	Guide explains how to c	omplete this form.	1 Filer ID		2 Total pages filed: \$\frac{1}{2}\$
3 CANDIDATE / OFFICEHOLDER NAME	MS/MRS/MR	FIRST Jayme		MI	OFFICE USE ON
	NICKNAME	LAST Mathias	,,	SUFFIX	Date Received
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; P.O. Box 2386	APT / SUITE #; CI	TY;	ZIP CODI	Date Hand-delivered or Date Postman Receipt # Amount
Change of Address	Austin, TX 78702				Date Processed
					Date Imaged
5 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST		MI	
	NICKNAME	LAST		SUFFIX	
6 CAMPAIGN	STREET ADDRESS (NO	PO BOX PLEASE);	APT	'/ SUITE#; CI	ry; state; zi
TREASURER ADDRESS (Residence or Business)					
ADDRESS	AREA CODE F	HONE NUMBER	EXTENSION		
ADDRESS (Residence or Business) 7 CAMPAIGN TREASURER	AREA CODE F January 15 July 15		EXTENSION e election	Runoff Exceeded \$500 limit	15th day after campaign treas appointment (officeholder only Final Report (Attach C/OH-FR
7 CAMPAIGN TREASURER PHONE 8 REPORT	January 15 July 15	HONE NUMBER 30th day before 8th day before	EXTENSION e election	Runoff	15th day after campaign treas appointment (officeholder only Final Report (Attach C/OH-FR
7 CAMPAIGN TREASURER PHONE 8 REPORT TYPE	January 15 July 15 Month Day Y 10/09/2016 ELECTION DAT	30th day before X 8th day before ear T E	EXTENSION e election	Runoff Exceeded \$500 limit Month Da	15th day after campaign treas appointment (officeholder only Final Report (Attach C/OH-FR Year

CANDIDATE / OFFICEHOLDER REPORT:

FORM C/OH COVER SHEET PG 2

SUPPORT	& TOTALS		COVER	JIILL	2 of 26
13 C / OH NAME	Mathias, Jayme		14 Filer ID		
15 NOTICE FROM POLITICAL	This box is for notice of candidate / officeholder consent. Candidates ar	political contributions accepted or political expenditu These expenditures may have been made without to dofficeholders are required to report this information	res made by political comr the candidate's or officehol n only if they receive notice	mittees to s Ider's know of such e	support the vledge or xpenditures.
COMMITTEE(S) Additional Pages	COMMITTEE TYPE	COMMITTEE NAME			
	GENERAL GENERAL	COMMITTEE ADDRESS			
	SPECIFIC	OSMAN TEE / ESTATE			
		COMMITTEE CAMPAIGN TREASURER NAME			
		COMMITTEE CAMPAIGN TREASURER ADDRES	SS		
	:				
16 CONTRIBUTION TOTALS	1. TOTAL POLIT LOANS, OR G	CAL CONTRIBUTIONS OF \$50 OR LESS (OTHER UARANTEES OF LOANS), UNLESS ITEMIZED	THAN PLEDGES,	\$	0.00
TOTALS	2 TOTAL POLIT	ICAL CONTRIBUTIONS I PLEDGES, LOANS, OR GUARANTEES OF LOAN	S)	\$	8,244.00
EXPENDITURE TOTALS		ICAL EXPENDITURES OF \$100 OR LESS, UNLESS		\$	0.00
IOTALS	4. TOTAL POLIT	ICAL EXPENDITURES		\$	2,798.30
CONTRIBUTION BALANCE	REPORTING			\$	6,740.40
OUTSTANDING LOAN TOTALS	6. TOTAL PRING	CIPAL AMOUNT OF ALL OUTSTANDING LOANS AS DRTING PERIOD	S OF THE LAST DAY	\$	2,000.00
17 AFFADAVIT					
		i swear, or affirm, under penal true and correct and includes	Ity of perjury, that the acco	ompanying be reporte	report is
OJARY PUL		under Title 15, Election Code.			,
	MARGERY ELAINE H My Commission E July 9, 2018	OPKINS pires		mental management of the second	*
	, NOTARY STAMP / SEAL	/ \\ (\)	of Candidate or Officehold	ler .	
Sworn to and su	hscribed before me, by th	e said Sayne hathia.	1, this the3_1'	<u></u>	day
or Octuba	, 20 <u> (o,</u> l	o certify which, withess my hand and seal of office.			
Signature	Source administering	phu Marcer Elainet Printed name of officer administering	Title of officer	administer	SSUT- ring oath

FORM C/OH **SUBTOTALS - C/OH COVER SHEET PG 3** 3 of 26 19 Filer ID 18 FILER NAME Mathias, Jayme 20 SCHEDULE SUBTOTALS SUBTOTAL AMOUNT NAME OF SCHEDULE 7,940.00 SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS 1. X 304.00 SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS Х \$ SCHEDULE B: PLEDGED CONTRIBUTIONS SCHEDULE E: LOANS SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS 2,798.30 5. Х SCHEDULE F2: UNPAID INCURRED OBLIGATIONS 6. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS \$ \$ SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS \$ SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH \$ 10. SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS \$ SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED \$ 12. TO FILER

MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
The Instru	ction Guide explains how to complete this f	orm.	1 Total page: Sch: 1/10	s Schedule A1: Rpt: 4/26	
2 FILER NAME Mathias, Jay		and the second s	3 Filer ID		
4 Date 10/24/2016	5 Full name of contributor		7 Amount of	Contribution (\$)	\$250.00
8 Principal occu	Austin, TX 78723 upation / Job title (See Instructions)	9 Employer (See Instructions	<u> </u> 		
Retired	, , , ,		•		
Date 10/18/2016	Full name of contributor out-of-state PAC (ID#:_Blazier, John Contributor address; City; State; Zip Code 901 S. MoPac, Bldg. V, Ste. 200)	Amount of	Contribution (\$)	\$500.00
Principal occu	Austin, TX 78746 upation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
Attorney	parion / oct are (ess merations)	Blazier, Christensen, Br	•	P.C.	
Date 10/18/2016	Full name of contributor)	Amount of	Contribution (\$)	\$100.00
	Austin, TX 78759				
•	ipation / Job title (See Instructions) evelopment Director	Employer (See Instructions American Constructors	5)		
Date 10/18/2016	Full name of contributor out-of-state PAC (ID#:_ Briganti, Frank Contributor address; City; State; Zip Code 2002 Breeze Hollow Austin, TX 78741)	Amount of	Contribution (\$)	\$100.00
Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions))		
Date 10/18/2016	Full name of contributor out-of-state PAC (ID#:_ Bruch, Margaret Contributor address; City; State; Zip Code 730 South Brazos Lockhart, TX 78644		Amount of	Contribution (\$)	\$100.00
Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions	<u>}</u> ;)		

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 2/10 Rpt: 5/26 3 Filer ID 2 FILER NAME Mathias, Jayme 7 Amount of Contribution (\$) 5 Full name of contributor out-of-state PAC (ID#: 4 Date \$100.00 10/18/2016 Burger, Martin 6 Contributor address; City; State; Zip Code 11212 Limoncillo Court Austin, TX 78750 Employer (See Instructions) 8 Principal occupation / Job title (See Instructions) American Constructors Vice President out-of-state PAC (ID#: Amount of Contribution (\$) Date Full name of contributor \$150.00 10/18/2016 Carroll, David Contributor address; City; State; Zip Code 2000 Homedale Drive Austin, TX 78704 Principal occupation / Job title (See Instructions) Employer (See Instructions) **DAVCAR** Engineer Amount of Contribution (\$) Full name of contributor x out-of-state PAC (ID#: C00002089 Date \$200.00 10/25/2016 Commuications Workers of America COPE PCC Contributor address; City; State; Zip Code 501 3rd Street, NW Washington, DC 20001 Employer (See Instructions) Principal occupation / Job title (See Instructions) Amount of Contribution (\$) out-of-state PAC (ID#: Date Full name of contributor \$100.00 10/23/2016 Cuellar, Margaret Contributor address; City; State; Zip Code 1621 Bowerton Drive Austin, TX 78754 Employer (See Instructions) Principal occupation / Job title (See Instructions) Retired Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: \$100.00 10/26/2016 Cuevas, Rita Contributor address; City; State; Zip Code 3212 Silk Oak Drive Austin, TX 78748 Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 3/10 Rpt: 6/26 3 Filer ID 2 FILER NAME Mathias, Jayme Amount of Contribution (\$) 5 Full name of contributor out-of-state PAC (ID#:_ 4 Date \$100.00 10/19/2016 David, Albert (Dr.) 6 Contributor address; City; State; Zip Code 1101 Grove Blvd., #703 Austin, TX 78741 9 Employer (See Instructions) 8 Principal occupation / Job title (See Instructions) Austin Community College Associate Professor Amount of Contribution (\$) Full name of contributor out-of-state PAC (ID#:_ Date \$30.00 10/25/2016 Estrada, Teresa C. Contributor address; City; State; Zip Code 2618 E. 3rd Street Austin, TX 78702 Employer (See Instructions) Principal occupation / Job title (See Instructions) Amount of Contribution (\$) out-of-state PAC (ID#: Full name of contributor Date \$125.00 10/29/2016 Everitt, Patti Contributor address; City; State; Zip Code 4007 Crescent Drive Austin, TX 78722 Principal occupation / Job title (See Instructions) Employer (See Instructions) Self Consultant Amount of Contribution (\$) out-of-state PAC (ID#: Full name of contributor Date \$250.00 10/24/2016 Guerra, Rick & Ann Contributor address; City; State; Zip Code 2107 Key West Cove Austin, TX 78746 Employer (See Instructions) Principal occupation / Job title (See Instructions) Jose I. Guerra, Inc. Principal Amount of Contribution (\$) out-of-state PAC (ID#:_ Full name of contributor Date \$100.00 10/27/2016 Hall, Donald Contributor address; City; State; Zip Code 5328 Acacia Grove St North Las Vegas, NV 89031 Principal occupation / Job title (See Instructions) Employer (See Instructions) Systems Analyst

The Instruct	tion Guide explains how to complete this fo	rn	1.	1	Total pages Schedule A1: Sch: 4/10 Rpt: 7/26	
FILER NAME				3	Filer ID	
10/12/2016	5 Full name of contributor)	7	Amount of Contribution (\$)	\$100.00
Principal occup	Austin, TX 78704 pation / Job title (See Instructions)	9	Employer (See Instructions	_ >)		
Date 10/28/2016	Full name of contributor out-of-state PAC (ID#:_Haynes, James Contributor address; City; State; Zip Code 1807 Maple Avenue Austin, TX 78702 pation / Job title (See Instructions)		Employer (See Instruction	s)	Amount of Contribution (\$)	\$20.0
Date 10/26/2016	Full name of contributor out-of-state PAC (ID#:_ Hopkins, Balbina Contributor address; City; State; Zip Code 2409 E. 2nd Street				Amount of Contribution (\$)	\$100.0
Principal occu	Austin, TX 78702 pation / Job title (See Instructions)		Employer (See Instruction	ıs)		
Date 10/18/2016	Full name of contributor out-of-state PAC (ID#:_Hutton, Grant Contributor address; City; State; Zip Code 221 Courtnees Way Georgetown, TX 78626				Amount of Contribution (\$)	\$100.
Principal occu Project Mana	pation / Job title (See Instructions)		Employer (See Instruction American Constructors			
Date 10/20/2016	Full name of contributor out-of-state PAC (ID#: Keeton, Carole (The Honorable) Contributor address; City; State; Zip Code 2904 Bowman Avenue Austin, TX 78703				Amount of Contribution (\$)	\$300.
Principal occu	upation / Job title (See Instructions)		Employer (See Instructio	ns)		

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 5/10 Rpt: 8/26 3 Filer ID FILER NAME Mathias, Jayme 7 Amount of Contribution (\$) out-of-state PAC (ID#: 4 Date 5 Full name of contributor \$25.00 10/17/2016 Kirikiti, Fulori 6 Contributor address; City; State; Zip Code 10320 Boulder Lane, #1727 Austin, TX 78758 9 Employer (See Instructions) 8 Principal occupation / Job title (See Instructions) Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: \$25.00 Larson, Kathleen 10/13/2016 Contributor address; City; State; Zip Code Villa Cumbrera No. 2 Casa 222 Penonome Panama Principal occupation / Job title (See Instructions) Employer (See Instructions) out-of-state PAC (ID#: Amount of Contribution (\$) Full name of contributor Date \$200.00 10/28/2016 Leal, Rafaela Contributor address; City; State; Zip Code 5201 Gladstone Drive Austin, TX 78723 Employer (See Instructions) Principal occupation / Job title (See Instructions) St. David's Medical Center Rehabilitation Amount of Contribution (\$) out-of-state PAC (ID#:__ Date Full name of contributor \$25.00 10/13/2016 Limon, John (Rev.) Contributor address; City; State; Zip Code 908 Calle Limon Austin, TX 78702 Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of Contribution (\$) out-of-state PAC (ID#: Date Full name of contributor \$50.00 10/22/2016 Loredo Guerra, Irene Contributor address; City; State; Zip Code 5904 Cedar Cliff Drive Austin, TX 78759 Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired

The Instructi	on Guide explains how to complete this f	orm.		Total pages Schedule A1: Sch: 6/10 Rpt: 9/26	
FILER NAME			3	Filer ID	
Mathias, Jaym	e		↓	(A)	
Date 5	Full name of contributor out-of-state PAC (ID#:		7	Amount of Contribution (\$)	\$100.00
10/17/2016	Malfaro, Louis	**************************************			Φ100.0
6	Contributor address; City; State; Zip Code				
	1510 E. 11th Street				
			1		
	Austin, TX 78702	9 Employer (See Instruction	1. 1s)		
	ation / Job title (See Instructions)	Texas AFT	·		
President		.)	T	Amount of Contribution (\$)	
Date	Full name of contributor out-of-state PAC (ID#				\$100.0
10/18/2016	Martinez, Lynett	***************************************	····		
	Contributor address; City; State; Zip Code		1		
	10550 Rodriguez Road				
	Austin, TX 78747		ļ		
Dringing occurs	ation / Job title (See Instructions)	Employer (See Instruction	ns)		
Retired	,	<u></u>			
	Full name of contributor out-of-state PAC (ID/	#:)	\neg	Amount of Contribution (\$)	
Date					\$2,000.
	McCabe, Tim				φ2,000.
10/25/2016	McCabe, Tim Contributor address: City; State; Zip Code				φ2,000.
10/25/2016	Contributor address; City; State; Zip Code				φ2,000.
	Contributor address; City; State; Zip Code P.O. Box 5236 Austin, TX 78763		2001		φ2,000.v
	Contributor address; City; State; Zip Code P.O. Box 5236	Employer (See Instruction			φ2,000.
·	Contributor address; City; State; Zip Code P.O. Box 5236 Austin, TX 78763 Pation / Job title (See Instructions)	Employer (See Instruction McCabe Developmen		Contribution (\$)	φ2,000.
Principal occup	Contributor address; City; State; Zip Code P.O. Box 5236 Austin, TX 78763 pation / Job title (See Instructions)	Employer (See Instruction McCabe Developmen		Amount of Contribution (\$)	
Principal occup Managing Dir	Contributor address; City; State; Zip Code P.O. Box 5236 Austin, TX 78763 Pation / Job title (See Instructions) Pector Full name of contributor out-of-state PAC (ID)	Employer (See Instruction McCabe Developmen	nt T	Amount of Contribution (\$)	
Principal occup Managing Dir Date	Contributor address; City; State; Zip Code P.O. Box 5236 Austin, TX 78763 action / Job title (See Instructions) ector Full name of contributor	Employer (See Instruction McCabe Developmen	nt T	Amount of Contribution (\$)	
Principal occup Managing Dir Date	Contributor address; City; State; Zip Code P.O. Box 5236 Austin, TX 78763 action / Job title (See Instructions) rector Full name of contributor out-of-state PAC (ID Meltzer, Bradley	Employer (See Instruction McCabe Developmen	nt T	Amount of Contribution (\$)	
Principal occup Managing Dir Date	Contributor address; City; State; Zip Code P.O. Box 5236 Austin, TX 78763 Pation / Job title (See Instructions) Pector Full name of contributor	Employer (See Instruction McCabe Developmen	nt T	Amount of Contribution (\$)	\$100
Principal occup Managing Dir Date 10/20/2016	Contributor address; City; State; Zip Code P.O. Box 5236 Austin, TX 78763 Pation / Job title (See Instructions) Prector Full name of contributor	Employer (See Instruction McCabe Developmen	nt		
Principal occup Managing Dir Date 10/20/2016	Contributor address; City; State; Zip Code P.O. Box 5236 Austin, TX 78763 Pation / Job title (See Instructions) Pector Full name of contributor	Employer (See Instruction McCabe Developmen	nt		
Principal occup Managing Dir Date 10/20/2016	Contributor address; City; State; Zip Code P.O. Box 5236 Austin, TX 78763 Pation / Job title (See Instructions) Pector Full name of contributor	Employer (See Instruction McCabe Developmen #:	nt		
Principal occup Managing Dir Date 10/20/2016 Principal occup Owner Date	Contributor address; City; State; Zip Code P.O. Box 5236 Austin, TX 78763 Pation / Job title (See Instructions) Pector Full name of contributor	Employer (See Instruction McCabe Developmen #:	nt		\$100
Principal occup Managing Dir Date 10/20/2016	Contributor address; City; State; Zip Code P.O. Box 5236 Austin, TX 78763 Pation / Job title (See Instructions) Pector Full name of contributor Meltzer, Bradley Contributor address; City; State; Zip Code 11116 Schmidt Lane Manor, TX 78653 Pation / Job title (See Instructions) Full name of contributor Out-of-state PAC (ID Montributor / Out-of-state PAC (I	Employer (See Instruction McCabe Developmen #:	nt		\$100
Principal occup Managing Dir Date 10/20/2016 Principal occup Owner Date	Contributor address; City; State; Zip Code P.O. Box 5236 Austin, TX 78763 Pation / Job title (See Instructions) Pector Full name of contributor Meltzer, Bradley Contributor address; City; State; Zip Code 11116 Schmidt Lane Manor, TX 78653 Pation / Job title (See Instructions) Full name of contributor Moffatt, Susan Contributor address; City; State; Zip Code	Employer (See Instruction McCabe Developmen #:	nt		\$100
Principal occup Managing Dir Date 10/20/2016 Principal occup Owner Date	Contributor address; City; State; Zip Code P.O. Box 5236 Austin, TX 78763 Pation / Job title (See Instructions) Pector Full name of contributor Meltzer, Bradley Contributor address; City; State; Zip Code 11116 Schmidt Lane Manor, TX 78653 Pation / Job title (See Instructions) Full name of contributor Out-of-state PAC (ID Montributor / Out-of-state PAC (I	Employer (See Instruction McCabe Developmen #:	nt		\$100
Principal occup Managing Dir Date 10/20/2016 Principal occup Owner Date	Contributor address; City; State; Zip Code P.O. Box 5236 Austin, TX 78763 Pation / Job title (See Instructions) Pector Full name of contributor Meltzer, Bradley Contributor address; City; State; Zip Code 11116 Schmidt Lane Manor, TX 78653 Pation / Job title (See Instructions) Full name of contributor Moffatt, Susan Contributor address; City; State; Zip Code 4112 Speedway	Employer (See Instruction McCabe Developmen #:	nt		
Principal occup Managing Dir Date 10/20/2016 Principal occup Owner Date 10/23/2016	Contributor address; City; State; Zip Code P.O. Box 5236 Austin, TX 78763 Pation / Job title (See Instructions) Pector Full name of contributor Meltzer, Bradley Contributor address; City; State; Zip Code 11116 Schmidt Lane Manor, TX 78653 Pation / Job title (See Instructions) Full name of contributor Moffatt, Susan Contributor address; City; State; Zip Code	Employer (See Instruction McCabe Developmen #:	ons)	Amount of Contribution (\$)	\$100

MONE	TARY POLITICAL C	ONTRIBUTIO	INS		SCHEDU	LE A1
The Instru	uction Guide explains how t	o complete this fo	orm.	1	Total pages Schedule A1: Sch: 7/10 Rpt: 10/26	
2 FILER NAME Mathias, Ja				3	Filer ID	
4 Date 10/13/2016	5 Full name of contributor	e; Zip Code)	7	Amount of Contribution (\$)	\$1,000.00
8 Principal occi	upation / Job title (See Instructions)		9 Employer (See Instructions Austin Tennis Academy)		
Date 10/14/2016		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,)		Amount of Contribution (\$)	\$25.00
Principal occi	upation / Job title (See Instructions)		Employer (See Instructions)		
Date 10/29/2016	Full name of contributor Pina, Mary Lou Contributor address; City; State	out-of-state PAC (ID#:_ e; Zip Code)		Amount of Contribution (\$)	\$100.00
	1129 Map Street Austin, TX 78721					
Principal occu Retired	upation / Job title (See Instructions)		Employer (See Instructions)		
Date 10/19/2016	Full name of contributor Puente, Sebastian Contributor address; City; State 106 Timpanagos	out-of-state PAC (ID#:		•	Amount of Contribution (\$)	\$50.00
	Austin, TX 78734					
Principal occu	upation / Job title (See Instructions)		Employer (See Instructions) Cultural Strategies, Inc.)		
Date 10/29/2016	Full name of contributor Quintero, Mary Helen Contributor address; City; State 11700 Long Rifle Cove Austin, TX 78754	out-of-state PAC (ID#: e; Zip Code			Amount of Contribution (\$)	\$50.00
Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions)			

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 8/10 Rpt: 11/26 3 Filer ID 2 FILER NAME Mathias, Jayme 7 Amount of Contribution (\$) 4 Date 5 Full name of contributor out-of-state PAC (ID#; \$75.00 10/29/2016 Quintero, Sandra C. 6 Contributor address; City; State; Zip Code 11700 Long Rifle Cove Austin, TX 78754 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Administrative Assistant Texas Medical Board out-of-state PAC (ID#;_ Amount of Contribution (\$) Full name of contributor \$100.00 10/22/2016 Radwanski, Wayne (Dr.) Contributor address; City; State; Zip Code 4502 Bunny Run Austin, TX 78746 Principal occupation / Job title (See Instructions) Employer (See Instructions) South Austin Dental Dentist Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#:_ \$500.00 10/20/2016 Reese, Donald Contributor address; City; State; Zip Code 2914 Regents Park Austin, TX 78746 Principal occupation / Job title (See Instructions) Employer (See Instructions) Riverside Resources Investor out-of-state PAC (ID#: Amount of Contribution (\$) Full name of contributor Date \$40.00 10/27/2016 Renteria, Solana Contributor address; City; State; Zip Code 1601 E. 5th Street, #111 Austin, TX 78702 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 10/14/2016 \$100.00 Ruiz, Buddy Contributor address; City; State; Zip Code 807 Sirroco Austin, TX 78745 Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired

MONETA	RY POLITICAL CONTRIBUTIO	N	S		SCHEDULE	A1
The Instruction	on Guide explains how to complete this fo	orn	n.	1.	Total pages Schedule A1: Sch: 9/10 Rpt: 12/26	
FILER NAME				3	Filer ID	
Mathias, Jayme	9					
10/17/2016	Full name of contributor			7	Amount of Contribution (\$)	\$50.00
	Kyle, TX 78640	10	Employer (See Instructions	=) -		
Principal occupa Teacher	tion / Job title (See Instructions)	9	Pflugerville ISD	> <i>)</i>		
Date 10/27/2016	Full name of contributor out-of-state PAC (ID#: Santos, Alfredo Contributor address; City; State; Zip Code P.O. Box 19457				Amount of Contribution (\$)	\$50.00
	Austin, TX 78760	Т	Employer (See Instruction	L. is)		
Principal occupa	ation / Job title (See Instructions)		La Voz Newspapers			
Date 10/28/2016	Full name of contributor out-of-state PAC (IDIE: Smith, Margaret Contributor address; City; State; Zip Code 3645 Newport Bay Drive				Amount of Contribution (\$)	\$25.0
Principal occup	Alpharetta, GA 30005 ation / Job title (See Instructions)	7	Employer (See Instruction	ns)		·
Date 10/18/2016	Full name of contributor Out-of-state PAC (ID# Valdes, Cristina Contributor address; City; State; Zip Code 902 E. 2nd Street Austin, TX 78702				Amount of Contribution (\$)	\$100.0
Principal occur	nation / Job title (See Instructions)	T	Employer (See Instruction	ns)		_
Broker Assoc		1	Realty Austin			
Date 10/18/2016	Full name of contributor out-of-state PAC (ID: Weiner, David Contributor address; City; State; Zip Code 8402 Appalachian Drive Austin, TX 78759				Amount of Contribution (\$)	\$25.6
Principal occup	pation / Job title (See Instructions)		Employer (See Instruction	ons)	
						n V1.0.1

	MONETARY POLITICAL CONTRIBUTIONS			SCHEDULE A1
F	The Instru	ction Guide explains how to comp	olete this form.	1 Total pages Schedule A1: Sch: 10/10 Rpt: 13/26
2	FILER NAME Mathias, Jay			3 Filer ID
4	Date 10/13/2016	Yorke, Jane (Dr.) 6 Contributor address; City; State; Zip Cor	de	7 Amount of Contribution (\$) \$50.00
		11906 Loomis Drive Austin, TX 78738		
8		pation / Job title (See Instructions)	9 Employer (See Instruction	
	Psychothera	pist	Austin Behavioral Heal	th Center

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	L.	S	CHEDULE A2
The Instruction Guide explains how to complete this f	orm.	1 Total pages Schedule / Sch: 1/1 Rpt: 14/26	A2:
2 FILER NAME Mathias, Jayme		3 Filer ID	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIB	UTIONS	\$	
5 Date 10/24/2016 South Austin Democrats 7 Contributor address; City; State; Zip Code P.O. Box 152592		8 Amount of 9 in-4 contribution (\$) des \$304.00 Mailer	cind contribution cription
Austin, TX 78715		Check if travel outside of	Texas. Complete Schedule T.
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON	-JUDICIAL) (See instruction	ns)
12 Contributor's principal occupation (FOR JUDICIAL)	13 Contributor's job title	(FOR JUDICIAL) (See ins	ructions)
14 Contributor's employer/law firm (FOR JUDICIAL)	15 Law firm of contribute	or's spouse (if any) (FOR JU	IDICIAL)
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
			,

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Solicitation/Fundraising Expense

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Political Credit Card Payment	Committee	Fees Food/Beverage Expense Gitt/Awards/Memorials Expense Legal Services The Instruction Guide explains	Polling Expense Printing Expens Salaries/Wages	e /Contract Labor	Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2 FILER NAM				3 Filer ID
_	Sch: 1/12 Rpt: 15/26	Mathias, Ja				
4		5 Payee name				
4	Date '	DonateWa				
•		7 Payee addre		e; Zip Code		
ט	Amount (\$) \$5.30	P.O. Box 3		, <u>-</u> ,-		
		Austin, TX		[/b)	Description	
8	PURPOSE OF EXPENDITURE		See Categories listed at the top of this so /Fundraising Expense	chedule) (U)		outside of Texas. Complete Schedule T. TX, officeholder living expense SETVICE
9	Complete ONLY if direct expenditure to benefit C/Ol		ficeholder name	Office sought		Office held
F	Date	Payee nam				
	10/13/2016	DonateWa	у			
	Amount (\$)	Payee addr	ess; City; Stat	e; Zip Code		
E	\$56.22	P.O. Box 3 Austin, TX				
_				(h)	Description	
	PURPOSE OF EXPENDITURE		see Categories listed at the top of this s n/Fundraising Expense	chedule)	Check if travel	outside of Texas. Complete Schedule T. ,TX, officeholder living expense SEIVICE
_	Complete ONLY if direct expenditure to benefit C/O		fficeholder name	Office sought		Office held
Г	Date	Payee nam	e			
	10/14/2016	DonateWa	ay			
	Amount (\$) \$5.30	Payee addi P.O. Box		te; Zip Code		
		Austin, TX	78703			
	PURPOSE OF EXPENDITURE		See Categories listed at the top of this on the send of this on the send of this send of the send of this send of the send of	schedule) (b)	L.—.I	outside of Texas. Complete Schedule T. n, TX, officeholder living expense
F	Complete ONLY if direct expenditure to benefit C/O		fficeholder name	Office sought		Office held

SCHEDULE F1

Advertising Expense

EXPENDITURE CATEGORIES FOR BOX 8(a) Loan Repayment/Reimbursement

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

Accounting/Banking Consulting Expense Contributions/ Donations Made By	Fees Food/Beverage Expense Gilt/Awards/Memorials Expense Committee Legal Services Finding Expense Printing Expense Fravel in District Travel in District Travel on District Travel out of District OTHER (enter a category not listed above)
Candidate/Officeholder/Political Credit Card Payment	The Instruction Guide explains how to complete this form.
Total pages Schedule F1:	2 FILER NAME 3 Filer ID
Sch: 2/12 Rpt: 16/26	Mathias, Jayme
	5 Payee name
10/17/2016	DonateWay
	7 Payee address; City; State; Zip Code
6 Amount (\$) \$11.22	P.O. Box 301267
ψ1 1 .22	1.0, 50% 00-220
	Austin, TX 78703
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Solicitation/Fundraising Expense Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
EXPENDITORE	Online giving service
	Candidate/Officeholder name Office sought Office held
 Complete <u>ONLY</u> if direct expenditure to benefit C/OF 	Caratatio Cities to the Caratage Carata
Date	Payee name
10/18/2016	DonateWay
Amount (\$)	Payee address; City; State; Zip Code
\$17.46	P.O. Box 301267
	Austin, TX 78703
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Solicitation/Fundraising Expense Check if travel outside of Texas, Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	Online giving service
	Condidate/Officeholder name Office sought Office held
Complete ONLY if direct	Calididate/Officerolder frame
expenditure to benefit C/OI	1
Date	Payee name
10/19/2016	DonateWay
Amount (\$)	Payee address; City; State; Zip Code
\$8.10	P.O. Box 301267
	Austin, TX 78703
PURPOSE OF	Calcitation/Cundraising Evnense Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	SOlicitation (Prunting alsing Expense Check if Auslin, TX, officeholder living expense
	Online giving service
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	Н
	Varsion V1 0.1

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee

EXPENDITURE CATEGORIES FOR BOX 8(a) Loan Repayment/Reimbursement Event Expense Fees

Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

Food/Beverage Expense Gilt/Awards/Memorials Expense Legal Services OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. 1 Total pages Schedule F1: FILER NAME 3 Filer ID Sch: 3/12 Rpt: 17/26 Mathias, Jayme 4 Date Payee name 10/20/2016 DonateWay Amount (\$) Payee address; City; State; Zip Code \$25.30 P.O. Box 301267 Austin, TX 78703 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Solicitation/Fundraising Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Online giving service Office sought Complete ONLY if direct Candidate/Officeholder name Office held expenditure to benefit C/OH Date Payee name 10/23/2016 DonateWay Payee address; City; Amount (\$) State; Zip Code \$2.80 P.O. Box 301267 Austin, TX 78703 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Solicitation/Fundraising Expense Check if travel outside of Texas, Complete Schedule T. **EXPENDITURE** Check if Austin, TX, officeholder living expense Online giving service Complete ONLY if direct Candidate/Officeholder name Office held Office sought expenditure to benefit C/OH Date Payee name 10/26/2016 DonateWay Amount (\$) Payee address; City; State; Zip Code \$5.30 P.O. Box 301267 Austin, TX 78703 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas. Complete Schedule T. Solicitation/Fundraising Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Online giving service Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense

EXPENDITURE CATEGORIES FOR BOX 8(a) Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

Candidate/Officeholder/Political Credit Card Payment	y - Gill/Awards/Memorials Expense Printing Expense - Traver Out or District Salaries/Wages/Contract Labor OTHER (enter a category not listed above)
	The Instruction Guide explains how to complete this form.
Total pages Schedule F1:	2 FILER NAME 3 Filer ID
Sch: 4/12 Rpt: 18/26	Mathias, Jayme
Date	5 Payee name
10/29/2016	DonateWay
	7 Payee address; City; State; Zip Code
Amount (\$) \$5.30	P.O. Box 301267
Ψ3.50	
	Austin, TX 78703
	(b) Description
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Clieck if Adami, 177 emerce
	Online giving service
	Office hold
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	OH
Date	Payee name
10/28/2016	DonateWay
<u></u>	Payee address; City; State; Zip Code
Amount (\$) \$2.86	
\$2.60	, , o. box 66123.
	1 274 70700
	Austin, TX 78703
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas, Complete Schedule T.
OF EXPENDITURE	Solicitation/Fundraising Expense Check if Austin, TX, officeholder living expense
LM ENDITORIE	Online giving service
04 H 34 15 - 15	Candidate/Officeholder name Office sought Office held
Complete ONLY if direct expenditure to benefit C/C	
Date	Payee name
10/29/2016	DonateWay
Amount (\$)	Payee address; City; State; Zip Code
\$10.30	P.O. Box 301267
	Austin, TX 78703
DUDDOSE	(b) Description
PURPOSE	Check II Eaver ducided of rexus. Compress
OF	Check ii Addulf, (A) omadioses and
OF EXPENDITURE	Online giving service
EXPENDITURE Complete ONLY if direct	ct Candidate/Officeholder name Office sought Office held
	ct Candidate/Officeholder name Office sought Office held
EXPENDITURE Complete ONLY if direct	ct Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Political Credit Card Payment	Committee Legal Services Salanes/Wages/Contract Labor OTHER (erter a category not instead dataset)
	<u> </u>	The Instruction Guide explains how to complete this form. 3 Filer ID
1	Total pages Schedule F1:	2 FILER WOME
	Sch: 5/12 Rpt: 19/26	Mathias, Jayme
4	Date	5 Payee name
	10/19/2016	Four Seasons Hotel
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$12.00	98 San Jacinto Boulevard Austin, TX 78701
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Event Expense Check it travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Parking for AVANCE fundraising luncheon
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	10/11/2016	Friends of the MACC
	Amount (\$)	Payee address; City; State; Zip Code
	\$50.00	600 River Street
	 "ე	OOO MACE GARGE
		Austin, TX 78701
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	EXPENDITORE	Candidate/Officeholder/Political Committee
		Spoilsoishiip of Dia de la Naza celebration
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	10/11/2016	H-E-B
-		Payee address; City; State; Zip Code
	Amount (\$) \$36.47	2701 E. 7th Street
	Ф30,41	2701 E. 7th 3000
ĺ		
		Austin, TX 78702
	PURPOSE	(a) Category (See Calegories listed at the top of this schedule) (b) Description
l	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T. Check if Austlin, TX, officeholder living expense
	EXPENDITORE	Food & drink for school tour & community
		conversation
I		
Г	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
•	expenditure to benefit C/O	TI
\vdash		

SCHEDULE F1

Advertising Expense Accounting/Banking

Event Expense Fees

EXPENDITURE CATEGORIES FOR BOX 8(a) Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Political Credit Card Payment	- Committee	Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide ex	Printing Salarie	_	e /Contract Labor	Travel Out of District OTHER (enter a category not listed abou	ve)
				VIANIS NOW 10		co tino totim	3 Filer ID	
1	Total pages Schedule F1: Sch: 6/12 Rpt: 20/26	2 FILER NAM Mathias, Ja					is that in	
_	· · · · · · · · · · · · · · · · · · ·						L	
4	5	· -y · · ·	,					
	10/16/2016	H-E-B 		<u> </u>				
6	Amount (\$)	7 Payee addre	-	State; Zip	ode			
	\$137.20	2701 E. 7t	1 Street					
		Austin, TX	78702					
8	PURPOSE	(a) Category	See Categories listed at the top of	this schedule)	(b)	Description		
	OF	Event Exp	=				outside of Texas. Complete Schedule T.	
	EXPENDITURE	,					n, TX, officeholder living expense	
						COnversation	for school tour & community , and for wine & cheese recepti	ion
						CONVENSATION		
9	Complete ONLY if direct		ficeholder name	Office s	ought		Office held	
	expenditure to benefit C/O	1				·		
	Date	Payee nam	9					
	10/24/2016	H-E-B						
	Amount (\$)	Payee addr	ess; Çity;	State; Zip	Code			
	\$38.71	2701 E. 7th Street						
	φουτε		****					
		Annain Th	70703					
L.		Austin, TX	10102		1.2			
	PURPOSE	(a) Category	See Categories listed at the top o	f this schedule)	(b)	Description	Loutside of Texas. Complete Schedule T.	
	OF EXPENDITURE	Event Exp	ense				n, TX, officeholder living expense	
	E/11 E/12/1 9/12						for school tour & community	
						conversation		
		0	fficeholder name	Office s	- Lought		Office held	
	Complete ONLY if direct expenditure to benefit C/O		incentiuer name	Office :	Jougnit		**************************************	
						· · · · · · · · · · · · · · · · · · ·		
	Date	Payee nam	е					
ĺ	10/26/2016	H-E-B						
	Amount (\$)	Payee add	ress; City;	State; Zip	Code			
	\$17.24	2701 E. 7	th Street					
		Austin, T>	(78702					
ldash		<u> </u>			(P)	Description		
	PURPOSE OF	1	(See Categories listed at the top o	ot this schedule)	(3)		el outside of Texas. Complete Schedule T.	
	EXPENDITURE	Event Exp	ense			ш	in, TX, officeholder living expense	
l							k for school tour & community	
						conversatio	n	
\vdash	Complete ONLY if direct	Candidate/C	ifficeholder name	Office	t_sought		Office held	
	expenditure to benefit C/O	Н	THE WATER PROPERTY.		J			
<u></u>			<u> </u>			 ,		
								V/1 O 1

POLITICAL EXPENDITURES FROM POLITICAL SCHEDULE F1 CONTRIBUTIONS **EXPENDITURE CATEGORIES FOR BOX 8(a)** Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Accounting/banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Political Committee Credit Card Payment Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Polling Expense Printing Expense Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME 3 Filer ID Sch: 7/12 Rpt: 21/26 Mathias, Jayme 4 Date Payee name 10/19/2016 La Placita 6 Amount (\$) Payee address; City; State; Zip Code \$11.74 5310 S. Pleasant Valley Road Austin, TX 78744 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas, Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Auslin, TX, officeholder fiving expense Breakfast with constituent Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 10/11/2016 Lozano, Carlos Amount (\$) Payee address; City; State; Zip Code \$65.00 10716 Sierra Oaks Austin, TX 78759 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedute T, **Event Expense** EXPENDITURE Check if Austin, TX, officeholder living expense Photography Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 10/25/2016 Lozano, Carlos Amount (\$) Payee address; City; State; Zip Code \$75.00 10716 Sierra Oaks Austin, TX 78759 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Event Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Photography Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Accounting/Barking Accounting/Barking Consulting Expense Contributions/ Donations Made E Candidate/Officeholder/Politic	al Committee Legal Services	Loan Repayment/Reimi Ollice Overhead/Remai Polling Expense xpense Prining Expense Salaries/Wages/Contra- de explains how to complete this	Expense Transportation Equipment & Related Expense Travel in District Travel Out of District tt Labor OTHER (enter a category not listed above)		
1 Total pages Schedule F1:			3 Filer ID		
Sch: 8/12 Rpt: 22/26	Mathias, Jayme		3 Tites to		
4 Date	5 Payee name				
10/27/2016	Lozano, Carlos				
6 Amount (\$) \$75.00	7 Payee address; City; 10716 Sierra Oaks Austin, TX 78759	State; Zip Code			
8 PURPOSE		[03 -			
OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Photography				
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name	Office sought	Office held		
Date	Payee name				
10/14/2016	Mail Chimp				
Amount (\$)	Payee address; City;	State; Zip Code			
\$50.00	675 Ponce de Leon Ave NE, 3 Atlanta, GA 30308	Suite 5000			
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the t Solicitation/Fundraising Exper	nse Cha	iption ck if travel outside of Texas. Complete Schedule T. ck if Austin, TX, officeholder living expense e Solicitation platform		
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name	Office sought	Office held		
Date 10/29/2016	Payee name Mathias, Jayme (The Honorab				
Amount (\$) \$500.58	Payee address; City; P.O. Box 2386 Austin, TX 78768	State; Zip Code			
PURPOSE	(a) Category (See Categories listed at the to	op of this schedule) (b) Descri	ntion		
OF EXPENDITURE	Travel In District	Che	priori ck if travel outside of Texas, Complete Schedule T. ck if Austin, TX, officeholder living expense DURSEMENT for 927 miles		
Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name	Office sought	Office held		

SCHEDULE F1

Event Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Advertising Expense Accounting/Banking Consulting Expense r-ees Food/Beverage Expense Gill/Awards/Memorials Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Credit Card Payment Printing Expense Salaries/Wages/Contract Labor Travel Out of District
OTHER (enter a category not listed above) Legal Services The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME 3 Filer ID Sch: 9/12 Rpt: 23/26 Mathias, Jayme 4 Date Payee name 10/14/2016 Office Depot Amount (\$) Payee address; City; State; Zip Code \$25,97 907 W. 5th Street Austin, TX 78703 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if Iravel outside of Texas. Complete Schedule T. Solicitation/Fundraising Expense EXPENDITURE Check if Auslin, TX, officeholder living expense Supplies for fundraising appeal Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 10/14/2016 Office Depot Amount (\$) Payee address; City; State; Zip Code \$60.59 907 W. 5th Street Austin, TX 78703 PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedute T. Solicitation/Fundraising Expense EXPENDITURE Check if Austin, TX, officeholder living expense Supplies for fundraising appeal Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 10/14/2016 Office Depot Amount (\$) Payee address; City; State; Zip Code \$28.57 907 W. 5th Street Austin, TX 78703 PURPOSE (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Solicitation/Fundraising Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Supplies for fundraising appeal Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense

Event Expense

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic		Polling Expense	e	ransportation Equipment & Related Expense ravel in District avel Out of District THER (enter a category not listed above)			
Credit Card Payment	The Instruction Guide e	explains how to comple	te this form.				
1 Total pages Schedule F1:	2 FILER NAME		3	Filer ID			
Sch: 10/12 Rpt: 24/26	Mathias, Jayme						
4 Date	5 Payee name						
10/15/2016	Radio Coffee & Beer						
6 Amount (\$)	7 Payee address; City;	State; Zip Code					
\$13.25	4204 Manchaca Road	otato, zip oodo					
<i>φ</i> σσ	120 i Marioridada (1884)						
	Augtin TV 79704						
	Austin, TX 78704						
8 PURPOSE OF	(a) Category (See Categories listed at the top	of this schedule) (b)	Description				
EXPENDITURE	Event Expense		ht	ide of Texas. Compfele Schedule T. , officeholder living expense			
			_	' block walking event			
			r ood & drillik loi	block walking event			
9 Complete ONLY if direct	Candidate/Officeholder name	Office cought		Office held			
expenditure to benefit C/O		Office sought		Office held			
Date	Payee name						
10/27/2016	Takoba						
Amount (\$)	Payee address; City;	State; Zip Code					
\$60.00	1411 E. 7th Street						
	Austin, TX 78702						
PURPOSE	(a) Category (See Categories listed at the top of	(b)	Description				
OF	Event Expense	or this schedule)	Check if Iravel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder [iving expense				
EXPENDITURE	LVOIR EXPONSO						
			Public Education	n Advocate Olympics			
Complete ONLY if direct	Candidate/Officeholder name	Office sought		Office held			
expenditure to benefit C/OI	H						
Date	Payee name						
10/16/2016	Tovar, Vincent						
		Ctatal Zin Cada	·····				
Amount (\$)	Payee address; City;	State; Zip Code					
\$800.00	6207 Mayhall Drive						
	Austin, TX 78721						
PURPOSE	(a) Category (See Categories listed at the top of	of this schedule) (b)	Description				
OF EXPENDITURE	Consulting Expense			de of Texas, Complete Schedule T.			
		[officeholder living expense			
		'	Campaign consu	litant			
Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name	Office sought		Office held			
OAPORGING TO DELICITE OF OF	1						

SCHEDULE F1

	EXPENDITURE CATEGORIES FOR BOX 8(a)						
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made t Candidate/Officeholder/Politic Credit Card Payment	Event Expense Loan Repayment/Reimbursement Solicitation/Fundraising Expense Fees Office Overhead/Rental Expense Transportation Equipment & Related Expense Food/Beverage Expense Polling Expense Travel in District By - GilfMayards/Memorials Expense Polling Expense Travel in District Travel Out of District						
1 Total pages Schedule F1:							
Sch: 11/12 Rpt: 25/26	Mathias, Jayme						
4 Date 10/19/2016	5 Payee name Twice the Ice						
6 Amount (\$) \$1.75	7 Payee address; City; State; Zip Code 626 Pedernales Street Austin, TX 78702						
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense ice						
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H						
Date	Payee name						
10/14/2016	U.S. Postmaster						
Amount (\$) Payee address; City; State; Zip Code \$155.10 823 Congress Avenue							
	Austin, TX 78701						
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense (b) Description Check if Iravel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Postage						
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held						
Date	Payee name						
10/12/2016	Worley Printing						
Amount (\$)							
\$211.09	Payee address; City; State; Zip Code 3217 N. Interstate 35 Frontage Road						
4	Austin, TX 78722						
PURPOSE OF EXPENDITURE	(a) Category (see Categories listed at the top of this schedule) Printing Expense Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Printing of pushcards						
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held						

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politica Credit Card Payment	iy - al C	ommittee	Event Expense Fees Food/Beverage E Gift/Awards/Mem Legal Services The Instruction	expense orials Expense on Guide explains	Office Overl Polling Expe Printing Exp Salaries/Wa	ense ges/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
Total pages Schedule F1:	2	FILER NAM		- Colde explains	THOIV TO COM	piete mis fomi.	12	Filer ID
Sch: 12/12 Rpt: 26/26							ľ	FILES ID
Date 10/20/2016	5	-			··· ··· ···		1	
Amount (\$) \$217.58		3217 N. In Austin, TX	terstate 35 Fr 78722	ontage Road				
OF EXPENDITURE		Printing Ex	rpense		nedule)	Check if travel	n, TX,	ide of Texas. Complete Schedule T. officeholder living expense ly Signs
Complete ONLY if direct expenditure to benefit C/OF	- (-	Candidate/Off	ficeholder name		Office sough	t		Office held
	Sch: 12/12 Rpt: 26/26 Date 10/20/2016 Amount (\$) \$217.58 PURPOSE OF EXPENDITURE Complete ONLY if direct	Date 5 10/20/2016 7 Amount (\$) 7 \$217.58 PURPOSE OF EXPENDITURE (a)	Sch: 12/12 Rpt: 26/26 Mathias, J Date 5 Payee nam Worley Pri Amount (\$) 7 Payee addr 3217 N. In Austin, TX PURPOSE OF EXPENDITURE (a) Category (c) Printing Ex	Sch: 12/12 Rpt: 26/26 Mathias, Jayme Date 5 Payee name Worley Printing Amount (\$) 7 Payee address; City; 3217 N. Interstate 35 From Austin, TX 78722 PURPOSE OF EXPENDITURE (a) Category (See Categories listed Printing Expense) Complete ONLY if direct Candidate/Officeholder name	Sch: 12/12 Rpt: 26/26	Sch: 12/12 Rpt: 26/26	Sch: 12/12 Rpt: 26/26	Sch: 12/12 Rpt: 26/26