CORRECTION/AMENDMENT AFFIDAVITFOR CANDIDATE/OFFICEHOLDER

1 Filer ID (Ethics Commission Filers) 2 Total pages filed: OFFICEUSEONLY 32 MS/MRS/MR FIRST м Date Received 3 CANDIDATE/ OFFICEHOLDER Christopher NAME SUFFIX NICKNAME LAST Rilev Chris 4 ORIGINAL X January 15 Runoff Other (specify) REPORT TYPE Exceeded \$500 limit 15th day after July 15 C Date Hand treasurer 30th day before election Postmarket appointment (officeholderonly) O Final report 8th day before election Receipt # Date Proces C) 5 ORIGINAL PERIOD Month Dav Year Month Day Year COVERED THROUGH 2014 12 2014 Date Imaged 10 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 JOHN ACOSTA Notary Public, State of Texas made in good faith and without an intent to mislead or to misrepre- sent My Commission Expires the information contained in the report. December 09, 2018 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. Signature of Candidate of Officeholder AFFIX NOTARY STAMP / SEAL ABOVE 20 **1**5 "hris Sworn to and subscribed before me, by the said this the to certify which, witness my hand and seal of office. of officer administering oath Printed name of officer administering oath Title of officer administering oath Signatur



FORM COR-

C/OH

CORRECTION/AMENDMENT AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

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

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

Semiannual Reports: Effective September 1, 2011, a semiannual report (due January 15 or July 15) that is amended/corrected <u>before</u> the eighth day after the original report was filed is considered to have been filed on the date the original report was filed. A semiannual report that is amended/corrected <u>on or after</u> the eighth day after the original report was filed on the date the original report was filed is considered to have been filed on the date the original report was filed is considered to have been filed on the date the original report was filed is considered to have been filed on the date 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.

	OFFICEHOLDER			for Cover Si	M C/OH HEET PG 1
The C/OH Instruction Gui	DE explains how to complete this form.	1 ACCOL (Ethics 0 00010	Commission filers)	2 PAGE # 1 of 27	
3 CANDIDATE / OFFICEHOLDER	MS/MRS/MR FIRST		MI	OFFICE	JSE ONLY
NAME	Christopher NICKNAME LAST Chris Riley		SUFFIX	Date Received	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; APT / SUITE #; P.O. Box 30062 Austin, TX 78703	СІТҮ;	STATE: ZIP CODE	Date Hand-delivere	d or Date Postmarked
Change of Address				Receipt #	Amount
5 CAMPAIGN TREASURER	MS/MRS/MR FIRST		М	Date Processed	
NAME	Cora			Date imaged	
	NICKNAME LAST Corky Hilliard		SUFFIX		
6 CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE): APT / 4120 Lawless St. Austin, TX 78723	'Suite #;	CITY; STATE;	ZIP CODE	
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER (512) 459-6342	·	EXTENSION		
8 REPORT TYPE	X January 15 30th day before a	election	Runoff		campaign treasurer fficeholder only)
	July 15 🔲 8th day before el	lection	Exceeded \$500 limit	Final report (Al	tach C/OH - FR)
9 PERIOD COVERED	Month Day Year		Month Day	Year	
	™ 10/26/2014	IROUGH	12/31/20)14	
10 ELECTION	ELECTION DATE ELECTION Month Day Year Pri 12/16/2014	N TYPE mary X	Runott	General	Special
11 OFFICE	OFFICE HELD (if any) City Council, Place 1		OFFICE SOUGHT (if known City Council, Distric		
	GO T	O PAGE 2			

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

13 C/OH NAME Riley,	, Christopher		14 ACCOUNT # (00010009	Ethics Commission filers)
15 NOTICE FROM	have been made with	tice of political expenditures by political committees to support the out the candidate's or officeholder's knowledge or consent. Candid y receive notice of such expenditures.		
POLITICAL COMMITTEE(S)	COMMITTEE TYPE	COMMITTEE NAME Austin Apartment Association		
	E GENERAL	COMMITTEE ADDRESS 8620 Burnet Rd. Ste. 475 Austin, TX 78757		
	SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME Arrona, Kristan		
additional pages		COMMITTEE CAMPAIGN TREASURER ADDRESS 8620 Burnet Hd. Ste. 475 Austin, TX 78757		
16 CONTRIBUTION TOTALS		OLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN S, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$	300.00
		POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS}	\$	9,076.00
EXPENDITURE TOTALS	3. TOTAL F	OLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMI	ZED \$	445.17
	4. TOTAL I	POLITICAL EXPENDITURES	\$	38,318.70
CONTRIBUTION BALANCE				619.38
OUTSTANDING LOAN TOTALS		RINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF TH Y OF THE REPORTING PERIOD	^{ie} \$	33,000.00
17 AFFIDAVIT		I swear, or affirm, under pena is true and correct and include me under Title 15, Election Co	es all information require	
		Signature of	Candidate or Officehole	der
AFFIX NOTARY S	STAMP / SEAL ABOV	E		
	•	ne said	, this the	day
ot,2	20 , to cer	tify which, witness my hand and seal of office.		
Signature of officer admi	nistering oath	Print name of officer administering oath	Title of officer admin	istering oath

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 1/	8 Report: 3/27
2	FILER NAME	Riley, Christopher		3 ACCOUNT # 00010009	(Ethics Commission filers)
4	Date	5 Full name of contributor Dout-of-state PAC (IDe Bluejay, Michael	#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	10/30/2014	6 Contributor address; City; State; Zip Code 2605B Oaklawn Ave Austin, TX 78722-1720		\$350.00	
					Texas, complete Schedule T)
9	Executive, Pu		10 Employer (See In Michael Bluejay		
	Date	Full name of contributor 🔲 out-of-state PAC (IDr Bufkin, Ben	ŧ)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/31/2014	Contributor address; City; State; Zip Code 5707 Highland Hills Cir Austin, TX 78731-4230		\$100.00	
L				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor D out-of-state PAC (ID# Burns, Kevin))	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/05/2014	Contributor address; City; State; Zip Code 801 W 5th St Ste 100 Austin, TX 78703-5405		\$350.00	
		Austin, 1X 78703-3403	i	(If travel outside of	Texas, complete Schedule T)
	Principal occup Real Estate	ation / Job title (See Instructions)	Employer (See Ins UrbanSpace LL	structions)	
	Date	Full name of contributor Dout-of-state PAC (ID# Burns, Paula)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/05/2014	Contributor address; City; State; Zip Code 801 W 5th St Ste 100 Austin, TX 78703-5403		\$350.00	
	Principal occupa	ation / Job title (See Instructions)	Employer (See Ins		Texas, complete Schedule T)
	Broker		UrbanSpace LLI		
	Date	Full name of contributor Dout-of-state PAC (ID# Campbell, Daniel)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/31/2014	Contributor address; City; State; Zip Code 6511 Hillside Hollow Dr Austin, TX 78750-8100		\$100.00 	
					Texas, complete Schedule T)
	Principal occupa	ation / Job title (See Instructions)	Employer (See Ins	tructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

	-				
	The INSTRUCTION	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 2/	8 Report: 4/27
2	FILER NAME	Riley, Christopher		3 ACCOUNT # 00010009	(Ethics Commission filers)
4	Date	5 Full name of contributor D out-of-state PAC (ID# Cody, Buck	:)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	10/30/2014	6 Contributor address; City; State; Zip Code 5708 Highland Hills Dr Austin, TX 78731-4233		\$100.00	
					Texas, complete Schedule T)
9	Principal occup	pation / Job title (See Instructions)	10 Employer (See In:	structions)	
	Date	Full name of contributor Dout-of-state PAC (ID# Driver, Susan)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/05/2014	Contributor address; City; State; Zip Code 8 Woodstone Sq Austin, TX 78703-1164		\$250.00	
				(If the set of the set	, 7
┣—	Principal occur	ation / Job title (See Instructions)	Employer (See In:		Texas, complete Schedule T)
	Accountant/A		Retired		
	Date	Full name of contributor Dout-of-state PAC (ID# Ellinger, Matthew)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/27/2014	Contributor address; City; State; Zip Code 140 Gardenside Dr Apt 401		\$100.00	
		San Francisco, CA 94131-1325		(If travel outside of	' Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See Ins	structions)	
	Date	Full name of contributor out-of-state PAC (ID# Elliott, Chris)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/29/2014	Contributor address; City; State; Zip Code 1705 Rabb Rd Austin, TX 78704-2811		\$100.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See Ins	structions)	
	Date	Full name of contributor Dout-of-state PAC (ID# Erichson, Christian)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/31/2014	Contributor address; City; State; Zip Code 2020 E 2nd St B		\$100.00	
		Austin, TX 78702-4563			
					Texas, complete Schedule T)
	Principal occupa	ation / Job title (See Instructions)	Employer (See Ins	tructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

				T.	
	The Instruction	DN GUIDE explains how to complete this form.		1 PAGE # Schedule: 3/	8 Report: 5/27
2	FILER NAME	Riley, Christopher		3 ACCOUNT # 00010009	(Ethics Commission filers)
4	Date	5 Full name of contributor Dout-of-state PAC (ID# Freeland Graves, Jean	ŧ)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	11/05/2014	6 Contributor address; City; State; Zip Code 900 W 17th St Austin, TX 78701-1007		\$250.00	
					Texas, complete Schedule T)
9	Principal occup requested	bation / Job title (See Instructions)	10 Employer (See In requested	structions)	
	Date	Full name of contributor D out-of-state PAC (ID# Gilson Sachs, Kay	ŧ)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/05/2014	Contributor address; City; State; Zip Code 4300 Prickly Pear Drive Austin, TX 78731		\$201.00	E
				(If travel outside of	Texas, complete Schedule T)
		ation / Job title (See Instructions) ount Manager	Employer (See In HD Supply	structions)	
	Date	Full name of contributor Dout-of-state PAC (ID# Hersh, Stuart)	Arnount of contribution (\$)	In-kind contribution description (if applicable)
	11/05/2014	Contributor address; City; State; Zip Code 1307 Kinney Ave Apt 117 Austin, TX 78704-2279		\$100.00)
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor Dout-of-state PAC (ID# Lewis, Barry & Romi)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/05/2014	Contributor address; City; State; Zip Code 200 Congress Ave Austin, TX 78701-4527		\$200.00	
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Retired	ation / Job title (See Instructions)	Employer (See In Self	structions)	
	Date	Full name of contributor Dout-of-state PAC (ID# Lippman, Susan)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/01/2014	Contributor address; City; State; Zip Code 8901 Chisholm Ln Austin, TX 78748-6381		\$100.00	
				/If benue a shales of	
	Principal occup	ation / Job title (See Instructions)	Employer (See Ins		Texas, complete Schedule T)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

The INSTRUCTION GUIDE explains how to complete this form.	1 PAGE # Schedule: 4/8 Report: 6/27
2 FILER NAME Riley, Christopher	3 ACCOUNT # (Ethics Commission filers) 00010009
4 Date 5 Full name of contributor D out-of-state PA Lopez, Laura	C (ID#) 7 Amount of 8 In-kind contribution contribution (\$) description (if applicable)
11/05/2014 6 Contributor address; City; State; Zip (308 Camino Arbolago Lakeway, TX 78734-3960	Code \$350.00
	(If travel outside of Texas, complete Schedule T)
9 Principal occupation / Job title (See Instructions) Homemaker	10 Employer (See Instructions) None
Date Full name of contributor Dut-of-state PA Mahlum, Terry	C (ID#) Arnount of In-kind contribution contribution (\$) description (if applicable)
11/03/2014 Contributor address; City; State; Zip (102 Lakota Pass Austin, TX 78738-6563	Sode \$350.00
	'
	(If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions) Regional Vice President	Employer (See Instructions) Delaware North Companies
Date Full name of contributor Dout-of-state PA Manchester, Douglas	C (ID#) Amount of In-kind contribution contribution (\$) description (if applicable)
11/05/2014 Contributor address; City; State; Zip 0 350 Carnino De La Reina San Diego, CA 92108-3003	\$350.00
	(If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions) Real Estate Development	Employer (See Instructions) Manchester Financial Group
Date Full name of contributor Dout-of-state PA Manchester, Lauren	C (ID#) Amount of In-kind contribution contribution (\$) description (if applicable)
11/04/2014 Contributor address; City; State; Zip C 350 Camino De La Reina San Diego, CA 92108-3003	ode \$350.00
	(If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions) Partner	Employer (See Instructions) Den Property Group
Date Full name of contributor Dout-of-state PA Orr, David	C (ID#) Amount of In-kind contribution contribution (\$) description (if applicable)
10/26/2014 Contributor address; City; State; Zip C 5312 Avenue H Austin, TX 78751	ode \$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: 5/8	3 Report: 7/27
2	FILER NAME	Riley, Christopher		3 ACCOUNT # 00010009	(Ethics Commission filers)
4	Date	5 Full name of contributor D out-of-state PAC (ID) Osborne, Michael	#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	10/30/2014	6 Contributor address; City; State; Zip Code 909 W 23rd St Austin, TX 78705-5007		\$350.00	
				•	Texas, complete Schedule T)
9	Principal occup Renewable E	ation / Job title (See Instructions) nergy	10 Employer (See In Osborne Comp		
	Date	Full name of contributor D out-of-state PAC (ID) Potter, Joseph	¥)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/26/2014	Contributor address; City; State; Zip Code 1630 Waterston Ave Austin, TX 78703-3935	• • • • • • • • • • • • • • • • • • • •	\$75.00	 {
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	-	
	Date	Full name of contributor D out-of-state PAC (ID) RECA - Good Government PAC	*)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/05/2014	Contributor address; City; State; Zip Code 98 San Jacinto Blvd Ste 510 Austin, TX 78701-4082		\$350.00	1 1 1
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor D out-of-state PAC (ID# Skaggs, Stephen	ŧ)	Amount of contribution (\$)	In-kind contribution description (if applicable)
I	11/05/2014	Contributor address; City; State; Zip Code 1108 Toyath St Austin, TX 78703-3921		\$100.00	
┝	Principal occup	ation / Job title (See Instructions)	Employer (See In	-	Texas, complete Schedule T)
	Date	Full name of contributor D out-of-state PAC (ID# Sprute, Dana	ŧ)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/30/2014	Contributor address; City; State; Zip Code 909 W 23rd St Austin, TX 78705-5007		\$350.00	[
			_	•	Texas, complete Schedule T)
	Principal occup Physician	ation / Job title (See Instructions)	Employer (See In: Blackstock Clini		

Electronic Filing Version 3.4.6

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

	The INSTRUCTIO	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 6/8	3 Report: 8/27
2	FILER NAME	Riley, Christopher		3 ACCOUNT # 00010009	(Ethics Commission filers)
4	Date	5 Full name of contributor Dout-of-state PAC (ID) Taylor, Kathy	ŧ)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	11/06/2014	6 Contributor address; City; State; Zip Code 1902 Stamford Ln Austin, TX 78703-2942		\$350.00	ł
				(If travel outside of	Texas, complete Schedule T)
9	Principal occup Homemaker	ation / Job title (See Instructions)	10 Employer (See In None	structions)	
	Date	Full name of contributor D out-of-state PAC (ID) Taylor, Timothy	¥)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/06/2014	Contributor address; City; State; Zip Code 1902 Stamford Ln Austin, TX 78703-2942		\$350.00	t 1
				(If travel outside of	Texas, complete Schedule T)
	Principal occup Attorney	ation / Job title (See Instructions)	Employer (See In Jackson Walke		
	Date	Full name of contributor Dout-of-state PAC (ID) Thumlert, Jason	ŧ)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/31/2014	Contributor address; City; State; Zip Code 610 Peacock Ln Austin, TX 78704-6232		\$100.00	
				(if travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)	
	Date	Full name of contributor D out-of-state PAC (ID) Todd, Bruce	*)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/29/2014	Contributor address; City; State; Zip Code 823 Congress Ave Ste 1505 Austin, TX 78701-2457		\$100.00	 Texas, complete Schedule T)
⊢	Principal occup	ation / Job title (See Instructions)	Employer (See In	•	
	Date	Full name of contributor Dout-of-state PAC (IDa Topkara, Engin	¥)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	11/05/2014	Contributor address; City; State; Zip Code 11915 Stonehollow Dr Apt 1031 Austin, TX 78758-3104		\$250.00	
	Dringingt	otion / Joh fills (Cas (ttio)	Employe- (0 1-	-	Texas, complete Schedule T)
	Principal occup Professor	ation / Job title (See Instructions)	Employer (See In Huston-Tillotsor		

POLITICAL CONTRIBUTIONS SCHEDULE A **OTHER THAN PLEDGES OR LOANS** 1 PAGE # The INSTRUCTION GUIDE explains how to complete this form. Schedule: 7/8 Report: 9/27 2 FILER NAME **Riley**, Christopher (Ethics Commission filers) 3 ACCOUNT # 00010009 4 Date 5 Full name of contributor out-of-state PAC (ID#) 8 | 7 Amount of In-kind contribution contribution (\$) description (if applicable) Topkara, Tugea 11/05/2014 6 Contributor address; City; State; Zip Code \$250.00 11915 Stonehollow Dr Apt 1031 Austin, TX 78758-3104 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) 9 10 Employer (See Instructions) requested requested Date Full name of contributor D out-of-state PAC (ID# Amount of In-kind contribution contribution (\$) description (if applicable) Van Zandt, Thomas 11/05/2014 Contributor address; City; State; Zip Code \$100.00 3001 Bonnie Rd Austin, TX 78703-2807 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor U out-of-state PAC (ID# Date In-kind contribution Amount of contribution (\$) description (if applicable) Vitanza, David 11/05/2014 Contributor address: City; State; Zip Code \$350.00 308 Camino Arbolago Lakeway, TX 78734-3960 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Vice President Schlosser Development Date Full name of contributor D out-of-state PAC (ID#_ Amount of In-kind contribution contribution (\$) description (if applicable) Vitanza, Mary Lou 11/05/2014 Contributor address; City; State; Zip Code \$250.00 2500 Barton Creek Blvd Apt 1612 Austin, TX 78735-1623 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired Retired Date Full name of contributor D out-of-state PAC (ID#_ In-kind contribution Amount of contribution (\$) description (if applicable) Vitanza, S.A. 11/05/2014 Contributor address: City; State; Zip Code \$250.00 2500 Barton Creek Blvd Apt 1612 Austin, TX 78735-1623 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired Retired

POLITICAL CONTRIBUTIONS SCHEDULE A **OTHER THAN PLEDGES OR LOANS** 1 PAGE # The INSTRUCTION GUIDE explains how to complete this form. Schedule: 8/8 Report: 10/27 (Ethics Commission filers) 2 FILER NAME **Riley**, Christopher 3 ACCOUNT # 00010009 4 5 Full name of contributor D out-of-state PAC (ID#_ Date ì 7 Amount of 8 In-kind contribution contribution (\$) description (if applicable) Yerly, Rebecca City; State; Zip Code 11/05/2014 6 Contributor address; \$350.00 1208 Bickler Rd Austin, TX 78704-2502 (If travel outside of Texas, complete Schedule T) 10 Employer (See Instructions) Principal occupation / Job title (See Instructions) 9 **Fundamentals Group** Researcher In-kind contribution Full name of contributor D out-of-state PAC (ID# Date Amount of contribution (\$) description (if applicable) Yilmaz, Feride 11/05/2014 Contributor address: City; State; Zip Code \$250.00 2012 Shaker Tri Austin, TX 78754-5936 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) requested requested Full name of contributor D out-of-state PAC (ID# Amount of In-kind contribution Date contribution (\$) description (if applicable) Yilmaz, Ilker 11/05/2014 Contributor address: City; State; Zip Code \$250.00 2012 Shaker Trl Austin, TX 78754-5936 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) requested requested Full name of contributor D out-of-state PAC (ID#_ In-kind contribution Amount of Date contribution (\$) description (if applicable) Zimel, Adam 10/31/2014 Contributor address; City; State; Zip Code \$100.00 4009 Madrid Cv Austin, TX 78759-5058 (If travel outside of Texas, complete Schedule T) Principal occupation / Job title (See Instructions) Employer (See Instructions) Electronic Filing Version 3.4.6

Austin, Texas 78711-2070

(512)463-5800

TDD 1-800-735-2989

The Instruction G	DIDE explains how to complete this form.	-	1 PAGE # Schedule: 1	/1 Report: 11/27
2 FILER NAME R	liley, Christopher		3 ACCOUNT # 00010009	(Ethics Commission filers)
4 TOTAL OF UN	IITEMIZED LOANS:	\$\$\$\$		\$
5 Date of Ioan 11/17/2014	7 Name of lender Dou Riley, Chris	it-of-state PAC (ID#)	9 Loan Amount (\$) \$7,000.00
6 Is lender a financial Institution?	8 Lender address; City; State; 1310 San Antonio #1	Zip Code		10 Interest rate 0
No	Austin, TX 78701			11 Maturity date
12 Principal occupatio Council Member	n / Job title (See Instructions)	13 Employer (See Instruc City of Austin	ctions)	
14 Description of Colla	ateral	15 Check if personal func	ds were deposited ir	nto political account
16 GUARANTOR INFORMATION	17 Name of guarantor			19 Amount Guaranteed (\$)
X not applicable	18 Guarantor address; City; State;	Zip Code		
_		Zip Code 21 Employer	····	
—	n	·	· · · · · 	Loan Amount (\$) \$1,000.00
20 Principal Occupation	Name of lender ou Riley, Chris Lender address; City; State; 1310 San Antonio	21 Employer	·····	
20 Principal Occupation Date of Ioan 12/06/2014 Is lender a	Name of lender Riley, Chris Lender address; City; State;	21 Employer	· · · · · · · · · · · · · · · · · · ·	\$1,000.00
20 Principal Occupation Date of Ioan 12/06/2014 Is lender a financial Institution? NO	Name of lender ou Riley, Chris Lender address; City; State; 1310 San Antonio #1	21 Employer		\$1,000.00 Interest rate 0
20 Principal Occupation Date of Ioan 12/06/2014 Is lender a financial Institution? No Principal occupation	Name of lender ou Riley, Chris Lender address; City; State; 1310 San Antonio #1 Austin, TX 78701	21 Employer t-of-state PAC (ID# Zip Code	tions)	\$1,000.0 Interest rate 0 Maturity date
20 Principal Occupation Date of Ioan 12/06/2014 Is lender a financial Institution? NO Principal occupation Council Member Description of Colla	Name of lender ou Riley, Chris Lender address; City; State; 1310 San Antonio #1 Austin, TX 78701	21 Employer t-of-state PAC (ID#	tions)	\$1,000.0 Interest rate 0 Maturity date
20 Principal Occupation Date of Ioan 12/06/2014 Is lender a financial Institution? NO Principal occupation Council Member Description of Colla Image: Collage of Collag	Name of lender ou Riley, Chris Lender address; City; State; 1310 San Antonio #1 Austin, TX 78701	21 Employer t-of-state PAC (ID#	tions)	\$1,000.00 Interest rate 0 Maturity date

Austin, Texas 78711-2070

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

POLITIC	CAL EXPENDITURES		SCHEDULE F
Advertising Expe Accounting/Bank Consulting Expe Event Expense Fees	king Legal Services Solicitation/Fund	Contract Labor Loan Re fraising Expense Transpo Contribu strict Cand /Rental Expense OTHER	epayment/Reimbursement ortation Equipment & Related Expense utions/Donations Made By didate/Officeholder/Political Committee I (enter a category not listed above)
1 PAGE # Schedule: 1/11 F	2 FILER NAME		3 ACCOUNT # (TEC filers) 00010009
4 Date	5 Payee name Ahuja, Jason		
10/31/2014 6 Amount (\$)	7 Payee address City; State; Zip Code		
\$655.00			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description (II travel o Contract labor	putside of Texas, complete Schedule T)
		Check if Austin, TX, office	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date	Payee name		
11/12/2014 Amount (\$)	Ahuja, Jason Payee address City; State; Zip Code		
\$340.00			
PURPOSE OF	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description (If travel of Contract Labor	outside of Texas, complete Schedule T)
EXPENDITURE		Check if Austin, TX, office	chalder living evogen
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date	Payee name		
11/18/2014 Amount (\$)	At Large Partners Payee address City; State; Zip Code		
\$2,700.00	Payee address City; State; Zip Code 907 East 15th St. Austin, TX 78702		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense	Description (If travel of Consulting	putside of Texas, complete Schedule T)
		Check if Austin, TX, office	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date	Payee name		
10/31/2014 Amount (\$)	Bean, Samuel Pavee address City: State: Zip Code	·	
\$708.00	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	Contract labor	utside of Texas, complete Schedule T)
Complete ONLY IF	Candidate / Officeholder name	Check if Austin, TX, office	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officenoider name	Office sought:	Office held:

POLITICAL EXPENDITURES SCHEDULE F EXPENDITURE CATEGORIES Advertising Expense Gifts/Awards/Memorial Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Loan Repayment/Reimbursement Accounting/Banking Transportation Equipment & Related Expense Legal Services Consulting Expense Food/Beverage Expense Travel In Distric Contributions/Donations Made By Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Polling Expense Printing Expense Event Expense Travel Out Of District Office Overhead/Rental Expense Fees The INSTRUCTION GUIDE explains how to complete this form. PAGE # FILER NAME 3 ACCOUNT # 2 (TEC filers) Riley, Christopher 00010009 Schedule: 2/11 Report: 13/27 4 Date 5 Payee name Bean, Samuel 11/12/2014 6 Amount (\$) Pavee address State: Zip Code City; 2604 Paramont Ave. \$210.00 Austin, TX 78704 (a) Category (See Categories listed at the top of this schedule) 8 (b) Description (If travel outside of Texas, complete Schedule T) PURPOSE Contract Labor Salaries/Wages/Contract Labor OF **EXPENDITURE** Check if Austin, TX, officeholder living expense 9 Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name 10/31/2014 BirdDog Research, LLC Amount (\$) Payee address City: State; Zip Code 96 Chicon St. \$2,500.00 Austin, TX 78702 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) PURPOSE Research Consulting Expense OF EXPENDITURE Check if Austin, TX, officeholder living expense Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name 10/31/2014 Blome, Bill Amount (\$) Payee address City; State; Zip Code 1405 Waller St. Austin, TX 78702 \$2,000.00 Description Category (See Categories listed at the top of this schedule) (If travel outside of Texas, complete Schedule T) PURPOSE Salary Salaries/Wages/Contract Labor OF **EXPENDITURE** Check if Austin, TX, officeholder living expense Complete ONLY if Candidate / Officeholder name Office sought: Office held: direct expenditure to benefit C/OH Date Payee name Blome, Bill 11/18/2014 Payee address Amount (\$) City; State; Zip Code 1405 Waller St. \$2.000.00 Austin, TX 78702 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, complete Schedule T) PURPOSE Salary Salaries/Wages/Contract Labor OF EXPENDITURE Check if Austin, TX, officeholder living expense Candidate / Officeholder name Complete ONLY if Office sought: Office held: direct expenditure to benefit C/OH

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

POLITIC	AL EXPENDITURES				SCHEDU	LE F
	EXPENDI	TURE CATEGO	RIES			
Advertising Expe Accounting/Bank Consulting Expe Event Expense Fees	nse Gifts/Awards/Memorial Expense ing Legal Services se Food/Beverage Expense Polling Expense	Salaries/Wages/Con Solicitation/Fundrais Travel In District Travel Out Of Distric Office Overhead/Rei	itract Labor ing Expense it ntal Expense	Transportation Contributions/D Candidate/O OTHER (enter a	nt/Reimbursement Equipment & Related Ionations Made By Ifficeholder/Political C a category not listed a	ommittee
1 PAGE # Schedule: 3/11 F	Report: 14/27 2 FILER NAME Riley, Christopher				3 ACCOUNT # 00010009	(TEC filers)
4 Date	5 Payee name Bray Timothy					
10/31/2014 6 Amount (\$)	Bray, Timothy 7 Payee address City; State; Zi	p Code				
\$1,250.00	2200 S. Pleasant Valley Rd. #107 Austin, TX 78741-4601	P				
8 PURPOSE OF	(a) Category (See Categories listed at the top of this Salaries/Wages/Contract Labor	s schedule)	(b) Description Salary	(If travel outside (of Texas, complete Se	chedule T) 🗌
EXPENDITURE			Check if Austin	n, TX, officeholde	r living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sou		Office held:	
Date	Payee name					
11/12/2014	Bray, Timothy					
Amount (\$)	Payee address City; State; Zi 2200 S. Pleasant Valley Rd. #107	p Code				
\$1,250.00	Austin, TX 78741-4601					
PURPOSE OF	Category (See Categories listed at the top of this Salaries/Wages/Contract Labor	s schedule)	Description Contract lab		of Texas, complete So	chedule T) 🔲
EXPENDITURE				n, TX, officeholde	r living expanse	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sou		Office held:	
Date	Payee name					
10/31/2014 Amount (\$)	Cecil, Willie Payee address City; State; Zi	n Code				
\$790.00	4714 Rowena Ave. Austin, TX 78751					
PURPOSE	Category (See Categories listed at the top of this Salaries/Wages/Contract Labor	s schedule)	Description Contract lab	(if travel outside o Or	of Texas, complete So	chedule T) 🗌
EXPENDITURE			Check if Austin	n, TX, officeholder	r living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sou	ight:	Office held:	
Date	Payee name					
11/12/2014 Amount (\$)	Cecil, Willie Payee address City; State; Zij	o Code				
\$340.00	4714 Rowena Ave.	h cone				
φ 0 +0.00	Austin, TX 78751					
PURPOSE	Category (See Categories listed at the top of this	s schedule)	Description Contract Lat		of Texas, complete So	chedule T) 🗌
OF	Salaries/Wages/Contract Labor			n, TX, officeholder	r living evnence	
Complete ONLY if	Candidate / Officeholder name		Office sou		Office held:	
direct expenditure to benefit C/OH				-		

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

POLITIC	AL EXPENDITURES		SCHEDULE F
Advertising Expe Accounting/Bank Consulting Expe Event Expense Fees	ing Legal Services Solicitation/Fundra	Contract Labor Loan Repayment aising Expense Transportation Ec Contributions/Doi trict Candidate/Offi Rental Expense OTHER (enter a d	puipment & Related Expense
1 PAGE # Schedule: 4/11 F	Priler NAME Report: 15/27 Riley, Christopher	1	3 ACCOUNT # (TEC filers) 00010009
4 Date	5 Payee name		
10/31/2014 6 Amount (\$)	de la Garza, Monica 7 Payee address City; State; Zip Code		
\$140.00	809a Plumpton Austin, TX 78755		
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 Contract Labor	Texas, complete Schedule T)
	Condidate (Office) alder some	Check if Austin, TX, officeholder I	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date	Payee name de la Garza, Monica		
<u>11/07/2014</u> Amount (\$)	Payee address City; State; Zip Code		
\$182.00	809a Plumpton Austin, TX 78755		
PURPOSE OF	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description (If travel outside of Contract Labor	Texas, complete Schedule T)
EXPENDITURE		Check if Austin, TX, officeholder li	iving expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date	Payee name		
10/29/2014 Amount (\$)	Facebook		
\$779.64	Payee address City; State; Zip Code 1601 S. California Ave. Palo Alto, CA 94304		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Political online advertising	Texas, complete Schedule T)
		Check if Austin, TX, officeholder li	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date 10/30/2014	Payee name Facebook		
Amount (\$)	Payee address City; State; Zip Code		
\$806.87	1601 S. California Ave. Palo Alto, CA 94304		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Political online advertising	Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:

POLITIC	AL EXPENDITURES		SCHEDULE F
Advertising Expe Accounting/Bank Consulting Expe Event Expense Fees	ing Legal Services Solicitation/Fun nse Food/Beverage Expense Travel In Distric Polling Expense Travel Out Of D	VContract Labor Loan Repayrr draising Expense Transportatio t Contributions istrict Candidate/ t/Rental Expense OTHER (ente	nent/Reimbursement n Equipment & Related Expense (Donations Made By Officeholder/Political Committee r a category not listed above)
1 PAGE # Schedule: 5/11 F	Report: 16/27 2 FILER NAME Riley, Christopher		3 ACCOUNT # (TEC filers) 00010009
4 Date 11/03/2014	5 Payee name Facebook		
6 Amount (\$) \$473.56	7 Payee address City; State; Zip Code		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description (If travel outsid Political online advertisin	e of Texas, complete Schedule T) 🌅 g
	On all the COllins in the later and an	Check if Austin, TX, officehold	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date	Payee name Facebook		
11/04/2014 Amount (\$)	Pavee address City; State; Zip Code		
\$794.14	1601 S. California Ave. Palo Alto, CA 94304		
PURPOSE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description (If travel outsid Political online advertisin	e of Texas, complete Schedule T)
EXPENDITURE		Check if Austin, TX, officehold	ler living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date 12/01/2014	Payee name Facebook		
Amount (\$)	Payee address City; State; Zip Code		
\$373.25	1601 S. California Ave. Palo Alto, CA 94304		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description (If travel outside Political online advertisin	e of Texas, complete Schedule T)
	Opendidate / Office helder some	Check If Austin, TX, officehok	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date	Payee name First Data		
11/03/2014 Amount (\$)	Payee address City; State; Zip Code		
\$281.00	5565 Glenridge Connector NE Attanta, GA 30342		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Accounting/Banking	Credit card processing fe	
		Check if Austin, TX, officehold	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:

Texas Ethics Corr	mission P.O.Box 12070 Austin, Texas 78711-2	070 (512)463-5800 TDD 1-800-735-2989
POLITIC	AL EXPENDITURES	SCHEDULE F
Advertising Expe Accounting/Bank Consulting Expe Event Expense Fees	Inse Gifts/Awards/Memorial Expense Salaries/Wages/Co ing Legal Services Solicitation/Fundrai nse Food/Beverage Expense Travel In District Polling Expense Office Overhead/Re The INSTRUCTION Guide explains how	Intract Labor Loan Repayment/Reimbursement sing Expense Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee ental Expense OTHER (enter a category not listed above)
1 PAGE # Schedule: 6/11 F	2 FILER NAME Report: 17/27 Riley, Christopher	3 ACCOUNT # (TEC filers) 00010009
4 Date 11/03/2014	5 Payee name First Data	
6 Amount (\$) \$426.76	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) Credit card processing fees
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date 11/03/2014	Payee name First Data	· · · · · · · · · · · · · · · · · · ·
Amount (\$) \$7.91	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) Credit card processing fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date 12/03/2014	Payee name First Data	
Amount (\$) \$366.41	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) Credit card processing fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date 12/03/2014	Payee name First Data	
Amount (\$) \$76.57	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) Credit card processing fees
	0	Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:

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

POLITIC	AL EXPENDITURES	SCHEDULE F
Advertising Expo Accounting/Banh Consulting Expe Event Expense Fees	ing Legal Services Solicitation/F nse Food/Beverage Expense Travel In Dis Polling Expense Travel Out O Printing Expense Office Overh	ges/Contract Labor Loan Repayment/Reimbursement undraising Expense Transportation Equipment & Related Expense trict Contributions/Donations Made By f District Candidate/Officeholder/Political Committee ead/Rental Expense OTHER (enter a category not listed above)
1 PAGE #		
Schedule: 7/11 F		3 ACCOUNT # (TEC filers) 00010009
4 Date 12/03/2014	5 Payee name First Data	
6 Amount (\$) \$43.33	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) Credit card processing fees
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date	Payee name	
12/03/2014	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) Credit card processing fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Check if Austin, TX, officeholder living expense Office sought: Office held:
Date	Payee name	
10/31/2014	Gaines, Rose	
Amount (\$) \$210.00	Payee address City; State; Zip Code 707 W. 21 St., 4D1B 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) Contract Labor
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date 11/07/2014	Payee name Gaines, Rose	
Amount (\$) \$142.10	Payee address City; State; Zip Code 707 W. 21 St., 4D1B 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) Contract Labor
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:

Electronic Filing Version 3.4.6

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

POLITIC	AL EXPENDITURES	SCHEDULE F
Advertising Expe Accounting/Bank Consulting Expe Event Expense Fees	ing Legal Services Solicitation/ nse Food/Beverage Expense Travel In Di Polling Expense Travel Out	ages/Contract Labor Fundraising Expense strict Df District head/Rental Expense OTHER (enter a category not listed above)
1 PAGE # Schedule: 8/11 F	2 FILER NAME	3 ACCOUNT # (TEC filers) 00010009
4 Date 10/31/2014	5 Payee name Green, Joe	
6 Amount (\$) \$260.00	7 Payee address City; State; Zip Code	
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) Contract Labor Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date	Payee name	
11/12/2014 Amount (\$)	Green, Joseph Payee address City; State; Zip Code	
\$180.00	300 Crockett #121 Austin, TX 78704	
PURPOSE	Category (See Categories listed at the top of this schedule) Sataries/Wages/Contract Labor	Description (If travel outside of Texas, complete Schedule T) Contract Labor
EXPENDITURE		Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date	Payee name Ivory, J'vona	
10/31/2014 Amount (\$)	Payee address City; State; Zip Code	·
\$725.00	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) Salary
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Check if Austin, TX, officeholder living expense Office sought: Office held:
Date 11/12/2014	Payee name Ivory, J'vona	
Amount (\$)	Payee address City; State; Zip Code	
\$500.00	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) Salary
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:

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

POLITIC	AL EXPENDITURES	SCHEDULE F
<u>.</u>		
Advertising Expe Accounting/Bank Consulting Exper Event Expense Fees	ing Legal Services Solicitation/Fundr	Contract Labor Loan Repayment/Reimbursement raising Expense Transportation Equipment & Related Expense contributions/Donations Made By Contributions/Donations Made By strict Candidate/Officeholder/Political Committee Rental Expense OTHER (enter a category not listed above)
1 PAGE # Schedule: 9/11 F	2 FILER NAME	3 ACCOUNT # (TEC filers) 00010009
4 Date	5 Payee name	
10/28/2014 6 Amount (\$)	Kelly Graphics 7 Payee address City; State; Zip Code	
\$10,419.03	1409 Quaker Ridge Austin, TX 78746	
B 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) Printing, postage and mailing services
9 Complete ONLY if	Candidate / Officeholder name	Check if Austin, TX, officeholder living expense Office sought: Office held:
direct expenditure to benefit C/OH		
Date	Payee name Macin Erangia	
10/31/2014 Amount (\$)	Macin, Francis Payee address City; State; Zip Code	
\$189.00	2514 Pearl St. 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)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Check if Austin, TX, officeholder living expense Office sought: Office held:
Date	Payee name	
11/07/2014	Macin, Francis	
Amount (\$) \$126.00	Payee address City; State; Zip Code 2514 Pearl St. 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) Contract Labor
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date 11/07/2014	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) Contract labor
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:

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

POLITIC	AL EXPENDITURES		SCHEDULE F
Advertising Expe Accounting/Bank Consulting Expe Event Expense Fees	ing Legal Services Solicitation/Func nse Food/Beverage Expense Travel In Distric Polling Expense Travel Out Of D	/Contract Labor Loan Repaym draising Expense Transportation t Contributions/ istrict Candidate// t/Rental Expense OTHER (enter	ent/Reimbursement Equipment & Related Expense Donations Made By Officeholder/Political Committee a category not listed above)
1 PAGE # Schedule: 10/11			3 ACCOUNT # (TEC filers) 00010009
4 Date 11/12/2014	5 Payee name Nalley, Jamie		
6 Amount (\$) \$250.00	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	Contract labor	of Texas, complete Schedule T)
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Check If Austin, TX, officehold Office sought:	Office held:
Date	Payee name NGP Van, Inc.		
11/03/2014 Amount (\$)	Payee address City; State; Zip Code	<u> </u>	<u> </u>
\$320.00	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 Database software	of Texas, complete Schedule T)
		Check if Austin, TX, officeholde	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date 10/30/2014	Payee name Office Max		
Amount (\$)	Payee address City; State; Zip Code		
\$102.69	4615 North Lamar Blvd Austin, tX 78701		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Description (If travel outside Office Supplies	of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
Date 10/31/2014	Payee name Tompkins, Nicholas		
Amount (\$) \$280.00	Payee address City; State; Zip Code 1919 Burton Austin, TX 78741		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description (If travel outside Contract Labor	of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:

P.O.Box 12070 Austin, Texas 78711-2070

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

POLITIC	AL EXPENDITURES	SCHEDULE F
Advertising Expe Accounting/Bank Consulting Exper Event Expense Fees	ing Legal Services Solicitation/Fundraising Expense Transportation nse Food/Beverage Expense Travel In District Contributions/I Polling Expense Travel Out Of District Candidate/C	ent/Reimbursement Equipment & Related Expense Donations Made By Officeholder/Political Committee a category not listed above)
1 PAGE # Schedule: 11/11	2 FILER NAME Report: 22/27 Riley, Christopher	3 ACCOUNT # (TEC filers) 00010009
4 Date 11/07/2014	5 Payee name Tompkins, Nicholas	
6 Amount (\$) \$322.00	7 Payee address City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	Salaries/Wages/Contract Labor	of Texas, complete Schedule T)
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Office sought:	Office held:
Date 10/31/2014	Payee name Wooding, John	
Amount (\$) \$315.00	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 Check if Austin, TX, officehold	of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Office sought:	Office held:
Date	Payee name	
11/12/2014	Wooding, John	
Amount (\$) \$360.00	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 Contract Labor Check if Austin, TX, officeholde	of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Office sought:	Office held:

(512)463-5800 TI

Electronic Filing Version 3.4.6

		NDITURES	DS		SCHEDULE G
Adventising Expe Accounting/Bank Consulting Expe Event Expense Fees	ing Legal S nse Food/B Polling	wards/Memorial Expense Services leverage Expense Expense g Expense	ENDITURE CATE(Salaries/Wages/ Solicitation/Fund Travel In District Travel Out Of Di Office Overhead	Contract Labor raising Expense strict	Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) m.
1 PAGE # Schedule: 1/5 Re	eport: 23/27	2 FILER NAME Riley, Christophe	r		3 ACCOUNT # (TEC filers) 00010009
4 Date 10/28/2014	5 Payee name Austin Chro				
6 Amount (\$) \$1,345.00 Beimbursement from political contributions intended	7 Payee addre PO Box 490 Austin, TX	066	e; Zip Code		
8 OF EXPENDITURE	(a) Category (Se Advertising	ee Categories listed at the to Expense	p of this schedule)	(b) Description political print	(If travel outside of Texas, complete Schedule T) advertising
				Check if Austin	TX, officeholder living expense
Date 11/03/2014	Payee name Austin's Piz				
Amount (\$)	Payee addres		e; Zip Code		
\$40.83 Reimbursement from political contributions intended	Austin, TX	alupe Street 78705			
PURPOSE OF EXPENDITURE		ee Categories listed at the to age Expense	p of this schedule)	Description food for volur	(If travel outside of Texas, complete Schedule T)
	- -			Check if Austin	TX, officeholder living expense
Date	Payee name Austin's Piz	70		· · · · · · · · · · · · · · · · · · ·	
11/04/2014 Amount (\$)	Payee addres		e; Zip Code		
\$140.19 Reimbursement from political contributions intended		alupe Street			
PURPOSE OF EXPENDITURE		ee Categories listed at the to age Expense	p of this schedule)	Description food for volur	(If travel outside of Texas, complete Schedule T) 🔲
				Check if Austin,	TX, officeholder living expense
Date	Payee name Austin's Piz	72*			
11/05/2014 Amount (\$)	Payee addres		e; Zip Code		
\$47.92 Reimbursement from political contributions intended	2324 Guada Austin, ⊤X	alupe Street			
PURPOSE OF EXPENDITURE		ee Categories listed at the top age Expense	p of this schedule)	Description food for volur	(If travel outside of Texas, complete Schedule T)
				Check if Austin,	TX, officeholder living expense

TDD 1-800-735-2989

	AL EXPENDITURES ROM PERSONAL FUNDS		SCHEDULE G
Advertising Expe Accounting/Bank Consulting Expe Event Expense Fees	nse Gifts/Awards/Memorial Expense Salarie ing Legal Services Solicit ise Food/Beverage Expense Travel Polling Expense Travel Printing Expense Office	ition/Fundraising Expense Transp In District Contrib Out Of District Can	lepayment/Reimbursement ortation Equipment & Related Expense putions/Donations Made By didate/Officeholder/Political Committee R (enter a category not listed above)
1 PAGE # Schedule: 2/5 Re	port: 24/27 2 FILER NAME Riley, Christopher		3 ACCOUNT # (TEC filers) 00010009
4 Date 11/04/2014	5 Payee name Cricket Wireless*		
6 Amount (\$) \$146.66 Beimbursement from political contributions intended	7 Payee address City; State; Zip Coc 2617 E 7th St Austin, TX 78702	e	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schere Office Overhead/Rental Expense	dule) (b) Description (If travel phones	outside of Texas, complete Schedule T)
Data	Deute nome	Check if Austin, TX, offic	ceholder living expense
Date 10/27/2014	Payee name Fed Ex Office*		
Amount (\$) \$8.22 Beimbursement from political contributions intended	Payee address City; State; Zip Cod 2711 Guadalupe St. Austin, TX 78705	e	-
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schere Printing Expense	tule) Description (If travel copies	outside of Texas, complete Schedule T)
Dete		Check if Austin, TX, offic	ceholder living expense
Date 10/27/2014	Payee name Fed Ex Office*		
Amount (\$) \$16.43 Reimbursement from political contributions intended	Payee address City; State; Zip Cod 2711 Guadalupe St. Austin, TX 78705	9	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this sched Printing Expense	lule) Description (If travel o copies	outside of Texas, complete Schedule T)
		Check if Austin, TX, offic	ceholder living expense
Date 10/27/2014	Payee name Fed Ex Office*		
Amount (\$) \$57.37 Reimbursement from potitical contributions intended	Payee address City; State; Zip Cod 2711 Guadalupe St. Austin, TX 78705	9	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this sched Printing Expense	ule) Description (If travel o copies	outside of Texas, complete Schedule T)
		Check if Austin, TX, offic	eholder living expense

Austin, Texas 78711-2070

(512)463-5800

TDD 1-800-735-2989

		NDITURES	S			SCHEDULE G
Advertising Expe Accounting/Ban Consulting Expe Event Expense Fees	king Legal S Inse Food/B Polling	wards/Memorial Expense Services Severage Expense Expense g Expense	Travel In District Travel Out Of Di Office Overhead	/Contract Labor draising Expense	Transportation Contributions/I Candidate/C OTHER (enter	ent/Reimbursement Equipment & Related Expense Donations Made By Officeholder/Political Committee a category not listed above)
1 PAGE # Schedule: 3/5 Re 4 Date		2 FILER NAME Riley, Christopher		· · · · · · · · · · · · · · · · · · ·		3 ACCOUNT # (TEC filers) 00010009
10/28/2014	5 Payee name Fed Ex Offic					
6 Amount (\$) \$83.35	· · · · · · · · · · · · · · · · · · ·	alupe St. 78705	-			
8 PURPOSE OF EXPENDITURE	(a) Category (Se Printing Exp	ee Categories listed at the top of Dense	this schedule)	(b) Description copies	(If travel outside	of Texas, complete Schedule T)
	<u>_</u>			Check if Aus	tin, TX, officeholde	er living expense
Date 11/03/2014	Payee name Fed Ex Offic	ce*				
Amount (\$)	Payee addres		Zip Code			
\$279.59 Reimbursement from political contributions intended	Austin, TX	78705				
PURPOSE OF EXPENDITURE	Category (Se Printing Exp	e Categories listed at the top of Dense	this schedule)	Description copies	(If travel outside	of Texas, complete Schedule T)
				Check if Aust	in, TX, officeholde	r living expense
Date	Payee name					
11/04/2014 Amount (\$)	Fed Ex Offic Payee addres		Zip Code		<u>.</u>	· · · · · · · · · · · · · · · · · · ·
\$10.81	2711 Guada Austin, TX	alupe St. 78705	·			
PURPOSE OF EXPENDITURE	Category (Se Printing Exp	e Categories listed at the top of ense	this schedule)	Description copies	(If travel outside)	of Texas, complete Schedule T)
	· · · · · · · · · · · · · · · · · · ·			Check if Aust	in, TX, officeholde	r living expense
Date 11/12/2014	Payee name Grande Corr	nmunications*				
Amount (\$) \$230.32 Reimbursement from political contributions intended	Payee addres 1923 E 7th S Austin, TX 7	s City; State; St #100	Zip Code			
PURPOSE OF EXPENDITURE		e Categories listed at the top of lead/Rental Expense	this schedule)	Description campaign c	(If travel outside of ffice utilities)	of Texas, complete Schedule T)
				Check if Austi	in, TX, officeholde	r living expense

Austin, Texas 78711-2070

(512)463-5800

TDD 1-800-735-2989

	AL EXPENDITURES ROM PERSONAL FUNDS	SCHEDULE G
Advertising Expe Accounting/Ban Consulting Expe Event Expense Fees	nse Gifts/Awards/Memorial Expense Salaries/Wages/Co ing Legal Services Solicitation/Fundrai:	ntract Labor sing Expense Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee antal Expense OTHER (enter a category not listed above)
1 PAGE # Schedule: 4/5 Re	2 FILER NAME Riley, Christopher	3 ACCOUNT # (TEC filers) 00010009
4 Date 10/28/2014	5 Payee name Office Max*	
6 Amount (\$) \$29.22 Beimbursement 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)
Date	Payee name	Check If Austin, TX, officeholder living expense
11/03/2014	Office Max*	
Amount (\$) \$98.27 Reimbursement 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) office supplies
		Check if Austin, TX, officeholder living expense
Date 11/03/2014	Payee name Office Max*	
Amount (\$) \$85.97 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) office supplies
		Check if Austin, TX, officeholder living expense
Date 11/03/2014	Payee name Office Max*	
Amount (\$) \$63.32 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)
		Check if Austin, TX, officeholder living expense

Electronic Filing Version 3.4.6

		NDITURES ISONAL FUND	S		SCHEDULE G
Advertising Expe Accounting/Bank Consulting Exper Event Expense Fees	ing Legal S nse Food/B Polling	wards/Memorial Expense iervices everage Expense Expense g Expense	DITURE CATEGO Salaries/Wages/Con Solicitation/Fundrais Travel In District Travel Out Of Distric Office Overhead/Ren GUIDE explains how to	tract Labor ing Expense t ntal Expense	Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) m.
1 PAGE # Schedule: 5/5 Re	eport: 27/27	2 FILER NAME Riley, Christopher			3 ACCOUNT # (TEC filers) 00010009
4 Date 11/12/2014	5 Payee name Office Max*				
6 Amount (\$) \$113.85 Beimbursement from political contributions intended	7 Payee addre 907 W 5th 5 Austin, TX	St.	Zip Code		
8 PURPOSE OF EXPENDITURE		e Categories listed at the top of head/Rental Expense	f this schedule)	(b) Description office supplie	(If travel outside of Texas, complete Schedule T)
				Check if Austin,	TX, officeholder living expense
Date 10/27/2014	Payee name Staples*				
Amount (\$)	Payee addres	s City; State;	Zip Code		
\$85.51 Reimbursement from political contributions intended	1201 Barba Austin, TX	ra Jordan Blvd Suite 700 78703)		
PURPOSE OF EXPENDITURE	• • •	ee Categories listed at the top of head/Rental Expense	f this schedule)	Description office supplie	If travel outside of Texas, complete Schedule T)
				Check if Austin,	TX, officeholder living expense
Date	Payee name Staples*				
10/27/2014 Amount (\$)	Payee addres	s City; State;	Zip Code		
\$108.24 Reimbursement from political contributions intended	1201 Barba Austin, TX	ra Jordan Blvd Suite 700 78703)		
PURPOSE OF EXPENDITURE		e Categories listed at the top of nead/Rental Expense	i this schedule)	Description office supplie:	If travel outside of Texas, complete Schedule T)
				Check if Austin,	TX, officeholder living expense
Date 10/31/2014	Payee name Voter Activa	ition*			
Amount (\$) \$168.00 Heimbursement from political contributions intended	Payee addre: 1101 15th S Ste. 500 Washington	-	Zip Code		
PURPOSE OF EXPENDITURE	Category (Se Advertising	e Categories listed at the top of Expense	this schedule)	Description VAN robodial	If travel outside of Texas, complete Schedule T) Er
				Check If Austin,	TX, officeholder living expense

SCHEDULE ATX. 3 – attach to form C/OH (C&E) Reference § 2-2-42, Austin City Code

CAMPAIGN DEBT RECONCILIATION

(To be filed by officeholders only during an election year) Period Covered: January 1, 2014_to December 31, 2014

Name of officeholder: Chris Riley

Campaign debt* existing as of the first day of the calendar year: <u>\$0</u>

Campaign debt* existing as of the last day of the calendar year: <u>\$33,000</u>

Enter the following information on all campaign debt existing as of December 31 of the reporting year (Note: Campaign debts under \$50 may be reported as an aggregate under (c), below):

(a) For loans and other debt evidenced by a note, the name of the creditor, the principal amount owed, the interest rate, and the date of maturity:

Creditor	 Principal amount owed	Interest rate	Date of maturity
Chris Riley	\$33,300	0	none

(b) For all other campaign debts, enter the name of the creditor and the principal amount owed:

Creditor/Vendor	Principal amount owed
Chris Riley	\$3,931.93

(c) Enter the total of campaign debts under \$50 if they are not itemized under (a) or (b) above.

* Campaign debt is the actual outstanding obligation of the candidate or candidate's committee as of a particular date, minus all funds held by the candidate or candidate's committee in cash or bank accounts on that date. SCHEDULE ATX. 4 - attach to form C/OH (C&E) Reference § 2-2-25, Austin City Code

BANK RECONCILIATION

A candidate, officeholder, or campaign committee filing a January 15 year-end contribution and expenditure report shall provide the following information for the previous calendar year.

Name of candidate, officeholder or campaign committee: Chris Riley

For each checking, savings or other financial institution account maintained during 2014___, enter the following information indicated. For each additional institution, use a copy of this schedule.

The name of the financial institution: <u>Frost Bank</u>
Type of account: <u>Checking</u>
The beginning balance: _\$0_____

The ending balance: _619.38_____

Enter the following information for checks issued on that account that have not cleared by December 31:

Date	Payee	Amount
10-21-14	Roland Swenson	\$700
· · · · · · · · · · · · · · · · · · ·		

Enter the following information for checks received as contributions and deposited but dishonored by the contributor's financial institution:

Date of receipt	Contributor	Amount

Office of the City Clerk, 20.36

Revised by the Ethics Review Commission 03/26/2014 Page 1 of 2 SCHEDULE ATX. 4 - attach to form C/OH (C&E) Reference § 2-2-25, Austin City Code

Amount of interest or dividends earned: \$1.29

All deposits and withdrawals not disclosed on a filed contribution and expenditure report:

Date of deposit or withdrawal	Amount of deposit	Amount of withdrawal
Various dates	\$1.29 interest	
5-6-14	.21 cents Gvalidate test deposit for bank services	

A listing of all checks received by December 31 but not deposited into any account (whether or not the checks have been "accepted" within the definition of the Texas Election Code):

Date of receipt	Contributor	Amount
	,	
	· · · · · ·	

Office of the City Clerk, 20.36

Revised by the Ethics Review Commission 03/26/2014 Page 2 of 2