

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

14 C/OH NAME Matthew "Matt" Stillwell 15 ACCOUNT # (Ethics Commission Filers)

16 NOTICE FROM POLITICAL COMMITTEE(S) THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.

COMMITTEE TYPE <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC <input type="checkbox"/> additional pages	COMMITTEE NAME
	COMMITTEE ADDRESS
	COMMITTEE CAMPAIGN TREASURER NAME
	COMMITTEE CAMPAIGN TREASURER ADDRESS

17 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ 0
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 7,451.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ 0
	4. TOTAL POLITICAL EXPENDITURES	\$ 4,077.70
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 4,404.56
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0

18 AFFIDAVIT

AFFIX NOTARY STAMP / SEAL ABOVE

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

Matthew Stillwell
Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Matthew Stillwell, this the 14 day of July, 2014, to certify which, witness my hand and seal of office.

Lawrence Garrison
Signature of officer administering oath

Lawrence Garrison
Printed name of officer administering oath

Barker
Title of officer administering oath

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: 11	
2 FILER NAME Matt Stillwell		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 5/8/14	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elliot Kralj	7 Amount of contribution (\$) 100.00	8 In-kind contribution description (if applicable)
6 Contributor address: City: State: Zip Code 1220 Colorado Ste 110 Austin TX 78701		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions) consulting		10 Employer (See Instructions) Kralj Consulting	
Date 5/8/14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hunter Nelson	Amount of contribution (\$) 25.00	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 11102 Froke Cedar Trl Austin TX 78750		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) ID Theft Mitigation		Employer (See Instructions)	
Date 5/8/14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Julie Murphy Stillwell	Amount of contribution (\$) 350.00	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 5703 Rain Creek Pkwy Austin TX 78759		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) N/A	
Date 5/8/14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gary Stillwell	Amount of contribution (\$) 350.00	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 5703 Rain Creek Pkwy Austin TX 78759		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) N/A	
Date 5/8/14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greg Anderson	Amount of contribution (\$) 50.00	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code 11610 Quarter Horse Trl Austin TX 78750		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) Program Coordinator		Employer (See Instructions) APS	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: 11	
2 FILER NAME Matt Stillwell		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 5/8/14	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) David C Whitworth 6 Contributor address; City; State; Zip Code 3907 Edgerock Drive Austin TX 78731	7 Amount of contribution (\$) 350.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) infill home builder		10 Employer (See Instructions)	
Date 5/8/14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Courtney Whitworth Contributor address; City; State; Zip Code 3907 Edgerock Drive Austin TX 78731	Amount of contribution (\$) 350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions) N/A	
Date 5/8/14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Yvonne Case Contributor address; City; State; Zip Code 8515 Foxhorn Trail Austin TX 78729	Amount of contribution (\$) 30.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Mortgage lending		Employer (See Instructions) VFCU	
Date 5/8/14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Laurie Roberts Contributor address; City; State; Zip Code 9405 Spring Hollow Austin TX 78750	Amount of contribution (\$) 350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) VFCU executive		Employer (See Instructions) VFCU	
Date 5/8/14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Randall Stephens Contributor address; City; State; Zip Code 10500 Avery Club Dr Unit 6 Austin TX 78717	Amount of contribution (\$) 100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Adboards executive		Employer (See Instructions) self	

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**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: <u>11</u>	
2 FILER NAME <u>Matt Stillwell</u>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <u>5/8/14</u>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <u>Jefferson French</u>	7 Amount of contribution (\$) <u>150⁰⁰</u>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <u>11500 Kempwood Dr Austin TX 78750</u>		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions) <u>software consulting</u>		10 Employer (See Instructions)	
Date <u>5/8/14</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <u>Molly Bucy</u>	Amount of contribution (\$) <u>50⁰⁰</u>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <u>9707 meadowheath Dr Austin TX 78729</u>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <u>teacher</u>		Employer (See Instructions) <u>Various</u>	
Date <u>5/9/14</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <u>Jan Pelosi</u>	Amount of contribution (\$) <u>75⁰⁰</u>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <u>10020 Valera Dr Austin TX 78717</u>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <u>retired</u>		Employer (See Instructions)	
Date <u>5/9/14</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <u>Kendall Wayne Scudder</u>	Amount of contribution (\$) <u>50⁰⁰</u>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <u>555 Bowers Blvd #805 Huntsville TX 77340</u>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <u>leasing Manager</u>		Employer (See Instructions) <u>Atlantic Housing Mgmt</u>	
Date <u>5/9/14</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <u>Tim Bishop</u>	Amount of contribution (\$) <u>50⁰⁰</u>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <u>2520 Bluebonnet Lane #36 Austin TX 78704</u>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <u>sports consulting</u>		Employer (See Instructions) <u>self</u>	

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**POLITICAL CONTRIBUTIONS
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SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: 11	
2 FILER NAME Matt Stillwell		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 5/11/14	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Phyllis Stillwell 6 Contributor address; City; State; Zip Code 415 CR 4026 Lampasas TX 76550	7 Amount of contribution (\$) 350 ⁰⁰	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) retired		10 Employer (See Instructions)	
Date 5/15/14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Susan Cope Griffith Contributor address; City; State; Zip Code 2415 Westlake Dr Austin TX 78746	Amount of contribution (\$) 350 ⁰⁰	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) realtor		Employer (See Instructions) Amelia Bullock	
Date 5/15/14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Curtis Fuelberg Contributor address; City; State; Zip Code 2415 Westlake Dr Austin TX 78746	Amount of contribution (\$) 350 ⁰⁰	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) consultant		Employer (See Instructions) Self	
Date 5/16/14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Darin Siefkes Contributor address; City; State; Zip Code 1523 W Koenig Lane Austin TX 78756	Amount of contribution (\$) 200 ⁰⁰	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Law Offices of Darin Siefkes	
Date 5/19/14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lisa Madry Contributor address; City; State; Zip Code 2808 Nordham Dr Austin TX 78745	Amount of contribution (\$) 30 ⁰⁰	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Education Director		Employer (See Instructions) National Wildlife Federation	

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**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: 11	
2 FILER NAME Matt Stillwell		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 5/21/14	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Ann Brennan Gas 6 Contributor address; City; State; Zip Code 7800 Mowinkle Dr Austin TX 78736	7 Amount of contribution (\$) 100 ⁰⁰	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Director of Contracts		10 Employer (See Instructions) Southwest Housing Compliance Corp	
Date 5/27/14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Grace Chimene Contributor address; City; State; Zip Code 11102 Leafwood Lane Austin TX 78750	Amount of contribution (\$) 50 ⁰⁰	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) RN CNP		Employer (See Instructions) none	
Date 5/27/14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Randy Wright Contributor address; City; State; Zip Code 11901 Fitzhugh Rd Austin TX 78736	Amount of contribution (\$) 350 ⁰⁰	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Apartment Manager		Employer (See Instructions) Self	
Date 5/27/14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Leslie Wingo Contributor address; City; State; Zip Code 2222 Rio Grande Blvd C 3rd Fl Austin TX 78705	Amount of contribution (\$) 100 ⁰⁰	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Advertising		Employer (See Instructions) Sanders/Wingo	
Date 5/31/14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Adam Coeny Contributor address; City; State; Zip Code 101 Colorado St Apt 1602 Austin TX 78701	Amount of contribution (\$) 350 ⁰⁰	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) Coeny Law Firm	

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**POLITICAL CONTRIBUTIONS
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SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: <u>1</u>	
2 FILER NAME <u>Matt Stillwell</u>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <u>6/2/14</u>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>Mike Langley</u> 6 Contributor address: City, State, Zip Code <u>1206 Baylor St Austin TX 78703</u>	7 Amount of contribution (\$) <u>20000</u>	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) <u>Real Estate</u>		10 Employer (See Instructions) <u>Self</u>	
Date <u>6/2/14</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>Jesse Soliz</u> Contributor address: City, State, Zip Code <u>2908 Taku Road Cedar Park TX 78613</u>	Amount of contribution (\$) <u>5000</u>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) <u>retired</u>		Employer (See Instructions) <u>retired</u>	
Date <u>6/13/14</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>Leslie Cunningham</u> Contributor address: City, State, Zip Code <u>11310 Spicewood Club #2 Austin TX 78750</u>	Amount of contribution (\$) <u>3000</u>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) <u>retired</u>		Employer (See Instructions)	
Date <u>6/23/14</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>John McClellan</u> Contributor address: City, State, Zip Code <u>7705 Flespar Dr Austin TX 78739</u>	Amount of contribution (\$) <u>35000</u>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) <u>Mortgage Banker</u>		Employer (See Instructions) <u>Supreme Lending</u>	
Date <u>6/24/14</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>Natalie Cayer</u> Contributor address: City, State, Zip Code <u>7800 San Felipe Blvd #1202</u>	Amount of contribution (\$) <u>2500</u>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) <u>Marketing Manager</u>		Employer (See Instructions) <u>Cisco Systems</u>	

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**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: <u>11</u>	
2 FILER NAME <u>Matt Stillwell</u>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <u>6/25/14</u>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>Fred Southard</u>	7 Amount of contribution (\$) <u>100.00</u>	8 In-kind contribution description (if applicable)
6 Contributor address: City: State: Zip Code <u>10700 Falling Tree Cove Austin TX 78759</u>		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions) <u>owner</u>		10 Employer (See Instructions) <u>Neighborhood Realty</u>	
Date <u>6/25/14</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>Brent Walton</u>	Amount of contribution (\$) <u>50.00</u>	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code <u>8315 Campeche Bay Pl Round Rock TX 78681</u>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <u>Sales Manager</u>		Employer (See Instructions) <u>UFCU</u>	
Date <u>6/25/14</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>Celeste Quesada</u>	Amount of contribution (\$) <u>50.00</u>	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code <u>502 Rhonda Court Austin TX 78745</u>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <u>Real Estate</u>		Employer (See Instructions) <u>the Hill Agency</u>	
Date <u>6/25/14</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>Lee Schultz</u>	Amount of contribution (\$) <u>100-</u>	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code <u>9403 Spring Hollow Dr Austin TX 78750</u>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <u>CPA</u>		Employer (See Instructions) <u>S&T</u>	
Date 6/30/14 <u>6/25/14</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>Vim McCurdy</u>	Amount of contribution (\$) <u>100-</u>	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code <u>1809 Nelson Ranch Loop Cedar Park TX 78613</u>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <u>retired</u>		Employer (See Instructions)	

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**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

SCHEDULE A

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2 FILER NAME <u>Matt Stillwell</u>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <u>6/30/14</u>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <u>Mark Anderson</u>	7 Amount of contribution (\$) <u>17500</u>	8 In-kind contribution description (if applicable)
	6 Contributor address; City; State; Zip Code <u>713 Twin Oak Trail Cedar Park TX 78613</u>	(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions) <u>Software tester</u>		10 Employer (See Instructions) <u>Square Root</u>	
Date <u>6/30/14</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <u>Kim Collins Gilby</u>	Amount of contribution (\$) <u>2500</u>	In-kind contribution description (if applicable)
	Contributor address; City; State; Zip Code <u>720 Nelson Ranch Road Cedar Park TX 78613</u>	(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <u>Volunteer</u>		Employer (See Instructions) <u>none</u>	
Date <u>6/30/14</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <u>Dean Hager - Smith</u>	Amount of contribution (\$) <u>5000</u>	In-kind contribution description (if applicable)
	Contributor address; City; State; Zip Code <u>1724 Rocky Ridge Rd Austin TX 78734</u>	(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <u>manager</u>		Employer (See Instructions) <u>TRG</u>	
Date <u>6/30/14</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <u>Jade Chang Sheppard</u>	Amount of contribution (\$) <u>35000</u>	In-kind contribution description (if applicable)
	Contributor address; City; State; Zip Code <u>12425 Dorsett Rd Austin TX 78727</u>	(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <u>president</u>		Employer (See Instructions) <u>Gideon</u>	
Date <u>6/30/14</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <u>John Sheppard</u>	Amount of contribution (\$) <u>35000</u>	In-kind contribution description (if applicable)
	Contributor address; City; State; Zip Code <u>12425 Dorsett Rd Austin TX 78727</u>	(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <u>N/A</u>		Employer (See Instructions) <u>N/A</u>	

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

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2 FILER NAME <u>Matt Stillwell</u>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <u>6/30/14</u>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <u>Brad Clark</u>	7 Amount of contribution (\$) <u>50.00</u>	8 In-kind contribution description (if applicable)
6 Contributor address: City: State: Zip Code <u>10906 Tall Oak Trail Austin TX 78750</u>		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions) <u>Founder</u>		10 Employer (See Instructions) <u>Rigging Dojo</u>	
Date <u>6/30/14</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <u>Lise Renee Lucci</u>	Amount of contribution (\$) <u>30.00</u>	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code <u>11716 Springs Head Loop Austin TX 78717</u>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <u>Realtor</u>		Employer (See Instructions) <u>Global Capital Realty</u>	
Date <u>6/30/14</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <u>Carol Strickland</u>	Amount of contribution (\$) <u>100.00</u>	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code <u>8610 Winding Walk Austin TX 78757</u>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <u>Realtor</u>		Employer (See Instructions) <u>Self</u>	
Date <u>6/30/14</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <u>David Hartley</u>	Amount of contribution (\$) <u>50.00</u>	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code <u>12703 Marimba Trl Austin TX 78729</u>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <u>Retired</u>		Employer (See Instructions)	
Date <u>6/30/14</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <u>Lisa Cavble</u>	Amount of contribution (\$) <u>50.00</u>	In-kind contribution description (if applicable)
Contributor address: City: State: Zip Code <u>11421 Pradera Drive Austin TX 78759</u>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <u>Mom</u>		Employer (See Instructions) <u>None</u>	

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4 Date <u>6/30/14</u>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>Blair Dancy</u>	7 Amount of contribution (\$) <u>100⁰⁰</u>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <u>4933 Strass Drive Austin TX 78731</u>		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions) <u>lawyer</u>		10 Employer (See Instructions) <u>Buahanan Di Masi Dancy & Grabowski</u>	
Date <u>6/30/14</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>Neil Faulkner</u>	Amount of contribution (\$) <u>10⁰⁰</u>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <u>12440 Alameda Trace #1921 Austin TX 78727</u>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <u>editor</u>		Employer (See Instructions) <u>self</u>	
Date <u>6/30/14</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>Nancy Nisson</u>	Amount of contribution (\$) <u>20⁰⁰</u>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <u>8801 N FM 620 #633 Austin TX 78726</u>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <u>food services</u>		Employer (See Instructions) <u>Lake Travis ISD</u>	
Date <u>6/30/14</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>Samir Gupta</u>	Amount of contribution (\$) <u>25⁰⁰</u>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <u>15803 Windermere Dr #400 Pflugerville TX 78660</u>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <u>Dentist</u>		Employer (See Instructions) <u>Pflugerville Dental</u>	
Date <u>6/30/14</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <u>Pamela Oldham</u>	Amount of contribution (\$) <u>51⁰⁰</u>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <u>2928 Clinton Place Round Rock TX 78665</u>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <u>writer</u>		Employer (See Instructions) <u>self</u>	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A. <div style="text-align: center; font-size: 2em;">11</div>	
2 FILER NAME <i>Matt Stillwell</i>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <i>6/25/14</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Bob Elmore</i>	7 Amount of contribution (\$) <i>350.00</i>	8 In-kind contribution description (if applicable) <i>house party expenses</i>
6 Contributor address; City; State; Zip Code <i>9405 Spring Hollow Austin TX 78750</i>		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions) <i>none</i>		10 Employer (See Instructions) <i>N/A</i>	
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

- | | | | |
|---------------------|-------------------------------|----------------------------------|--|
| Advertising Expense | Gift/Awards/Memorials Expense | Salaries/Wages/Contract Labor | Loan Repayment/Reimbursement |
| Accounting/Banking | Legal Services | Solicitation/Fundraising Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Travel In District | Contributions/Donations Made By |
| Event Expense | Polling Expense | Travel Out Of District | Candidate/Officeholder/Political Committee |
| Fees | Printing Expense | Office Overhead/Rental Expense | OTHER (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 2	2 FILER NAME Matt Stillwell	3 ACCOUNT # (Ethics Commission Filers)
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4 Date 4/16/14	5 Payee name Littlefield Consulting
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6 Amount (\$) 1,100 ⁰⁰	7 Payee address; City; State; Zip Code PO Box 40541 Austin TX 78709
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) polling expense	(b) Description (If travel outside of Texas, complete Schedule T) District 6 poll
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 5/27/14	Payee name Catalyst Design
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Amount (\$) 100 ⁰⁰	Payee address; City; State; Zip Code PO Box 82811 Austin TX 78708
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising expense	Description (If travel outside of Texas, complete Schedule T) website revision
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 6/17/14	Payee name Diaspora Vote
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Amount (\$) 50 ⁰⁰	Payee address; City; State; Zip Code 4132 E. 12th Austin TX 78721
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Adv. expense	Description (If travel outside of Texas, complete Schedule T) club membership
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 6/18/14	Payee name Super Cheap Signs
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Amount (\$) 304.24	Payee address; City; State; Zip Code 9804 Gray Blvd Austin TX 78758
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising expense	Description (If travel outside of Texas, complete Schedule T) signs
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By
Event Expense	Polling Expense	Travel Out Of District	Candidate/Officeholder/Political Committee
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 2	2 FILER NAME	3 ACCOUNT # (Ethics Commission Filers)
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4 Date 6/23/14	5 Payee name Fed Ex Office
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6 Amount (\$) 10.70	7 Payee address; City; State; Zip Code 13729 N. Hwy 183 Austin TX 78750
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) printing expense	(b) Description (If travel outside of Texas, complete Schedule T) printed campaign material
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 6/25/14	Payee name office Max
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Amount (\$) 86.43	Payee address; City; State; Zip Code 11066 Pecan Park Cedar Park TX 78613
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) event expense	Description (If travel outside of Texas, complete Schedule T) house party materials
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 6/26/14	Payee name Hotcards.com
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Amount (\$) 206.92	Payee address; City; State; Zip Code 2400 Superior Avenue Cleveland OH 44114
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) printing expense	Description (If travel outside of Texas, complete Schedule T) push cards
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 6/30/14	Payee name Pirya
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Amount (\$) 147.70	Payee address; City; State; Zip Code 144 2nd St 1st Floor San Francisco CA 94105
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) fees	Description (If travel outside of Texas, complete Schedule T) transaction fees
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

- | | | | |
|---------------------|-------------------------------|----------------------------------|--|
| Advertising Expense | Gift/Awards/Memorials Expense | Salaries/Wages/Contract Labor | Loan Repayment/Reimbursement |
| Accounting/Banking | Legal Services | Solicitation/Fundraising Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Travel In District | Contributions/Donations Made By |
| Event Expense | Polling Expense | Travel Out Of District | Candidate/Officeholder/Political Committee |
| Fees | Printing Expense | Office Overhead/Rental Expense | OTHER (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: 1	2 FILER NAME Matt Stillwell	3 ACCOUNT # (Ethics Commission Filers)
4 Date 5/2/14	5 Payee name Office Depot #574	
6 Amount (\$) 21.64 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 13201 RE 620 N Austin TX 78717	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) printing expense	(b) Description (If travel outside of Texas, complete Schedule T) map
Date 5/8/14	Payee name Alamo Drafthouse Cinema Lakeline	
Amount (\$) 2950.07 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 14028 N. US Highway 183 Austin TX 78717	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) event expense	Description (If travel outside of Texas, complete Schedule T) campaign kickoff
Date	Payee name	
Amount (\$) <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
Date	Payee name	
Amount (\$) <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)

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