

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

13 C/OH NAME Boyt, Jefferson E.

14 ACCOUNT # (Ethics Commission filers)
00000007

15 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. ..

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

16 CONTRIBUTION TOTALS

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$	1,037.00
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2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	11,636.00
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EXPENDITURE TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$	177.42
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4. TOTAL POLITICAL EXPENDITURES	\$	27,661.62
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CONTRIBUTION BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	10,302.78
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OUTSTANDING LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	10,025.00
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17 AFFIDAVIT

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



[Handwritten Signature]

 Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Jefferson Boyt, this the 6th day of October, 2014, to certify which, witness my hand and seal of office.

[Handwritten Signature]

 Signature of officer administering oath

Susan C. Harry Notary

 Print name of officer administering oath Title of officer administering oath

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 1/11 Report: 3/22	
2 FILER NAME Boyt, Jefferson E.		3 ACCOUNT # (Ethics Commission filers) 00000007	
4 Date 09/23/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Alam, Jamil 6 Contributor address; City; State; Zip Code 1401 Gaston Ave Austin, TX 78703-2513	7 Amount of contribution (\$) \$350.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Principal		10 Employer (See Instructions) Endeavor Real Estate	
Date 08/19/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Apil, Ali Contributor address; City; State; Zip Code 11900 Stonehollow Dr Apt 731 Austin, TX 78758-3142	Amount of contribution (\$) \$150.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/24/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Beall, Jonathan Contributor address; City; State; Zip Code 2503 Flora Cv Austin, TX 78746-6902	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/10/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Boykin, Cue Contributor address; City; State; Zip Code 3621 Windsor Rd Austin, TX 78703-1537	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired	
Date 09/10/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Boykin, Dorothy Contributor address; City; State; Zip Code 3621 Windsor Rd Austin, TX 78703-1537	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 2/11 Report: 4/22	
2 FILER NAME Boyt, Jefferson E.		3 ACCOUNT # (Ethics Commission filers) 00000007	
4 Date 07/25/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Byers, Julie 6 Contributor address; City; State; Zip Code 4516 Balcones Dr Austin, TX 78731-5220	7 Amount of contribution (\$) \$15.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) retired		10 Employer (See Instructions) retired	
Date 08/10/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Byers, Julie Contributor address; City; State; Zip Code 4516 Balcones Dr Austin, TX 78731-5220	Amount of contribution (\$) \$335.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired	
Date 09/21/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Canaday, Nicholas III Contributor address; City; State; Zip Code 4603 Lantana Holw Austin, TX 78731-3513	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Hanna & Plaut LLP	
Date 09/24/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Carpenter, James Contributor address; City; State; Zip Code 1700 Palisades Pointe Ln Austin, TX 78738-5351	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) Carpenter & Associates, Inc.	
Date 09/06/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Compton, Sean Contributor address; City; State; Zip Code 2601 Great Oaks Pkwy Austin, TX 78756-2909	Amount of contribution (\$) \$150.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 3/11 Report: 5/22	
2 FILER NAME Boyt, Jefferson E.		3 ACCOUNT # (Ethics Commission filers) 00000007	
4 Date 09/25/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Curtis, Matthew 6 Contributor address; City; State; Zip Code 807 Blanco St Apt 203 Austin, TX 78703-4956	7 Amount of contribution (\$) \$200.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Director		10 Employer (See Instructions) Homeaway (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Date 09/22/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Doty, Hope Contributor address; City; State; Zip Code 12202 Antoinette Pl Austin, TX 78727-5320	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Veteran		Employer (See Instructions) USAF (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Date 08/01/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Elliott, Chris Contributor address; City; State; Zip Code 1705 Rabb Rd Austin, TX 78704-2811	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 08/21/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gadbois, Glenn Contributor address; City; State; Zip Code 5616 Bull Creek Rd Austin, TX 78756-1010	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Date 09/20/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gadbois, Glenn Contributor address; City; State; Zip Code 5616 Bull Creek Rd Austin, TX 78756-1010	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 4/11 Report: 6/22	
2 FILER NAME Boyt, Jefferson E.		3 ACCOUNT # (Ethics Commission filers) 00000007	
4 Date 09/25/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gosselink, Paul 6 Contributor address; City; State; Zip Code 903 W 16th St Austin, TX 78701-1521	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 09/17/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Graham, Lawrence Contributor address; City; State; Zip Code 5909 Bull Creek Rd Austin, TX 78757-3101	Amount of contribution (\$) \$150.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/10/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Green, Robert Contributor address; City; State; Zip Code 3001 Gilbert St Austin, TX 78703-2219	Amount of contribution (\$) \$300.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) UT Austin	
Date 09/11/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hanna, Anna Contributor address; City; State; Zip Code 1111 W. 12th, Unit 116 Austin, TX 78703	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) food & beverages for event
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) none	
Date 09/13/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Harding, Annie Contributor address; City; State; Zip Code 4428 Gillis St Austin, TX 78745-1018	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Associate Producer		Employer (See Instructions) Armadillo Christmas Bazaar	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 5/11 Report: 7/22	
2 FILER NAME Boyt, Jefferson E.		3 ACCOUNT # (Ethics Commission filers) 00000007	
4 Date 08/22/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hatfield, Theodore 6 Contributor address; City; State; Zip Code 2104 Cullen Ave Apt 219 Austin, TX 78757-2454	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 09/16/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hayden, Tim Contributor address; City; State; Zip Code 6702 Hardy Dr Austin, TX 78757-2822	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 08/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Heffington, John Contributor address; City; State; Zip Code 3101 White Rock Dr Austin, TX 78757-4441	Amount of contribution (\$) \$199.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 08/22/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hoover, Joseph Contributor address; City; State; Zip Code 4203 N Hills Dr Austin, TX 78731-2827	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Owner		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions) Joseph Hoover Co	
Date 09/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Jackson, Keith Contributor address; City; State; Zip Code 504 E 42nd St Austin, TX 78751-4302	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Engineer		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions) RS&H, Inc.	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 7/11 Report: 9/22	
2 FILER NAME Boyt, Jefferson E.		3 ACCOUNT # (Ethics Commission filers) 00000007	
4 Date 09/22/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Meyer, Tory 6 Contributor address; City; State; Zip Code 1108 Exton Cv Austin, TX 78733-3429	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions) Principal		10 Employer (See Instructions)	
Date 09/23/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Miller, Bryce Contributor address; City; State; Zip Code 221 W 6th St Ste 1300 Austin, TX 78701-3415	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Principal		Employer (See Instructions) Endeavor Real Estate	
Date 09/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Minors, Steve Contributor address; City; State; Zip Code 4006 S Lamar Blvd Austin, TX 78704-8802	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/11/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Morrison, Dick Contributor address; City; State; Zip Code 1111 W. 12th, Unit 116 Austin, TX 78703	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) food & beverages for event
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) attorney		Employer (See Instructions) self	
Date 09/05/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mullins, Alise Contributor address; City; State; Zip Code 1502 Garner Ave Austin, TX 78704-2849	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 8/11 Report: 10/22	
2 FILER NAME Boyt, Jefferson E.		3 ACCOUNT # (Ethics Commission filers) 00000007	
4 Date 09/22/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Myer, Thomas 6 Contributor address; City; State; Zip Code 12202 Antoinette Pl Austin, TX 78727-5320	7 Amount of contribution (\$) \$250.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Consultant		10 Employer (See Instructions) Triple Dog Dare Media	
Date 08/21/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) OConnor, Brendan Contributor address; City; State; Zip Code 4214 Avenue C Austin, TX 78751-3707	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) O'Keefe, Jacqueline Contributor address; City; State; Zip Code 5413 Shoalwood Ave Austin, TX 78756-1619	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Gone to Seed	
Date 09/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Patterson, Angie Hartel Contributor address; City; State; Zip Code 4800 W Frances Pl Austin, TX 78731-5528	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Investment management		Employer (See Instructions) Liberty Clyde Partnership, Ltd.	
Date 09/18/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Riggs, Jennifer Contributor address; City; State; Zip Code PO Box 280 Austin, TX 78767-0280	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Riggs Aleshire & Ray P.C.	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 9/11 Report: 11/22	
2 FILER NAME Boyt, Jefferson E.		3 ACCOUNT # (Ethics Commission filers) 00000007	
4 Date 07/30/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Schwartz, Aaron 6 Contributor address; City; State; Zip Code 1122 Colorado St Apt 2102 Austin, TX 78701-2142	7 Amount of contribution (\$) \$150.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 09/11/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Shipman, Bob Contributor address; City; State; Zip Code 2985 Highway 39 Hunt, TX 78024-3415	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) retired		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions) Hanscomb, Faithful & Gould	
Date 09/22/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Siff, Ted Contributor address; City; State; Zip Code 604 W 11th St Austin, TX 78701-2007	Amount of contribution (\$) \$150.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 09/03/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Simpler, Jeff Contributor address; City; State; Zip Code 1408 Patterson Rd Austin, TX 78733-6503	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 09/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Stallings, Robin Contributor address; City; State; Zip Code 2208 Santa Rosa St Austin, TX 78702-4628	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Executive Director		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions) BikeTexas	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 10/11 Report: 12/22	
2 FILER NAME Boyt, Jefferson E.		3 ACCOUNT # (Ethics Commission filers) 00000007	
4 Date 09/23/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Stuart, Donald 6 Contributor address; City; State; Zip Code 4105 Long Champ Dr Austin, TX 78746-1150	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 09/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Tomlinson, Mykle Contributor address; City; State; Zip Code 5102 Delores Ave Austin, TX 78721-2110	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 09/18/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Wilkins, Timothy Contributor address; City; State; Zip Code 4610 Via Media Austin, TX 78746-2444	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 09/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Williams, Talley Contributor address; City; State; Zip Code 8209 Dark Ridge Cv Austin, TX 78737-3511	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			
Date 09/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Wimberley, Lane Contributor address; City; State; Zip Code 4810 Shoal Creek Blvd Austin, TX 78756-2813	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>			

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 11/11 Report: 13/22	
2 FILER NAME Boyt, Jefferson E.		3 ACCOUNT # (Ethics Commission filers) 00000007	
4 Date 09/24/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Wolff, David 6 Contributor address; City; State; Zip Code 1206 W 8th St Austin, TX 78703-5279	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 09/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Woods Martin, Patsy Contributor address; City; State; Zip Code PO Box 5543 Austin, TX 78763-5543	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Executive Director		Employer (See Instructions) Annie's List	
Date 09/25/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Woody, Bob Contributor address; City; State; Zip Code 504B Trinity St Austin, TX 78701-3714	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 09/04/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) YStrategy, LLC Contributor address; City; State; Zip Code 3010 Manor Rd. Austin, TX 78723	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) phone calls (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 08/19/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Zirih, John Contributor address; City; State; Zip Code 4025 Duval Rd Apt 2635 Austin, TX 78759-3440	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 1/7 Report: 15/22		2 FILER NAME Boyt, Jefferson E.		3 ACCOUNT # (TEC filers) 00000007	
4 Date 09/11/2014		5 Payee name 34th Street Catering of Austin			
6 Amount (\$) \$223.16		7 Payee address City; State; Zip Code 1013 W. 34th St. Austin, TX 78705			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Event Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Food & beverage for event <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 07/22/2014		Payee name Allandale Neighborhood Association			
Amount (\$) \$232.00		Payee address City; State; Zip Code 2212 White Horse Trail Austin, TX 78757			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Political print adversting <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 09/25/2014		Payee name Austin AFL-CIO Council			
Amount (\$) \$215.00		Payee address City; State; Zip Code PO Box 87 Austin, TX 78767			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Political print adversting <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 08/12/2014		Payee name Checkmark Typesetting			
Amount (\$) \$3,177.32		Payee address City; State; Zip Code 3217 N. IH 35 Austin, TX 78722			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Printing Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> printing and yardsigns <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 2/7 Report: 16/22		2 FILER NAME Boyt, Jefferson E.		3 ACCOUNT # (TEC filers) 00000007	
4 Date 07/03/2014		5 Payee name First Data Merchant Services			
6 Amount (\$) \$15.90		7 Payee address City; State; Zip Code 5565 Glenridge Connector NE 30342			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Accounting/Banking		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> credit card processing fees <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 07/03/2014		Payee name First Data Merchant Services			
Amount (\$) \$76.49		Payee address City; State; Zip Code 5565 Glenridge Connector NE 30342			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Accounting/Banking		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> credit card processing fees <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 07/03/2014		Payee name First Data Merchant Services			
Amount (\$) \$97.51		Payee address City; State; Zip Code 5565 Glenridge Connector NE 30342			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Accounting/Banking		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> credit card processing fees <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 08/04/2014		Payee name First Data Merchant Services			
Amount (\$) \$11.40		Payee address City; State; Zip Code 5565 Glenridge Connector NE 30342			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Accounting/Banking		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> credit card processing fees <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 3/7 Report: 17/22		2 FILER NAME Boyt, Jefferson E.		3 ACCOUNT # (TEC filers) 00000007	
4 Date 08/04/2014		5 Payee name First Data Merchant Services			
6 Amount (\$) \$26.98		7 Payee address City; State; Zip Code 5565 Glenridge Connector NE 30342			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Accounting/Banking		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> credit card processing fees <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 08/04/2014		Payee name First Data Merchant Services			
Amount (\$) \$108.20		Payee address City; State; Zip Code 5565 Glenridge Connector NE 30342			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Accounting/Banking		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> credit card processing fees <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 09/03/2014		Payee name First Data Merchant Services			
Amount (\$) \$7.00		Payee address City; State; Zip Code 5565 Glenridge Connector NE 30342			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Accounting/Banking		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> credit card processing fees <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 09/03/2014		Payee name First Data Merchant Services			
Amount (\$) \$15.72		Payee address City; State; Zip Code 5565 Glenridge Connector NE 30342			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> credit card processing fees <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 4/7 Report: 18/22		2 FILER NAME Boyt, Jefferson E.		3 ACCOUNT # (TEC filers) 00000007	
4 Date 09/03/2014		5 Payee name First Data Merchant Services			
6 Amount (\$) \$55.47		7 Payee address City; State; Zip Code 5565 Glenridge Connector NE 30342			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Accounting/Banking		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> credit card processing fees <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 07/02/2014		Payee name NGP Van, Inc.			
Amount (\$) \$150.00		Payee address City; State; Zip Code 1105 15th Street NW, Ste. 500 Washington, DC 20005			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> database software <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 08/04/2014		Payee name NGP Van, Inc.			
Amount (\$) \$150.00		Payee address City; State; Zip Code 1105 15th Street NW, Ste. 500 Washington, DC 20005			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> database software <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 09/02/2014		Payee name NGP Van, Inc.			
Amount (\$) \$150.00		Payee address City; State; Zip Code 1105 15th Street NW, Ste. 500 Washington, DC 20005			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> database software <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 5/7 Report: 19/22		2 FILER NAME Boyt, Jefferson E.		3 ACCOUNT # (TEC filers) 00000007	
4 Date 09/25/2014	5 Payee name Rick's Refills				
6 Amount (\$) \$108.25	7 Payee address City; State; Zip Code 6800 West Gate Blvd. #133 Austin, TX 78745				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> office supplies		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	
Date 07/01/2014	Payee name Susan Harry Consulting, LLC				
Amount (\$) \$450.00	Payee address City; State; Zip Code P.O. Box 301074 Austin, TX 78703				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Compliance consulting		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	
Date 07/01/2014	Payee name Susan Harry Consulting, LLC				
Amount (\$) \$1,325.00	Payee address City; State; Zip Code P.O. Box 301074 Austin, TX 78703				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Fundraising & compliance consulting		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	
Date 08/01/2014	Payee name Susan Harry Consulting, LLC				
Amount (\$) \$1,325.00	Payee address City; State; Zip Code P.O. Box 301074 Austin, TX 78703				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Fundraising & compliance consulting		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:	Office held:	

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 6/7 Report: 20/22		2 FILER NAME Boyt, Jefferson E.		3 ACCOUNT # (TEC filers) 00000007	
4 Date 07/24/2014		5 Payee name Worley Printing			
6 Amount (\$) \$423.80		7 Payee address City; State; Zip Code 3217 North IH 35 Austin, TX 78722			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Printing Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> printing <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 07/01/2014		Payee name YStrategy			
Amount (\$) \$8,000.00		Payee address City; State; Zip Code 3010 Manor Rd. Austin, TX 78723			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Consulting Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> General consulting <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 08/01/2014		Payee name YStrategy			
Amount (\$) \$4,000.00		Payee address City; State; Zip Code 3010 Manor Rd. Austin, TX 78723			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Consulting Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> General consulting <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 08/04/2014		Payee name YStrategy			
Amount (\$) \$1,425.00		Payee address City; State; Zip Code 3010 Manor Rd. Austin, TX 78723			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Printing Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Printing <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 7/7 Report: 21/22	2 FILER NAME Boyt, Jefferson E.	3 ACCOUNT # (TEC filers) 00000007
4 Date 09/04/2014	5 Payee name YStrategy	
6 Amount (\$) \$4,000.00	7 Payee address City; State; Zip Code 3010 Manor Rd. Austin, TX 78723	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> General consulting
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 1/1 Report: 22/22	2 FILER NAME Boyt, Jefferson E.	3 ACCOUNT # (TEC filers) 00000007
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4 Date 09/18/2014	5 Payee name Postmaster
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6 Amount (\$) \$1,715.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address City; State; Zip Code Northcross Station Austin, TX 78757
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> postage
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense	

PERSONAL FUNDS - LOANS AND EXPENDITURES

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

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

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

Name of candidate/officeholder: **Jefferson "Jeb" Boyt**

Reporting Period:	
<input type="checkbox"/>	First day of candidacy – Midnight on the 10 th day prior to City election
<input type="checkbox"/>	Midnight on the 10 th day before City election – Midnight on the day before election

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

Amount of loan	Date of loan
\$5,000	6-30-14
\$25	4-24-14
\$5,000	9-3-14
\$18,000	9-30-14

Enter the following information concerning the person or persons to whom expenditures were made from personal funds and the total amount, purpose and date of each expenditure:

Name	Street Address	Amount	Purpose	Date
Postmaster	Northcross Station, Austin, TX 78757	\$1715	Postage	9-18-14

SCHEDULE ATX. 2

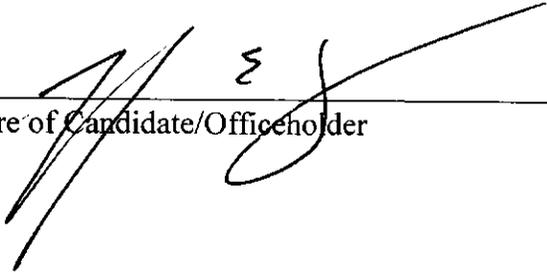
Reference § 2-2-27, Austin City Code

STATE OF TEXAS

VERIFICATION

I swear that the preceding disclosure of loans and expenditures from personal funds of a candidate or officeholder filed herewith is in all things true and correct and fully shows all information required to be reported by me pursuant to City Code, Section 2-2-27 for the reporting period indicated.

Signature of Candidate/Officeholder

A handwritten signature in black ink, consisting of several stylized, overlapping strokes, positioned above a horizontal line.