

**CANDIDATE / OFFICEHOLDER REPORT:
SUPPORT & TOTALS****FORM C/OH
COVER SHEET PG 2****14 C/OH NAME** Riley, Chris**15 ACCOUNT #** (Ethics Commission filers)
00010009**16 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 pages**17 CONTRIBUTION
TOTALS**1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN
PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED

\$

0.00

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

\$

10,239.00

**EXPENDITURE
TOTALS**

3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED

\$

107.46

4. TOTAL POLITICAL EXPENDITURES

\$

35,192.26

**CONTRIBUTION
BALANCE**5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE
LAST DAY OF THE REPORTING PERIOD

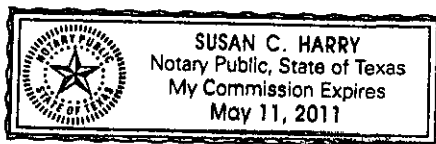
\$

0.00

**OUTSTANDING
LOAN TOTALS**6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE
LAST DAY OF THE REPORTING PERIOD

\$

0.00

18 AFFIDAVITI 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 Chris Riley, this the 14th day
of July, 20 09, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Susan C. Harry

Print name of officer administering oath

Notary

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: 1/14 Report: 3/32

2 FILER NAME Riley, Chris

3 ACCOUNT # (Ethics Commission filers)
00010009

4 Date

05/04/2009

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

6 Contributor address; City, State, Zip Code
3600 N Capital of Texas Highway
Austin, TX 78746

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)

10 Employer (See Instructions)
Homemaker

Date

05/01/2009

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

Contributor address; City, State, Zip Code
4516 Balcones Dr.
Austin, TX 78731

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

05/08/2009

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

Contributor address; City, State, Zip Code
2113 Riverview
Austin, TX 78702

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

04/30/2009

Full name of contributor ☐ out-of-state PAC (ID# _____)
Cheaney, Shelia Enid

Contributor address; City, State, Zip Code
6016 Mount Bonnell Cove
Austin, TX 78731

Amount of
contribution (\$)

\$25.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/01/2009

Full name of contributor ☐ out-of-state PAC (ID# _____)
Cheaney, Shelia Enid

Contributor address; City, State, Zip Code
6016 Mount Bonnell Cove
Austin, TX 78731-3515

Amount of
contribution (\$)

\$25.00

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: 2/14 Report: 4/32

2 FILER NAME Riley, Chris

3 ACCOUNT # (Ethics Commission filers)

00010009

4 Date

05/03/2009

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

6 Contributor address; City; State; Zip Code
2103A La Casa Dr
Austin, TX 78704

7 Amount of
contribution (\$)

\$25.00

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

05/08/2009

Full name of contributor ☐ out-of-state PAC (ID# _____)
Curry, Mark

Contributor address; City; State; Zip Code
4000 Table Rock
Austin, TX 78731

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

05/02/2009

Full name of contributor ☐ out-of-state PAC (ID# _____)
Duncan, Michelle Angelique

Contributor address; City; State; Zip Code
3103 Canter Lane
Austin, TX 78759

Amount of
contribution (\$)

\$10.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/02/2009

Full name of contributor ☐ out-of-state PAC (ID# _____)
Fitzpatrick, John

Contributor address; City; State; Zip Code
1706 Nickerson Street
Austin, TX 78704

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

04/30/2009

Full name of contributor ☐ out-of-state PAC (ID# _____)
Gayle, Dewitt

Contributor address; City; State; Zip Code
1609 Scenic Drive
Austin, TX 78703

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)
Architect

Employer (See Instructions)
RTG Partners

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 3/14 Report: 5/32

2 FILER NAME Riley, Chris

3 ACCOUNT # (Ethics Commission filers)

00010009

4 Date

05/03/2009

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

6 Contributor address; City; State; Zip Code
3036 Thrushwood Dr
Austin, TX 78757

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

04/30/2009

Full name of contributor ☐ out-of-state PAC (ID# _____)
Graham, Alan

Contributor address; City; State; Zip Code
1408 Redbud Trail
Austin, TX 78746

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

05/01/2009

Full name of contributor ☐ out-of-state PAC (ID# _____)
Griebel, Thomas

Contributor address; City; State; Zip Code
8332 La Plata Loop
Austin, TX 78737

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

05/05/2009

Full name of contributor ☐ out-of-state PAC (ID# _____)
Gutierrez, Jenice

Contributor address; City; State; Zip Code
360 Nueces #1008
Austin, TX 78701

Amount of
contribution (\$)

\$50.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/08/2009

Full name of contributor ☐ out-of-state PAC (ID# _____)
Hahn, Jeffery

Contributor address; City; State; Zip Code
6700 Hot Springs Dr.
Austin, TX 78749

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: 4/14 Report: 6/32

2 FILER NAME Riley, Chris

3 ACCOUNT # (Ethics Commission filers)
00010009

4 Date

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

7 Amount of
contribution (\$)

8 In-kind contribution
description (if applicable)

05/01/2009

6 Contributor address; City; State; Zip Code
5202 Rambling Range
Austin, TX 78727

\$200.00

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

9 Principal occupation / Job title (See Instructions)
Retired

10 Employer (See Instructions)
None

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Harris, Lisa

Amount of
contribution (\$)

In-kind contribution
description (if applicable)

05/09/2009

Contributor address; City; State; Zip Code
4522 Avenue F
Austin, TX 78751

\$50.00

(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# _____)
Heidrick, Clarke

Amount of
contribution (\$)

In-kind contribution
description (if applicable)

05/06/2009

Contributor address; City; State; Zip Code
3702 Eastledge Dr.
Austin, TX 78731

\$50.00

(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# _____)
Herndon, Benjamin

Amount of
contribution (\$)

In-kind contribution
description (if applicable)

05/03/2009

Contributor address; City; State; Zip Code
1111 West 12th St.
#111
Austin, TX 78703

\$350.00

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

Principal occupation / Job title (See Instructions)
Research Assistant

Employer (See Instructions)
UT Austin

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Hightower, Susan

Amount of
contribution (\$)

In-kind contribution
description (if applicable)

05/07/2009

Contributor address; City; State; Zip Code
2214 Alta Vista Ave.
Austin, TX 78704

\$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: 5/14 Report: 7/32	
2 FILER NAME Riley, Chris		3 ACCOUNT # (Ethics Commission filers) 00010009	
4 Date 05/04/2009	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hill, Richard 6 Contributor address; City; State; Zip Code 2303 Windsor Rd. Austin, TX 78703	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) Partner		10 Employer (See Instructions) Hill Partners, Inc.	
Date 05/06/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hogan, Bill Contributor address; City; State; Zip Code 719 W. 6th St. Austin, TX 78701	Amount of contribution (\$) \$22.00	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 05/03/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Holland, Sarah Contributor address; City; State; Zip Code 1707 Wethersfield Rd. Austin, TX 78703	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 05/08/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hornaday, Walter & Raina Contributor address; City; State; Zip Code 908 West 18th St. Austin, TX 78701	Amount of contribution (\$) \$700.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Wind Farmer / Generation Operator		Employer (See Instructions) Cielo Wind Services / Cielo Wind Services	
Date 05/02/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hornburg, Kernan Contributor address; City; State; Zip Code 12105 Scribe Dr. Austin, TX 78759	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)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule 6/14 Report 8/32

2 FILER NAME Riley, Chris

3 ACCOUNT # (Ethics Commission filers)
00010009

4 Date

05/04/2009

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Jaikumar, Arjun Kent

6 Contributor address; City; State; Zip Code
2161 42nd St.
Astoria, NY 11105

7 Amount of
contribution (\$)

\$25.00

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

05/03/2009

Full name of contributor ☐ out-of-state PAC (ID# _____)
Johnson, Matthew

Contributor address; City; State; Zip Code
611 Oakland Ave
Austin, TX 78703

Amount of
contribution (\$)

\$25.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/01/2009

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

Contributor address; City; State; Zip Code
4401 Avenue H
Austin, TX 78751

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

05/06/2009

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

Contributor address; City; State; Zip Code
119 E 6th St Ste 304
Austin, TX 78701

Amount of
contribution (\$)

\$22.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/08/2009

Full name of contributor ☐ out-of-state PAC (ID# _____)
Laine, Samuel

Contributor address; City; State; Zip Code
5421 Hitcher Bnd.
Austin, TX 78749

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)
Associate

Employer (See Instructions)
Riverside Resources

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 7/14 Report: 9/32

2 FILER NAME Riley, Chris

3 ACCOUNT # (Ethics Commission filers)
00010009

4 Date

05/05/2009

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Lance, Kent Jr.

6 Contributor address; City; State; Zip Code
3600 N Capital of TX Hwy
Bldg B Ste 250
Austin, TX 78746

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)
Associate

10 Employer (See Instructions)
Hill Partners

Date

05/01/2009

Full name of contributor ☐ out-of-state PAC (ID# _____)
Law Office of Jimmy Nassour

Contributor address; City; State; Zip Code
3839 Bee Cave Rd.
Ste. 200
Austin, TX 78746

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)

Employer (See Instructions)

Date

05/01/2009

Full name of contributor ☐ out-of-state PAC (ID# _____)
Lowerre, Richard

Contributor address; City; State; Zip Code
725 Patterson
Austin, TX 78703

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

05/06/2009

Full name of contributor ☐ out-of-state PAC (ID# _____)
Marvin, Flora

Contributor address; City; State; Zip Code
2708 Westlake Dr.
Austin, TX 78746

Amount of
contribution (\$)

\$50.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/01/2009

Full name of contributor ☐ out-of-state PAC (ID# _____)
Mayo Clark, Pamela

Contributor address; City; State; Zip Code
4100 Bluffridge Dr.
Austin, TX 78759

Amount of
contribution (\$)

\$50.00

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: 8/14 Report: 10/32

2 FILER NAME Riley, Chris

3 ACCOUNT # (Ethics Commission filers)
00010009

4 Date

05/01/2009

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

6 Contributor address; City; State; Zip Code
3802 Avenue H,
Austin, TX 78751

7 Amount of
contribution (\$)

\$50.00

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

05/07/2009

Full name of contributor ☐ out-of-state PAC (ID# _____)
Moss, Ron

Contributor address; City; State; Zip Code
7705 Stonehaven Circle
Austin, TX 78731

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)
attorney

Employer (See Instructions)
Graves Dougherty Hearon & Moody, P.C.

Date

05/04/2009

Full name of contributor ☐ out-of-state PAC (ID# _____)
Neal, Erin Lee

Contributor address; City; State; Zip Code
1345 East Whitten Place
Chandler, AZ 85225

Amount of
contribution (\$)

\$40.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/09/2009

Full name of contributor ☐ out-of-state PAC (ID# _____)
Pedersen, Craig

Contributor address; City; State; Zip Code
4703 Trail Crest Circle
Austin, TX 78735

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)
Vice President - Water Resources - Texas

Employer (See Instructions)
URS

Date

05/05/2009

Full name of contributor ☐ out-of-state PAC (ID# _____)
Penn, Walter

Contributor address; City; State; Zip Code
1109 Kennan Rd
Austin, TX 78746

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)
Financial Advisor

Employer (See Instructions)
Raymond James

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 9/14 Report: 11/32

2 FILER NAME Riley, Chris

3 ACCOUNT # (Ethics Commission filers)
00010009

4 Date

05/09/2009

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

6 Contributor address; City; State; Zip Code
4100 Michael Neill Dr.
Austin, TX 78730

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

04/30/2009

Full name of contributor ☐ out-of-state PAC (ID# _____)
Rankin, Susan

Contributor address; City; State; Zip Code
3216 Harris Park
Austin, TX 78705

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

05/08/2009

Full name of contributor ☐ out-of-state PAC (ID# _____)
Reese, Andrew

Contributor address; City; State; Zip Code
2914 Regents Park
Austin, TX 78746

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)
Homemaker

Employer (See Instructions)
n/a

Date

05/08/2009

Full name of contributor ☐ out-of-state PAC (ID# _____)
Reese, Donald

Contributor address; City; State; Zip Code
100 Congress Ave., Ste. 780
Austin, TX 78701

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)
Founder

Employer (See Instructions)
Riverside Resources

Date

05/06/2009

Full name of contributor ☐ out-of-state PAC (ID# _____)
Reese, Gina

Contributor address; City; State; Zip Code
2914 Regents Park
Austin, TX 78746

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)
Associate

Employer (See Instructions)
Ironwood Real Estate

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 10/14 Report: 12/32

2 FILER NAME Riley, Chris

3 ACCOUNT # (Ethics Commission filers)
00010009

4 Date

05/07/2009

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

6 Contributor address; City; State; Zip Code
808 Dawson
Austin, TX 78704

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)
Architect

10 Employer (See Instructions)
Rhode Partners

Date

05/09/2009

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

Contributor address; City; State; Zip Code
6805 Vallecito Dr
Austin, TX 78759

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

05/01/2009

Full name of contributor ☐ out-of-state PAC (ID# _____)
Rostami, Amir

Contributor address; City; State; Zip Code
5729 N. Scout Island Cir
Austin, TX 78731

Amount of
contribution (\$)

\$22.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/06/2009

Full name of contributor ☐ out-of-state PAC (ID# _____)
Schenkkan, Phyllis

Contributor address; City; State; Zip Code
3505 Mount Bonnell Rd
Austin, TX 78731

Amount of
contribution (\$)

\$50.00

In-kind contribution
description (if applicable)

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

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/06/2009

Full name of contributor ☐ out-of-state PAC (ID# _____)
Scherer, Bradley

Contributor address; City; State; Zip Code
2 Bank St. Apt. 16
New York, NY 10014

Amount of
contribution (\$)

\$25.00

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: 11/14 Report: 13/32

2 FILER NAME Riley, Chris**3** ACCOUNT # (Ethics Commission filers)
00010009**4** Date

05/04/2009

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Sherman, Max**6** Contributor address; City; State; Zip Code
3505 Greenway
Austin, TX 78705**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

05/07/2009

Full name of contributor ☐ out-of-state PAC (ID# _____)
Smith, CraigContributor address; City; State; Zip Code
1908 Barton Parkway
Austin, TX 78704Amount 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

05/05/2009

Full name of contributor ☐ out-of-state PAC (ID# _____)
Smitheal, JeremyContributor address; City; State; Zip Code
100 Congress Ave., Ste. 780
Austin, TX 78701Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐Principal occupation / Job title (See Instructions)
PrincipalEmployer (See Instructions)
Riverside Resources

Date

05/03/2009

Full name of contributor ☐ out-of-state PAC (ID# _____)
Souhami, GloriaContributor address; City; State; Zip Code
802 Norwalk Ln.
Austin, TX 78703Amount of
contribution (\$)

\$25.00

In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/05/2009

Full name of contributor ☐ out-of-state PAC (ID# _____)
Stack, DavidContributor address; City; State; Zip Code
1525 E Candlestick Dr.
Tempe, AZ 85283Amount of
contribution (\$)

\$25.00

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: 12/14 Report: 14/32	
2 FILER NAME Riley, Chris		3 ACCOUNT # (Ethics Commission filers) 00010009	
4 Date 04/30/2009	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Stumberg, Eric 6 Contributor address; City; State; Zip Code 3911 Avenue G Austin, TX 78751	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) CEO		10 Employer (See Instructions) TengolInternet, Inc.	
Date 05/07/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Taylor, Beau Contributor address; City; State; Zip Code 11208 Hidden Bluff Dr Austin, TX 78754	Amount of contribution (\$) \$25.00	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 05/07/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Tilney, William Angus Contributor address; City; State; Zip Code 5516 Avenue G. Austin, TX 78751	Amount of contribution (\$) \$25.00	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 05/01/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Vandelden, Jeffrey Contributor address; City; State; Zip Code 5809 Painted Valley Rd. Austin, TX 78759	Amount of contribution (\$) \$22.00	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 05/06/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Vita, Brian Contributor address; City; State; Zip Code 1007 S. Congress Ave Apt. 432 Austin, TX 78704	Amount of contribution (\$) \$25.00	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: 13/14 Report: 15/32

2 FILER NAME Riley, Chris

3 ACCOUNT # (Ethics Commission filers)
00010009

4 Date

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Waterloo Brothers LLC

7 Amount of
contribution (\$)

8 In-kind contribution
description (if applicable)

05/01/2009

6 Contributor address; City; State; Zip Code
705 W. Lynn St
Austin, TX 78703

\$210.00

(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# _____)
Whatley, Melba

Amount of
contribution (\$)

In-kind contribution
description (if applicable)

05/06/2009

Contributor address; City; State; Zip Code
2909 W. 35th St
Austin, TX 78703

\$350.00

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

Principal occupation / Job title (See Instructions)
investments

Employer (See Instructions)
clarite holdings

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Williams, Clayton

Amount of
contribution (\$)

In-kind contribution
description (if applicable)

05/02/2009

Contributor address; City; State; Zip Code
6 Desta Drive
Ste. 6500
Midland, TX 79705

\$350.00

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

Principal occupation / Job title (See Instructions)
investments

Employer (See Instructions)
Self

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Williams, Modesta Jr.

Amount of
contribution (\$)

In-kind contribution
description (if applicable)

05/02/2009

Contributor address; City; State; Zip Code
6 Desta Drive
Ste. 6500
Midland, TX 79705

\$350.00

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

Principal occupation / Job title (See Instructions)
Owner

Employer (See Instructions)
CWEI

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)
Winetroub, Jerald

Amount of
contribution (\$)

In-kind contribution
description (if applicable)

05/06/2009

Contributor address; City; State; Zip Code
515 Congress Avenue, Suite 2230
Austin, TX 78701

\$350.00

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

Principal occupation / Job title (See Instructions)
President

Employer (See Instructions)
Jerald Winetroub Companies

**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS****SCHEDULE A**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 14/14 Report: 16/32

2 FILER NAME Riley, Chris**3** ACCOUNT # (Ethics Commission filers)

00010009

4 Date

05/06/2009

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Womack, Brad**6** Contributor address; City; State; Zip Code
719 W. 6th St.
Austin, TX 78701**7** Amount of
contribution (\$)

\$22.00

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

05/06/2009

Full name of contributor ☐ out-of-state PAC (ID# _____)
Woody, BobContributor address; City; State; Zip Code
807 Brazos St. #311
Austin, TX 78701Amount of
contribution (\$)

\$22.00

In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

05/06/2009

Full name of contributor ☐ out-of-state PAC (ID# _____)
Yassine, MikeContributor address; City; State; Zip Code
213 W. 4th St.
Ste 200
Austin, TX 78701Amount of
contribution (\$)

\$22.00

In-kind contribution
description (if applicable)(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 1/11 Report: 17/32**2** FILER NAME Riley, Chris**3** ACCOUNT # (Ethics Commission filers)
00010009**4** Date

05/22/2009**5** Payee name
Constant Contact**6** Payee address; City; State; Zip Code
1601 Trapelo Rd., Ste. 329
Waltham, MA 2451**7** Amount
(\$)

\$85.00**8** Purpose of payment (See instructions regarding type of information required.)

Email List Management

(If travel outside of Texas, complete Schedule T) ☐**9** ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:Office sought:
Office held:

Date

Payee name
Constant contactAmount
(\$)

06/22/2009

Payee address; City; State; Zip Code
1601 Trapelo Rd., Ste. 329
Waltham, MA 02451

\$50.00

Purpose of payment (See instructions regarding type of information required.)

email service

(If travel outside of Texas, complete Schedule T) ☐** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:Office sought:
Office held:

Date

Payee name
Eastside CaféAmount
(\$)

05/18/2009

Payee address; City; State; Zip Code
2113 Manor Rd.
Austin, TX 78722

\$50.14

Purpose of payment (See instructions regarding type of information required.)

Meals

(If travel outside of Texas, complete Schedule T) ☐** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:Office sought:
Office held:

Date

Payee name
ElysiumAmount
(\$)

05/11/2009

Payee address; City; State; Zip Code
705 Red River
Austin, TX 78701

\$104.99

Purpose of payment (See instructions regarding type of information required.)

Intern appreciation party

(If travel outside of Texas, complete Schedule T) ☐** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:Office sought:
Office held:

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 2/11 Report: 18/32**2** FILER NAME Riley, Chris**3** ACCOUNT # (Ethics Commission filers)
00010009**4** Date**5** Payee name
Enviromedia**7** Amount
(\$)

05/01/2009

6 Payee address; City; State; Zip Code
1717 W. 6th St. Ste. 400
Austin, TX 78703

\$8,670.00

8 Purpose of payment (See instructions regarding type of information required.)

Television Advertising

9 ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:

Date

Payee name
EnviromediaAmount
(\$)

05/05/2009

Payee address; City; State; Zip Code
1717 W. 6th St. Ste. 400
Austin, TX 78703

\$1,035.00

Purpose of payment (See instructions regarding type of information required.)

Television Advertising

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:

Date

Payee name
FacebookAmount
(\$)

05/02/2009

Payee address; City; State; Zip Code
156 University Ave.
Palo Alto, CA 94301

\$39.99

Purpose of payment (See instructions regarding type of information required.)

Advertising

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:

Date

Payee name
FacebookAmount
(\$)

05/04/2009

Payee address; City; State; Zip Code
156 University Ave.
Palo Alto, CA 94301

\$40 00

Purpose of payment (See instructions regarding type of information required.)

Advertising

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 3/11 Report: 19/32**2** FILER NAME Riley, Chris**3** ACCOUNT # (Ethics Commission filers)
00010009**4** Date**5** Payee name

Facebook

7 Amount
(\$)

05/05/2009

6 Payee address; City; State; Zip Code156 University Ave.
Palo Alto, CA 94301

\$40.00

8 Purpose of payment (See instructions regarding type of information required.)

Advertising

9 ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:

Date

Payee name

Facebook

Amount
(\$)

05/06/2009

Payee address; City; State; Zip Code

156 University Ave.
Palo Alto, CA 94301

\$29.99

Purpose of payment (See instructions regarding type of information required.)

Advertising

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:

Date

Payee name

Facebook

Amount
(\$)

05/08/2009

Payee address; City; State; Zip Code

156 University Ave.
Palo Alto, CA 94301

\$30.00

Purpose of payment (See instructions regarding type of information required.)

Advertising

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:

Date

Payee name

Facebook

Amount
(\$)

05/08/2009

Payee address; City; State; Zip Code

156 University Ave.
Palo Alto, CA 94301

\$30.00

Purpose of payment (See instructions regarding type of information required.)

Advertising

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule. 4/11 Report: 20/32**2** FILER NAME Riley, Chris**3** ACCOUNT # (Ethics Commission filers)
00010009**4** Date

05/09/2009**5** Payee name
Facebook

6 Payee address; City; State; Zip Code
156 University Ave.
Palo Alto, CA 94301**7** Amount
(\$)

\$30.00**8** Purpose of payment (See instructions regarding type of information required.)
Advertising**9** ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:Date

05/10/2009Payee name
Facebook

Payee address; City; State; Zip Code
156 University Ave.
Palo Alto, CA 94301Amount
(\$)

\$45.00Purpose of payment (See instructions regarding type of information required.)
Advertising** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:Date

05/10/2009Payee name
Facebook

Payee address; City; State; Zip Code
156 University Ave.
Palo Alto, CA 94301Amount
(\$)

\$45.00Purpose of payment (See instructions regarding type of information required.)
Advertising** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:Date

05/13/2009Payee name
Facebook

Payee address; City; State; Zip Code
156 University Ave.
Palo Alto, CA 94301Amount
(\$)

\$44.99Purpose of payment (See instructions regarding type of information required.)
Advertising** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 5/11 Report: 21/32**2** FILER NAME Riley, Chris**3** ACCOUNT # (Ethics Commission filers)
00010009**4** Date**5** Payee name

Facebook

7 Amount
(\$)

05/13/2009

6 Payee address; City; State; Zip Code156 University Ave.
Palo Alto, CA 94301

\$44.96

8 Purpose of payment (See instructions regarding type of information required.)

Advertising

9 ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:

Date

Payee name

Garrett, Hall

Amount
(\$)

05/13/2009

Payee address; City; State; Zip Code

2509 Peachtree
Mckinney, TX 78070

\$250.00

Purpose of payment (See instructions regarding type of information required.)

Campaign Salary: Intern

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:

Date

Payee name

Goss, Delwin

Amount
(\$)

05/05/2009

Payee address; City; State; Zip Code

6410 Ponca St.
Austin, TX 78741

\$120.00

Purpose of payment (See instructions regarding type of information required.)

Contract Labor-Yard Signs

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:

Date

Payee name

Haenschen, Katherine

Amount
(\$)

04/30/2009

Payee address; City; State; Zip Code

4505 Duval St. Apt. 229
Austin, TX 78751

\$3,000.00

Purpose of payment (See instructions regarding type of information required.)

Campaign Manager Salary

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 6/11 Report: 22/32**2** FILER NAME Riley, Chris**3** ACCOUNT # (Ethics Commission filers)
00010009**4** Date**5** Payee name
Harry, Susan**7** Amount
(\$)

05/08/2009

6 Payee address; City; State; Zip Code
2520 Longview St. Ste. 211
Austin, TX 78705

\$3,000.00

8 Purpose of payment (See instructions regarding type of information required.)

Campaign Salary: Finance Manager

9 ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:

Date

Payee name
Kelly GraphicsAmount
(\$)

05/04/2009

Payee address; City; State; Zip Code
1409 Quaker Ridge
Austin, TX 78746

\$2,918.32

Purpose of payment (See instructions regarding type of information required.)

Printing

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:

Date

Payee name
Kelly GraphicsAmount
(\$)

05/04/2009

Payee address; City; State; Zip Code
1409 Quaker Ridge
Austin, TX 78746

\$489.76

Purpose of payment (See instructions regarding type of information required.)

Printing

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:

Date

Payee name
Ledesma, ChrisAmount
(\$)

05/13/2009

Payee address; City; State; Zip Code
4415 Avenue A
Austin, TX 78751

\$250.00

Purpose of payment (See instructions regarding type of information required.)

Campaign Salary: Intern

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 7/11 Report: 23/32**2** FILER NAME Riley, Chris**3** ACCOUNT # (Ethics Commission filers)
00010009

4 Date 05/04/2009	5 Payee name McKinley, Warren 6 Payee address; City; State; Zip Code 45 Lovegrass Lane Austin, TX 78745	7 Amount (\$) \$100.00
---------------------------------	---	--------------------------------------

8 Purpose of payment (See instructions regarding type of information required)
Event Expense**9** ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name.(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:

Date 05/14/2009	Payee name Nokoa Payee address; City; State; Zip Code 1223 Rosewood Ave. Austin, TX 78702	Amount (\$) \$920.00
------------------------	---	-----------------------------

Purpose of payment (See instructions regarding type of information required)
Advertising** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:

Date 05/05/2009	Payee name Office Max Payee address; City; State; Zip Code 907 W. 5th St. Austin, TX 78701	Amount (\$) \$62.76
------------------------	--	----------------------------

Purpose of payment (See instructions regarding type of information required.)
Office Supplies** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:

Date 05/13/2009	Payee name Parikh, Ishanee Payee address; City; State; Zip Code 742 Annies Way Sugarland, TX 77479	Amount (\$) \$250.00
------------------------	--	-----------------------------

Purpose of payment (See instructions regarding type of information required.)
Campaign Salary: Intern** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule 8/11 Report: 24/32**2** FILER NAME Riley, Chris**3** ACCOUNT # (Ethics Commission filers)
00010009**4** Date

05/10/2009

5 Payee name

Pirya

7 Amount
(\$)

\$193.34

6 Payee address; City; State; Zip Code401 W. 15th St. Ste. 520
Austin, TX 78701**8** Purpose of payment (See instructions regarding type of information required.)

Credit card processing fees

9 ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:

Date

05/07/2009

Payee name

Political Calling

Amount
(\$)

\$1,051.75

Payee address; City; State; Zip Code

712 5th St. Ste., E
Davis, CA 95616

Purpose of payment (See instructions regarding type of information required.)

Robocall

**** Complete if direct expenditure to benefit Candidate/Officeholder ****
Candidate / Officeholder name.(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:

Date

05/13/2009

Payee name

Puryear, Veronica

Amount
(\$)

\$500.00

Payee address; City; State; Zip Code

1301 W Lynn St Apt 310
Austin, TX 78703

Purpose of payment (See instructions regarding type of information required.)

Campaign Salary: Intern

**** Complete if direct expenditure to benefit Candidate/Officeholder ****
Candidate / Officeholder name.(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:

Date

05/09/2009

Payee name

Scholz Bier Garten

Amount
(\$)

\$935.92

Payee address; City; State; Zip Code

1607 San Jacinto
Austin, TX 78701

Purpose of payment (See instructions regarding type of information required.)

Election Night Party

**** Complete if direct expenditure to benefit Candidate/Officeholder ****
Candidate / Officeholder name(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 9/11 Report: 25/32**2** FILER NAME Riley, Chris**3** ACCOUNT # (Ethics Commission filers)
00010009**4** Date

05/13/2009**5** Payee name
Shea, Philip**7** Amount
(\$)

\$500.00**6** Payee address; City, State; Zip Code
c/o 621 West 7th St.
Austin, TX 78701**8** Purpose of payment (See instructions regarding type of information required.)
Campaign Salary: Intern**9** ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:Date

05/04/2009Payee name
Telgoogle (ADWORDS)Amount
(\$)

\$50.90Payee address; City, State; Zip Code
1600 Amphitheatre Parkway
Mountain View, CA 94043Purpose of payment (See instructions regarding type of information required.)
Advertising** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:Date

05/08/2009Payee name
Telgoogle (ADWORDS)Amount
(\$)

\$23.74Payee address; City, State; Zip Code
1600 Amphitheatre Parkway
Mountain View, CA 94043Purpose of payment (See instructions regarding type of information required.)
Advertising** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:Date

05/01/2009Payee name
USPSAmount
(\$)

\$28.00Payee address; City, State; Zip Code
Central Park
West Station
Austin, TX 78705Purpose of payment (See instructions regarding type of information required.)
Postage** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held:

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 10/11 Report: 26/32**2** FILER NAME Riley, Chris**3** ACCOUNT # (Ethics Commission filers)
00010009**4** Date

05/02/2009

5 Payee name

USPS

7 Amount
(\$)

\$11.20

6 Payee address; City; State; Zip CodeCentral Park
West Station
Austin, TX 78705**8** Purpose of payment (See instructions regarding type of information required.)

Postage

9 ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:Office sought:
Office held:(If travel outside of Texas, complete Schedule T) ☐

Date

06/12/2009

Payee name

USPS

Amount
(\$)

\$10.00

Payee address; City; State; Zip Code

Central Park
West Station
Austin, TX 78705

Purpose of payment (See instructions regarding type of information required.)

Postage

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:Office sought:
Office held:(If travel outside of Texas, complete Schedule T) ☐

Date

06/12/2009

Payee name

USPS

Amount
(\$)

\$27.00

Payee address; City; State; Zip Code

Downtown Station
Austin, TX 78701

Purpose of payment (See instructions regarding type of information required.)

postage

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:Office sought:
Office held:(If travel outside of Texas, complete Schedule T) ☐

Date

05/13/2009

Payee name

Wadia, Bahman

Amount
(\$)

\$500.00

Payee address; City; State; Zip Code

2205 Cliffs Edge Dr.
Austin, TX 78733

Purpose of payment (See instructions regarding type of information required.)

Campaign Salary: Intern

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:Office sought:
Office held:(If travel outside of Texas, complete Schedule T) ☐

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 11/11 Report: 27/32**2** FILER NAME Riley, Chris**3** ACCOUNT # (Ethics Commission filers)
00010009**4** Date

05/08/2009**5** Payee name
Worley

6 Payee address; City; State; Zip Code
3217 N. IH 35
Austin, TX 78722**7** Amount
(\$)

\$2,432.38**8** Purpose of payment (See instructions regarding type of information required.)
Printing**9** ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:(If travel outside of Texas, complete Schedule T) ☐Office sought:
Office held.

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 1/3 Report: 28/32

2 FILER NAME Riley, Chris

3 ACCOUNT # (Ethics Commission filers)
00010009

4 Date 05/15/2009	5 Payee name AT&T <hr/> 6 Payee address; City; State; Zip Code PO Box 5001 Carol Stream, IL 60197 <hr/> 7 Purpose of expenditure (See instructions regarding type of information required.) Phone (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	8 Amount (\$) \$1,241.40 <input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date 06/22/2009	Payee name Constant Contact <hr/> Payee address; City; State; Zip Code 1601 Trapelo Rd., Ste. 329 Waltham, MA 02451 <hr/> Purpose of expenditure (See instructions regarding type of information required.) Email List Management (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	Amount (\$) \$35.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date 05/15/2009	Payee name David Thomas Photography <hr/> Payee address; City; State; Zip Code 2004-E B 9th St. Austin, TX 78702 <hr/> Purpose of expenditure (See instructions regarding type of information required.) Photography (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	Amount (\$) \$150.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date 05/15/2009	Payee name Haenschen, Katherine <hr/> Payee address; City; State; Zip Code 4505 Duval St. Apt. 229 Austin, TX 78751 <hr/> Purpose of expenditure (See instructions regarding type of information required.) Campaign Manager Salary (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	Amount (\$) \$1,500.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date 05/17/2009	Payee name Kelly Graphics <hr/> Payee address; City; State; Zip Code 1409 Quaker Ridge Austin, TX 78746 <hr/> Purpose of expenditure (See instructions regarding type of information required.) Printing & mailing services (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	Amount (\$) \$276.46 <input checked="" type="checkbox"/> Reimbursement from political contributions intended

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 2/3 Report: 29/32

2 FILER NAME Riley, Chris

3 ACCOUNT # (Ethics Commission filers)
00010009

4 Date	5 Payee name Litt, Mike	8 Amount (\$)
05/15/2009	6 Payee address; City; State; Zip Code 4415 Avenue A Austin, TX 78751	\$1,050.00
	7 Purpose of expenditure (See instructions regarding type of information required.) Campaign Salary: Field Director (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date	Payee name NGP	Amount (\$)
05/22/2009	Payee address; City; State; Zip Code 1225 Eye St., NW Ste. 1225 Washington, DC 20005	\$250.00
	Purpose of expenditure (See instructions regarding type of information required.) Software (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date	Payee name People Calling People	Amount (\$)
05/15/2009	Payee address; City; State; Zip Code 3948 Legacy Dr. Ste. 106 PMB 272 Plano, TX 75023	\$863.15
	Purpose of expenditure (See instructions regarding type of information required.) Robocall (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date	Payee name Smart Mail	Amount (\$)
05/15/2009	Payee address; City; State; Zip Code 2012 Anchor Lane Austin, TX 78723	\$737.15
	Purpose of expenditure (See instructions regarding type of information required.) Mailing services (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date	Payee name Smart Mail	Amount (\$)
05/15/2009	Payee address; City; State; Zip Code 2011 Anchor Lane Austin, TX 78723	\$359.55
	Purpose of expenditure (See instructions regarding type of information required.) Mailing services (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	<input checked="" type="checkbox"/> Reimbursement from political contributions intended

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule 3/3 Report: 30/32

2 FILER NAME Riley, Chris

3 ACCOUNT # (Ethics Commission filers)
00010009

<p>4 Date</p> <p>05/15/2009</p>	<p>5 Payee name Smart Mail</p> <hr/> <p>6 Payee address; City; State; Zip Code 2011 Anchor Lane Austin, TX 78723</p> <p>7 Purpose of expenditure (See instructions regarding type of information required.) Mailing services</p> <p>(If travel outside of Texas, complete Schedule T) <input type="checkbox"/></p>	<p>8 Amount (\$)</p> <p>\$87.70</p> <p><input checked="" type="checkbox"/> Reimbursement from political contributions intended</p>
<p>Date</p> <p>06/15/2009</p>	<p>Payee name USPS</p> <hr/> <p>Payee address; City; State; Zip Code Central Park West Station Austin, TX 78705</p> <p>Purpose of expenditure (See instructions regarding type of information required.) Postage</p> <p>(If travel outside of Texas, complete Schedule T) <input type="checkbox"/></p>	<p>Amount (\$)</p> <p>\$176.00</p> <p><input checked="" type="checkbox"/> Reimbursement from political contributions intended</p>
<p>Date</p> <p>05/15/2009</p>	<p>Payee name Worley</p> <hr/> <p>Payee address; City; State; Zip Code 3217 North IH 35 Austin, TX 78722</p> <p>Purpose of expenditure (See instructions regarding type of information required.) Printing</p> <p>(If travel outside of Texas, complete Schedule T) <input type="checkbox"/></p>	<p>Amount (\$)</p> <p>\$318.26</p> <p><input checked="" type="checkbox"/> Reimbursement from political contributions intended</p>

CREDITS (optional)**SCHEDULE K**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 1/1 Report: 31/32**2** FILER NAME Riley, Chris**3** ACCOUNT # (Ethics Commission filers)
00010009**4** Date

05/14/2009

5 Payor name
Arc360 Residential**6** Payor address; City; State; Zip Code
360 Nueces Street
Austin, TX 78701**8** Amount
(\$)

\$300.00

7 Reason for credit
deposit return

**CANDIDATE/OFFICEHOLDER REPORT:
DESIGNATION OF FINAL REPORT****FORM C/OH - FR**

The Instruction Guide explains how to complete this form.

**** Complete only if 'Report Type' on page 1 is marked 'Final Report' ****

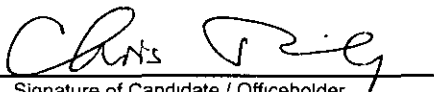
Page 32 of 32

1 C/OH NAME Riley, Chris**2 ACCOUNT #** (Ethics Commission filers)

00010009

3 SIGNATURE

I do not expect any further political contributions or political expenditures in connection with my candidacy. I understand that designating a report as a final report terminates my campaign treasurer appointment. I also understand that I may not accept any campaign contributions or make any campaign expenditures without a campaign treasurer appointment on file.


Signature of Candidate / Officeholder**4 FILER WHO IS NOT AN OFFICEHOLDER****** Complete A & B below only if you are not an officeholder ******A. CAMPAIGN FUNDS**

Check only one:

- ☐ I do not have unexpended contributions or unexpended interest or income earned from political contributions.
- ☐ I have unexpended contributions or unexpended interest or income earned from political contributions. I understand that I may not convert unexpended political contributions or unexpended interest or income earned on political contributions to personal use. I also understand that I must file an annual report of unexpended contributions and that I may not retain unexpended contributions or unexpended interest or income earned on political contributions longer than six years after filing this final report. Further, I understand that I must dispose of unexpended political contributions and unexpended interest or income earned on political contributions in accordance with the requirements of Election Code, § 254.204.

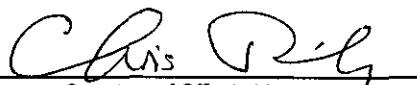
B. ASSETS

Check only one:

- ☐ I do not retain assets purchased with political contributions or interest or other income from political contributions.
- ☐ I do retain assets purchased with political contributions or interest or other income from political contributions. I understand that I may not convert assets purchased with political contributions or interest or other income from political contributions to personal use. I also understand that I must dispose of assets purchased with political contributions in accordance with the requirements of Election Code, § 254.204.

Signature of Candidate**5 OFFICEHOLDER****** Complete this section only if you are an officeholder ****

- ☒ I am aware that I remain subject to filing requirements applicable to an officeholder who does not have a campaign treasurer on file. I am also aware that I will be required to file reports of unexpended contributions if, at the time I cease holding office, I retain assets purchased with political contributions or interest or other income from political contributions.


Signature of Officeholder