

**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 5
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI Shaun		OFFICE USE ONLY Date Received 2014 OCT 27 AUSTIN CITY CLERK RECEIVED Date Hand-delivered or Date Postmarked Receipt Amount Date Processed Date Imaged
	NICKNAME LAST SUFFIX Ireland		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS ☐ Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE P.O. Box 41064 Austin, TX 78704		
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Mr. Matthew		
	NICKNAME LAST SUFFIX Martinez		
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	☐ January 15 ☐ 30th day before election ☐ Runoff ☐ 15th day after campaign treasurer appointment (officeholder only) ☐ July 16 ☒ 8th day before election ☐ Exceeded \$500 limit ☐ Final report (Attach C/OH - FR)		
9 PERIOD COVERED	Month Day Year Month Day Year 09/26/2014 THROUGH 10/25/2014		
10 ELECTION	ELECTION DATE ELECTION TYPE Month Day Year ☐ Primary ☐ Runoff ☒ General ☐ Special 11/04/2014		
11 OFFICE	OFFICE HELD (if any)		12 OFFICE SOUGHT (if known) City of Austin, City Council District 3

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**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)

\$ 100.00

**EXPENDITURE
TOTALS**

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

\$ 0.00

4. TOTAL POLITICAL EXPENDITURES

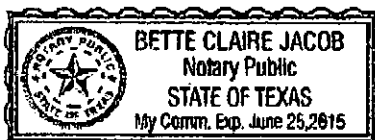
\$ 1,523.72

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

\$ 771.24

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

\$ 4,059.63

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

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Shaun Ireland, this the 27th day
of October, 20 14, to certify which, witness my hand and seal of office.

Signature of officer administering oath

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: 1/1 Report: 3/5	
2 FILER NAME Ireland, Shaun		3 ACCOUNT # (Ethics Commission filers) 00078704	
4 Date 10/13/2014	5 Full name of contributor ☐ out-of-state PAC (ID# _____) Spiegel, Marc 6 Contributor address: City: State: Zip Code 2235 E 6th Street Apt. 312 Austin, TX 78702	7 Amount of contribution (\$) \$100.00 (If travel outside of Texas, complete Schedule T) ☐	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	

POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES**Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
FeesGifts/Awards/Memorial Expenses
Legal Services
Food/Beverage Expense
Printing Expense
Printing ExpensesSalaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental ExpenseLoan 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: 1/2 Report: 4/5		2 FILER NAME Ireland, Shaun		3 ACCOUNT # (TEC filers) 00078704	
4 Date 09/30/2014	5 Payee name Facebook				
6 Amount (\$) \$45.00	7 Payee address City: State: Zip Code 1601 Willow Road Mentor Park, CA 94025				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description (If travel outside of Texas, complete Schedule T) ☐ Facebook Ads ☐ 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 10/23/2014	Payee name Facebook				
Amount (\$) \$53.92	Payee address City: State: Zip Code 1601 Willow Road Mentor 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) ☐ Facebook Ads ☐ Check if Austin, TX, officeholder living expense		
	Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name: _____ Office sought: _____ Office held: _____				
Date 09/27/2014	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) ☐ Voter Targeting and Outreach Services ☐ Check if Austin, TX, officeholder living expense		
	Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name: _____ Office sought: _____ Office held: _____				
Date 10/23/2014	Payee name The Rivas Group				
Amount (\$) \$105.00	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) ☐ Voter Targeting and Outreach Services ☐ 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 Expenses
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: 2/2 Report: 5/5

2 FILER NAME

Ireland, Shaun

3 ACCOUNT # (TEC filers)

00078704

4 Date

10/22/2014

5 Payee name

Twitter Inc.

6 Amount (\$)

\$117.71

7 Payee address

City: State: Zip Code

1355 Market St.
Ste. 900
San Francisco, CA 94103

8**PURPOSE
OF
EXPENDITURE**

(a) Category (See Categories listed at the top of this schedule)
Advertising Expense

(b) Description
Twitter Ad

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

10/22/2014

Payee name

United States Post Office

Amount (\$)

\$1,027.09

Payee address

City: State: Zip Code

3903 S Congress Ave.
Austin, TX 78704

**PURPOSE
OF
EXPENDITURE**

Category (See Categories listed at the top of this schedule)
OTHER - Postage

Description (If travel outside of Texas, complete Schedule T) ☐
Postage for Mailers

☐ Check if Austin, TX, officeholder living expense

**Complete ONLY if
direct expenditure
to benefit C/OH**

Candidate / Officeholder name

Office sought:

Office held: