

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 1

The C/OH INSTRUCTION GUIDE explains how to complete this form.		1 ACCOUNT # (Ethics Commission filers) 00078704	2 PAGE # 1 of 9
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI Shaun		OFFICE USE ONLY Date Received 2014 OCT 6 PM 4 59 AUSTIN CITY CLERK RECEIVED
	NICKNAME LAST SUFFIX Ireland		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS  <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE P.O. Box 41064 Austin, TX 78704		Date Hand-delivered or Date Postmarked
			Receipt # Amount
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Mr. Matthew		Date Processed
	NICKNAME LAST SUFFIX Martinez		Date Imaged
6 CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 3715 South 1st St., Apt. 136 Austin, TX 78704		
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (512) 522-3103		
8 REPORT TYPE	<input type="checkbox"/> January 15 <input checked="" type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final report (Attach C/OH - FR)		
9 PERIOD COVERED	Month Day Year    Month Day Year 07/01/2014    THROUGH    09/25/2014		
10 ELECTION	ELECTION DATE Month Day Year 11/04/2014		ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input checked="" type="checkbox"/> General <input type="checkbox"/> Special
11 OFFICE	OFFICE HELD (if any)		12 OFFICE SOUGHT (if known) City of Austin, City Council District 3

GO TO PAGE 2

# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH  
COVER SHEET PG 2

13 C/OH NAME Ireland, Shaun

14 ACCOUNT # (Ethics Commission filers)  
00078704

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. ..

COMMITTEE TYPE

COMMITTEE NAME

☐ GENERAL

COMMITTEE ADDRESS

☐ SPECIFIC

COMMITTEE CAMPAIGN TREASURER NAME

☐ additional pages

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

\$ 0.00

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

\$ 845.00

EXPENDITURE  
TOTALS

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

\$ 0.00

4. TOTAL POLITICAL EXPENDITURES

\$ 4,347.74

CONTRIBUTION  
BALANCE

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

\$ 4,059.63

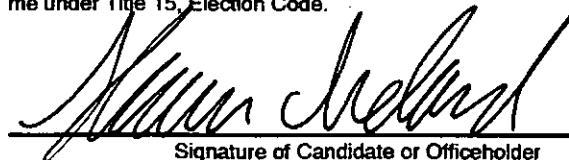
OUTSTANDING  
LOAN TOTALS

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

\$ 10,970.00

17 AFFIDAVIT

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

  
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Shaun Ireland this the 6th day of October, 20 14, to certify which, witness my hand and seal of office.

Jannette Sue Goodale Jannette Sue Goodale Notary

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

**SCHEDULE A**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #  
Schedule: 1/2 Report: 3/9

2 FILER NAME Ireland, Shaun

3 ACCOUNT # (Ethics Commission filers)  
00078704

4 Date  
09/16/2014

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Hoffman, Dan

6 Contributor address; City; State; Zip Code  
1330 Post Oak Blvd  
Ste. 2877  
Austin, TX 77056

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)  
Attorney

10 Employer (See Instructions)  
Self Employed

Date  
07/18/2014

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Johnson, Elliot

Contributor address; City; State; Zip Code  
1354 The High Road  
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)  
Architect

Employer (See Instructions)  
Self Employed

Date  
07/01/2014

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Kozak, Aaron

Contributor address; City; State; Zip Code  
6010 Romaine Street  
#204  
Los Angeles, CA 90038

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)  
Self Employed

Employer (See Instructions)  
Self Employed

Date  
07/01/2014

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Melson, Che

Contributor address; City; State; Zip Code  
1485 Fifth Avenue  
Apt. 16D  
New York, NY 10035

Amount of contribution (\$)  
\$20.00

In-kind contribution description (if applicable)

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

Principal occupation / Job title (See Instructions)  
Consultant

Employer (See Instructions)  
Capgemini US LLC

Date  
07/01/2014

Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Nielson, Chris

Contributor address; City; State; Zip Code  
5011 E Cesar Chavez  
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)  
CEO

Employer (See Instructions)  
Prestige Oak

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 2/2 Report: 4/9

2 FILER NAME Ireland, Shaun

3 ACCOUNT # (Ethics Commission filers)  
00078704

4 Date

08/01/2014

5 Full name of contributor ☐ out-of-state PAC (ID# \_\_\_\_\_)  
Ornelas, Jill

6 Contributor address; City; State; Zip Code  
3708 Buckingham Drive  
Nacogdoches, TX 75965

7 Amount of  
contribution (\$)

\$250.00

8 In-kind contribution  
description (if applicable)

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

9 Principal occupation / Job title (See Instructions)  
Interior Designer

10 Employer (See Instructions)  
Self-Employed

# LOANS

## SCHEDULE E

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 1/2 Report: 5/9
2 FILER NAME Ireland, Shaun		3 ACCOUNT # (Ethics Commission filers) 00078704
4 TOTAL OF UNITEMIZED LOANS: ⇔⇔⇔⇔⇔⇔		\$
5 Date of loan 07/03/2014	7 Name of lender Ireland, Shaun <input type="checkbox"/> out-of-state PAC (ID# _____)	9 Loan Amount (\$) \$1,000.00
6 Is lender a financial institution?  No	8 Lender address; City; State; Zip Code P.O. Box 41064 Austin, TX 78704	10 Interest rate
		11 Maturity date
12 Principal occupation / Job title (See Instructions) Finance & Intergovernmental Affairs		13 Employer (See Instructions) DTI Resources
14 Description of Collateral <input checked="" type="checkbox"/> none		15 Check if personal funds were deposited into political account <input checked="" type="checkbox"/>
16 GUARANTOR INFORMATION  <input checked="" type="checkbox"/> not applicable	17 Name of guarantor  18 Guarantor address; City; State; Zip Code P.O. Box 41064 Austin, TX 78704	19 Amount Guaranteed (\$)
20 Principal Occupation		21 Employer
Date of loan 08/04/2014	Name of lender Ireland, Shaun <input type="checkbox"/> out-of-state PAC (ID# _____)	Loan Amount (\$) \$1,000.00
Is lender a financial institution?  No	Lender address; City; State; Zip Code P.O. Box 41064 Austin, TX 78704	Interest rate
		Maturity date
Principal occupation / Job title (See Instructions) Finance & Intergovernmental Affairs		Employer (See Instructions) DTI Resources
Description of Collateral <input checked="" type="checkbox"/> none		Check if personal funds were deposited into political account <input checked="" type="checkbox"/>
GUARANTOR INFORMATION  <input checked="" type="checkbox"/> not applicable	Name of guarantor  Guarantor address; City; State; Zip Code	Amount Guaranteed (\$)
Principal Occupation		Employer

# LOANS

## SCHEDULE E

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 2/2 Report: 6/9	
2 FILER NAME Ireland, Shaun		3 ACCOUNT # (Ethics Commission filers) 00078704	
4 TOTAL OF UNITEMIZED LOANS:                      ⇄⇄⇄⇄⇄⇄			\$
5 Date of loan 08/11/2014	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID# _____) Ireland, Shaun		9 Loan Amount (\$) \$1,000.00
6 Is lender a financial institution?  No	8 Lender address;    City;        State;    Zip Code P.O. Box 41064 Austin, TX 78704		10 Interest rate
			11 Maturity date
12 Principal occupation / Job title (See Instructions) Finance & Intergovernmental Affairs		13 Employer (See Instructions) DTI Resources	
14 Description of Collateral <input checked="" type="checkbox"/> none		15 Check if personal funds were deposited into political account <input checked="" type="checkbox"/>	
16 GUARANTOR INFORMATION  <input checked="" type="checkbox"/> not applicable	17 Name of guarantor  18 Guarantor address; City;        State;    Zip Code		19 Amount Guaranteed (\$)
20 Principal Occupation		21 Employer	
Date of loan 09/09/2014	Name of lender <input type="checkbox"/> out-of-state PAC (ID# _____) Ireland, Shaun		Loan Amount (\$) \$1,000.00
Is lender a financial institution?  No	Lender address;    City;        State;    Zip Code P.O. Box 41064 Austin, TX 78704		Interest rate
			Maturity date
Principal occupation / Job title (See Instructions) Finance & Intergovernmental Affairs		Employer (See Instructions) DTI Resources	
Description of Collateral <input checked="" type="checkbox"/> none		Check if personal funds were deposited into political account <input checked="" type="checkbox"/>	
GUARANTOR INFORMATION  <input checked="" type="checkbox"/> not applicable	Name of guarantor  Guarantor address; City;        State;    Zip Code		Amount Guaranteed (\$)
Principal Occupation		Employer	

# POLITICAL EXPENDITURES

# SCHEDULE F

## EXPENDITURE CATEGORIES

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 1/3 Report: 7/9		2 FILER NAME Ireland, Shaun		3 ACCOUNT # (TEC filers) 00078704	
4 Date 07/21/2014		5 Payee name Checkmark Typesetting			
6 Amount (\$) \$1,652.44		7 Payee address City; State; Zip Code 3217 N I-35 Frontage Road 2nd Floor 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"/> Graphic Design/Print Collateral  <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 08/14/2014		Payee name Checkmark Typesetting			
Amount (\$) \$1,741.46		Payee address City; State; Zip Code 3217 N I-35 Frontage Road 2nd Floor 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"/> Graphic Design/Print Collateral  <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 08/18/2014		Payee name Facebook			
Amount (\$) \$20.53		Payee address City; State; Zip Code 1601 Willow Road Menlo Park, CA 94025			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Facebook Ad  <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 Facebook			
Amount (\$) \$35.00		Payee address City; State; Zip Code 1601 Willow Road Menlo Park, CA 94025			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Facebook Ad  <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure		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.

<b>1 PAGE #</b> Schedule: 2/3 Report: 8/9		<b>2 FILER NAME</b> Ireland, Shaun		<b>3 ACCOUNT # (TEC filers)</b> 00078704	
<b>4 Date</b> 09/22/2014	<b>5 Payee name</b> Home Depot				
<b>6 Amount (\$)</b> \$14.58	<b>7 Payee address</b> City: State: Zip Code 3600 S I-35 Frontage Road Austin, TX 78704				
<b>8 PURPOSE OF EXPENDITURE</b>	<b>(a) Category</b> (See Categories listed at the top of this schedule) OTHER - Hardware Supplies		<b>(b) Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Hardware for Signage		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>9 Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:
<b>Date</b> 09/11/2014	<b>Payee name</b> South Austin Democrats				
<b>Amount (\$)</b> \$55.00	<b>Payee address</b> City: State: Zip Code PO BOX 152592 Austin, TX 78715				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) OTHER - Fee		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Membership Mail List		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:
<b>Date</b> 09/15/2014	<b>Payee name</b> South Austin Democrats				
<b>Amount (\$)</b> \$55.00	<b>Payee address</b> City: State: Zip Code PO BOX 152592 Austin, TX 78715				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) OTHER - Event Sponsorship		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Sponsorship		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:
<b>Date</b> 07/29/2014	<b>Payee name</b> Staples				
<b>Amount (\$)</b> \$7.99	<b>Payee address</b> City: State: Zip Code 4301 W William Cannon Drive Austin, TX 78749				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) OTHER - Office Supplies		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Printer Paper		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>Complete ONLY if direct expenditure</b>	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.

<b>1 PAGE #</b> Schedule: 3/3 Report: 9/9		<b>2 FILER NAME</b> Ireland, Shaun		<b>3 ACCOUNT # (TEC filers)</b> 00078704	
<b>4 Date</b> 07/17/2014	<b>5 Payee name</b> The Rivas Group				
<b>6 Amount (\$)</b> \$250.00	<b>7 Payee address</b> City; State; Zip Code 111 Congress, Ste. 400 Austin, TX 78701				
<b>8 PURPOSE OF EXPENDITURE</b>	<b>(a) Category</b> (See Categories listed at the top of this schedule) Advertising Expense		<b>(b) Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Graphic Design/Copy/Advertising		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>9 Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:
<b>Date</b> 08/15/2014	<b>Payee name</b> The Rivas Group				
<b>Amount (\$)</b> \$140.00	<b>Payee address</b> City; State; Zip Code 111 Congress, Ste. 400 Austin, TX 78701				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) Consulting Expense		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Consulting		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:
<b>Date</b> 08/19/2014	<b>Payee name</b> The Rivas Group				
<b>Amount (\$)</b> \$200.74	<b>Payee address</b> City; State; Zip Code 111 Congress, Ste. 400 Austin, TX 78701				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) Advertising Expense		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Automated Phone Targeting for RoboCall/RoboPoll		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:		Office held:
<b>Date</b> 09/15/2014	<b>Payee name</b> The Rivas Group				
<b>Amount (\$)</b> \$175.00	<b>Payee address</b> City; State; Zip Code 111 Congress, Ste. 400 Austin, TX 78701				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) Consulting Expense		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Consulting		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>Complete ONLY if direct expenditure</b>	Candidate / Officeholder name		Office sought:		Office held: