CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction Gui	DE explains how to complete this form.	1 ACCOUNT # (Ethics Commission filers) 00078704	2 PAGE # 1 of 9		
3 CANDIDATE / OFFICEHOLDER	MS/MRS/MR FIRST Shaun	MI	OFFICE USE ONLY		
NAME	NICKNAME LAST Ireland	SUFFix	Date Received		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; APT / SUITE #; P.O. Box 41064 Austin, TX 78704	CITY; STATE; ZIP CODE	C STIN Receipt #		
5 CAMPAIGN TREASURER	MS/MRS/MR FIRST	MI	Date Processed		
NAME	Mr. Matthew		Date Imaged		
	NICKNAME LAST Martinez	SUFFIX			
6 CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT / 3715 South 1st St., Apt. 136 Austin, TX 78704	/SUITE#; CITY; STATE;	ZIP CODE		
7 CAMPAIGN TREASURER PHONE	area ∞de phone number (512) 522-3103	EXTENSION			
8 REPORT TYPE	January 15 X 30th day before Juty 15 Bith day before e		15th day after campaign treasurer appointment (officeholder only) Final report (Attach C/OH - FR)		
9 PERIOD	Manth Day Yang		· · · · · · · · · · · · · · · · · · ·		
COVERED	Month Day Year Th 07/01/2014	Month Day HROUGH 09/25/20	Year 14		
10 ELECTION	ELECTION DATE ELECTION Month Day Year Pri 11/04/2014	N TYPE Imary Runoff X	General Special		
11 OFFICE	OFFICE HELD (# any)	12 OFFICE SOUGHT (11 known City of Austin, City C 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 file 00078704				
15 NOTICE FROM	have been made with	lice of political expenditures by political committees to support the ca out the candidate's or officeholder's knowledge or consent. Candidat y receive notice of such expenditures		
POLITICAL COMMITTEE(S)				
	GENERAL	COMMITTEE ADDRESS		
	SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME	<u>.</u>	
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 ITEME		D \$	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 THI LAST DAY OF THE REPORTING PERIOD		\$	10,970.00
17 AFFIDAVIT	-			· · · · · · · · · · · · · · · · · · ·
		I swear, or affirm, under penalty		
		is true and correct and includes me under Title 15, Election Cod		quired to be reported by
		Mauro	Veller	n/
		Signature of C	andidate or Office	eholder

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said <u>Shown Treland</u>	this the 671	day
of Octoler, 20 14, to certify which, witness my hand and seal of office.		
Jan 10000 Sue Levelose Jenners Sue Goodare	Notary	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION	on Guide explains how to complete this form.		1 PAGE # Schedule: 1/2	2 Report: 3/9
2 FILER NAME	Ireland, Shaun		3 ACCOUNT # 00078704	(Ethics Commission filers)
4 Date	5 Full name of contributor D out-of-state PAC (ID# Hoffman, Dan	·)		8 In-kind contribution description (if applicable)
09/16/2014	6 Contributor address; City; State; Zip Code 1330 Post Oak Blvd Ste. 2877 Austin, TX 77056		\$350.00	 Texas, complete Schedule T)
			(II date outside of	
9 Principal occup Attorney	ation / Job title (See Instructions)	10 Employer (See In Self Employed	structions)	
Date	Full name of contributor D out-of-state PAC (ID# Johnson, Elliot)	Amount of contribution (\$)	In-kind contribution description (if applicable)
07/18/2014	Contributor address; City; State; Zip Code 1354 The High Road Austin, TX 78746		\$100.00	
				Texas, complete Schedule T)
Principal occup Architect	pation / Job title (See Instructions)	Employer (See In Self Employed	structions)	
Date	Full name of contributor Dout-of-state PAC (ID# Kozak, Aaron)	Amount of contribution (\$)	In-kind contribution description (if applicable)
07/01/2014	Contributor address; City; State; Zip Code 6010 Romaine Street #204 Los Angeles, CA 90038		\$25.00	 Texas, complete Schedule T)
Principal occup Self Employe	ation / Job title (See Instructions) d	Employer (See In Self Employed	structions)	
Date	Full name of contributor Dout-of-state PAC (ID# Melson, Che	<u>ا</u>)	Amount of contribution (\$)	In-kind contribution description (if applicable)
07/01/2014	Contributor address; City; State; Zip Code 1485 Fifth Avenue Apt. 16D New York, NY 10035		\$20.00	
	`		(If travel outcide of	Texas, complete Schedule T)
Principal occup Consultant	vation / Job title (See Instructions)	Employer (See In Capgemini US I	structions)	
Date	Full name of contributor Dout-of-state PAC (ID# Nielson, Chris	······)	Amount of contribution (\$)	In-kind contribution description (if applicable)
07/01/2014	Contributor address; City; State; Zip Code 5011 E Cesar Chavez Austin, TX 78702		\$100.00	
Principal occup	pation / Job title (See Instructions)	Employer (See In	•	Texas, complete Schedule T)
		· · · · · · · · · · · · · · · · · · ·		

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

	The Instruction	IN GUIDE explains how to complete this form.		1 PAGE # Schedule: 2/2	2_Report: 4/9
2	FILER NAME	Ireland, Shaun		3 ACCOUNT # 00078704	(Ethics Commission filers)
4	Date	5 Full name of contributor Dout-of-state PAC (ID# Ornelas, Jill	······		8 In-kind contribution description (if applicable)
	08/01/2014	6 Contributor address; City; State; Zip Code 3708 Buckingham Drive Nacogdoches, TX 75965		\$250.00	
					·
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See In:		Texas, complete Schedule T)
	Interior Desig	ner	Self-Employed	,	
_					

LOANS				SCHEDULE E
	DE explains how to complete this f	orm.		1/2 Report: 5/9
? FILER NAME Ire	land, Shaun		0007870	# (Ethics Commission filers) 4
4 TOTAL OF UNI	TEMIZED LOANS:	++++ ++++++++++++++++++++++++++++++++		\$
5 Date of Ioan 07/03/2014	7 Name of lender Ireland, Shaun	Out-ol-state PAC (ID#)	9 Loan Amount (\$) \$1,000.00
Is lender a financial Institution?	8 Lender address; City; P.O. Box 41064 Austin, TX 78704	State; Zip Code		10 Interest rate
No	Ausun, 17 70704			11 Maturity date
12 Principal occupation Finance & Intergo	/ Job title (See Instructions) vernmental Affairs	13 Employer (See Ins DTI Resources	tructions)	
4 Description of Collat	eral	15 Check if personal f	iunds were deposited	l into political account
6 GUARANTOR INFORMATION	17 Name of guarantor	· · · · · · · · · · · · · · · · · · ·		19 Amount Guaranteed (\$)
	- 	State; Zip Code		19 Amount Guaranteed (\$)
INFORMATION	18 Guarantor address; City;	State; Zip Code 21 Employer		19 Amount Guaranteed (\$)
INFORMATION	18 Guarantor address; City;			Loan Amount (\$)
INFORMATION Inot applicable Principal Occupation Date of loan	18 Guarantor address; City; Name of lender Ireland, Shaun Lender address; City; P.O. Box 41064	21 Employer	· · · · · · · · · · · · · · · · · · ·	Loan Amount (\$)
INFORMATION INFORMATION INFORMATION Deteof loan 08/04/2014 Is lender a	18 Guarantor address; City; Name of lender Ireland, Shaun Lender address; City;	21 Employer Out-of-state PAC (ID#	· · · · · · · · · · · · · · · · · · ·	Loan Amount (\$) \$1,000.00
INFORMATION INFORMATION International Occupation Date of Ioan 08/04/2014 Is lender a financial Institution? No Principal occupation	18 Guarantor address; City; Name of lender Ireland, Shaun Lender address; City; P.O. Box 41064	21 Employer Out-of-state PAC (ID#		Loan Amount (\$) \$1,000.00 Interest rate
INFORMATION INFORMATION International Occupation Date of Ioan 08/04/2014 Is lender a financial Institution? No Principal occupation	18 Guarantor address; City; Name of lender Ireland, Shaun Lender address; City; P.O. Box 41064 Austin, TX 78704	21 Employer Out-of-state PAC (ID# State; Zip Code Employer (See Ins DT I Resources	tructions)	Loan Amount (\$) \$1,000.00 Interest rate
INFORMATION In not applicable Principal Occupation Date of Ioan 08/04/2014 Is lender a financial Institution? No Principal occupation Finance & Intergo Description of Collat	18 Guarantor address; City; Name of lender Ireland, Shaun Lender address; City; P.O. Box 41064 Austin, TX 78704 / Job title (See Instructions) vernmental Affairs eral Name of guarantor	21 Employer out-ol-state PAC (ID#	tructions)	Loan Amount (\$) \$1,000.00 Interest rate Maturity date
not applicable Principal Occupation Date of loan 08/04/2014 Is lender a financial Institution? No Principal occupation Finance & Intergo Description of Collat X none GUARANTOR	18 Guarantor address; City; Name of lender Ireland, Shaun Lender address; City; P.O. Box 41064 Austin, TX 78704 /Job title (See Instructions) vernmental Affairs eral Name of guarantor Guarantor address; City;	21 Employer out-ol-state PAC (ID#	tructions)	Loan Amount (\$) \$1,000.00 Interest rate Maturity date

LOANS				SCHEDULE E
The Instruction Gui	DE explains how to complete this form.		1 PAGE # Schedule: 2/2	Peport: 6/9
2 FILER NAME Ire	eland, Shaun		3 ACCOUNT # 00078704	(Ethics Commission filers)
4 TOTAL OF UN	ITEMIZED LOANS:	***		\$
5 Date of loan 08/11/2014	7 Name of lender 🔲 ou Ireland, Shaun	nt-ol-state PAC (ID#)	9 Loan Amount (\$) \$1,000.00
6 Is lender a financial Institution?	8 Lender address; City; State; P.O. Box 41064 Austin, TX 78704	Zip Code	• • • • •	10 Interest rate
No				11 Maturity date
	L / Job title (See Instructions) vernmental Affairs	13 Employer (See Instruct DTI Resources	ions)	I
14 Description of Collar	era!	15 Check if personal funds	s were deposited int	o political account
16 GUARANTOR INFORMATION	17 Name of guarantor18 Guarantor address; City; State;	Zip Code	· · ·	19 Amount Guaranteed (\$)
Not applicable			······	
20 Principal Occupation	n .	21 Employer		
Date of loan 09/09/2014	Name of lender 🛛 our Ireland, Shaun	tt-of-state PAC (ID#)	Loan Amount (\$) \$1,000.00
is lender a financial Institution?	Lender address; City; State; P.O. Box 41064 Austin, TX 78704	Zip Code		Interest rate
No				Maturity date
	/ Job title (See Instructions) vernmental Affairs	Employer (See Instruct DTI Resources	ions)	L
Description of Collat	eral	Check if personal funds	s were deposited int	o political account
X none				
GUARANTOR INFORMATION	Name of guarantor			Amount Guaranteed (\$)
🕅 not applicable	Guarantor address; City; State;	Zip Code		
Principal Occupation	ו	Employer		I,,,,,,,,
	······································	· I		

POLITICAL EXPENDITURES

SCHEDULE F

Schedule: 1/3 Report: 7/9 Ireland, Shaun 0007870 4 Date 5 Payee name Checkmark Typesetting 07/21/2014 Checkmark Typesetting 6 Amount (\$) 7 Payee address City; State; Zip Code \$ Amount (\$) 7 Payee address City; State; Zip Code 3217 N I-35 Frontage Road 2nd Floor \$ Austin, TX 78722 3217 N I-35 Frontage Road 2nd Floor (b) Description (if travel outside of Texas, completed and floor PURPOSE OF Frinting Expense (b) Description (if travel outside of Texas, completed and floor floor 9 Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought: Office he direct sought: Date Payee name Office Address City; State; Zip Code City; State; Zip Code	ed Expense t Committee d above) # (TEC filers) +
AccountingEdenking Consulting Expense Event Expense Fees Consulting Expense Fold Developed Expense Poling Expense Travel In District Contributions Donations Made B Contributions Donations Donations Made B Contributions Donations Donations Made B Contributions Donations Donations Donations Donations Made B Contributions Donations Donating Donatent Donations Donations Donations Donations Donatin Donati	ed Expense t Committee d above) # (TEC filers) +
Consulting Expense Polorbeverage Expense Travel Out Of District Contributions/Made B Fees Poling Expense Office Overhead/Rental Expense OTHER (enter a category not its 1 PAGE # 2 FILER NAME 3 ACCOUNT Schedule: 1/3 Report: 7/9 2 FILER NAME 3 ACCOUNT 00/7870 4 Date 5 Payee name 0007870 07/21/2014 Checkmark Typesetting 6 Amount (\$) 7 Payee address City; State; Zip Code 8 PURPOSE OF Candidate / Officeholder name (b) Description (fit travel outside of Texas, complete thing expense 9 Complete ONLY if Uriting Expense Candidate / Officeholder name Office sought: Office holder living expense 9 Complete ONLY if Uriting Expense Candidate / Officeholder name Office sought: Office holder living expense 9 Complete ONLY if Uriting Expense Candidate / Officeholder name Office sought: Office holder living expense 08/14/2014 Payee name Office holder rame Office sought: Office holder living expense 08/14/2014 Payee name City;	e Schedule T)
Fees Printing Expense Office Overhead/Rental Expense OTHER (enter a category not its The INSTRUCTION Guice explains how to complete this form. 1 PAGE # 2 FILER NAME 3 ACCOUNT Schedule: 1/3 Report: 7/9 2 FILER NAME 0007870 4 Date 5 Payee name 0007870 07/21/2014 Checkmark Typesetting 0007870 6 Amount (\$) 7 Payee address City; State; Zip Code \$1,652.44 3217 N I-35 Frontage Road 2nd Floor Austin, TX 78722 (a) Category (See Categories listed at the top of this schedule) (b) Description (it travel outside of Texas, complete 9 Complete ONLY id direct expenditure to benefit C/OH Candidate / Officeholder name Office sought: Office holder living expense 08/14/2014 Payee name (\$) Payee address City; State; Zip Code Office sought: Office holder living expense	d above) # (TEC filers) Schedule T)
The INSTRUCTION GUIDE explains how to complete this form. 1 PAGE # 2 FILER NAME Ireland, Shaun 3 ACCOUNT 0007870 4 Date 5 Payee name Checkmark Typesetting 3 ACCOUNT 0007870 6 Amount (\$) 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 (it travel outside of Texas, complete Graphic Design/Print Collateral 9 Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought: Office holder living expense Date 08/14/2014 Payee name Office sought: Office holder living expense 08/14/2014 Payee name Office Sought: Office holder living expense	# (TEC filers)
1 PAGE # 2 FILER NAME Ireland, Shaun 3 ACCOUNT 0007870 4 Date 5 Payee name Checkmark Typesetting 3 ACCOUNT 0007870 6 Amount (\$) 7 Payee address City, State; Zip Code 3217 N I-35 Frontage Road 2nd Floor Austin, TX 78722 3 ACCOUNT 0007870 8 (a) Category (See Categories listed at the top of this schedule) OF EXPENDITURE (b) Description (it travel outside of Texas, complet Graphic Design/Print Collateral 9 Complete ONL Y if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought: Office he Office holder living expense Date Payee name 08/14/2014 Payee address City; State; Zip Code Amount (\$) Payee address City; State; Zip Code	Schedule T)
Schedule: 1/3 Report: 7/9 Ireland, Shaun 0007870 4 Date 5 Payee name 07/21/2014 Checkmark Typesetting 6 Amount (\$) 7 Payee address City; State; Zip Code 3217 N I-35 Frontage Road 9 Austin, TX 78722 (a) Category (See Categories listed at the top of this schedule) (b) Description (if travel outside of Texas, complet 9 Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought: Office he Date Payee name Officeholder name Office sought: Office he 08/14/2014 Payee address City; State; Zip Code City; State; Zip Code	Schedule T)
4 Date 5 Payee name 07/21/2014 Checkmark Typesetting 6 Amount (\$) 7 Payee address City; State; Zip Code \$1,652.44 3217 N I-35 Frontage Road 2nd Floor Austin, TX 78722 Austin, TX 78722 8 (a) Category (See Categories listed at the top of this schedule) (b) Description (it travel outside of Texas, complete Green Complete ONLY if direct expenditure 9 Complete ONLY if direct expenditure Candidate / Officeholder name Office sought: 08/14/2014 Payee name Office heat 08/14/2014 Payee address City; State; Zip Code	Schedule T)
07/21/2014 Checkmark Typesetting 6 Amount (\$) 7 Payee address City; State; Zip Code \$1,652.44 3217 N I-35 Frontage Road 2nd Floor 2nd Floor Austin, TX 78722 (a) Category (See Categories listed at the top of this schedule) (b) Description (if travel outside of Texas, complete PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) (b) Description (if travel outside of Texas, complete 9 Complete ONLY if direct expenditure to the top of the complete COHLY if direct expenditure Candidate / Officeholder name Office sought: Office he complete Date Payee name Office complete Payee address City; State; Zip Code Amount (\$) Payee address City; State; Zip Code Code	·····
6 Amount (\$) 7 Payee address City: State; Zip Code \$1,652.44 3217 N I-35 Frontage Road 2nd Floor Austin, TX 78722 8 (a) Category (See Categories listed at the top of this schedule) OF PURPOSE OF Printing Expense 9 Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Date Payee name 08/14/2014 Checkmark Typesetting Amount (\$) Payee address	·····
\$1,652.44 3217 N I-35 Frontage Road 2nd Floor Austin, TX 78722 8 (a) Category (See Categories listed at the top of this schedule) OF EXPENDITURE (b) Description (if travel outside of Texas, complet Graphic Design/Print Collateral 9 Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought: Date 08/14/2014 Payee name Checkmark Typesetting Office State; Zip Code	·····
2nd Floor Austin, TX 78722 8 (a) Category (See Categories listed at the top of this schedule) OF EXPENDITURE (b) Description (if travel outside of Texas, complet Graphic Design/Print Collateral 9 Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought: Office holder living expense Date Payee name Office Sought: Office holder Office sought: Office holder 08/14/2014 Checkmark Typesetting Payee address City; State; Zip Code	·····
Austin, TX 78722 8 FURPOSE OF Printing Expense PURPOSE Printing Expense PURPOSE Check if Austin, TX, officeholder living expense 9 Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Date Payee name 08/14/2014 Checkmark Typesetting Amount (\$) Payee address	·····
8 (a) Category (See Categories listed at the top of this schedule) (b) Description (it travel outside of Texas, complet Graphic Design/Print Collateral 9 OF Printing Expense Check if Austin, TX, officeholder living expense 9 Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought: Office her constraints Date Payee name Checkmark Typesetting Checkmark Typesetting Amount (\$) Payee address City; State; Zip Code Zip Code	·····
PURPOSE OF EXPENDITURE Printing Expense Graphic Design/Print Collateral 9 Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought: Office he Office sought: Date Payee name O8/14/2014 Checkmark Typesetting Amount (\$) Payee address City; State; Zip Code	·····
OF EXPENDITURE Candidate / Officeholder name Check if Austin, TX, officeholder living expense 9 Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought: Office he Date Payee name 08/14/2014 Checkmark Typesetting Amount (\$) Payee address City; State; Zip Code	d:
Openetic ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Cffice sought: Office he construction Date Payee name 08/14/2014 Checkmark Typesetting Amount (\$) Payee address City; State; Zip Code	d:
9 Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought: Office he Date Payee name 08/14/2014 Checkmark Typesetting Amount (\$) Payee address City; State; Zip Code	d:
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to benefit C/OH Date Payee name 08/14/2014 Checkmark Typesetting Amount (\$) Payee address City; State; Zip Code	
08/14/2014 Checkmark Typesetting Amount (\$) Payee address City; State; Zip Code	
08/14/2014 Checkmark Typesetting Amount (\$) Payee address City; State; Zip Code	
Amount (\$) Payee address City; State; Zip Code	
\$1,741.46 3217 N I-35 Frontage Road 2nd Floor	
Austin, TX 78722	
Category (See Categories listed at the top of this schedule) Description (It travel outside of Texas, complet PURPOSE Printing Expense Graphic Design/Print Collateral	Schedule T)
OF Finitury Expense	
EXPENDITURE	
Check if Austin, TX, officeholder living expense	
Complete ONLY II Candidate / Officeholder name Office sought: Office he direct expenditure	d:
to benefit C/OH	
Date Payee name	
08/18/2014 Facebook	
Amount (\$) Payee address City; State; Zip Code	
\$20.53 1601 Willow Road Menio Park, CA 94025	
Category (See Categories listed at the ten of this selectule) Description (It has at statistic to the	. Oathard
PURPOSE Advertising Expense Stated at the top of this schedule) Description (If travel outside of Texas, complet Facebook Ad	schedule T)
OF Advanusing Expense	
Complete ONLY II Candidate / Officeholder name Office sought: Office he	
direct expenditure	a .
to benefit C/OH	
Date Payee name	
09/02/2014 Facebook	
Amount (\$) Payee address City; State; Zip Code	
tas on 1601 Willow Boad	
\$35.00 1601 Willow Road Menio Park, CA 94025	
\$35.00 1601 Willow Road Menio Park, CA 94025	
Menlo Park, CA 94025	
Menio Park, CA 94025 Category (See Categories listed at the top of this schedule) Description (If travel outside of Texas, completed at the top of this schedule)	e Schedule T) 🔲
Wento Park, CA 94025 PURPOSE OF Category (See Categories listed at the top of this schedule) Advertising Expense Description Facebook Ad (If travel outside of Texas, complete Facebook Ad	Schedule T)
Mento Park, CA 94025 PURPOSE OF EXPENDITURE Category (See Categories listed at the top of this schedule) Advertising Expense Description Facebook Ad (ff travel outside of Texas, complete Facebook Ad	Schedule T) 🗌
Wento Park, CA 94025 PURPOSE OF Category (See Categories listed at the top of this schedule) Advertising Expense Description Facebook Ad (If travel outside of Texas, complete Facebook Ad	···

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POLITICAL EXPENDITURES

SCHEDULE F

	EXPENDITURE CATE	EGORIES
Advertising Expe Accounting/Bank		s/Contract Labor Loan Repayment/Reimbursement draising Expense Transportation Equipment & Related Expense
Consulting Expe	nse Food/Beverage Expense Travel In Distric	Contributions/Donations Made By
Event Expense Fees	Polling Expense Travel Out Of E Printing Expense Office Overhea	District Candidate/Officeholder/Political Committee d/Rental Expense OTHER (enter a category not listed above)
	The Instauction Guide explains h	• • • • • • • • • • • • • • • • • • • •
1 PAGE #	2 FILER NAME	3 ACCOUNT # (TEC filers)
Schedule: 2/3 Re	aport: 8/9 ireland, Shaun	00078704
4 Date	5 Payee name	
09/22/2014	Home Depot	
6 Amount (\$)	7 Payee address City: State; Zip Code	
\$14.58	3600 S I-35 Frontage Road	
φ1 4 .30	Austin, TX 78704	
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description (It travel outside of Texas, complete Schedule T)
PURPOSE	OTHER - Hardware Supplies	Hardware for Signage
EXPENDITURE		
		Check If Austin, TX, officeholder living expense
9 Complete ONLY II direct expenditure	Candidate / Officeholder name	Office sought: Office held:
to benefit C/OH		
Date	Pavee name	na dhan ann an Air an
09/11/2014	South Austin Democrats	
Amount (\$)	Payee address City; State; Zip Code	····
\$55.00	Austin, TX 78715	
	· · ·	
	Category (See Categories listed at the top of this schedule)	Description (It travel outside of Texas, complete Schedule T)
PURPOSE	OTHER - Fee	Membership Mail List
OF EXPENDITURE		
		Check if Austin, TX, officeholder living expense
Complete ONLY if	Candidate / Officeholder name	Office sought: Office held:
direct expenditure to benefit C/OH		
Date	Payee name	
09/15/2014	South Austin Democrats	
Amount (\$)	Payee address City; State; Zip Code	· · · · · · · · · · · · · · · · · · ·
\$55.00		
\$25.00	Austin, TX 78715	
	Category (See Categories listed at the top of this schedule)	Description (It travel outside of Texas, complete Schedule T)
PURPOSE	OTHER - Event Sponsorship	Sponsorship
OF EXPENDITURE		
·		Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure	Candidate / Officeholder name	Office sought: Office held:
to benefit C/OH		
Date	Payee name	
07/29/2014	Staples	
Amount (\$)	Payee address City; State; Zip Code	
\$7.99	4301 W William Cannon Drive	
ψ1.33	Austin, TX 78749	
	Category (See Categories listed at the top of this schedule)	Description (It travel outside of Texas, complete Schedule T)
PURPOSE	OTHER - Office Supplies	Printer Paper
EXPENDITURE		
		Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure	Candidate / Officeholder name	Office sought: Office held:
, an out expendicitle	•	

POLITIC	AL EXPENDITURES	SCHEDULE F
Advertising Expe Accounting/Bank Consulting Exper Event Expense Fees	ing Legal Services Solicitation/Func nse Food/Beverage Expense Travel in District Polling Expense Travel Out Of Di	Contract Labor traising Expense Loan Repayment/Reimbursement traising Expense Transportation Equipment & Related Expense Contributions/Donations Made By strict Candidate/Officeholder/Political Committee /Rental Expense OTHER (enter a category not listed above)
1 PAGE # Schedule: 3/3 Re	2 FILER NAME ireland, Shaun	3 ACCOUNT # (TEC filers) 00078704
4 Date 07/17/2014	5 Payee name The Rivas Group	
6 Amount (\$) \$250.00	7 Payee address City, State Zp Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description (II travel outside of Texas, complete Schedule T) Graphic Design/Copy/Advertising
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date 08/15/2014	Payee name The Rivas Group	
Amount (\$) \$140.00	Payee address City; State; Zip Code 111 Congress, Ste. 400 Austin, TX 78701	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense	Description (If Iravel outside of Texas, complete Schedule T) Consulting
Complete ONLY IT direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date 08/19/2014	Payee name The Rivas Group	
Amount (\$) \$200.74	Payee address City; State; Zip Code 111 Congress, Ste. 400 Austin, TX 78701	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T) Automated Phone Targeting for RoboCall/RoboPoll
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date 09/15/2014	Payee name The Rivas Group	
Amount (\$) \$175.00	Payee address City; State; Zip Code 111 Congress, Ste. 400 Austin, TX 78701	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Consulting Expense	Description (If travel outside of Texas, complete Schedule T) Consulting
Complete ONLY if direct expenditure	Candidate / Officeholder name	Check if Austin, TX, officeholder living expense Office sought: Office held:

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