



## CORRECTION/AMENDMENT AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

**All Reports:** A filer who files a corrected report must submit a correction affidavit. The affidavit must identify the information that has changed.

**Reports filed with Texas Ethics Commission:** A corrected report (other than a report due 8 days before an election or a special report near election) filed with the Ethics Commission after its due date is not considered late for purposes of late-filing penalties if: (1) any error or omission in the report as originally filed was made in good faith, and (2) the person filing the report files a corrected report and a good-faith affidavit not later than the 14th business day after the date the person learns that the report as originally filed is inaccurate or incomplete.

**Semiannual Reports:** Effective September 1, 2011, a semiannual report (due January 15 or July 15) that is amended/corrected before the eighth day after the original report was filed is considered to have been filed on the date the original report was filed. A semiannual report that is amended/corrected on or after the eighth day after the original report was filed is considered to have been filed on the date the original report was filed if: (1) the amendment/correction is made before any complaint is filed with regard to the subject of the amendment/correction; and (2) the original report was made in good faith and without intent to mislead or misrepresent the information contained in the report.

Attach additional pages as necessary.

### INSTRUCTIONS FOR COMPLETING THIS FORM

*The following numbers correspond to the numbered boxes on the other side.*

- 1. Filer ID.** If you file with the Ethics Commission, you should have received a letter acknowledging receipt of your campaign treasurer appointment and assigning you a Filer ID. Put that number in this box. If you do not file with the Ethics Commission, skip this box.
- 2. Total Pages Filed.** After completing this form and any attachments, count the number of pages. Enter that number in this box. Each side of a two-sided form counts as a page. In other words, this form is two pages.
- 3. Candidate/Officeholder Name.** Put your full name here. Enter your name in the same way as on the report you are correcting.
- 4. Original Report Type.** Mark the type of report you are correcting.
- 5. Original Period Covered.** Enter the period covered by the report you are correcting. The year is important because filers sometimes correct reports years after filing the original.
- 6. Explanation of Correction.** Attach any part of the campaign finance report form needed to report and explain corrections. Explain why there was an error on the original report. Also explain what information is being corrected and how the new information is different from the information on the original report. (Use additional pages if you need more space.) You may also use this area to request a waiver or reduction of a late-filing penalty and state the basis of your request.
- 7. Affidavit.** Read the affidavit before signing. You must sign the affidavit in the presence of an individual authorized to take oaths. If signed before a notary public, the affidavit must include the notary's signature and seal.

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

# FORM C/OH COVER SHEET PG 1

The C/OH INSTRUCTION GUIDE explains how to complete this form.		<b>1 ACCOUNT #</b> (Ethics Commission filers) 00010009	<b>2 PAGE #</b> 1 of 27
<b>3 CANDIDATE / OFFICEHOLDER NAME</b>	MS / MRS / MR                      FIRST                      MI Christopher <hr style="border-top: 1px dashed black;"/> NICKNAME                      LAST                      SUFFIX Chris                      Riley	<b>OFFICE USE ONLY</b>	
<b>4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS</b>  <input type="checkbox"/> Change of Address	ADDRESS / PO BOX:      APT / SUITE #:                      CITY:                      STATE:                      ZIP CODE  P.O. Box 30062 Austin, TX 78703	Date Received   Date Hand-delivered or Date Postmarked  Receipt #                      Amount	
<b>5 CAMPAIGN TREASURER NAME</b>	MS / MRS / MR                      FIRST                      MI Cora <hr style="border-top: 1px dashed black;"/> NICKNAME                      LAST                      SUFFIX Corky                      Hilliard	Date Processed  Date Imaged	
<b>6 CAMPAIGN TREASURER ADDRESS</b> (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE):      APT / SUITE #:                      CITY:                      STATE:                      ZIP CODE  4120 Lawless St. Austin, TX 78723		
<b>7 CAMPAIGN TREASURER PHONE</b>	AREA CODE                      PHONE NUMBER                      EXTENSION  (512) 459-6342		
<b>8 REPORT TYPE</b>	<input checked="" type="checkbox"/> January 15 <input 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)		
<b>9 PERIOD COVERED</b>	Month      Day      Year                      Month      Day      Year  10/26/2014                      THROUGH                      12/31/2014		
<b>10 ELECTION</b>	ELECTION DATE Month      Day      Year 12/16/2014	ELECTION TYPE <input type="checkbox"/> Primary <input checked="" type="checkbox"/> Runoff <input type="checkbox"/> General <input type="checkbox"/> Special	
<b>11 OFFICE</b>	OFFICE HELD (if any) City Council, Place 1	<b>12 OFFICE SOUGHT (if known)</b> City Council, District 9	

**GO TO PAGE 2**

# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

**FORM C/OH  
COVER SHEET PG 2**

**13 C/OH NAME** Riley, Christopher

**14 ACCOUNT #** (Ethics Commission filers)  
00010009

**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**  
Austin Apartment Association

**GENERAL**

**COMMITTEE ADDRESS**  
8620 Burnet Rd.  
Ste. 475  
Austin, TX 78757

**SPECIFIC**

**COMMITTEE CAMPAIGN TREASURER NAME**  
Arrona, Kristan

additional pages

**COMMITTEE CAMPAIGN TREASURER ADDRESS**  
8620 Burnet Rd.  
Ste. 475  
Austin, TX 78757

**16 CONTRIBUTION TOTALS**

1.	TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$	300.00
----	--	----	--------

2.	TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	9,076.00
----	---	----	----------

**EXPENDITURE TOTALS**

3.	TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$	445.17
----	--	----	--------

4.	TOTAL POLITICAL EXPENDITURES	\$	38,318.70
----	------------------------------	----	-----------

**CONTRIBUTION BALANCE**

5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	619.38
----	---	----	--------

**OUTSTANDING LOAN TOTALS**

6.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	33,000.00
----	--	----	-----------

**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 \_\_\_\_\_, this the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_, 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: 1/8 Report: 3/27	
2 FILER NAME Riley, Christopher		3 ACCOUNT # (Ethics Commission filers) 00010009	
4 Date  10/30/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bluejay, Michael  6 Contributor address; City; State; Zip Code 2605B Oaklawn Ave Austin, TX 78722-1720	7 Amount of contribution (\$)  \$350.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Executive, Publishing		10 Employer (See Instructions) Michael Bluejay Incorporated	
Date  10/31/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bufkin, Ben  Contributor address; City; State; Zip Code 5707 Highland Hills Cir Austin, TX 78731-4230	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  11/05/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Burns, Kevin  Contributor address; City; State; Zip Code 801 W 5th St Ste 100 Austin, TX 78703-5405	Amount of contribution (\$)  \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) UrbanSpace LLP	
Date  11/05/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Burns, Paula  Contributor address; City; State; Zip Code 801 W 5th St Ste 100 Austin, TX 78703-5403	Amount of contribution (\$)  \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Broker		Employer (See Instructions) UrbanSpace LLP	
Date  10/31/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Campbell, Daniel  Contributor address; City; State; Zip Code 6511 Hillside Hollow Dr Austin, TX 78750-8100	Amount of contribution (\$)  \$100.00	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: 2/8 Report: 4/27	
2 FILER NAME Riley, Christopher		3 ACCOUNT # (Ethics Commission filers) 00010009	
4 Date  10/30/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cody, Buck  6 Contributor address; City; State; Zip Code 5708 Highland Hills Dr Austin, TX 78731-4233	7 Amount of contribution (\$)  \$100.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date  11/05/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Driver, Susan  Contributor address; City; State; Zip Code 8 Woodstone Sq Austin, TX 78703-1164	Amount of contribution (\$)  \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Accountant/Auditor		Employer (See Instructions) Retired	
Date  10/27/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Ellinger, Matthew  Contributor address; City; State; Zip Code 140 Gardenside Dr Apt 401 San Francisco, CA 94131-1325	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  10/29/2014	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  10/31/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Erichson, Christian  Contributor address; City; State; Zip Code 2020 E 2nd St B Austin, TX 78702-4563	Amount of contribution (\$)  \$100.00	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: 3/8 Report: 5/27	
2 FILER NAME Riley, Christopher		3 ACCOUNT # (Ethics Commission filers) 00010009	
4 Date  11/05/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Freeland Graves, Jean  6 Contributor address; City; State; Zip Code 900 W 17th St Austin, TX 78701-1007	7 Amount of contribution (\$)  \$250.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) requested		10 Employer (See Instructions) requested	
Date  11/05/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gilson Sachs, Kay  Contributor address; City; State; Zip Code 4300 Prickly Pear Drive Austin, TX 78731	Amount of contribution (\$)  \$201.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) National Account Manager		Employer (See Instructions) HD Supply	
Date  11/05/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hersh, Stuart  Contributor address; City; State; Zip Code 1307 Kinney Ave Apt 117 Austin, TX 78704-2279	Amount of contribution (\$)  \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date  11/05/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lewis, Barry & Romi  Contributor address; City; State; Zip Code 200 Congress Ave Austin, TX 78701-4527	Amount of contribution (\$)  \$200.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Self	
Date  11/01/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lippman, Susan  Contributor address; City; State; Zip Code 8901 Chisholm Ln Austin, TX 78748-6381	Amount of contribution (\$)  \$100.00	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: 4/8 Report: 6/27	
2 FILER NAME Riley, Christopher		3 ACCOUNT # (Ethics Commission filers) 00010009	
4 Date  11/05/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lopez, Laura  6 Contributor address; City; State; Zip Code 308 Camino Arbolago Lakeway, TX 78734-3960	7 Amount of contribution (\$)  \$350.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Homemaker		10 Employer (See Instructions) None	
Date  11/03/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mahlum, Terry  Contributor address; City; State; Zip Code 102 Lakota Pass Austin, TX 78738-6563	Amount of contribution (\$)  \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Regional Vice President		Employer (See Instructions) Delaware North Companies	
Date  11/05/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Manchester, Douglas  Contributor address; City; State; Zip Code 350 Camino De La Reina San Diego, CA 92108-3003	Amount of contribution (\$)  \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Real Estate Development		Employer (See Instructions) Manchester Financial Group	
Date  11/04/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Manchester, Lauren  Contributor address; City; State; Zip Code 350 Camino De La Reina San Diego, CA 92108-3003	Amount of contribution (\$)  \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Partner		Employer (See Instructions) Den Property Group	
Date  10/26/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Orr, David  Contributor address; City; State; Zip Code 5312 Avenue H Austin, TX 78751	Amount of contribution (\$)  \$100.00	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: 5/8 Report: 7/27

2 FILER NAME Riley, Christopher

3 ACCOUNT # (Ethics Commission filers)  
00010009

4 Date  
10/30/2014

5 Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Osborne, Michael

6 Contributor address; City; State; Zip Code  
909 W 23rd St  
Austin, TX 78705-5007

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)  
Renewable Energy

10 Employer (See Instructions)  
Osborne Companies

Date  
10/26/2014

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Potter, Joseph

Contributor address; City; State; Zip Code  
1630 Waterston Ave  
Austin, TX 78703-3935

Amount of contribution (\$)  
\$75.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
11/05/2014

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
RECA - Good Government PAC

Contributor address; City; State; Zip Code  
98 San Jacinto Blvd  
Ste 510  
Austin, TX 78701-4082

Amount of contribution (\$)  
\$350.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
11/05/2014

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Skaggs, Stephen

Contributor address; City; State; Zip Code  
1108 Toyath St  
Austin, TX 78703-3921

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)

Employer (See Instructions)

Date  
10/30/2014

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Sprute, Dana

Contributor address; City; State; Zip Code  
909 W 23rd St  
Austin, TX 78705-5007

Amount of contribution (\$)  
\$350.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)  
Physician

Employer (See Instructions)  
Blackstock Clinic

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

**1** PAGE #  
Schedule: 6/8 Report: 8/27

**2** FILER NAME Riley, Christopher

**3** ACCOUNT # (Ethics Commission filers)  
00010009

**4** Date  
11/06/2014

**5** Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Taylor, Kathy

**7** Amount of contribution (\$) | **8** In-kind contribution description (if applicable)

11/06/2014

**6** Contributor address; City; State; Zip Code  
1902 Stamford Ln  
Austin, TX 78703-2942

\$350.00

(If travel outside of Texas, complete Schedule T) 
**9** Principal occupation / Job title (See Instructions)  
Homemaker

**10** Employer (See Instructions)  
None

Date

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Taylor, Timothy

Amount of contribution (\$)

In-kind contribution description (if applicable)

11/06/2014

Contributor address; City; State; Zip Code  
1902 Stamford Ln  
Austin, TX 78703-2942

\$350.00

(If travel outside of Texas, complete Schedule T) 
Principal occupation / Job title (See Instructions)  
Attorney

Employer (See Instructions)  
Jackson Walker LLP

Date

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Thumlert, Jason

Amount of contribution (\$)

In-kind contribution description (if applicable)

10/31/2014

Contributor address; City; State; Zip Code  
610 Peacock Ln  
Austin, TX 78704-6232

\$100.00

(If travel outside of Texas, complete Schedule T) 

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Todd, Bruce

Amount of contribution (\$)

In-kind contribution description (if applicable)

10/29/2014

Contributor address; City; State; Zip Code  
823 Congress Ave  
Ste 1505  
Austin, TX 78701-2457

\$100.00

(If travel outside of Texas, complete Schedule T) 

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Topkara, Engin

Amount of contribution (\$)

In-kind contribution description (if applicable)

11/05/2014

Contributor address; City; State; Zip Code  
11915 Stonehollow Dr  
Apt 1031  
Austin, TX 78758-3104

\$250.00

(If travel outside of Texas, complete Schedule T) 
Principal occupation / Job title (See Instructions)  
Professor

Employer (See Instructions)  
Huston-Tillotson University

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 7/8 Report: 9/27	
2 FILER NAME Riley, Christopher		3 ACCOUNT # (Ethics Commission filers) 00010009	
4 Date 11/05/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Topkara, Tugea	7 Amount of contribution (\$) \$250.00	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 11915 Stonehollow Dr Apt 1031 Austin, TX 78758-3104		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions) requested		10 Employer (See Instructions) requested	
Date 11/05/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Van Zandt, Thomas	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 3001 Bonnie Rd Austin, TX 78703-2807		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 11/05/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Vitanza, David	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 308 Camino Arbolago Lakeway, TX 78734-3960		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Vice President		Employer (See Instructions) Schlosser Development	
Date 11/05/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Vitanza, Mary Lou	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 2500 Barton Creek Blvd Apt 1612 Austin, TX 78735-1623		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired	
Date 11/05/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Vitanza, S.A.	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 2500 Barton Creek Blvd Apt 1612 Austin, TX 78735-1623		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
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: 8/8 Report: 10/27	
2 FILER NAME Riley, Christopher		3 ACCOUNT # (Ethics Commission filers) 00010009	
4 Date 11/05/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Yerly, Rebecca ..... 6 Contributor address; City; State; Zip Code 1208 Bickler Rd Austin, TX 78704-2502	7 Amount of contribution (\$) \$350.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Researcher		10 Employer (See Instructions) Fundamentals Group	
Date 11/05/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Yilmaz, Feride ..... Contributor address; City; State; Zip Code 2012 Shaker Trl Austin, TX 78754-5936	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) requested		Employer (See Instructions) requested	
Date 11/05/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Yilmaz, Ilker ..... Contributor address; City; State; Zip Code 2012 Shaker Trl Austin, TX 78754-5936	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) requested		Employer (See Instructions) requested	
Date 10/31/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Zimel, Adam ..... Contributor address; City; State; Zip Code 4009 Madrid Cv Austin, TX 78759-5058	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

# LOANS

# SCHEDULE E

The <b>INSTRUCTION GUIDE</b> explains how to complete this form.		<b>1</b> PAGE # Schedule: 1/1 Report: 11/27
<b>2</b> FILER NAME Riley, Christopher		<b>3</b> ACCOUNT # (Ethics Commission filers) 00010009
<b>4</b> TOTAL OF UNITEMIZED LOANS: <span style="float:right">⇔⇔⇔⇔⇔⇔</span> \$		
<b>5</b> Date of loan 11/17/2014	<b>7</b> Name of lender <input type="checkbox"/> out-of-state PAC (ID# _____) Riley, Chris	<b>9</b> Loan Amount (\$) \$7,000.00
<b>6</b> Is lender a financial Institution?  No	<b>8</b> Lender address; City; State; Zip Code ..... 1310 San Antonio #1 Austin, TX 78701	<b>10</b> Interest rate 0
<b>11</b> Maturity date		
<b>12</b> Principal occupation / Job title (See Instructions) Council Member		<b>13</b> Employer (See Instructions) City of Austin
<b>14</b> Description of Collateral <input checked="" type="checkbox"/> none		<b>15</b> Check if personal funds were deposited into political account <input checked="" type="checkbox"/>
<b>16</b> GUARANTOR INFORMATION  <input checked="" type="checkbox"/> not applicable	<b>17</b> Name of guarantor  <b>18</b> Guarantor address; City; State; Zip Code .....	<b>19</b> Amount Guaranteed (\$)
<b>20</b> Principal Occupation		<b>21</b> Employer
Date of loan 12/06/2014	Name of lender <input type="checkbox"/> out-of-state PAC (ID# _____) Riley, Chris	Loan Amount (\$) \$1,000.00
Is lender a financial Institution?  No	Lender address; City; State; Zip Code ..... 1310 San Antonio #1 Austin, TX 78701	Interest rate 0
Maturity date		
Principal occupation / Job title (See Instructions) Council Member		Employer (See Instructions) City of Austin
Description of Collateral <input checked="" type="checkbox"/> none		Check if personal funds were deposited into political account <input checked="" type="checkbox"/>
<b>GUARANTOR INFORMATION</b>  <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.

<b>1</b> PAGE # Schedule: 1/11 Report: 12/27	<b>2</b> FILER NAME Riley, Christopher	<b>3</b> ACCOUNT # (TEC filers) 00010009
---	---	---

<b>4</b> Date 10/31/2014	<b>5</b> Payee name Ahuja, Jason
-----------------------------	-------------------------------------

<b>6</b> Amount (\$) \$655.00	<b>7</b> Payee address City; State; Zip Code 4600 Monterey Oaks Blvd. #613 Austin, TX 78749
----------------------------------	---

<b>8</b> PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract labor  <input type="checkbox"/> Check if Austin, TX, officeholder living expense
---------------------------------	---	---

<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
--	-------------------------------	----------------	--------------

Date 11/12/2014	Payee name Ahuja, Jason
--------------------	----------------------------

Amount (\$) \$340.00	Payee address City; State; Zip Code 4600 Monterey Oaks Blvd. #613 Austin, TX 78749
-------------------------	--

<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract Labor  <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 11/18/2014	Payee name At Large Partners
--------------------	---------------------------------

Amount (\$) \$2,700.00	Payee address City; State; Zip Code 907 East 15th St. Austin, TX 78702
---------------------------	--

<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Consulting Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> 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 10/31/2014	Payee name Bean, Samuel
--------------------	----------------------------

Amount (\$) \$708.00	Payee address City; State; Zip Code 2604 Paramount Ave. Austin, TX 78704
-------------------------	--

<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract labor  <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 | Gifts/Awards/Memorial Expense | Salaries/Wages/Contract Labor    | Loan Repayment/Reimbursement               |
| Accounting/Banking  | Legal Services                | Solicitation/Fundraising Expense | Transportation Equipment & Related Expense |
| Consulting Expense  | Food/Beverage Expense         | Travel In District               | Contributions/Donations Made By            |
| Event Expense       | Polling Expense               | Travel Out Of District           | Candidate/Officeholder/Political Committee |
| Fees                | Printing Expense              | Office Overhead/Rental Expense   | OTHER (enter a category not listed above)  |

The INSTRUCTION GUIDE explains how to complete this form.

<b>1</b> PAGE # Schedule: 2/11 Report: 13/27	<b>2</b> FILER NAME Riley, Christopher	<b>3</b> ACCOUNT # (TEC filers) 00010009
---	---	---

<b>4</b> Date 11/12/2014	<b>5</b> Payee name Bean, Samuel
-----------------------------	-------------------------------------

<b>6</b> Amount (\$) \$210.00	<b>7</b> Payee address City; State; Zip Code 2604 Paramount Ave. Austin, TX 78704
----------------------------------	---

<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract Labor
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense	

<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
--	-------------------------------	----------------	--------------

Date 10/31/2014	Payee name BirdDog Research, LLC
--------------------	-------------------------------------

Amount (\$) \$2,500.00	Payee address City; State; Zip Code 96 Chicon St. Austin, TX 78702
---------------------------	--

<b>8</b> 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"/> Research
	<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 10/31/2014	Payee name Blome, Bill
--------------------	---------------------------

Amount (\$) \$2,000.00	Payee address City; State; Zip Code 1405 Waller St. Austin, TX 78702
---------------------------	--

<b>8</b> PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Salary
	<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 11/18/2014	Payee name Blome, Bill
--------------------	---------------------------

Amount (\$) \$2,000.00	Payee address City; State; Zip Code 1405 Waller St. Austin, TX 78702
---------------------------	--

<b>8</b> PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Salary
	<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.

<b>1</b> PAGE # Schedule: 3/11 Report: 14/27	<b>2</b> FILER NAME Riley, Christopher	<b>3</b> ACCOUNT # (TEC filers) 00010009
---	---	---

<b>4</b> Date 10/31/2014	<b>5</b> Payee name Bray, Timothy
-----------------------------	--------------------------------------

<b>6</b> Amount (\$) \$1,250.00	<b>7</b> Payee address City; State; Zip Code 2200 S. Pleasant Valley Rd. #107 Austin, TX 78741-4601
------------------------------------	---

<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Salary
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense	

<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:

Date 11/12/2014	Payee name Bray, Timothy
--------------------	-----------------------------

Amount (\$) \$1,250.00	Payee address City; State; Zip Code 2200 S. Pleasant Valley Rd. #107 Austin, TX 78741-4601
---------------------------	--

<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract labor
	<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 10/31/2014	Payee name Cecil, Willie
--------------------	-----------------------------

Amount (\$) \$790.00	Payee address City; State; Zip Code 4714 Rowena Ave. Austin, TX 78751
-------------------------	---

<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract labor
	<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 11/12/2014	Payee name Cecil, Willie
--------------------	-----------------------------

Amount (\$) \$340.00	Payee address City; State; Zip Code 4714 Rowena Ave. Austin, TX 78751
-------------------------	---

<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract Labor
	<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	Gifts/Awards/Memorial Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By
Event Expense	Polling Expense	Travel Out Of District	Candidate/Officeholder/Political Committee
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

<b>1</b> PAGE # Schedule: 4/11 Report: 15/27	<b>2</b> FILER NAME Riley, Christopher	<b>3</b> ACCOUNT # (TEC filers) 00010009
---	---	---

<b>4</b> Date 10/31/2014	<b>5</b> Payee name de la Garza, Monica
-----------------------------	--

<b>6</b> Amount (\$) \$140.00	<b>7</b> Payee address City; State; Zip Code 809a Plumpton Austin, TX 78755
----------------------------------	---

<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract Labor
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense	

<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
--	-------------------------------	----------------	--------------

Date 11/07/2014	Payee name de la Garza, Monica
--------------------	-----------------------------------

Amount (\$) \$182.00	Payee address City; State; Zip Code 809a Plumpton Austin, TX 78755
-------------------------	--

<b>8</b> PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract Labor
	<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 10/29/2014	Payee name Facebook
--------------------	------------------------

Amount (\$) \$779.64	Payee address City; State; Zip Code 1601 S. California Ave. Palo Alto, CA 94304
-------------------------	---

<b>8</b> 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 online advertising
	<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 10/30/2014	Payee name Facebook
--------------------	------------------------

Amount (\$) \$806.87	Payee address City; State; Zip Code 1601 S. California Ave. Palo Alto, CA 94304
-------------------------	---

<b>8</b> 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 online advertising
	<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 | Gifts/Awards/Memorial Expense | Salaries/Wages/Contract Labor    | Loan Repayment/Reimbursement               |
| Accounting/Banking  | Legal Services                | Solicitation/Fundraising Expense | Transportation Equipment & Related Expense |
| Consulting Expense  | Food/Beverage Expense         | Travel In District               | Contributions/Donations Made By            |
| Event Expense       | Polling Expense               | Travel Out Of District           | Candidate/Officeholder/Political Committee |
| Fees                | Printing Expense              | Office Overhead/Rental Expense   | OTHER (enter a category not listed above)  |

The INSTRUCTION GUIDE explains how to complete this form.

<b>1</b> PAGE # Schedule: 5/11 Report: 16/27	<b>2</b> FILER NAME Riley, Christopher	<b>3</b> ACCOUNT # (TEC filers) 00010009
---	---	---

<b>4</b> Date 11/03/2014	<b>5</b> Payee name Facebook
-----------------------------	---------------------------------

<b>6</b> Amount (\$) \$473.56	<b>7</b> Payee address City; State; Zip Code 1601 S. California Ave. Palo Alto, CA 94304
----------------------------------	--

<b>8</b> 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) <input type="checkbox"/> Political online advertising  <input type="checkbox"/> Check if Austin, TX, officeholder living expense
---------------------------------	---	---

<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
--	-------------------------------	----------------	--------------

Date 11/04/2014	Payee name Facebook
--------------------	------------------------

Amount (\$) \$794.14	Payee address City; State; Zip Code 1601 S. California Ave. Palo Alto, CA 94304
-------------------------	---

<b>PURPOSE OF EXPENDITURE</b>	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 online advertising  <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 12/01/2014	Payee name Facebook
--------------------	------------------------

Amount (\$) \$373.25	Payee address City; State; Zip Code 1601 S. California Ave. Palo Alto, CA 94304
-------------------------	---

<b>PURPOSE OF EXPENDITURE</b>	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 online advertising  <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 11/03/2014	Payee name First Data
--------------------	--------------------------

Amount (\$) \$281.00	Payee address City; State; Zip Code 5565 Glenridge Connector NE Atlanta, GA 30342
-------------------------	---

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

The INSTRUCTION GUIDE explains how to complete this form.

<b>1</b> PAGE # Schedule: 6/11 Report: 17/27	<b>2</b> FILER NAME Riley, Christopher	<b>3</b> ACCOUNT # (TEC filers) 00010009
---	---	---

<b>4</b> Date 11/03/2014	<b>5</b> Payee name First Data
-----------------------------	-----------------------------------

<b>6</b> Amount (\$) \$426.76	<b>7</b> Payee address City; State; Zip Code 5565 Glenridge Connector NE Atlanta, GA 30342
----------------------------------	--

<b>8</b> 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	

<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
--	-------------------------------	----------------	--------------

Date 11/03/2014	Payee name First Data
--------------------	--------------------------

Amount (\$) \$7.91	Payee address City; State; Zip Code 5565 Glenridge Connector NE Atlanta, GA 30342
-----------------------	---

<b>PURPOSE OF EXPENDITURE</b>	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 12/03/2014	Payee name First Data
--------------------	--------------------------

Amount (\$) \$366.41	Payee address City; State; Zip Code 5565 Glenridge Connector NE Atlanta, GA 30342
-------------------------	---

<b>PURPOSE OF EXPENDITURE</b>	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 12/03/2014	Payee name First Data
--------------------	--------------------------

Amount (\$) \$76.57	Payee address City; State; Zip Code 5565 Glenridge Connector NE Atlanta, GA 30342
------------------------	---

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

The INSTRUCTION GUIDE explains how to complete this form.

<b>1</b> PAGE # Schedule: 7/11 Report: 18/27	<b>2</b> FILER NAME Riley, Christopher	<b>3</b> ACCOUNT # (TEC filers) 00010009
---	---	---

<b>4</b> Date 12/03/2014	<b>5</b> Payee name First Data
-----------------------------	-----------------------------------

<b>6</b> Amount (\$) \$43.33	<b>7</b> Payee address City; State; Zip Code 5565 Glenridge Connector NE Atlanta, GA 30342
---------------------------------	--

<b>8</b> 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
---------------------------------	--	--

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
---	-------------------------------	----------------	--------------

Date 12/03/2014	Payee name First Data
--------------------	--------------------------

Amount (\$) \$19.20	Payee address City; State; Zip Code 5565 Glenridge Connector NE Atlanta, GA 30342
------------------------	---

<b>PURPOSE OF EXPENDITURE</b>	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 10/31/2014	Payee name Gaines, Rose
--------------------	----------------------------

Amount (\$) \$210.00	Payee address City; State; Zip Code 707 W. 21 St., 4D1B Austin, TX 78705
-------------------------	--

<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract Labor  <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 11/07/2014	Payee name Gaines, Rose
--------------------	----------------------------

Amount (\$) \$142.10	Payee address City; State; Zip Code 707 W. 21 St., 4D1B Austin, TX 78705
-------------------------	--

<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract Labor  <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.

<b>1</b> PAGE # Schedule: 8/11 Report: 19/27		<b>2</b> FILER NAME Riley, Christopher		<b>3</b> ACCOUNT # (TEC filers) 00010009	
<b>4</b> Date 10/31/2014	<b>5</b> Payee name Green, Joe				
<b>6</b> Amount (\$) \$260.00	<b>7</b> Payee address City; State; Zip Code 300 Crockett St. Austin, TX 78704				
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		<b>(b)</b> Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract Labor		
	<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 11/12/2014	Payee name Green, Joseph				
Amount (\$) \$180.00	Payee address City; State; Zip Code 300 Crockett #121 Austin, TX 78704				
<b>8</b> PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract Labor		
	<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 10/31/2014	Payee name Ivory, J'vona				
Amount (\$) \$725.00	Payee address City; State; Zip Code 150 Klattenhoff Lane #5207 Hutto, TX 78634				
<b>8</b> PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Salary		
	<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 11/12/2014	Payee name Ivory, J'vona				
Amount (\$) \$500.00	Payee address City; State; Zip Code 150 Klattenhoff Lane #5207 Hutto, TX 78634				
<b>8</b> PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Salary		
	<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.

<b>1</b> PAGE # Schedule: 9/11 Report: 20/27	<b>2</b> FILER NAME Riley, Christopher	<b>3</b> ACCOUNT # (TEC filers) 00010009
---	---	---

<b>4</b> Date 10/28/2014	<b>5</b> Payee name Kelly Graphics
-----------------------------	---------------------------------------

<b>6</b> Amount (\$) \$10,419.03	<b>7</b> Payee address City; State; Zip Code 1409 Quaker Ridge Austin, TX 78746
-------------------------------------	---

<b>8</b> 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, postage and mailing services  <input type="checkbox"/> Check if Austin, TX, officeholder living expense
---------------------------------	--	---

<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
--	-------------------------------	----------------	--------------

Date 10/31/2014	Payee name Macin, Francis
--------------------	------------------------------

Amount (\$) \$189.00	Payee address City; State; Zip Code 2514 Pearl St. Austin, TX 78705
-------------------------	---

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract Labor  <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 11/07/2014	Payee name Macin, Francis
--------------------	------------------------------

Amount (\$) \$126.00	Payee address City; State; Zip Code 2514 Pearl St. Austin, TX 78705
-------------------------	---

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract Labor  <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 11/07/2014	Payee name Nalley, Jamie
--------------------	-----------------------------

Amount (\$) \$500.00	Payee address City; State; Zip Code 3413 Cedar St. Unit A Austin, TX 78705
-------------------------	--

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract labor  <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	Gifts/Awards/Memorial Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By
Event Expense	Polling Expense	Travel Out Of District	Candidate/Officeholder/Political Committee
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

<b>1</b> PAGE # Schedule: 10/11 Report: 21/27	<b>2</b> FILER NAME Riley, Christopher	<b>3</b> ACCOUNT # (TEC filers) 00010009
--	---	---

<b>4</b> Date 11/12/2014	<b>5</b> Payee name Nalley, Jamie
-----------------------------	--------------------------------------

<b>6</b> Amount (\$) \$250.00	<b>7</b> Payee address City; State; Zip Code 3413 Cedar St. Unit A Austin, TX 78705
----------------------------------	---

<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	<b>(b)</b> Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract labor
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense	

<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
--	-------------------------------	----------------	--------------

Date 11/03/2014	Payee name NGP Van, Inc.
--------------------	-----------------------------

Amount (\$) \$320.00	Payee address City; State; Zip Code 1105 15th Street NW, Ste. 500 Washington, DC 20005
-------------------------	--

<b>8</b> 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 10/30/2014	Payee name Office Max
--------------------	--------------------------

Amount (\$) \$102.69	Payee address City; State; Zip Code 4615 North Lamar Blvd Austin, TX 78701
-------------------------	--

<b>8</b> 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"/> Office Supplies
	<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 10/31/2014	Payee name Tompkins, Nicholas
--------------------	----------------------------------

Amount (\$) \$280.00	Payee address City; State; Zip Code 1919 Burton Austin, TX 78741
-------------------------	--

<b>8</b> PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract Labor
	<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 | Gifts/Awards/Memorial Expense | Salaries/Wages/Contract Labor    | Loan Repayment/Reimbursement               |
| Accounting/Banking  | Legal Services                | Solicitation/Fundraising Expense | Transportation Equipment & Related Expense |
| Consulting Expense  | Food/Beverage Expense         | Travel In District               | Contributions/Donations Made By            |
| Event Expense       | Polling Expense               | Travel Out Of District           | Candidate/Officeholder/Political Committee |
| Fees                | Printing Expense              | Office Overhead/Rental Expense   | OTHER (enter a category not listed above)  |

The INSTRUCTION GUIDE explains how to complete this form.

<b>1</b> PAGE # Schedule: 11/11 Report: 22/27	<b>2</b> FILER NAME Riley, Christopher	<b>3</b> ACCOUNT # (TEC filers) 00010009
--	---	---

<b>4</b> Date 11/07/2014	<b>5</b> Payee name Tompkins, Nicholas
-----------------------------	---

<b>6</b> Amount (\$) \$322.00	<b>7</b> Payee address City; State; Zip Code 1919 Burton Austin, TX 78741
----------------------------------	---

<b>8</b> PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract Labor
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense	

<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
--	-------------------------------	----------------	--------------

Date 10/31/2014	Payee name Wooding, John
--------------------	-----------------------------

Amount (\$) \$315.00	Payee address City; State; Zip Code 3601 Willow Springs Rd. Apt. 104 Austin, TX 78704
-------------------------	---

<b>8</b> PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract Labor
	<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 11/12/2014	Payee name Wooding, John
--------------------	-----------------------------

Amount (\$) \$360.00	Payee address City; State; Zip Code 3601 Willow Springs Rd. Apt. 104 Austin, TX 78704
-------------------------	---

<b>8</b> PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Contract Labor
	<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 MADE FROM PERSONAL FUNDS

## SCHEDULE G

### EXPENDITURE CATEGORIES

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

The INSTRUCTION GUIDE explains how to complete this form.

<b>1</b> PAGE # Schedule: 1/5 Report: 23/27	<b>2</b> FILER NAME Riley, Christopher	<b>3</b> ACCOUNT # (TEC filers) 00010009
--	---	---

<b>4</b> Date 10/28/2014	<b>5</b> Payee name Austin Chronicle*
-----------------------------	--

<b>6</b> Amount (\$) \$1,345.00 <input type="checkbox"/> Reimbursement from political contributions intended	<b>7</b> Payee address City; State; Zip Code PO Box 49066 Austin, TX 78703
--	--

<b>8</b> 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) <input type="checkbox"/> political print advertising  <input type="checkbox"/> Check if Austin, TX, officeholder living expense
---------------------------------	---	--

Date 11/03/2014	Payee name Austin's Pizza*
--------------------	-------------------------------

Amount (\$) \$40.83 <input type="checkbox"/> Reimbursement from political contributions intended	Payee address City; State; Zip Code 2324 Guadalupe Street Austin, TX 78705
--	--

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> food for volunteers  <input type="checkbox"/> Check if Austin, TX, officeholder living expense
------------------------	---	--

Date 11/04/2014	Payee name Austin's Pizza
--------------------	------------------------------

Amount (\$) \$140.19 <input type="checkbox"/> Reimbursement from political contributions intended	Payee address City; State; Zip Code 2324 Guadalupe Street Austin, TX 78705
---	--

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> food for volunteers  <input type="checkbox"/> Check if Austin, TX, officeholder living expense
------------------------	---	--

Date 11/05/2014	Payee name Austin's Pizza*
--------------------	-------------------------------

Amount (\$) \$47.92 <input type="checkbox"/> Reimbursement from political contributions intended	Payee address City; State; Zip Code 2324 Guadalupe Street Austin, TX 78705
--	--

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> food for volunteers  <input type="checkbox"/> Check if Austin, TX, officeholder living expense
------------------------	---	--

# POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

# SCHEDULE G

### EXPENDITURE CATEGORIES

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

The INSTRUCTION GUIDE explains how to complete this form.

<b>1</b> PAGE # Schedule: 2/5 Report: 24/27	<b>2</b> FILER NAME Riley, Christopher	<b>3</b> ACCOUNT # (TEC filers) 00010009
--	---	---

<b>4</b> Date 11/04/2014	<b>5</b> Payee name Cricket Wireless*
-----------------------------	--

<b>6</b> Amount (\$) \$146.66 <input type="checkbox"/> Reimbursement from political contributions intended	<b>7</b> Payee address City; State; Zip Code 2617 E 7th St Austin, TX 78702
--	---

<b>8</b> 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"/> phones  <input type="checkbox"/> Check if Austin, TX, officeholder living expense
---------------------------------	--	---

Date 10/27/2014	Payee name Fed Ex Office*
--------------------	------------------------------

Amount (\$) \$8.22 <input type="checkbox"/> Reimbursement from political contributions intended	Payee address City; State; Zip Code 2711 Guadalupe St. Austin, TX 78705
---	---

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"/> copies  <input type="checkbox"/> Check if Austin, TX, officeholder living expense
------------------------	--	---

Date 10/27/2014	Payee name Fed Ex Office*
--------------------	------------------------------

Amount (\$) \$16.43 <input type="checkbox"/> Reimbursement from political contributions intended	Payee address City; State; Zip Code 2711 Guadalupe St. Austin, TX 78705
--	---

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"/> copies  <input type="checkbox"/> Check if Austin, TX, officeholder living expense
------------------------	--	---

Date 10/27/2014	Payee name Fed Ex Office*
--------------------	------------------------------

Amount (\$) \$57.37 <input type="checkbox"/> Reimbursement from political contributions intended	Payee address City; State; Zip Code 2711 Guadalupe St. Austin, TX 78705
--	---

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"/> copies  <input type="checkbox"/> Check if Austin, TX, officeholder living expense
------------------------	--	---

# 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.

<b>1</b> PAGE # Schedule: 3/5 Report: 25/27		<b>2</b> FILER NAME Riley, Christopher		<b>3</b> ACCOUNT # (TEC filers) 00010009	
<b>4</b> Date 10/28/2014		<b>5</b> Payee name Fed Ex Office*			
<b>6</b> Amount (\$) \$83.35 <input type="checkbox"/> Reimbursement from political contributions intended		<b>7</b> Payee address City; State; Zip Code 2711 Guadalupe St. Austin, TX 78705			
<b>8</b> PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Printing Expense		<b>(b)</b> Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> copies  <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Date 11/03/2014		Payee name Fed Ex Office*			
Amount (\$) \$279.59 <input type="checkbox"/> Reimbursement from political contributions intended		Payee address City; State; Zip Code 2711 Guadalupe St. Austin, TX 78705			
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"/> copies  <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Date 11/04/2014		Payee name Fed Ex Office*			
Amount (\$) \$10.81 <input type="checkbox"/> Reimbursement from political contributions intended		Payee address City; State; Zip Code 2711 Guadalupe St. Austin, TX 78705			
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"/> copies  <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Date 11/12/2014		Payee name Grande Communications*			
Amount (\$) \$230.32 <input type="checkbox"/> Reimbursement from political contributions intended		Payee address City; State; Zip Code 1923 E 7th St #100 Austin, TX 78702			
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"/> campaign office utilities  <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

# POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

## SCHEDULE G

### EXPENDITURE CATEGORIES

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

The INSTRUCTION GUIDE explains how to complete this form.

<b>1</b> PAGE # Schedule: 4/5 Report: 26/27	<b>2</b> FILER NAME Riley, Christopher	<b>3</b> ACCOUNT # (TEC filers) 00010009
--	---	---

<b>4</b> Date 10/28/2014	<b>5</b> Payee name Office Max*
-----------------------------	------------------------------------

<b>6</b> Amount (\$) \$29.22 <input type="checkbox"/> Reimbursement from political contributions intended	<b>7</b> Payee address City; State; Zip Code 907 W 5th St. Austin, TX 78703
---	---

<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b)</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	

Date 11/03/2014	Payee name Office Max*
--------------------	---------------------------

Amount (\$) \$98.27 <input type="checkbox"/> Reimbursement from political contributions intended	Payee address City; State; Zip Code 907 W 5th St. Austin, TX 78703
--	--

<b>PURPOSE OF EXPENDITURE</b>	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"/> office supplies
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Date 11/03/2014	Payee name Office Max*
--------------------	---------------------------

Amount (\$) \$85.97 <input type="checkbox"/> Reimbursement from political contributions intended	Payee address City; State; Zip Code 907 W 5th St. Austin, TX 78703
--	--

<b>PURPOSE OF EXPENDITURE</b>	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"/> office supplies
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Date 11/03/2014	Payee name Office Max*
--------------------	---------------------------

Amount (\$) \$63.32 <input type="checkbox"/> Reimbursement from political contributions intended	Payee address City; State; Zip Code 907 W 5th St. Austin, TX 78703
--	--

<b>PURPOSE OF EXPENDITURE</b>	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"/> office supplies
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense	

# POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

## SCHEDULE G

### EXPENDITURE CATEGORIES

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

The INSTRUCTION GUIDE explains how to complete this form.

<b>1 PAGE #</b> Schedule: 5/5 Report: 27/27	<b>2 FILER NAME</b> Riley, Christopher	<b>3 ACCOUNT # (TEC filers)</b> 00010009
--	---	---

<b>4 Date</b> 11/12/2014	<b>5 Payee name</b> Office Max*
-----------------------------	------------------------------------

<b>6 Amount (\$)</b> \$113.85 <input type="checkbox"/> Reimbursement from political contributions intended	<b>7 Payee address</b> City; State; Zip Code 907 W 5th St. Austin, TX 78703
--	---

<b>8 PURPOSE OF EXPENDITURE</b>	<b>(a) Category</b> (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>(b) Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> office supplies  <input type="checkbox"/> Check if Austin, TX, officeholder living expense
---------------------------------	---	---

<b>Date</b> 10/27/2014	<b>Payee name</b> Staples*
---------------------------	-------------------------------

<b>Amount (\$)</b> \$85.51 <input type="checkbox"/> Reimbursement from political contributions intended	<b>Payee address</b> City; State; Zip Code 1201 Barbara Jordan Blvd Suite 700 Austin, TX 78703
---	--

<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> office supplies  <input type="checkbox"/> Check if Austin, TX, officeholder living expense
-------------------------------	---	---

<b>Date</b> 10/27/2014	<b>Payee name</b> Staples*
---------------------------	-------------------------------

<b>Amount (\$)</b> \$108.24 <input type="checkbox"/> Reimbursement from political contributions intended	<b>Payee address</b> City; State; Zip Code 1201 Barbara Jordan Blvd Suite 700 Austin, TX 78703
--	--

<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> office supplies  <input type="checkbox"/> Check if Austin, TX, officeholder living expense
-------------------------------	---	---

<b>Date</b> 10/31/2014	<b>Payee name</b> Voter Activation*
---------------------------	--

<b>Amount (\$)</b> \$168.00 <input type="checkbox"/> Reimbursement from political contributions intended	<b>Payee address</b> City; State; Zip Code 1101 15th St. NW Ste. 500 Washington, DC 20005
--	--

<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"/> VAN robodialer  <input type="checkbox"/> Check if Austin, TX, officeholder living expense
-------------------------------	--	--

**CAMPAIGN DEBT RECONCILIATION**  
 (To be filed by officeholders only during an election year)  
 Period Covered: January 1, 2014 to December 31, 2014

Name of officeholder: Chris Riley

Campaign debt\* existing as of the first day of the calendar year: \$0

Campaign debt\* existing as of the last day of the calendar year: \$33,000

Enter the following information on all campaign debt existing as of December 31 of the reporting year  
 (Note: Campaign debts under \$50 may be reported as an aggregate under (c), below):

(a) For loans and other debt evidenced by a note, the name of the creditor, the principal amount owed, the interest rate, and the date of maturity:

Creditor	Principal amount owed	Interest rate	Date of maturity
Chris Riley	\$33,300	0	none

(b) For all other campaign debts, enter the name of the creditor and the principal amount owed:

Creditor/Vendor	Principal amount owed
Chris Riley	\$3,931.93

(c) Enter the total of campaign debts under \$50 if they are not itemized under (a) or (b) above.

---

*\* Campaign debt is the actual outstanding obligation of the candidate or candidate's committee as of a particular date, minus all funds held by the candidate or candidate's committee in cash or bank accounts on that date.*

### BANK RECONCILIATION

A candidate, officeholder, or campaign committee filing a January 15 year-end contribution and expenditure report shall provide the following information for the previous calendar year.

Name of candidate, officeholder or campaign committee: Chris Riley

For each checking, savings or other financial institution account maintained during 2014\_\_, enter the following information indicated. For each additional institution, use a copy of this schedule.

The name of the financial institution: Frost Bank

Type of account: Checking

The beginning balance: \$0

The ending balance: 619.38

Enter the following information for checks issued on that account that have not cleared by December 31:

Date	Payee	Amount
10-21-14	Roland Swenson	\$700

Enter the following information for checks received as contributions and deposited but dishonored by the contributor's financial institution:

Date of receipt	Contributor	Amount

SCHEDULE ATX. 4 - attach to form C/OH (C&E)  
 Reference § 2-2-25, Austin City Code

Amount of interest or dividends earned: \$1.29

All deposits and withdrawals not disclosed on a filed contribution and expenditure report:

Date of deposit or withdrawal	Amount of deposit	Amount of withdrawal
Various dates	\$1.29 interest	
5-6-14	.21 cents Gvalidate test deposit for bank services	

A listing of all checks received by December 31 but not deposited into any account (whether or not the checks have been "accepted" within the definition of the Texas Election Code):

Date of receipt	Contributor	Amount