014	ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input checked="" type="checkbox"/> General <input type="checkbox"/> Special	
11 OFFICE	OFFICE HELD (if any) City Council, Place 1		12 OFFICE SOUGHT (if known) City Council, District 9

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

13 C/OH NAME Riley, Christopher

14 ACCOUNT # (Ethics Commission filers)
0001000915 NOTICE
FROM
POLITICAL
COMMITTEE(S)

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

COMMITTEE TYPE

COMMITTEE NAME

☐ GENERAL

COMMITTEE ADDRESS

☐ SPECIFIC

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

☐ additional pages16 CONTRIBUTION
TOTALS1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN
PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED

\$

3,091.00

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

\$

49,975.98

EXPENDITURE
TOTALS

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

\$

365.44

4. TOTAL POLITICAL EXPENDITURES

\$

87,798.20

CONTRIBUTION
BALANCE5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE
LAST DAY OF THE REPORTING PERIOD

\$

53,028.30

OUTSTANDING
LOAN TOTALS6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE
LAST DAY OF THE REPORTING PERIOD

\$

25,000.00

17 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said _____, this the _____ day
of _____, 20_____, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Print name of officer administering oath

Title of officer administering oath

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 1/45 Report: 3/82	
2 FILER NAME Riley, Christopher		3 ACCOUNT # (Ethics Commission filers) 00010009	
4 Date 09/14/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Adair, Craig 6 Contributor address; City; State; Zip Code 204 Park Ln Austin, TX 78704-2411	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 09/21/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Alexander, Mike Contributor address; City; State; Zip Code 2827 Salado St Austin, TX 78705-3624	Amount of contribution (\$) \$125.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 08/12/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Almanza, Boone Contributor address; City; State; Zip Code 3221 Stevenson Ave Austin, TX 78703-2241	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Almanza, Blackburn & Dickie, LLP	
Date 08/09/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Alsop, Jim Contributor address; City; State; Zip Code 2610 Saint Anthony St Austin, TX 78703-1746	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Jackson Walker LLP	
Date 08/29/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Arcadis G&M, Inc Texas PAC Contributor address; City; State; Zip Code 11490 Westheimer Rd Ste 600 Houston, TX 77077-6841	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 2/45 Report: 4/82	
2 FILER NAME Riley, Christopher		3 ACCOUNT # (Ethics Commission filers) 00010009	
4 Date 07/21/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ausley, Tom 6 Contributor address; City; State; Zip Code 3707 Laurel Ledge Ln Austin, TX 78731-4049	7 Amount of contribution (\$) \$150.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 09/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Austin Firefighters Association PAC Contributor address; City; State; Zip Code 7537 Cameron Rd Austin, TX 78752-2013	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 07/24/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ayad, Victor Contributor address; City; State; Zip Code 2100 Hartford Rd Austin, TX 78703-3125	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ayer, Mason Contributor address; City; State; Zip Code 2508 Friar Tuck Ln Austin, TX 78704-5612	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 08/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Babalola, Oyeniran Contributor address; City; State; Zip Code 201 Lavaca St Apt 320 Austin, TX 78701-3969	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 3/45 Report: 5/82	
2 FILER NAME Riley, Christopher		3 ACCOUNT # (Ethics Commission filers) 00010009	
4 Date 09/08/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bailey, Brian 6 Contributor address; City; State; Zip Code 2509 Harris Blvd Austin, TX 78703-2451	7 Amount of contribution (\$) \$156.12	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 08/18/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Barr, Alan Contributor address; City; State; Zip Code 7706 Stoneywood Dr Austin, TX 78731-1443	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Architect		Employer (See Instructions) White, Dolce & Barr	
Date 09/23/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Barr, Alan Contributor address; City; State; Zip Code 7706 Stoneywood Dr Austin, TX 78731-1443	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Architect		Employer (See Instructions) White, Dolce & Barr	
Date 07/09/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Barry, Melissa Contributor address; City; State; Zip Code 3009 Breeze Ter Austin, TX 78722-1907	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/07/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Benton, Dianne Contributor address; City; State; Zip Code 901 W 9th St Apt 605 Austin, TX 78703-4636	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Consultant Pharmacist		Employer (See Instructions) Benton assisted living	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.			1 PAGE # Schedule: 4/45 Report: 6/82	
2 FILER NAME Riley, Christopher			3 ACCOUNT # (Ethics Commission filers) 00010009	
4 Date 09/22/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Benz, Erick 6 Contributor address; City; State; Zip Code 11116 Miramar Dr Austin, TX 78726-2415		7 Amount of contribution (\$) \$175.00	8 In-kind contribution description (if applicable)
			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)	
Date 09/22/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Berkowitz, Jason Contributor address; City; State; Zip Code 602 W 7th St Austin, TX 78701-2741		Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Real Estate			Employer (See Instructions) Roscoe Properties	
Date 08/24/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bielamowicz, Paul Contributor address; City; State; Zip Code 820 W 3rd St Apt 2114 Austin, TX 78701-3861		Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)			Employer (See Instructions)	
Date 09/15/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Blair Jr, Frederic Contributor address; City; State; Zip Code 805 Theresa Ave Austin, TX 78703-4733		Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)			Employer (See Instructions)	
Date 09/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Blood, Michele Contributor address; City; State; Zip Code 4100 Bradwood Rd Austin, TX 78722-1133		Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)
			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Realtor			Employer (See Instructions) Kuper Sotheby's International Realty	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 5/45 Report: 7/82	
2 FILER NAME Riley, Christopher		3 ACCOUNT # (Ethics Commission filers) 00010009	
4 Date 09/25/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Boduch, Michael 6 Contributor address; City; State; Zip Code 111 Sandra Muraida Way Unit 70 Austin, TX 78703-4995	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 09/16/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bolton, Valinda Contributor address; City; State; Zip Code 5000 Woodcreek Rd Austin, TX 78749-2239	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Borah, Matthew Contributor address; City; State; Zip Code 505 E Mary St Austin, TX 78704-3142	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/01/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Boswell, Melissa (Mrs.) Contributor address; City; State; Zip Code 510 E Monroe St Ste 330 Austin, TX 78704-3130	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) software		Employer (See Instructions) TaxPro, LLC	
Date 08/27/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Brady, Denise Contributor address; City; State; Zip Code 1310 San Antonio St Apt 2 Austin, TX 78701-1642	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 6/45 Report: 8/82	
2 FILER NAME Riley, Christopher		3 ACCOUNT # (Ethics Commission filers) 00010009	
4 Date 09/07/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Braunberg, Andrew 6 Contributor address; City; State; Zip Code 909 W Johanna St Apt A Austin, TX 78704-4097	7 Amount of contribution (\$) \$350.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions) Analyst		10 Employer (See Instructions) NSS Labs	
Date 08/08/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Brim, Jay Contributor address; City; State; Zip Code 1309 Lost Creek Blvd Austin, TX 78746-6316	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 08/10/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Brimble, Raymond Contributor address; City; State; Zip Code 2800 Robbs Run Austin, TX 78703-1637	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) President and CEO		Employer (See Instructions) Lynxs Group, LLC	
Date 08/30/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Briscoe, John Contributor address; City; State; Zip Code 308 Ridgewood Rd Austin, TX 78746-4619	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Chemist		Employer (See Instructions) Retired	
Date 08/01/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Brown, Charles Contributor address; City; State; Zip Code 3624 N Hills Dr B-100 Austin, TX 78731-2415	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 7/45 Report: 9/82	
2 FILER NAME Riley, Christopher		3 ACCOUNT # (Ethics Commission filers) 00010009	
4 Date 09/17/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Burton, Ted 6 Contributor address; City; State; Zip Code 1118 Mission Rdg Austin, TX 78704-2632	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 09/22/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bury, Paul III Contributor address; City; State; Zip Code 221 W 6th St Ste 600 Austin, TX 78701-3411	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Bury & Partners	
Date 07/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Butler, Edward Contributor address; City; State; Zip Code 301 Hillcrest Ct West Lake Hills, TX 78746-5491	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) VP		Employer (See Instructions) Enterprise	
Date 07/26/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Butler, Renee Contributor address; City; State; Zip Code 301 Hillcrest Ct West Lake Hills, TX 78746-5491	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Homemaker		Employer (See Instructions) Not Employed	
Date 09/20/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Byars, Anne Contributor address; City; State; Zip Code 2103 Schulle Ave Austin, TX 78703-2141	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Farm Manager		Employer (See Instructions) Self Employed	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 8/45 Report: 10/82	
2 FILER NAME Riley, Christopher		3 ACCOUNT # (Ethics Commission filers) 00010009	
4 Date 08/15/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Byars, Paul 6 Contributor address; City; State; Zip Code 4641 Ruiz St Austin, TX 78723-3333	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 08/17/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Byers, Brent and Deena Contributor address; City; State; Zip Code 4303 Farhills Dr Austin, TX 78731-2815	Amount of contribution (\$) \$150.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/16/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Byers, Julie Contributor address; City; State; Zip Code 4516 Balcones Dr Austin, TX 78731-5220	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) none	
Date 09/15/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bynum, Grover Contributor address; City; State; Zip Code PO Box 80 Bastrop, TX 78602-0080	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Advisor		Employer (See Instructions) Austin Tech Council	
Date 09/08/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Campbell, Jack Contributor address; City; State; Zip Code 901 W 9th St Apt 302 Austin, TX 78703-4633	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 9/45 Report: 11/82

2 FILER NAME Riley, Christopher

3 ACCOUNT # (Ethics Commission filers)
00010009

4 Date

07/02/2014

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

6 Contributor address; City; State; Zip Code
4707 Avenue F
Austin, TX 78751-3114

7 Amount of
contribution (\$)

\$200.00

8 In-kind contribution
description (if applicable)

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

9 Principal occupation / Job title (See Instructions)
Small business manager

10 Employer (See Instructions)
Self employed

Date

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

08/27/2014

Contributor address; City; State; Zip Code
PO Box 1085
Round Rock, TX 78680-1085

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

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

09/13/2014

Contributor address; City; State; Zip Code
4100 Hyridge Dr
Austin, TX 78759-8022

Amount of
contribution (\$)

\$150.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

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

08/15/2014

Contributor address; City; State; Zip Code
10610 Morado Cir
Apt 2622
Austin, TX 78759-5559

Amount of
contribution (\$)

\$200.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
General Manager

Employer (See Instructions)
Winthrop managemnt

Date

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

09/19/2014

Contributor address; City; State; Zip Code
200 W Cesar Chavez St
Ste 250
Austin, TX 78701-4049

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Real Estate

Employer (See Instructions)
Cushman & Wakefield | Oxford Commercial

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.			1 PAGE # Schedule: 10/45 Report: 12/82	
2 FILER NAME Riley, Christopher			3 ACCOUNT # (Ethics Commission filers) 00010009	
4 Date 09/25/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Coleman, Aan 6 Contributor address; City; State; Zip Code 9890 Silver Mountain Dr Austin, TX 78737-3103		7 Amount of contribution (\$) \$350.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Landscape Architect			10 Employer (See Instructions) Coleman and Assoc	
Date 09/06/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Compton, Sean Contributor address; City; State; Zip Code 2601 Great Oaks Pkwy Austin, TX 78756-2909		Amount of contribution (\$) \$150.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)			Employer (See Instructions)	
Date 07/13/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Coopwood, Thomas II Contributor address; City; State; Zip Code 6717 Valburn Dr Austin, TX 78731-1803		Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)			Employer (See Instructions)	
Date 07/19/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Correa, Ana Contributor address; City; State; Zip Code 3607 Thompson St Austin, TX 78702-3129		Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)			Employer (See Instructions)	
Date 08/24/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cotera, Martha Contributor address; City; State; Zip Code 1502 Norris Dr Austin, TX 78704-2021		Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)			Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

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

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 12/45 Report: 14/82

2 FILER NAME Riley, Christopher

3 ACCOUNT # (Ethics Commission filers)
00010009

4 Date

08/25/2014

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

6 Contributor address; City; State; Zip Code
4701 Spicewood Springs Rd
Austin, TX 78759-8402

7 Amount of
contribution (\$)

\$150.00

8 In-kind contribution
description (if applicable)

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

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

07/03/2014

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

Contributor address; City; State; Zip Code
2604 Stratford Dr
Austin, TX 78746-4623

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
VP Marketing

Employer (See Instructions)
Market Hardware

Date

07/30/2014

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

Contributor address; City; State; Zip Code
11231 Tracton Ln
Austin, TX 78739-1401

Amount of
contribution (\$)

\$300.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Realtor

Employer (See Instructions)
Self

Date

08/26/2014

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

Contributor address; City; State; Zip Code
503 Brookhaven Trl
Austin, TX 78746-5452

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Attorney

Employer (See Instructions)
Almanza, Blackburn and Dickie LLP

Date

09/16/2014

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

Contributor address; City; State; Zip Code
503 Brookhaven Trl
Austin, TX 78746-5452

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Attorney

Employer (See Instructions)
Almanza, Blackburn and Dickie LLP

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 13/45 Report: 15/82

2 FILER NAME Riley, Christopher

3 ACCOUNT # (Ethics Commission filers)

00010009

4 Date

07/31/2014

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

6 Contributor address; City; State; Zip Code
3422 Mount Barker Dr
Austin, TX 78731-5725

7 Amount of
contribution (\$)

\$100.00

8 In-kind contribution
description (if applicable)

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

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

09/25/2014

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

Contributor address; City; State; Zip Code
2440 Sunset Farm Rd
Ellicott City, MD 21042-1632

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/21/2014

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

Contributor address; City; State; Zip Code
4609 Trail Crest Cir
Austin, TX 78735-6344

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

09/25/2014

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

Contributor address; City; State; Zip Code
30 Adams St NW
Washington, DC 20001-1026

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

07/29/2014

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

Contributor address; City; State; Zip Code
4101 Avenue C
Austin, TX 78751-4605

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 14/45 Report: 16/82	
2 FILER NAME Riley, Christopher		3 ACCOUNT # (Ethics Commission filers) 00010009	
4 Date 09/23/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Edwards, David 6 Contributor address; City; State; Zip Code 2715 Wooldridge Dr Austin, TX 78703-1953	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 09/24/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Elsner, Larry Contributor address; City; State; Zip Code 1608 Preston Ave Austin, TX 78703-1906	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 07/15/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Erichson, Christian Contributor address; City; State; Zip Code 2020 E 2nd St B Austin, TX 78702-4563	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 08/04/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Erichson, Christian Contributor address; City; State; Zip Code 2020 E 2nd St B Austin, TX 78702-4563	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/23/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Erickson, David Contributor address; City; State; Zip Code 1402 Preston Ave Austin, TX 78703-1902	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions) Erickson Demel CPAs	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 15/45 Report: 17/82	
2 FILER NAME Riley, Christopher		3 ACCOUNT # (Ethics Commission filers) 00010009	
4 Date 07/24/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Falkenberg, Howard 6 Contributor address; City; State; Zip Code PO Box 123 Austin, TX 78767-0123	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 08/27/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Fitzgerald, James Contributor address; City; State; Zip Code 3921 Threadgill St Austin, TX 78723-4506	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) CEO/COO		Employer (See Instructions) Texas Star Brands, Inc	
Date 08/02/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Forrest, Hugh Contributor address; City; State; Zip Code 703B E 50th St No B Austin, TX 78751-2615	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Event Planner		Employer (See Instructions) SXSW	
Date 09/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Forrest, Hugh Contributor address; City; State; Zip Code 703B E 50th St Austin, TX 78751-2615	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Event Planner		Employer (See Instructions) SXSW	
Date 08/18/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Friday, Philip Contributor address; City; State; Zip Code 3401 Glenview Ave Austin, TX 78703-1448	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 16/45 Report: 18/82	
2 FILER NAME Riley, Christopher		3 ACCOUNT # (Ethics Commission filers) 00010009	
4 Date 09/10/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Friese, Karen 6 Contributor address; City; State; Zip Code 6603 Cat Creek Trl Austin, TX 78731-2600	7 Amount of contribution (\$) \$350.00	8 In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions) Senior Project Manager		10 Employer (See Instructions) K. Friese & Associates	
Date 08/21/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gadbois, Glenn Contributor address; City; State; Zip Code 5616 Bull Creek Rd Austin, TX 78756-1010	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Executive Director		Employer (See Instructions) Movability Austin	
Date 09/20/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gadbois, Glenn Contributor address; City; State; Zip Code 5616 Bull Creek Rd Austin, TX 78756-1010	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Executive Director		Employer (See Instructions) Movability Austin	
Date 09/13/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Garbee, Kelty Contributor address; City; State; Zip Code 5508 Chadwyck Dr Austin, TX 78723-5414	Amount of contribution (\$) \$125.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/24/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Garbee, Kelty Contributor address; City; State; Zip Code 5508 Chadwyck Dr Austin, TX 78723-5414	Amount of contribution (\$) \$20.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 17/45 Report: 19/82	
2 FILER NAME Riley, Christopher		3 ACCOUNT # (Ethics Commission filers) 00010009	
4 Date 09/08/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gayle, Dewitt 6 Contributor address; City; State; Zip Code 1609 Scenic Dr Austin, TX 78703-2054	7 Amount of contribution (\$) \$350.00	8 In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions) Architect		10 Employer (See Instructions) STG Design, Inc.	
Date 08/04/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ghahremani, Kay Contributor address; City; State; Zip Code 3036 Thrushwood Dr Austin, TX 78757-6811	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 08/27/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gilliland, Douglas Contributor address; City; State; Zip Code 55 Main St Ste 340 Colleyville, TX 76034-2959	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Managing director		Employer (See Instructions) Global Real Estate Investment	
Date 07/16/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ginor, Diana Contributor address; City; State; Zip Code 5221 S Scout Island Cir Austin, TX 78731-3378	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Homemaker		Employer (See Instructions) Self	
Date 07/16/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ginor, Ron Contributor address; City; State; Zip Code 5221 S Scout Island Cir Austin, TX 78731-3378	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Doctor and President		Employer (See Instructions) Mirabel Medical Systems, Inc.	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 18/45 Report: 20/82	
2 FILER NAME Riley, Christopher		3 ACCOUNT # (Ethics Commission filers) 00010009	
4 Date 07/01/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Goldston, Carolyn 6 Contributor address; City; State; Zip Code 3521 Starline Dr Austin, TX 78759-8941	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 09/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gonzalez, Julio Contributor address; City; State; Zip Code 1408 S 3rd St Austin, TX 78704-2308	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable) (\$9 refunded on 10/6/14) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Highview Ventures	
Date 09/22/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Graham, Dan Contributor address; City; State; Zip Code 9309 Leaning Rock Cir Austin, TX 78730-2731	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Buildasign.com	
Date 09/22/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Graham, Lisa Contributor address; City; State; Zip Code 9309 Leaning Rock Cir Austin, TX 78730-2731	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) homemaker		Employer (See Instructions) none	
Date 08/14/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Greer, Marcy Contributor address; City; State; Zip Code 2006 Wychwood Dr Austin, TX 78746-7800	Amount of contribution (\$) \$150.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 19/45 Report: 21/82	
2 FILER NAME Riley, Christopher		3 ACCOUNT # (Ethics Commission filers) 00010009	
4 Date 08/05/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) GSD Enterprises, LP 6 Contributor address; City; State; Zip Code 513 E Monroe St # A Austin, TX 78704-3129	7 Amount of contribution (\$) \$250.00	8 In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 09/10/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Guerra, Rick Contributor address; City; State; Zip Code 2107 Key West Cv Austin, TX 78746-7257	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Jose I. Guerra, Inc.	
Date 07/01/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Guzman, Ana Contributor address; City; State; Zip Code 30 Sangre De Cristo Dr Santa Fe, NM 87506-1108	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Santa Fe Community College	
Date 07/18/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hackney, Clint Contributor address; City; State; Zip Code PO Box 163164 Austin, TX 78716-3164	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) governmental affairs consultant		Employer (See Instructions) Self	
Date 07/18/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hackney, Susan Contributor address; City; State; Zip Code PO Box 163164 Austin, TX 78716-3164	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) governmental affairs consultant		Employer (See Instructions) Office of Clint Hackney	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 20/45 Report: 22/82	
2 FILER NAME Riley, Christopher		3 ACCOUNT # (Ethics Commission filers) 00010009	
4 Date 07/03/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hagemann, Jody 6 Contributor address; City; State; Zip Code 1808 Barton Pkwy Austin, TX 78704-3210	7 Amount of contribution (\$) \$150.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 08/27/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hailey, Royce Jr. Contributor address; City; State; Zip Code 3408 Mount Bonnell Rd Austin, TX 78731-5850	Amount of contribution (\$) \$150.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/10/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Halff Associates State PAC Contributor address; City; State; Zip Code 1201 N Bowser Rd Richardson, TX 75081-2220	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/13/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Harding, Annie Contributor address; City; State; Zip Code 4428 Gillis St Austin, TX 78745-1018	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Associate Producer		Employer (See Instructions) Armadillo Christmas Bazaar	
Date 09/10/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Harris, Rob Contributor address; City; State; Zip Code 220 Bowlin Cv Dripping Springs, TX 78620-5019	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Brown & Gay Engineers	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 21/45 Report: 23/82	
2 FILER NAME Riley, Christopher		3 ACCOUNT # (Ethics Commission filers) 00010009	
4 Date 09/25/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Harriss, June 6 Contributor address; City; State; Zip Code 5333 Tortuga Trl Austin, TX 78731-4545	7 Amount of contribution (\$) \$350.00	8 In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions) research associate		10 Employer (See Instructions) The University of Texas at Austin	
Date 09/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Harriss, William Contributor address; City; State; Zip Code 5333 Tortuga Trl Austin, TX 78731-4545	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Chief Financial Officer		Employer (See Instructions) Butler Family Interests	
Date 09/09/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Harutunian, Anne Contributor address; City; State; Zip Code PO Box W Austin, TX 78713-8923	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Contractor		Employer (See Instructions) Harutunian Engineers	
Date 09/09/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Harutunian, Kegham Contributor address; City; State; Zip Code PO Box W Austin, TX 78713-8923	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Engineering / technical coordination		Employer (See Instructions) Harutunian Engineers	
Date 09/09/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Harutunian, Shant Contributor address; City; State; Zip Code PO Box W Austin, TX 78713-8923	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Technical Coordinator		Employer (See Instructions) Harutunian Engineers	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 22/45 Report: 24/82

2 FILER NAME Riley, Christopher

3 ACCOUNT # (Ethics Commission filers)
00010009

4 Date

09/09/2014

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

6 Contributor address; City; State; Zip Code
PO Box W
Austin, TX 78713-8923

7 Amount of
contribution (\$)

\$350.00

8 In-kind contribution
description (if applicable)

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

9 Principal occupation / Job title (See Instructions)
President

10 Employer (See Instructions)
Harutunian Engineers

Date

09/09/2014

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

Contributor address; City; State; Zip Code
PO Box W
Austin, TX 78713-8923

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Engineering / technical coordination

Employer (See Instructions)
Harutunian Engineers

Date

09/10/2014

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

Contributor address; City; State; Zip Code
602 Palo Alto Ln
Cedar Park, TX 78613-2941

Amount of
contribution (\$)

\$250.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
Engineer

Employer (See Instructions)
Cobb Fendley & Associates, Inc.

Date

08/27/2014

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

Contributor address; City; State; Zip Code
7701 Bramblewood Cir.
Austin, TX 78731

Amount of
contribution (\$)

\$350.00

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

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

Principal occupation / Job title (See Instructions)
Attorney

Employer (See Instructions)
Husch Blackwell

Date

08/27/2014

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

Contributor address; City; State; Zip Code
7701 Bramblewood Cir.
Austin, TX 78731

Amount of
contribution (\$)

\$350.00

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

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

Principal occupation / Job title (See Instructions)
Teacher

Employer (See Instructions)
UT Charter School

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

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

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

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

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 25/45 Report: 27/82

2 FILER NAME Riley, Christopher

3 ACCOUNT # (Ethics Commission filers)
00010009

4 Date

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

7 Amount of
contribution (\$)

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

08/01/2014

6 Contributor address; City; State; Zip Code
555 E 5th St
#917
Austin, TX 78701

\$115.63

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

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Jones, Michael and Linda

Amount of
contribution (\$)

In-kind contribution
description (if applicable)

09/02/2014

Contributor address; City; State; Zip Code
360 Nueces St
Apt 1602
Austin, TX 78701-4264

\$100.00

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Jones & Carter, Inc. PAC

Amount of
contribution (\$)

In-kind contribution
description (if applicable)

09/10/2014

Contributor address; City; State; Zip Code
6335 Gulfport St
Ste 100
Houston, TX 77081-1112

\$350.00

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

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

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

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

Principal occupation / Job title (See Instructions)
Managing Director

Employer (See Instructions)
Avison Young

Date

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

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

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.				1 PAGE # Schedule: 26/45 Report: 28/82	
2 FILER NAME Riley, Christopher				3 ACCOUNT # (Ethics Commission filers) 00010009	
4 Date 07/01/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Knight, Joe		7 Amount of contribution (\$) \$200.00		8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 3200 Kittowa Cv Austin, TX 78746-2002			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
9 Principal occupation / Job title (See Instructions) Attorney			10 Employer (See Instructions) Baker Botts LLP		
Date 08/28/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Koeninger, Sara		Amount of contribution (\$) \$100.00		In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 300 Bowie St 602 Austin, TX 78703-4661			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions) General Manager			Employer (See Instructions) Balcones Resources		
Date 09/18/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Koeninger, Sara		Amount of contribution (\$) \$100.00		In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 300 Bowie St 602 Austin, TX 78703-4661			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions) General Manager			Employer (See Instructions) Balcones Resources		
Date 09/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kornely, Analiese		Amount of contribution (\$) \$100.00		In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 96 Chicon St Austin, TX 78702-4457			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date 08/27/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Larson, Dohn		Amount of contribution (\$) \$350.00		In-kind contribution description (if applicable) food & beverage for event
Contributor address; City; State; Zip Code 1009 Ellingson Lane Austin, TX 78751			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions) Attorney			Employer (See Instructions) Texas Classroom Teachers Association		

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 27/45 Report: 29/82	
2 FILER NAME Riley, Christopher		3 ACCOUNT # (Ethics Commission filers) 00010009	
4 Date 07/30/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Laves, Harold 6 Contributor address; City; State; Zip Code 7508 Stonecliff Cir Austin, TX 78731-1515	7 Amount of contribution (\$) \$150.00	8 In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 09/24/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Laves, Joan Contributor address; City; State; Zip Code 7201 Mesa Dr Austin, TX 78731-2103	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Registered Nurse		Employer (See Instructions) Austin Endoscopy	
Date 08/04/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) League, Karrie Contributor address; City; State; Zip Code 1305 W 22nd St Austin, TX 78705-5332	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Founder		Employer (See Instructions) Alamo Draft House	
Date 08/24/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Legge, Murray Contributor address; City; State; Zip Code 4005 Idlewild Rd Austin, TX 78731-6146	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 07/26/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lewis, Barry Contributor address; City; State; Zip Code 1509 Wild Cat Holw West Lake Hills, TX 78746-3640	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) manager		Employer (See Instructions) Applied materials	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

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

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.			1 PAGE # Schedule: 29/45 Report: 31/82	
2 FILER NAME Riley, Christopher			3 ACCOUNT # (Ethics Commission filers) 00010009	
4 Date 09/08/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Martinez, Roberto 6 Contributor address; City; State; Zip Code 5905 Thames Dr Austin, TX 78723-3232		7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)	
Date 09/16/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mauro, Carmelo Contributor address; City; State; Zip Code 504 East 5th St Austin, TX 78701		Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) food & beverage for event
			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Owner			Employer (See Instructions) Carmelo's Restaurant	
Date 07/20/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mauro, Hilary Contributor address; City; State; Zip Code 13711 Bay Front Dr Houston, TX 77077-1947		Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Owner & Marketing Director			Employer (See Instructions) Carmelo's Ristorante Italiano	
Date 08/27/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mauzy, Catherine Contributor address; City; State; Zip Code 5203 Shoal Creek Blvd Austin, TX 78756-1812		Amount of contribution (\$) \$150.00	In-kind contribution description (if applicable)
			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)			Employer (See Instructions)	
Date 07/20/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) McDevitt, Patrick Contributor address; City; State; Zip Code 101 Colorado St Apt 2302 Austin, TX 78701-4140		Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)			Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 30/45 Report: 32/82	
2 FILER NAME Riley, Christopher		3 ACCOUNT # (Ethics Commission filers) 00010009	
4 Date 09/24/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Muskin, Ellen 6 Contributor address; City; State; Zip Code 4009 Knollwood Dr Austin, TX 78731-2916	7 Amount of contribution (\$) \$350.00 (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Commercial Real Estate		10 Employer (See Instructions) Muskin Commercial, LLC	
Date 09/19/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Naeve, Pat and Chuck Contributor address; City; State; Zip Code 6507 Lost Cv Austin, TX 78746-7128	Amount of contribution (\$) \$100.00 (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/10/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Naiser, Marcus Contributor address; City; State; Zip Code 115 Pine Vly Portland, TX 78374-4137	Amount of contribution (\$) \$350.00 (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) VP		Employer (See Instructions) LNV	
Date 09/10/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Nichols, Michael Contributor address; City; State; Zip Code 513 Kodiak Trl Cedar Park, TX 78613-4109	Amount of contribution (\$) \$150.00 (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 08/27/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Norton, E. K. III Contributor address; City; State; Zip Code 512 E Riverside Dr Ste 200 Austin, TX 78704-1306	Amount of contribution (\$) \$350.00 (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Norton Rose FullBright	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 31/45 Report: 33/82	
2 FILER NAME Riley, Christopher		3 ACCOUNT # (Ethics Commission filers) 00010009	
4 Date 07/01/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ocanas, Gilberto 6 Contributor address; City; State; Zip Code 30 Sangre De Cristo Dr Santa Fe, NM 87506-1108	7 Amount of contribution (\$) \$350.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions) Corporate Communication		10 Employer (See Instructions) Ocanas Group	
Date 08/11/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Owen, Martha Contributor address; City; State; Zip Code 3600 Hillbrook Dr Austin, TX 78731-4040	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/19/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Page, Dan Contributor address; City; State; Zip Code 6202 Burk Burnett Ct Austin, TX 78749-1876	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/01/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Parsley, Clint Contributor address; City; State; Zip Code 604 W 12th St Austin, TX 78701-1718	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 07/27/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Pastner, Rebecca Contributor address; City; State; Zip Code 3708 Grayson Ln Austin, TX 78722-1314	Amount of contribution (\$) \$75.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 32/45 Report: 34/82	
2 FILER NAME Riley, Christopher		3 ACCOUNT # (Ethics Commission filers) 00010009	
4 Date 07/20/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Pasztor, David 6 Contributor address; City; State; Zip Code 2214 Alta Vista Ave Austin, TX 78704-5227	7 Amount of contribution (\$) \$350.00	8 In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions) Chief Executive Officer		10 Employer (See Instructions) David Patszor Fine Woodworking	
Date 08/24/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Perry, James Jr. Contributor address; City; State; Zip Code 500 Chicon St Austin, TX 78702-2754	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 08/24/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Pomeroy, John II Contributor address; City; State; Zip Code 800 W 5th St Apt 1206 Austin, TX 78703-5447	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 07/01/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Potter, Joseph Contributor address; City; State; Zip Code 1630 Waterston Ave Austin, TX 78703-3935	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/24/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Potter-Miller, Jennifer Contributor address; City; State; Zip Code 3909 Grayson Ln Austin, TX 78722-1327	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 33/45 Report: 35/82	
2 FILER NAME Riley, Christopher		3 ACCOUNT # (Ethics Commission filers) 00010009	
4 Date 08/29/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Raba-Kistner PAC Inc. 6 Contributor address; City; State; Zip Code PO Box 690287 San Antonio, TX 78269-0287	7 Amount of contribution (\$) \$250.00	8 In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 09/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ramirez, Andrew Contributor address; City; State; Zip Code 10301 River Plantation Dr Austin, TX 78747-1130	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Rz Communications	
Date 07/07/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Reed, Jerry Contributor address; City; State; Zip Code 510 W 15th St Austin, TX 78701-1512	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Development 2000 Inc	
Date 09/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Reynolds, Ronald Contributor address; City; State; Zip Code 6605 Woodcrest Dr Austin, TX 78759-3827	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/10/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rice, Brian Contributor address; City; State; Zip Code 2905 Brian Wood Ct Cedar Park, TX 78613-5143	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Binkley & Barfield	

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The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 34/45 Report: 36/82	
2 FILER NAME Riley, Christopher		3 ACCOUNT # (Ethics Commission filers) 00010009	
4 Date 07/31/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Richards, Daniel 6 Contributor address; City; State; Zip Code 816 Congress Ave 1200 Austin, TX 78701-2442	7 Amount of contribution (\$) \$350.00	8 In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions) Attorney		10 Employer (See Instructions) Self	
Date 09/18/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Riley, Ken Contributor address; City; State; Zip Code 8115 Greenslope Dr Austin, TX 78759-8731	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) Self employed	
Date 09/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rivera, Julian Contributor address; City; State; Zip Code 2404 Forest Bend Dr Austin, TX 78704-4526	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Husch Blackwell	
Date 09/16/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Romero, Celina Contributor address; City; State; Zip Code 203 E 47th St Austin, TX 78751-3106	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Duggins Wren Mann & Romero	
Date 08/26/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rose, Patrick Contributor address; City; State; Zip Code 627 W San Antonio St San Marcos, TX 78666-4319	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Corridor Title	

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The INSTRUCTION GUIDE explains how to complete this form.			1 PAGE # Schedule: 35/45 Report: 37/82	
2 FILER NAME Riley, Christopher			3 ACCOUNT # (Ethics Commission filers) 00010009	
4 Date 08/11/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Roth, Danny 6 Contributor address; City; State; Zip Code 1503 Wild Cat Holw West Lake Hills, TX 78746-3640		7 Amount of contribution (\$) \$250.00	8 In-kind contribution description (if applicable)
			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions) real estate			10 Employer (See Instructions) Southwest Strategies Group, Inc.	
Date 09/11/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rourke, Kelli Contributor address; City; State; Zip Code 300 Bowie St Apt 2602 Austin, TX 78703-4665		Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Volunteer			Employer (See Instructions) None	
Date 09/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ruiz, James Contributor address; City; State; Zip Code 10801 Yucca Dr Austin, TX 78759-6037		Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Attorney			Employer (See Instructions) Winstead PC	
Date 08/15/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Sauer, Larry Jr. Contributor address; City; State; Zip Code 6117 Highlandale Dr Austin, TX 78731-4005		Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)			Employer (See Instructions)	
Date 09/16/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Sawin, Kodi Contributor address; City; State; Zip Code 1004 E 7th St Austin, TX 78702-3219		Amount of contribution (\$) \$150.00	In-kind contribution description (if applicable)
			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)			Employer (See Instructions)	

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The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 36/45 Report: 38/82	
2 FILER NAME Riley, Christopher		3 ACCOUNT # (Ethics Commission filers) 00010009	
4 Date 07/17/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Schmandt, Phillip 6 Contributor address; City; State; Zip Code 11 Hull Circle Dr West Lake Hills, TX 78746-3709	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 09/09/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Schoenbaum, Alan Contributor address; City; State; Zip Code 203 Corona Ave San Antonio, TX 78209-4524	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) attorney		Employer (See Instructions) self	
Date 09/09/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Schoenbaum, James Contributor address; City; State; Zip Code 404 Rio Grande St Apt 401 Austin, TX 78701-2861	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Arbol Lindo LLC		Employer (See Instructions) Co-Founder	
Date 08/14/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Scott, Jeffrey Contributor address; City; State; Zip Code 6824 Bay City Bnd Austin, TX 78725-2935	Amount of contribution (\$) \$150.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/04/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Scroggs, Jane Contributor address; City; State; Zip Code 1714 Summit View Pl Apt 1 Austin, TX 78703-3336	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) former public school librarian		Employer (See Instructions) retired	

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The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 37/45 Report: 39/82	
2 FILER NAME Riley, Christopher		3 ACCOUNT # (Ethics Commission filers) 00010009	
4 Date 09/23/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Shade, Randi 6 Contributor address; City; State; Zip Code 1822 W 10th St Austin, TX 78703-3910	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 08/26/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Shands, Rob Contributor address; City; State; Zip Code 2525 S Lamar Blvd 304 Austin, TX 78704-4743	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 07/31/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Shapiro, Robert Contributor address; City; State; Zip Code 42 Sundown Pkwy Austin, TX 78746-5258	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 08/15/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Sheppard, David Contributor address; City; State; Zip Code 1304 Nueces St Austin, TX 78701-1722	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self	
Date 08/13/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Shieh, James Contributor address; City; State; Zip Code 2901 Windsor Rd Austin, TX 78703-2345	Amount of contribution (\$) \$150.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 38/45 Report: 40/82	
2 FILER NAME Riley, Christopher		3 ACCOUNT # (Ethics Commission filers) 00010009	
4 Date 09/22/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Siff, Ted 6 Contributor address; City; State; Zip Code 604 W 11th St Austin, TX 78701-2007	7 Amount of contribution (\$) \$150.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 08/27/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Simms, Cicily Contributor address; City; State; Zip Code 707 W 10th St Austin, TX 78701-2033	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) attorney		Employer (See Instructions) self	
Date 09/16/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Simms, Cicily Contributor address; City; State; Zip Code 707 W 10th St Austin, TX 78701-2033	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) attorney		Employer (See Instructions) self	
Date 09/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Skaggs, Stephen Contributor address; City; State; Zip Code 1108 Toyath St Austin, TX 78703-3921	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) financial advisor / investment banker		Employer (See Instructions) The Bank Advisory Group, L.L.C.	
Date 09/11/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Smith, Bea Ann Contributor address; City; State; Zip Code 1610 Hartford Rd Austin, TX 78703-3314	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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

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The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 40/45 Report: 42/82	
2 FILER NAME Riley, Christopher		3 ACCOUNT # (Ethics Commission filers) 00010009	
4 Date 08/23/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Steiner, Anna 6 Contributor address; City; State; Zip Code 3132 Eanes Cir Austin, TX 78746-6741	7 Amount of contribution (\$) \$150.00	8 In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 08/27/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Stuart, Donald Contributor address; City; State; Zip Code 4105 Long Champ Dr Austin, TX 78746-1150	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Metcalfe Wolff Stuart & Williams, LLP	
Date 09/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Stumpf, Lance Contributor address; City; State; Zip Code 208 Barton Springs Rd Austin, TX 78704-1211	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) G.M.		Employer (See Instructions) Hyatt Regency Austin	
Date 07/24/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Sullivan, David Contributor address; City; State; Zip Code 1710 Waterston Ave Austin, TX 78703-3937	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/02/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Sullivan, Michael Contributor address; City; State; Zip Code 1613 W 9th 1/2 St Austin, TX 78703-4711	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Austin Fire Dept	

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The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 41/45 Report: 43/82	
2 FILER NAME Riley, Christopher		3 ACCOUNT # (Ethics Commission filers) 00010009	
4 Date 08/27/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Summers, Jim 6 Contributor address; City; State; Zip Code 8901 Chisholm Ln Austin, TX 78748-6381	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 08/24/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Susman, Jim Contributor address; City; State; Zip Code 2108 Lakeshore Dr Austin, TX 78746-2909	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Architect		Employer (See Instructions) STG Design	
Date 09/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Tashnick, Walt Contributor address; City; State; Zip Code 1200 Castle Hill St Apt H Austin, TX 78703-4165	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/23/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Terkel, Tom Contributor address; City; State; Zip Code 3105 Bowman Ave Austin, TX 78703-2253	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Real Estate Development		Employer (See Instructions) FourT Realty	
Date 08/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Tita, Michael Contributor address; City; State; Zip Code 5905 Tumbling Cir Austin, TX 78731-4053	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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The INSTRUCTION GUIDE explains how to complete this form.				1 PAGE # Schedule: 42/45 Report: 44/82	
2 FILER NAME Riley, Christopher				3 ACCOUNT # (Ethics Commission filers) 00010009	
4 Date 07/21/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Tobias, Vanessa		7 Amount of contribution (\$) \$100.00		8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 2012 Ford St Austin, TX 78704-2838			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
9 Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)		
Date 07/21/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Tobias, Vanessa		Amount of contribution (\$) \$100.00		In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 2012 Ford St Austin, TX 78704-2838			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date 09/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Todd, Bruce		Amount of contribution (\$) \$100.00		In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 823 Congress Ave Ste 1505 Austin, TX 78701-2457			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date 08/15/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Todd, Patricia		Amount of contribution (\$) \$100.00		In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 500 E Riverside Dr Apt 256 Austin, TX 78704-1343			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date 09/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Todd, Patricia		Amount of contribution (\$) \$50.00		In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 500 E Riverside Dr Apt 256 Austin, TX 78704-1343			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 43/45 Report: 45/82	
2 FILER NAME Riley, Christopher		3 ACCOUNT # (Ethics Commission filers) 00010009	
4 Date 08/27/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Trickey, Christopher 6 Contributor address; City; State; Zip Code 401 Congress Ave Ste 2200 Austin, TX 78701-3790	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 09/24/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Tynberg, Alex Contributor address; City; State; Zip Code 3712 Meredith St Austin, TX 78703-2021	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Real Estate Professional		Employer (See Instructions) Tynberg LLC	
Date 08/30/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Varney, Lana Contributor address; City; State; Zip Code 308 Ridgewood Rd Austin, TX 78746-4619	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Norton Rose Fulbright	
Date 09/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Waltz, Steffen Contributor address; City; State; Zip Code 1301 W 25th St 510 Austin, TX 78705-4254	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Dominion Advisors	
Date 08/03/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Watkins, Karen Contributor address; City; State; Zip Code 9005 Heiden Ln Austin, TX 78749-4175	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Office of the Attorney General	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 44/45 Report: 46/82	
2 FILER NAME Riley, Christopher		3 ACCOUNT # (Ethics Commission filers) 00010009	
4 Date 08/27/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Weber, Andrew 6 Contributor address; City; State; Zip Code 301 Congress Ave Ste 2000 Austin, TX 78701-2960	7 Amount of contribution (\$) \$250.00	8 In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions) Attorney Partner		10 Employer (See Instructions) Kelly Hart & Hallman, LLP	
Date 07/01/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Westenbarger, David Contributor address; City; State; Zip Code 1707 E 38th 1/2 St Austin, TX 78722-1211	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Wheelus, C. Daniel Contributor address; City; State; Zip Code 3103 Bee Caves Rd Ste 201 Austin, TX 78746-5580	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) attorney		Employer (See Instructions) self	
Date 07/19/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Wisembaker, Brian Contributor address; City; State; Zip Code 7104 Doral Pl Tyler, TX 75703-5754	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/24/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Wolff, David Contributor address; City; State; Zip Code 1206 W 8th St Austin, TX 78703-5279	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) attorney		Employer (See Instructions) Drenner & Golden Stuart Wolff LLP	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 45/45 Report: 47/82

2 FILER NAME Riley, Christopher

3 ACCOUNT # (Ethics Commission filers)
00010009

4 Date

09/24/2014

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

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

7 Amount of
contribution (\$)

\$350.00

8 In-kind contribution
description (if applicable)

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

9 Principal occupation / Job title (See Instructions)
none

10 Employer (See Instructions)
none

Date

08/26/2014

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

Contributor address; City; State; Zip Code
1036 Liberty Park Dr
House 49
Austin, TX 78746-6990

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)
attorney

Employer (See Instructions)
lkardWynneLLP

Date

09/25/2014

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

Contributor address; City; State; Zip Code
2037 S Kihei Rd
Apt 10
Kihei, HI 96753-9704

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

LOANS

SCHEDULE E

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 1/1 Report: 48/82	
2 FILER NAME Riley, Christopher		3 ACCOUNT # (Ethics Commission filers) 00010009	
4 TOTAL OF UNITEMIZED LOANS: ⇄⇄⇄⇄⇄⇄		\$	
5 Date of loan 09/25/2014	7 Name of lender Riley, Chris <input type="checkbox"/> out-of-state PAC (ID# _____)	9 Loan Amount (\$) \$25,000.00	
6 Is lender a financial Institution? No	8 Lender address; City; State; Zip Code 1310 San Antonio #1 Austin, TX 78701	10 Interest rate	
		11 Maturity date 11/04/2014	
12 Principal occupation / Job title (See Instructions) Council Member		13 Employer (See Instructions) City of Austin	
14 Description of Collateral <input checked="" type="checkbox"/> none		15 Check if personal funds were deposited into political account <input checked="" type="checkbox"/>	
16 GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	17 Name of guarantor 18 Guarantor address; City; State; Zip Code	19 Amount Guaranteed (\$)	
20 Principal Occupation		21 Employer	

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

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 1/29 Report: 49/82		2 FILER NAME Riley, Christopher		3 ACCOUNT # (TEC filers) 00010009	
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4 Date 07/01/2014	5 Payee name Ahuja, Jason				
6 Amount (\$) \$400.00	7 Payee address City; State; Zip Code 4600 Monterey Oaks Blvd. #613 Austin, TX 78749				
8 PURPOSE OF EXPENDITURE	(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) <input type="checkbox"/> Contract labor		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:

Date 07/15/2014	Payee name Ahuja, Jason				
Amount (\$) \$400.00	Payee address City; State; Zip Code 4600 Monterey Oaks Blvd. #613 Austin, TX 78749				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract labor		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:

Date 07/31/2014	Payee name Ahuja, Jason				
Amount (\$) \$510.00	Payee address City; State; Zip Code 4600 Monterey Oaks Blvd. #613 Austin, TX 78749				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract labor		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:

Date 08/12/2014	Payee name Ahuja, Jason				
Amount (\$) \$300.00	Payee address City; State; Zip Code 4600 Monterey Oaks Blvd. #613 Austin, TX 78749				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract labor		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:

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

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 2/29 Report: 50/82	2 FILER NAME Riley, Christopher	3 ACCOUNT # (TEC filers) 00010009
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4 Date 08/29/2014	5 Payee name Ahuja, Jason
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6 Amount (\$) \$200.00	7 Payee address City; State; Zip Code 4600 Monterey Oaks Blvd. #613 Austin, TX 78749
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8 PURPOSE OF EXPENDITURE	(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) <input type="checkbox"/> Contract labor
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense	

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 09/15/2014	Payee name Ahuja, Jason
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Amount (\$) \$400.00	Payee address City; State; Zip Code 4600 Monterey Oaks Blvd. #613 Austin, TX 78749
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract labor
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 08/29/2014	Payee name Austin AFL-CIO
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Amount (\$) \$310.00	Payee address City; State; Zip Code PO Box 87 Austin, TX 78767
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Political print advertising
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 07/01/2014	Payee name Bean, Samuel
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Amount (\$) \$480.00	Payee address City; State; Zip Code 2604 Paramont Ave. Austin, TX 78704
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> contract labor
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 3/29 Report: 51/82		2 FILER NAME Riley, Christopher		3 ACCOUNT # (TEC filers) 00010009
4 Date 07/15/2014	5 Payee name Bean, Samuel			
6 Amount (\$) \$480.00	7 Payee address City; State; Zip Code 2604 Paramont Ave. Austin, TX 78704			
8 PURPOSE OF EXPENDITURE	(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) <input type="checkbox"/> Contract labor	
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense			
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:
Date 07/31/2014	Payee name Bean, Samuel			
Amount (\$) \$420.00	Payee address City; State; Zip Code 2604 Paramont Ave. Austin, TX 78704			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract labor	
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense			
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:
Date 08/15/2014	Payee name Bean, Samuel			
Amount (\$) \$540.00	Payee address City; State; Zip Code 2604 Paramont Ave. Austin, TX 78704			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract labor	
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense			
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:
Date 08/29/2014	Payee name Bean, Samuel			
Amount (\$) \$480.00	Payee address City; State; Zip Code 2604 Paramont Ave. Austin, TX 78704			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract labor	
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense			
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:

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

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 4/29 Report: 52/82		2 FILER NAME Riley, Christopher		3 ACCOUNT # (TEC filers) 00010009	
4 Date 09/15/2014		5 Payee name Bean, Samuel			
6 Amount (\$) \$300.00		7 Payee address City: State: Zip Code 2604 Paramont Ave. Austin, TX 78704			
8 PURPOSE OF EXPENDITURE		(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) <input type="checkbox"/> Contract labor <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name Office sought: Office held:			
Date 07/01/2014		Payee name Blome, Bill			
Amount (\$) \$2,000.00		Payee address City: State: Zip Code 1405 Waller St. Austin, TX 78702			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Salary <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name Office sought: Office held:			
Date 07/14/2014		Payee name Blome, Bill			
Amount (\$) \$2,000.00		Payee address City: State: Zip Code 1405 Waller St. Austin, TX 78702			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Salary <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name Office sought: Office held:			
Date 07/31/2014		Payee name Blome, Bill			
Amount (\$) \$2,000.00		Payee address City: State: Zip Code 1405 Waller St. Austin, TX 78702			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Salary <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name Office sought: Office held:			

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

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 5/29 Report: 53/82		2 FILER NAME Riley, Christopher		3 ACCOUNT # (TEC filers) 00010009	
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4 Date 08/15/2014	5 Payee name Blome, Bill				
6 Amount (\$) \$2,000.00	7 Payee address City; State; Zip Code 1405 Waller St. Austin, TX 78702				
8 PURPOSE OF EXPENDITURE	(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) <input type="checkbox"/> Salary		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:

Date 08/29/2014	Payee name Blome, Bill				
Amount (\$) \$2,000.00	Payee address City; State; Zip Code 1405 Waller St. Austin, TX 78702				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Salary		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:

Date 09/15/2014	Payee name Blome, Bill				
Amount (\$) \$2,000.00	Payee address City; State; Zip Code 1405 Waller St. Austin, TX 78702				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Salary		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:

Date 07/01/2014	Payee name Bray, Timothy				
Amount (\$) \$120.00	Payee address City; State; Zip Code 2200 S. Pleasant Valley Rd. #107 Austin, TX 78741-4601				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract labor		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:

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

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 6/29 Report: 54/82		2 FILER NAME Riley, Christopher		3 ACCOUNT # (TEC filers) 00010009
4 Date 07/15/2014	5 Payee name Bray, Timothy			
6 Amount (\$) \$400.00	7 Payee address City; State; Zip Code 2200 S. Pleasant Valley Rd. #107 Austin, TX 78741-4601			
8 PURPOSE OF EXPENDITURE	(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) <input type="checkbox"/> Contract labor	
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense			
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:
Date 07/31/2014	Payee name Bray, Timothy			
Amount (\$) \$450.00	Payee address City; State; Zip Code 2200 S. Pleasant Valley Rd. #107 Austin, TX 78741-4601			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract labor	
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense			
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:
Date 08/15/2014	Payee name Bray, Timothy			
Amount (\$) \$450.00	Payee address City; State; Zip Code 2200 S. Pleasant Valley Rd. #107 Austin, TX 78741-4601			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract labor	
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense			
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:
Date 08/29/2014	Payee name Bray, Timothy			
Amount (\$) \$450.00	Payee address City; State; Zip Code 2200 S. Pleasant Valley Rd. #107 Austin, TX 78741-4601			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract labor	
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense			
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:

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

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 7/29 Report: 55/82		2 FILER NAME Riley, Christopher		3 ACCOUNT # (TEC filers) 00010009	
4 Date 09/15/2014	5 Payee name Bray, Timothy				
6 Amount (\$) \$825.00	7 Payee address City: State: Zip Code 2200 S. Pleasant Valley Rd. #107 Austin, TX 78741-4601				
8 PURPOSE OF EXPENDITURE	(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) <input type="checkbox"/> Contract labor		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 07/31/2014	Payee name Checkmark Typesetting				
Amount (\$) \$119.08	Payee address City: State: Zip Code 3217 N. IH 35 Austin, TX 78722				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> printing		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 09/08/2014	Payee name Debellis, Rudy				
Amount (\$) \$120.00	Payee address City: State: Zip Code 907 E 15th St Austin, TX 78702				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract labor		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 07/01/2014	Payee name Diaz, Robert				
Amount (\$) \$1,250.00	Payee address City: State: Zip Code 1016 Camino La Costa, Apt 2115 Austin, TX 78752				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Salary		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:

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

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 8/29 Report: 56/82		2 FILER NAME Riley, Christopher		3 ACCOUNT # (TEC filers) 00010009	
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4 Date 07/17/2014	5 Payee name Diaz, Robert				
6 Amount (\$) \$1,250.00	7 Payee address City: State: Zip Code 1016 Camino La Costa, Apt 2115 Austin, TX 78752				
8 PURPOSE OF EXPENDITURE	(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) <input type="checkbox"/> Salary		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:

Date 07/31/2014	Payee name Diaz, Robert				
Amount (\$) \$1,250.00	Payee address City: State: Zip Code 1016 Camino La Costa, Apt 2115 Austin, TX 78752				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Salary		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:

Date 08/15/2014	Payee name Diaz, Robert				
Amount (\$) \$1,250.00	Payee address City: State: Zip Code 1016 Camino La Costa, Apt 2115 Austin, TX 78752				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Salary		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:

Date 08/29/2014	Payee name Diaz, Robert				
Amount (\$) \$1,250.00	Payee address City: State: Zip Code 1016 Camino La Costa, Apt 2115 Austin, TX 78752				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Salary		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:

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

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 9/29 Report: 57/82		2 FILER NAME Riley, Christopher		3 ACCOUNT # (TEC filers) 00010009
4 Date 09/15/2014	5 Payee name Diaz, Robert			
6 Amount (\$) \$625.00	7 Payee address City; State; Zip Code 1016 Camino La Costa, Apt 2115 Austin, TX 78752			
8 PURPOSE OF EXPENDITURE	(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) <input type="checkbox"/> Salary <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:
Date 08/01/2014	Payee name Facebook			
Amount (\$) \$11.08	Payee address City; State; Zip Code 1601 Willow Road Menlo Park, CA 94025			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Political online advertising <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:
Date 08/07/2014	Payee name Facebook			
Amount (\$) \$250.73	Payee address City; State; Zip Code 1601 Willow Road Menlo Park, CA 94025			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Political online advertising <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:
Date 08/18/2014	Payee name Facebook			
Amount (\$) \$500.23	Payee address City; State; Zip Code 1601 Willow Road Menlo Park, CA 94025			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Political online advertising <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:

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

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 10/29 Report: 58/82		2 FILER NAME Riley, Christopher		3 ACCOUNT # (TEC filers) 00010009	
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4 Date 09/02/2014	5 Payee name Facebook				
6 Amount (\$) \$45.15	7 Payee address City; State; Zip Code 1601 Willow Road Menlo Park, CA 94025				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Political online advertising		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:

Date 09/24/2014	Payee name Facebook				
Amount (\$) \$751.12	Payee address City; State; Zip Code 1601 Willow Road Menlo Park, CA 94025				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> political online advertising		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:

Date 07/01/2014	Payee name FedEx Office				
Amount (\$) \$8.56	Payee address City; State; Zip Code 2711 Guadalupe St Austin, TX 78705				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> copies		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:

Date 07/02/2014	Payee name FedEx Office				
Amount (\$) \$76.43	Payee address City; State; Zip Code 2711 Guadalupe St Austin, TX 78705				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> copies		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:

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

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 11/29 Report: 59/82		2 FILER NAME Riley, Christopher		3 ACCOUNT # (TEC filers) 00010009	
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4 Date 07/11/2014	5 Payee name FedEx Office				
6 Amount (\$) \$37.49	7 Payee address City: State: Zip Code 2711 Guadalupe St Austin, TX 78705				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> copies		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:

Date 07/11/2014	Payee name FedEx Office				
Amount (\$) \$38.02	Payee address City: State: Zip Code 2711 Guadalupe St Austin, TX 78705				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> copies		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:

Date 07/15/2014	Payee name FedEx Office				
Amount (\$) \$54.45	Payee address City: State: Zip Code 2711 Guadalupe St Austin, TX 78705				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> copies		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:

Date 07/16/2014	Payee name FedEx Office				
Amount (\$) \$48.43	Payee address City: State: Zip Code 2711 Guadalupe St Austin, TX 78705				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> copies		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:

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

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 12/29 Report: 60/82		2 FILER NAME Riley, Christopher		3 ACCOUNT # (TEC filers) 00010009
4 Date 07/17/2014	5 Payee name FedEx Office			
6 Amount (\$) \$30.91	7 Payee address City; State; Zip Code 2711 Guadalupe St Austin, TX 78705			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> copies	
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense			
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:
Date 07/18/2014	Payee name FedEx Office			
Amount (\$) \$63.78	Payee address City; State; Zip Code 2711 Guadalupe St Austin, TX 78705			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> copies	
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense			
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:
Date 07/19/2014	Payee name FedEx Office			
Amount (\$) \$25.16	Payee address City; State; Zip Code 2711 Guadalupe St Austin, TX 78705			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> copies	
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense			
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:
Date 07/20/2014	Payee name FedEx Office			
Amount (\$) \$13.17	Payee address City; State; Zip Code 2711 Guadalupe St Austin, TX 78705			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> copies	
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense			
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:

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

1 PAGE # Schedule: 13/29 Report: 61/82	2 FILER NAME Riley, Christopher	3 ACCOUNT # (TEC filers) 00010009
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4 Date 07/22/2014	5 Payee name FedEx Office
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6 Amount (\$) \$19.77	7 Payee address City; State; Zip Code 2711 Guadalupe St Austin, TX 78705
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> copies
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense	

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 07/24/2014	Payee name FedEx Office
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Amount (\$) \$42.00	Payee address City; State; Zip Code 2711 Guadalupe St Austin, TX 78705
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> copies
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 07/25/2014	Payee name FedEx Office
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Amount (\$) \$35.49	Payee address City; State; Zip Code 2711 Guadalupe St Austin, TX 78705
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> copies
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 07/26/2014	Payee name FedEx Office
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Amount (\$) \$82.61	Payee address City; State; Zip Code 2711 Guadalupe St Austin, TX 78705
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> copies
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 14/29 Report: 62/82		2 FILER NAME Riley, Christopher		3 ACCOUNT # (TEC filers) 00010009	
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4 Date 07/29/2014	5 Payee name FedEx Office				
6 Amount (\$) \$36.38	7 Payee address City: State: Zip Code 2711 Guadalupe St Austin, TX 78705				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> copies		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:

Date 07/31/2014	Payee name FedEx Office				
Amount (\$) \$46.02	Payee address City: State: Zip Code 2711 Guadalupe St Austin, TX 78705				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> copies		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:

Date 08/01/2014	Payee name FedEx Office				
Amount (\$) \$144.45	Payee address City: State: Zip Code 2711 Guadalupe St Austin, TX 78705				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> copies		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:

Date 08/04/2014	Payee name FedEx Office				
Amount (\$) \$20.51	Payee address City: State: Zip Code 2711 Guadalupe St Austin, TX 78705				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> copies		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:

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

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 15/29 Report: 63/82		2 FILER NAME Riley, Christopher		3 ACCOUNT # (TEC filers) 00010009	
4 Date 08/05/2014	5 Payee name FedEx Office				
6 Amount (\$) \$7.90	7 Payee address City; State; Zip Code 2711 Guadalupe St Austin, TX 78705				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> copies		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 08/06/2014	Payee name FedEx Office				
Amount (\$) \$8.24	Payee address City; State; Zip Code 2711 Guadalupe St Austin, TX 78705				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> copies		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 08/07/2014	Payee name FedEx Office				
Amount (\$) \$79.25	Payee address City; State; Zip Code 2711 Guadalupe St Austin, TX 78705				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> copies		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 08/08/2014	Payee name FedEx Office				
Amount (\$) \$86.36	Payee address City; State; Zip Code 2711 Guadalupe St Austin, TX 78705				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> copies		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:

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

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 16/29 Report: 64/82		2 FILER NAME Riley, Christopher		3 ACCOUNT # (TEC filers) 00010009	
4 Date 08/09/2014	5 Payee name FedEx Office				
6 Amount (\$) \$61.63	7 Payee address City; State; Zip Code 2711 Guadalupe St Austin, TX 78705				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> copies		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 08/12/2014	Payee name FedEx Office				
Amount (\$) \$52.67	Payee address City; State; Zip Code 2711 Guadalupe St Austin, TX 78705				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> copies		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 08/13/2014	Payee name FedEx Office				
Amount (\$) \$8.97	Payee address City; State; Zip Code 2711 Guadalupe St Austin, TX 78705				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> copies		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 08/23/2014	Payee name FedEx Office				
Amount (\$) \$16.56	Payee address City; State; Zip Code 2711 Guadalupe St Austin, TX 78705				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> copies		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:

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

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 17/29 Report: 65/82		2 FILER NAME Riley, Christopher		3 ACCOUNT # (TEC filers) 00010009	
4 Date 07/03/2014		5 Payee name First Data			
6 Amount (\$) \$36.10		7 Payee address City: State; Zip Code 5565 Glenridge Connector NE Atlanta, GA 30342			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Accounting/Banking		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> credit card processing fees <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 07/03/2014		Payee name First Data			
Amount (\$) \$262.72		Payee address City: State; Zip Code 5565 Glenridge Connector NE Atlanta, GA 30342			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Accounting/Banking		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> credit card processing fees <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 07/03/2014		Payee name First Data			
Amount (\$) \$611.11		Payee address City: State; Zip Code 5565 Glenridge Connector NE Atlanta, GA 30342			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Accounting/Banking		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> credit card processing fees <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 08/04/2014		Payee name First Data			
Amount (\$) \$230.25		Payee address City: State; Zip Code 5565 Glenridge Connector NE Atlanta, GA 30342			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Accounting/Banking		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Credit card processing fees <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	

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

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 18/29 Report: 66/82		2 FILER NAME Riley, Christopher		3 ACCOUNT # (TEC filers) 00010009	
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4 Date 08/04/2014	5 Payee name First Data				
6 Amount (\$) \$64.45	7 Payee address City: State: Zip Code 5565 Glenridge Connector NE Atlanta, GA 30342				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Credit card processing fees		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:

Date 08/04/2014	Payee name First Data				
Amount (\$) \$529.11	Payee address City: State: Zip Code 5565 Glenridge Connector NE Atlanta, GA 30342				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Accounting/Banking		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Credit card processing fees		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:

Date 09/03/2014	Payee name First Data				
Amount (\$) \$19.20	Payee address City: State: Zip Code 5565 Glenridge Connector NE Atlanta, GA 30342				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Accounting/Banking		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Credit card processing fees		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:

Date 09/03/2014	Payee name First Data				
Amount (\$) \$104.92	Payee address City: State: Zip Code 5565 Glenridge Connector NE Atlanta, GA 30342				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Accounting/Banking		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Credit card processing fees		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:

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

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 19/29 Report: 67/82		2 FILER NAME Riley, Christopher		3 ACCOUNT # (TEC filers) 00010009	
4 Date 09/03/2014	5 Payee name First Data				
6 Amount (\$) \$318.39	7 Payee address City; State; Zip Code 5565 Glenridge Connector NE Atlanta, GA 30342				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Credit card processing fees		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 08/26/2014	Payee name Goss, Delwin				
Amount (\$) \$450.00	Payee address City; State; Zip Code 6410 Ponca St. Austin, TX 78741				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> contract labor		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 09/22/2014	Payee name Goss, Delwin				
Amount (\$) \$180.00	Payee address City; State; Zip Code 6410 Ponca St. Austin, TX 78741				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> contract labor		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 09/15/2014	Payee name Green, Joseph				
Amount (\$) \$200.00	Payee address City; State; Zip Code 300 Crockett #121 Austin, TX 78704				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract labor		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:

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

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 20/29 Report: 68/82		2 FILER NAME Riley, Christopher		3 ACCOUNT # (TEC filers) 00010009	
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4 Date 07/31/2014	5 Payee name Heideman, Brian				
6 Amount (\$) \$250.00	7 Payee address City; State; Zip Code 700 Nacona Trail Harker Heights, TX 76548				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Website services		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:

Date 09/21/2014	Payee name Heideman, Brian				
Amount (\$) \$50.00	Payee address City; State; Zip Code 700 Nacona Trail Harker Heights, TX 76548				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Website services		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:

Date 08/15/2014	Payee name Ivory, J'vona				
Amount (\$) \$650.00	Payee address City; State; Zip Code 150 Klattenhoff Lane #5207 Hutto, TX 78634				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Salary		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:

Date 08/29/2014	Payee name Ivory, J'vona				
Amount (\$) \$650.00	Payee address City; State; Zip Code 150 Klattenhoff Lane #5207 Hutto, TX 78634				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Salary		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:

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

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 21/29 Report: 69/82		2 FILER NAME Riley, Christopher		3 ACCOUNT # (TEC filers) 00010009	
4 Date 09/15/2014	5 Payee name Ivory, J'vona				
6 Amount (\$) \$650.00	7 Payee address City: State; Zip Code 150 Klattenhoff Lane #5207 Hutto, TX 78634				
8 PURPOSE OF EXPENDITURE	(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) <input type="checkbox"/> Salary		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 08/04/2014	Payee name Kelly Graphics				
Amount (\$) \$4,887.02	Payee address City: State; Zip Code 1409 Quaker Ridge Austin, TX 78746				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Printing		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 08/13/2014	Payee name Kelly Graphics				
Amount (\$) \$11,349.55	Payee address City: State; Zip Code 1409 Quaker Ridge Austin, TX 78746				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Printing, postage and mailing services		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 08/20/2014	Payee name Kelly Graphics				
Amount (\$) \$1,798.03	Payee address City: State; Zip Code 1409 Quaker Ridge Austin, TX 78746				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Yard signs		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:

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

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 22/29 Report: 70/82		2 FILER NAME Riley, Christopher		3 ACCOUNT # (TEC filers) 00010009	
4 Date 09/15/2014	5 Payee name Kelly Graphics				
6 Amount (\$) \$5,346.58	7 Payee address City: State; Zip Code 1409 Quaker Ridge Austin, TX 78746				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Printing, postage and mailing services <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 07/29/2014	Payee name Live Oak Gottesman				
Amount (\$) \$2,400.00	Payee address City: State; Zip Code San Gabriel, Ltd. Austin, TX 78735				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Office rent <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 07/31/2014	Payee name Nalley, Jamie				
Amount (\$) \$500.00	Payee address City: State; Zip Code 3413 Cedar St. Unit A Austin, TX 78705				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract labor <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 08/15/2014	Payee name Nalley, Jamie				
Amount (\$) \$500.00	Payee address City: State; Zip Code 3413 Cedar St. Unit A Austin, TX 78705				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract labor <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:

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

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 23/29 Report: 71/82		2 FILER NAME Riley, Christopher		3 ACCOUNT # (TEC filers) 00010009	
4 Date 08/29/2014		5 Payee name Nalley, Jamie			
6 Amount (\$) \$500.00		7 Payee address City; State; Zip Code 3413 Cedar St. Unit A Austin, TX 78705			
8 PURPOSE OF EXPENDITURE		(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) <input type="checkbox"/> Contract labor <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 09/15/2014		Payee name Nalley, Jamie			
Amount (\$) \$500.00		Payee address City; State; Zip Code 3413 Cedar St. Unit A Austin, TX 78705			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract labor <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 07/02/2014		Payee name NGP Van, Inc.			
Amount (\$) \$320.00		Payee address City; State; Zip Code 1105 15th Street NW, Ste. 500 Washington, DC 20005			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> database software <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 08/04/2014		Payee name NGP Van, Inc.			
Amount (\$) \$320.00		Payee address City; State; Zip Code 1105 15th Street NW, Ste. 500 Washington, DC 20005			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> database software <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	

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

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 24/29 Report: 72/82		2 FILER NAME Riley, Christopher		3 ACCOUNT # (TEC filers) 00010009	
4 Date 09/02/2014	5 Payee name NGP Van, Inc.				
6 Amount (\$) \$320.00	7 Payee address City; State; Zip Code 1105 15th Street NW, Ste. 500 Washington, DC 20005				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> database software <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Office sought: Office held:				
Date 07/18/2014	Payee name Office Max				
Amount (\$) \$10.78	Payee address City; State; Zip Code 907 West 5th Street Austin, TX 78703				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Office supplies <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Office sought: Office held:				
Date 07/18/2014	Payee name Office Max				
Amount (\$) \$21.30	Payee address City; State; Zip Code 907 West 5th Street Austin, TX 78703				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Office supplies <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Office sought: Office held:				
Date 08/01/2014	Payee name Office Max				
Amount (\$) \$130.59	Payee address City; State; Zip Code 907 West 5th Street Austin, TX 78703				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Office supplies <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Office sought: Office held:				

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

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 25/29 Report: 73/82		2 FILER NAME Riley, Christopher		3 ACCOUNT # (TEC filers) 00010009	
4 Date 08/27/2014		5 Payee name Orr, Baxter			
6 Amount (\$) \$1,000.00		7 Payee address City: State; Zip Code 531 Virginia Ave. #404 Indianapolis, IN 46203			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Printing Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> graphic design <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 07/10/2014		Payee name Postmaster			
Amount (\$) \$98.00		Payee address City: State; Zip Code 3507 N. Lamar Blvd Austin, TX 78703			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> postage <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 07/12/2014		Payee name Postmaster			
Amount (\$) \$39.20		Payee address City: State; Zip Code 3507 N. Lamar Blvd Austin, TX 78703			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Printing Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Postage <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 07/16/2014		Payee name Postmaster			
Amount (\$) \$490.00		Payee address City: State; Zip Code 3507 N. Lamar Blvd Austin, TX 78703			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> postage <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	

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

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 26/29 Report: 74/82		2 FILER NAME Riley, Christopher		3 ACCOUNT # (TEC filers) 00010009	
4 Date 08/13/2014	5 Payee name Postmaster				
6 Amount (\$) \$49.00	7 Payee address City; State; Zip Code 3507 N. Lamar Blvd Austin, TX 78703				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Postage		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 09/15/2014	Payee name Reese, Melissa				
Amount (\$) \$750.00	Payee address City; State; Zip Code 2503 Bridle Path Apt. B Austin, TX 78703				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Videography		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 08/29/2014	Payee name San Gabriel, Ltd.				
Amount (\$) \$1,200.00	Payee address City; State; Zip Code Live Oak Gottesman Austin, TX 78735				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Office rent		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 07/01/2014	Payee name Susan Harry Consulting, LLC				
Amount (\$) \$3,000.00	Payee address City; State; Zip Code P.O. Box 301074 Austin, TX 78704				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Fundraising & compliance consulting		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:

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

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 27/29 Report: 75/82		2 FILER NAME Riley, Christopher		3 ACCOUNT # (TEC filers) 00010009	
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4 Date 08/01/2014	5 Payee name Susan Harry Consulting, LLC				
6 Amount (\$) \$3,000.00	7 Payee address City: State: Zip Code P.O. Box 301074 Austin, TX 78704				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Fundraising & compliance consulting <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name: _____ Office sought: _____ Office held: _____				

Date 08/15/2014	Payee name Susan Harry Consulting, LLC				
Amount (\$) \$360.00	Payee address City: State: Zip Code P.O. Box 301074 Austin, TX 78704				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> compliance consulting <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name: _____ Office sought: _____ Office held: _____				

Date 09/01/2014	Payee name Susan Harry Consulting, LLC				
Amount (\$) \$3,000.00	Payee address City: State: Zip Code P.O. Box 301074 Austin, TX 78704				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Fundraising & compliance consulting <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name: _____ Office sought: _____ Office held: _____				

Date 08/14/2014	Payee name The University of Texas at Austin				
Amount (\$) \$130.40	Payee address City: State: Zip Code P.O. Box 8058 Austin, TX 78713-8058				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Data <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name: _____ Office sought: _____ Office held: _____				

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

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 28/29 Report: 76/82		2 FILER NAME Riley, Christopher		3 ACCOUNT # (TEC filers) 00010009	
4 Date 07/03/2014	5 Payee name Tulchin Research				
6 Amount (\$) \$5,000.00	7 Payee address City; State; Zip Code 182 2nd Street San Francisco, CA 94105				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Polling Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> polling		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 08/15/2014	Payee name Wooding, John				
Amount (\$) \$400.00	Payee address City; State; Zip Code 3601 Willow Springs Rd. Apt. 104 Austin, TX 78704				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract labor		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 08/29/2014	Payee name Wooding, John				
Amount (\$) \$300.00	Payee address City; State; Zip Code 3601 Willow Springs Rd. Apt. 104 Austin, TX 78704				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract labor		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 09/15/2014	Payee name Wooding, John				
Amount (\$) \$400.00	Payee address City; State; Zip Code 3601 Willow Springs Rd. Apt. 104 Austin, TX 78704				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract labor		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:

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

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 29/29 Report: 77/82		2 FILER NAME Riley, Christopher		3 ACCOUNT # (TEC filers) 00010009
4 Date 07/23/2014	5 Payee name Worley Printing			
6 Amount (\$) \$1,149.62	7 Payee address City; State; Zip Code 3217 North IH 35 Austin, TX 78722			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Printing <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Office sought: Office held:			
Date 08/25/2014	Payee name Wortham Insurance & Risk Management			
Amount (\$) \$541.34	Payee address City; State; Zip Code PO Box 301819 Dallas, TX 75303			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> rental insurance <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Office sought: Office held:			

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

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

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 2/5 Report: 79/82		2 FILER NAME Riley, Christopher		3 ACCOUNT # (TEC filers) 00010009
4 Date 07/22/2014	5 Payee name Guero's Taco Bar*			
6 Amount (\$) \$500.00 <input type="checkbox"/> Reimbursement from political contributions intended	7 Payee address City: State; Zip Code 1412 S Congress Ave Austin, TX 78704			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> food for event	
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense			
Date 07/21/2014	Payee name Office Max*			
Amount (\$) \$10.78 <input type="checkbox"/> Reimbursement from political contributions intended	Payee address City: State; Zip Code 907 W 5th St. Austin, TX 78703			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> office supplies	
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense			
Date 07/21/2014	Payee name Office Max*			
Amount (\$) \$21.30 <input type="checkbox"/> Reimbursement from political contributions intended	Payee address City: State; Zip Code 907 W 5th St. Austin, TX 78703			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> office supplies	
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense			
Date 08/04/2014	Payee name Office Max*			
Amount (\$) \$130.59 <input type="checkbox"/> Reimbursement from political contributions intended	Payee address City: State; Zip Code 907 W 5th St. Austin, TX 78703			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> office supplies	
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense			

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 3/5 Report: 80/82		2 FILER NAME Riley, Christopher		3 ACCOUNT # (TEC filers) 00010009	
4 Date 08/11/2014	5 Payee name Office Max*				
6 Amount (\$) \$60.31 <input type="checkbox"/> Reimbursement from political contributions intended	7 Payee address City; State; Zip Code 907 W 5th St. Austin, TX 78703				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> office supplies		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Date 08/14/2014	Payee name Office Max*				
Amount (\$) \$24.11 <input type="checkbox"/> Reimbursement from political contributions intended	Payee address City; State; Zip Code 907 W 5th St. Austin, TX 78703				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> office supplies		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Date 08/21/2014	Payee name Office Max*				
Amount (\$) \$78.36 <input type="checkbox"/> Reimbursement from political contributions intended	Payee address City; State; Zip Code 907 W 5th St. Austin, TX 78703				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> office supplies		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Date 09/04/2014	Payee name Office Max*				
Amount (\$) \$123.93 <input type="checkbox"/> Reimbursement from political contributions intended	Payee address City; State; Zip Code 907 W 5th St. Austin, TX 78703				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> office supplies		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 4/5 Report: 81/82	2 FILER NAME Riley, Christopher	3 ACCOUNT # (TEC filers) 00010009
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4 Date 09/15/2014	5 Payee name Office Max*
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6 Amount (\$) \$74.14 <input type="checkbox"/> Reimbursement from political contributions intended	7 Payee address City; State; Zip Code 907 W 5th St. Austin, TX 78703
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> office supplies <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Date 09/22/2014	Payee name Office Max*
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Amount (\$) \$148.28 <input type="checkbox"/> Reimbursement from political contributions intended	Payee address City; State; Zip Code 907 W 5th St. Austin, TX 78703
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> office supplies <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Date 09/15/2014	Payee name Phoneburner*
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Amount (\$) \$149.00 <input type="checkbox"/> Reimbursement from political contributions intended	Payee address City; State; Zip Code 27702 Crown Valley Parkway Ladera Ranch, CA 92694
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> office supplies <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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Date 08/28/2014	Payee name Voter Activation*
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Amount (\$) \$140.00 <input type="checkbox"/> Reimbursement from political contributions intended	Payee address City; State; Zip Code 1101 15th St. NW Ste. 500 Washington, DC 20005
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> VAN robodialer <input type="checkbox"/> Check if Austin, TX, officeholder living expense
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POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 5/5 Report: 82/82	2 FILER NAME Riley, Christopher	3 ACCOUNT # (TEC filers) 00010009
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4 Date 08/28/2014	5 Payee name Voter Activation*	
6 Amount (\$) \$140.00 <input type="checkbox"/> Reimbursement from political contributions intended	7 Payee address City; State; Zip Code 1101 15th St. NW Ste. 500 Washington, DC 20005	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> VAN robodialer
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Date 09/12/2014	Payee name Voter Activation*	
Amount (\$) \$140.00 <input type="checkbox"/> Reimbursement from political contributions intended	Payee address City; State; Zip Code 1101 15th St. NW Ste. 500 Washington, DC 20005	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> VAN robodialer
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense	

PERSONAL FUNDS - LOANS AND EXPENDITURES

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

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

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

Name of candidate/officeholder: **Christopher "Chris" Riley**

Reporting Period:

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

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

Amount of loan	Date of loan
\$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			
Office Max	907 W 5th St., Austin, TX 78703	21.3	office supplies	20140721
Guero's Taco Bar	1412 S Congress Ave, Austin, TX 78704	500	food for event	20140722
Sweetish Hill	1120 W 6th St, Austin, TX 78703	34	food for volunteers	20140722
HEB	1000 East 41st Street, Austin, TX 78751	26.7	food for volunteers	20140804
Taco Shack	2825 Guadalupe St, Austin, TX 78705	41.82	food for volunteers	20140804
WM SuperCenter	5017 W Hwy 290, Austin, TX 78746	69.27	office furniture/supplies	20140804
CVS Pharmacy	2927 Guadalupe St, Austin, TX 78705	24.67	office supplies	20140804
Office Max	907 W 5th St., Austin, TX 78703	130.59	office supplies	20140804
DeMayo Cellular	9027 Northgate Blvd, Austin, TX 78758	237.3	campaign phones	20140806
Office Max	907 W 5th St., Austin, TX 78703	60.31	office supplies	20140811
Idealist.org	302 Fifth Avenue, 11th Floor, New York, NY 10001	80	canvasser recruitment ad	20140813
Best Buy	1201 Barbara Jordan Blvd, Austin, TX 78723	254.36	office equipment	20140813
Office Max	907 W 5th St., Austin, TX 78703	24.11	office supplies	20140814
Jack in the Box	Austin, TX	3.78	food for volunteers	20140815
Staples	1201 Barbara Jordan Blvd Suite 700, Austin, TX 78703	36.79	office supplies	20140818
Office Max	907 W 5th St., Austin, TX 78703	78.36	office supplies	20140821
Voter Activation	1101 15th St. NW, Ste. 500 Washington, DC 20005	140	VAN robodialer	20140828
Voter Activation	1101 15th St. NW, Ste. 500 Washington, DC 20005	140	VAN robodialer	20140828
Office Max	907 W 5th St., Austin, TX 78703	123.93	office supplies	20140904
Grande Communications	1923 E 7th St #100, Austin, TX 78702	275.04	campaign office utilities	20140908
AIO Wireless	1552 FM 685, Pflugerville, TX 78660	125	campaign phones	20140908
Voter Activation	1101 15th St. NW, Ste. 500 Washington, DC 20005	140	VAN robodialer	20140912
Office Max	907 W 5th St., Austin, TX 78703	74.14	office supplies	20140915
Phoneburner	27702 Crown Valley Parkway, Ladera Ranch, CA 92694	149	office supplies	20140915
Office Max	907 W 5th St., Austin, TX 78703	148.28	office supplies	20140922

Craigslist.org	222 Sutter St., San Francisco, CA 94108	25	advertisement	20140923
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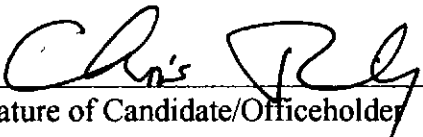
SCHEDULE ATX. 2

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 Individual/Bundler	Address	Occupation	Employer	Total Amount Bundled
Amanda DeAngelis	1851 S. Lakeline Boulevard, Suite 104, #162, Cedar Park, TX 78613	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.

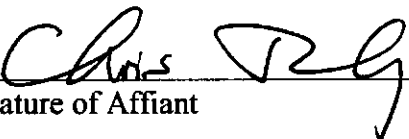
Name	Address	City	State	Zip	Occupation	Employer	Amount	Contributor
Dianne Benton	901 W 9th St #605	Austin	TX	78703-4636	Benton assisted living	Consultant Pharmacist	\$250.00	Amanda DeAngelis
Karen Friese	6603 Cat Creek Trl	Austin	TX	78731-2600	K. Friese & Associates	Senior Project Manager	\$350.00	Amanda DeAngelis
Rick Guerra	2107 Key West Cv	Austin	TX	78746-7257	Jose I. Guerra, Inc.	Engineer	\$250.00	Amanda DeAngelis
	Half Associates State PAC	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	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

3. Identify each person registered or required to be register under City Code, Chapter 4-8 (Regulation of Lobbyists) employed by, or compensated to lobby by: (1) any Bundler identified in Section 1 above, (2) a business association through which the Bundler does business, or (3) the Bundler's employer.

Note: It is important to remember that contributions to you are from the actual donor, not 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