		e-mailed 7-18	-16 h	
		E / OFFICEHOLDER I FINANCE REPORT	- 16 ARIS SIRI	FORM C/OH COVER SHEET PG 1
T	he C/OH Instruction C	Guide explains how to complete this form.) ,	2 Total pages filed: 21
3	CANDIDATE / OFFICEHOLDER NAME	MS/MRS/MR FIRST Jayme	MI	OFFICE USE ONLY Date Received
		NICKNAME LAST Mathias	SUFFIX	
4	CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY; PO Box 2386	ZIP CODE	Date Hand-delivered or Date Postmarked Receipt # Amount
	Change of Address	Austin, TX 78768	·	Date Imaged
5	CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST Hon. Sabino	Mi	
		NICKNAME LAST "Pio" Renteria	SUFFIX	
6	CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE 1511 Haskell St., Austin, TX 78702	#; CITY;	STATE; ZIP CODE
7	CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (512) 478-6770		
В	REPORT TYPE	January 15 30th day before election Runoff X July 15 8th day before election Exceeded	\$500 limit	15th day after campaign treasurer appointment (officeholder only) Final Report (Attach C/OH-FR)
9	PERIOD COVERED	Month Day Year Mo 01/01/2016 THROUGH	onth Day 06/30/2016	Year 3
LO	ELECTION	Month Day Year Primary Rur	FION TYPE	Other
1.1	OFFICE	` ''	ICE SOUGHT stee Place 2 [(if known) District Austin ISD
		GO TO PAGE 2		

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CANDIDATE / OFFICEHOLDER REPORT:

FORM C/OH COVER SHEET PG 2

SUPPORT	& IUIALS				2 of 21
13 C / OH NAME	Mathias, Jayme		14 Filer ID		
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expendite These expenditures may have been made without d officeholders are required to report this informatio	the candidate's or office	eholder's know	ledge or
Additional Pages	COMMITTEE TYPE GENERAL	COMMITTEE NAME			
	SPECIFIC	COMMITTEE ADDRESS			
		COMMITTEE CAMPAIGN TREASURER NAME			
		COMMITTEE CAMPAIGN TREASURER ADDRES	ss		
16 CONTRIBUTION	1. TOTAL POLITIO	AL CONTRIBUTIONS OF \$50 OR LESS (OTHER	THAN PLEDGES		
TOTALS	LOANS, OR GU	ARANTEES OF LOANS), UNLESS ITEMIZED		\$	0.00
	(OTHER THAN	CAL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS		\$	2,085.00
EXPENDITURE TOTALS	3. TOTAL POLITIC	AL EXPENDITURES OF \$100 OR LESS, UNLESS	3 ITEMIZED	\$	0.00
	4. TOTAL POLITIC	CAL EXPENDITURES		\$	2,390.09
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE L RIOD	AST DAY OF THE	\$	1,185.73
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	PAL AMOUNT OF ALL OUTSTANDING LOANS AS ETING PERIOD	OF THE LAST DAY	\$	2,000.00
17 AFFADAVIT		I swear, or affirm, under penalt	ty of pegiury, that the ac	companying re	port is
	STEFAN GILL Notary Public	true and correct and includes a under Title 15, Election Code.	ill information required to	o be reported t	by me
	STATE OF TEXAS ID#12903482-9 My Comm. Exp. Aug. 25, 20 TARY STAMP / SEAL AB	OVE	f Candidate or Officehol		
Sworn to and subso	cribed before me, by the s	aid Affine Lee Ma (1 a.5 ertify which, witness my hand and seal of office.	, this the	!	day
Signature of office	cer adin/hiskering	Printed frame of officer administering	Title of officer	administering	oath

FORM C/OH **SUBTOTALS - C/OH COVER SHEET PG 3** 3 of 21 19 Filer ID **18 FILER NAME** Mathias, Jayme 20 SCHEDULE SUBTOTALS SUBTOTAL AMOUNT NAME OF SCHEDULE SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS \$ 2,085.00 Х 1. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS \$ \$ SCHEDULE B: PLEDGED CONTRIBUTIONS 3. \$ 2,000.00 SCHEDULE E: LOANS 4. Х SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS 2,390.09 \$ 5. Х SCHEDULE F2: UNPAID INCURRED OBLIGATIONS \$ 6. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS \$ 7. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD \$ 8. SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS \$ SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH \$ SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS 1,050.00 \$ 11. Х SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED \$ 12.

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 1/6 Rpt: 4/21 3 Filer ID FILER NAME Mathias, Jayme 7 Amount of Contribution (\$) 5 Full name of contributor ut-of-state PAC (ID#: Date \$50.00 02/11/2016 Brady, Jim 6 Contributor address; City; State; Zip Code 12010 Carmel Park Lane Austin, TX 78727 9 Employer (See Instructions) Principal occupation / Job title (See Instructions) Amount of Contribution (\$) out-of-state PAC (ID#:_ Date Full name of contributor \$50.00 02/23/2016 Brewster, Marc Contributor address; City; State; Zip Code 1103 Ridgecrest Drive Austin, TX 78746 Employer (See Instructions) Principal occupation / Job title (See Instructions) Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#:_ \$50.00 02/11/2016 Castro, Elaine Contributor address; City; State; Zip Code 8604 Thaxton Rd. Austin, TX 78747 Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of Contribution (\$) out-of-state PAC (ID#: Full name of contributor Date \$100.00 02/09/2016 Chanpheng, Nu Contributor address; City; State; Zip Code 7721 Arbor Ridge Ct. Austin, TX 78744 Employer (See Instructions) Principal occupation / Job title (See Instructions) Amount of Contribution (\$) Full name of contributor out-of-state PAC (ID#; Date \$50.00 02/12/2016 Elisabeth, Adams Contributor address; City; State; Zip Code 1904 Wayward Sun Drive Austin, TX 78754 Employer (See Instructions) Principal occupation / Job title (See Instructions) J.L. Powers & Associates Consultant

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 2/6 Rpt: 5/21 FILER NAME Filer ID Mathias, Jayme 7 Amount of Contribution (\$) Date 5 Full name of contributor out-of-state PAC (ID#: 02/12/2016 \$75.00 Everitt, Patti 6 Contributor address; City; State; Zip Code 4007 Crescent Drive Austin, TX 78722 Principal occupation / Job title (See Instructions) Employer (See Instructions) Consultant Self-Employed Date Full name of contributor out-of-state PAC (ID#:_ Amount of Contribution (\$) \$100.00 02/02/2016 Fraiser, Margo (The Honorable) Contributor address; City; State; Zip Code 5408 Avenue F Austin, TX 78751 Employer (See Instructions) Principal occupation / Job title (See Instructions) Police Monitor City of Austin Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: 02/12/2016 Garcia Esq., Alberto \$50.00 Contributor address; City; State; Zip Code 1715 S. 1st Street Austin, TX 78704 Principal occupation / Job title (See Instructions) Employer (See Instructions) Attorney Self Employed Date Amount of Contribution (\$) Full name of contributor out-of-state PAC (ID#: 02/12/2016 \$50.00 Guerra, Irene Contributor address; City; State; Zip Code 712 Huntland Austin, TX 78752 Employer (See Instructions) Principal occupation / Job title (See Instructions) Retired Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: \$100.00 02/11/2016 Hagar, Carol Contributor address; City; State; Zip Code 7701 Rialto #1321 Austin, TX 78735 Principal occupation / 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: 3/6 Rpt: 6/21 3 Filer ID FILER NAME Mathias, Jayme 7 Amount of Contribution (\$) out-of-state PAC (ID#: 5 Full name of contributor Date \$50.00 02/11/2016 Hagey, Donna 6 Contributor address; City; State; Zip Code 3906 Cherrywood Austin, TX 78721 9 Employer (See Instructions) 8 Principal occupation / Job title (See Instructions) Amount of Contribution (\$) out-of-state PAC (ID#: Date Full name of contributor \$10.00 01/29/2016 Jayme, Mathias (The Honorable) Contributor address; City; State; Zip Code 1612 Garden Street Austin, TX 78702 Employer (See Instructions) Principal occupation / Job title (See Instructions) Holy Family American Catholic Church Pastor Amount of Contribution (\$) Full name of contributor out-of-state PAC (ID#:_ Date \$60.00 02/12/2016 Jim, Powers (The Honorable) Contributor address; City; State; Zip Code 1280 Drifting Wind Run Dripping Springs, TX 78620 Employer (See Instructions) Principal occupation / Job title (See Instructions) J.L. Powers & Associates Principal Amount of Contribution (\$) out-of-state PAC (ID#:_ Full name of contributor Date \$75.00 02/12/2016 Jimenez, Manuel Contributor address; City; State; Zip Code 7516 Cedar Edge Drive Austin, TX 78744 Employer (See Instructions) Principal occupation / Job title (See Instructions) Travis County (Texas) Deputy Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#:_ \$100.00 04/06/2016 Littlefield, Mark Contributor address; City; State; Zip Code 7906 Henry Kinney Row Austin, TX 78749 Employer (See Instructions) Principal occupation / Job title (See Instructions) Littlefield Consulting Consultant

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 4/6 Rpt: 7/21 FILER NAME Filer ID Mathias, Jayme Date 5 Full name of contributor 7 Amount of Contribution (\$) out-of-state PAC (ID#; 02/12/2016 Lloyd, Doggett (Rep.) \$195.00 6 Contributor address; City; State; Zip Code 217 W Travis Street San Antonio, TX 78205 Principal occupation / Job title (See Instructions) Employer (See Instructions) Congressman U.S. House of Representatives Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: \$75.00 02/15/2016 Lopez, Robert Contributor address; City; State; Zip Code 237 W Travis Ste. 201 San Antonio, TX 78205 Principal occupation / Job title (See Instructions) Employer (See Instructions) Principal Lopez Salas Architects, Inc. Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: 02/12/2016 \$50.00 Lovett, James Contributor address; City; State; Zip Code 2930 E. 12th Street, Unit C Austin, TX 78702 Principal occupation / Job title (See Instructions) Employer (See Instructions) Consultant J.L. Powers & Associates Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 04/12/2016 Luke, Muszkiewicz \$50.00 Contributor address; City; State; Zip Code 1132 Lincoln St. Austin, TX 78702 Principal occupation / Job title (See Instructions) Employer (See Instructions) **Product Manager** Anderson ZurMuehlen Date ut-of-state PAC (ID#; Full name of contributor Amount of Contribution (\$) 04/05/2016 Mathias, Jayme (The Honorable) \$5.00 Contributor address; City; State; Zip Code 1612 Garden Street Austin, TX 78702 Principal occupation / Job title (See Instructions) **Employer (See Instructions)** Pastor Holy Family American Catholic Church

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MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 5/6 Rpt: 8/21 3 Filer ID FILER NAME Mathias, Jayme 7 Amount of Contribution (\$) out-of-state PAC (ID#:_ Date 5 Full name of contributor \$50.00 06/11/2016 Meza, Myrna 6 Contributor address; City; State; Zip Code 10920 Preston Trails Dr. Austin, TX 78747 9 Employer (See Instructions) 8 Principal occupation / Job title (See Instructions) Amount of Contribution (\$) Full name of contributor out-of-state PAC (iD#:_ Date \$1.00.00 Ramirez, Jill 04/17/2016 Contributor address; City; State; Zip Code 5309 Presidio Road Austin, TX 78745 Employer (See Instructions) Principal occupation / Job title (See Instructions) Latino Healthcare Forum CEO Amount of Contribution (\$) out-of-state PAC (ID#:_ Date Full name of contributor \$200.00 02/12/2016 Reves, John (The Honorable) Contributor address; City; State; Zip Code 1201 Plum Street Lockhart, TX 78644 Employer (See Instructions) Principal occupation / Job title (See Instructions) Austin ISD Teacher Amount of Contribution (\$) out-of-state PAC (ID#:_ Full name of contributor Date \$100.00 Reyes, Rob (The Honorable) 06/11/2016 Contributor address; City; State; Zip Code 3937 Octavia Drive Pflugerville, TX 78660 Employer (See Instructions) Principal occupation / Job title (See Instructions) J.L. Powers & Associates Sr. Consultant Amount of Contribution (\$) out-of-state PAC (ID#:_ Full name of contributor Date \$10.00 Spier, Stephen 05/28/2016 Contributor address; City; State; Zip Code 1225 Corona Drive Austin, TX 78723 Employer (See Instructions) Principal occupation / Job title (See Instructions) Self-Employed

	MONET	TARY POLITICAL CONTRIBUTION)NS		SCHEDUL	.E A1
	The Instru	uction Guide explains how to complete this f	iorm.	1	Total pages Schedule A1: Sch: 6/6 Rpt: 9/21	
2	FILER NAME Mathias, Jay			3	Filer ID	
4	Date 02/12/2016	 Fuil name of contributor		7	Amount of Contribution (\$)	\$75.00
8	Principal occu Financial Au	upation / Job title (See Instructions)	9 Employer (See Instructions Texas Education Comm		sion	
	Date 02/09/2016	Contributor address; City; State; Zip Code 2255 Bee Cave Rd. Ste. 610 Austin, TX 78746			Amount of Contribution (\$)	\$30.00
	Principal occur	upation / Job title (See Instructions)	Employer (See Instructions	s) _		
	Date 06/27/2016	Full name of contributor out-of-state PAC (ID#: Yorke, Jane Contributor address; City; State; Zip Code 11906 Loomis Drive Austin, TX 78738			Amount of Contribution (\$)	\$25.00
_	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 02/12/2016	Full name of contributor out-of-state PAC (ID#:_ Zamarripa, Hermelinda Contributor address; City; State; Zip Code 4811 Caswell Avenue Austin, TX 78751			Amount of Contribution (\$)	\$150.00
	Principal occup	upation / Job title (See Instructions) Liaison	Employer (See Instructions City of Austin	s)		

LOANS	SCHEDULE E
The Instruction Guide explains how to complete this form.	1 Total pages Schedule E: Sch: 1/1 Rpt: 10/21
2 FILER NAME Mathias, Jayme	3 Filer ID
TOTAL OF UNITEMIZED LOANS	\$
5 Date of loan 7 Name of lender	9 Loan Amount (\$) \$2,000.00
6 Is lender a financial institution? 8 Lender address; City; State; Zip Code 1612 Garden Street	10 Interest Rate
No Austin, TX 78702	11 Maturity Date
12 Principal occupation / Job title (See Instructions) 13 Employer (See Holy Family Pastor Holy Family	ee Instructions) ⁄ American Catholic Church
14 Description of Collateral15 Check if persX NoneX	onal funds were deposited into political account (See Instructions)
16 GUARANTOR INFORMATION 17 Name of guarantor	19 Amount Guaranteed (\$)
X not applicable 18 Guarantor address; City; State; Zip Code	
20 Principal occupation 21 Employer (Se	ee Instructions)

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Lahor

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)

	Credit Card Payment	The Instruction Guide explains how to complete	this form.
1	Total pages Schedule F1:		3 Filer ID
	Sch: 1/7 Rpt: 11/21	Mathias, Jayme	
4	Date	5 Payee name	
	06/09/2016	CheckMark Typesetting	
6	Amount (\$) \$190.51	7 Payee address; City; State; Zip Code 3217 N Interstate 35 Frontage Rd	
		Austin, TX 78722	
8	PURPOSE OF EXPENDITURE	Printing Expense	escription Check if travel outside of Yexas. Complete Schedule T. Check if Austin, TX, officeholder living expense ampaign Literature
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought H	Office held
	Date	Payee name	
	06/30/2016	Donate Way	
	Amount (\$) \$49.58	Payee address; City; State; Zip Code PO Box 301267 Austin, TX 78703	
H	PURPOSE		escription
	OF EXPENDITURE	Fees D	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense ConateWay.com Processing Fees (January 1, 2016 June 30, 2016)
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	01/20/2016	Gina Hinojosa Campaign	
	Amount (\$) \$50.00	Payee address; City; State; Zip Code 2120 South Lamar	
		Austin, TX 78704	
	PURPOSE OF EXPENDITURE	Donation	rescription Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Colitical Contribution
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought	Office held

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee Event Expense Food/Beverage Expense Gift/Awards/Memorials Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement 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

OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. 3 Filer ID 1 Total pages Schedule F1: FILER NAME Sch: 2/7 Rpt: 12/21 Mathias, Jayme 4 Date Payee name Gina Hinojosa Campaign 05/15/2016 State; Zip Code Payee address; City; 6 Amount (\$) \$25.00 2120 South Lamar Austin, TX 78704 (b) Description **PURPOSE** (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas. Complete Schedule T. Donation **EXPENDITURE** Check if Austin, TX, officeholder living expense Political Contribution Office held Candidate/Officeholder name Office sought Complete ONLY if direct expenditure to benefit C/OH Date Payee name The Rivas Group 01/08/2016 Payee address; City; State; Zip Code Amount (\$) PO BOX 40973 \$25.00 Austin, TX 78704 **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) Check if travel outside of Texas. Complete Schedule T. OF Advertising Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense **Constituent Communication Services** Office held Candidate/Officeholder name Office sought Complete ONLY if direct expenditure to benefit C/OH Date Payee name 06/25/2016 The Rivas Group State; Zip Code Amount (\$) Payee address; City; PO BOX 40973 \$25.00 Austin, TX 78704 (b) Description **PURPOSE** (a) Category (See Categories listed at the top of this schedule) Check if travel outside of Texas. Complete Schedule T. OF Advertising Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Constituent Communication Service Office held Office sought Complete ONLY if direct Candidate/Officeholder name expenditure to benefit C/OH

SCHEDULE F1

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

Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

Credit Card Payment The instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME 3 Filer ID Sch: 3/7 Rpt: 13/21 Mathias, Jayme 4 Date Payee name 01/25/2016 The Rivas Group 6 Amount (\$) Payee address; State; Zip Code City; PO BOX 40973 \$100.00 Austin, TX 78704 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Consulting Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Compliance Services Office held Complete ONLY if direct Candidate/Officeholder name Office sought expenditure to benefit C/OH Date Payee name 02/04/2016 The Rivas Group Payee address; Amount (\$) City; State; Zip Code \$25.00 PO BOX 40973 Austin, TX 78704 (b) Description **PURPOSE** (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas. Complete Schedule T. Advertising Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Constituent Communication Service Candidate/Officeholder name Complete ONLY if direct Office sought Office held expenditure to benefit C/OH Date Payee name 02/08/2016 The Rivas Group Amount (\$) Payee address; City; State; Zip Code \$25.00 PO BOX 40973

Constituent Communication Service

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

(b) Description

Check if travel outside of Texas. Complete Schedule T.

Check if Austin, TX, officeholder living expense

PURPOSE

OF

EXPENDITURE

Austin, TX 78704

Advertising Expense

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

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

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

Candidate/Officeholder/Politic Credit Card Payment	af Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID
Sch: 4/7 Rpt: 14/21	Mathias, Jayme
4 Date	5 Payee name
02/10/2016	The Rivas Group
6 Amount (\$) \$25.00	7 Payee address; City; State; Zip Code PO BOX 40973 Austin, TX 78704
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Advertising Expense Check if Iravel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Constituent Communication Service
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H
Date	Payee name
02/16/2016	The Rivas Group
Amount (\$) \$50.00	Payee address; City; State; Zip Code PO BOX 40973 Austin TX 78704
DUDBOOF	Austin, TX 78704
PURPOSE OF EXPENDITURE	(a) Category (see Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Constituent Communication Service
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H
Date	Payee name
02/22/2016	The Rivas Group
Amount (\$) \$25.00	Payee address; City; State; Zip Code PO BOX 40973
	Austin, TX 78704
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Constituent Communication Service
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 By -Candidate/Officeholder/Political Committee

Event Expense
Fees
Food/Reverage Expense
Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		mmiltee	Gift/Awa Legal So		Expense	Printin Salari				Travel Out of District Travel Out of District OTHER (enter a category not listed above)	
1	Total pages Schedule F1:	2	FILER NAME	=						3	Filer ID	
	Sch: 5/7 Rpt: 15/21	l	Mathias, Ja	yme								
4	Date	5	Payee name									
	03/03/2016		The Rivas (Group								
6	Amount (\$)	7	Payee addre	ss;	City;	State	; Zip	Code				
	\$1,500.00		PO BOX 40	973								
			Austin, TX	78704								
8	PURPOSE	(a)	Category (Se	ee Catego	ories listed at th	ne top of this scl	hedule)	(b)	Description			
	OF EXPENDITURE		Consulting I	Expen	se			ļ	I		ide of Texas. Complete Schedule T.	
		ĺ									, officeholder living expense sulting Services	
ŀ									Campaign	0113	adding dervices	
9	Complete ONLY if direct	L	andidate/Offi	ceholdi	er name		Office s	ought			Office held	
Ĭ	expenditure to benefit C/OI		·	ocrioidi	31 Harrie		Omoc o	ougni			Chioc Hold	
	Date		Payee name								<u></u>	
	05/25/2016		The Rivas (Group								
	Amount (\$)		Payee addre		City;	State	; Zip	Code			· ·	
	\$25.00	l	PO BOX 40		Oity,	Otato	, <u>~</u> ,p	Oodo				
	420.00		. 0 20,1 10	0,0								
			Austin, TX 7	8704					·			
	PURPOSE OF		Category (So			e top of this sch	neđule)	(b)	Description			
	EXPENDITURE		Advertising	Expen	se				<u> </u>		ide of Texas. Complete Schedule T. officeholder living expense	
									<u></u>		nmunication Service	
	Complete ONLY if direct expenditure to benefit C/Oł		andidate/Offic	ceholde	er name	(Office s	ought			Office held	
	Date		_									
	Date 05/23/2016		Payee name	roun								
			The Rivas G	· · · · ·	O't-	Chair	- 7:	0.4.				
	Amount (\$) \$25.00		Payee addres PO BOX 40		City;	State	; Zip	Code				
	Φ23.00		PU BUX 40	913								
			Austin, TX 7	8704								
	PURPOSE OF		Category (Se			e top of this sch	iedule)	(b)	Description			
	EXPENDITURE		Advertising	Expen	se				li		de of Texas. Complete Schedule T. officeholder living expense	
	Ì								h		munication Service	
											-	
	Complete ONLY if direct	C	andidate/Offic	eholde	r name		Office s	ought			Office held	
	expenditure to benefit C/OF	1										
												-

SCHEDULE F1

Advertising Expense

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

Solicitation/Fundraising Expense

	Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services	Polling Exper Printing Expe Salaries/Wag	ense Jes/Contract Labor		Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)	
			The Instruction Guide explain	ns how to comp	olete this form.			_
1	Total pages Schedule F1:	1				3	Filer ID	
_	Sch: 6/7 Rpt: 16/21	Mathias, Ja	ayme			<u> </u>		
4	Date	5 Payee name						
	05/16/2016	The Rivas	Group					
6	Amount (\$)	7 Payee addre	ess; City; Sta	ite; Zip Code				
	\$25.00	PO BOX 40	ე973					
		Austin, TX	78704					
8	PURPOSE	(a) Category (5	See Categories listed at the top of this s	schedule) (b) Description			_
	OF EXPENDITURE	Advertising			Check if travel of		le of Texas. Complete Schedule T.	
	EVERIFICAL						officeholder living expense	
	I				Constituent C	Somi	munication Service	
Ļ								
9	Complete ONLY if direct expenditure to benefit C/O		ficeholder name	Office sough	t		Office held	
F	P-40	T						
İ	Date 05/07/2016	Payee name						
	05/07/2016	The Rivas	***************************************	-: 0.1-				_
	Amount (\$)	Payee addre	•	te; Zip Code				
	\$50.00	PO BOX 40)973					
	!							
)	Austin, TX	78704					
	PURPOSE	(a) Category (s	See Categories listed at the top of this s	schedule) (b) Description			
	OF EXPENDITURE	Advertising					le of Texas. Complete Schedule T.	
	LA LIBITATIO	1					officeholder living expense	
	!	1			Constituent C	JUH	munication Service	
	Complete ONLY if divoct	CandidatalOff	Cbaldar nama	Office course	<u> </u>		Office hold	
	Complete ONLY if direct expenditure to benefit C/OH		ficeholder name	Office sought	Į.		Office held	
		T			**************************************			_
	Date	Payee name						
	04/27/2016	The Rivas (Group					
	Amount (\$)	Payee addre	ess; City; Stat	te; Zip Code				
	\$25.00	PO BOX 40)973					
		1						
	l	Austin, TX	78704					
	PURPOSE	(a) Category (s	iee Categories listed at the top of this s	(b)) Description			_
	OF	Advertising		Chedulos	Check if travel o		e of Texas. Complete Schedule T.	
	EXPENDITURE	Ī	· · · · · · ·				officeholder living expense	
		ĺ			Constituent C)omi	munication Service	
	Complete ONLY if direct		iceholder name	Office sought	-		Office held	-
	expenditure to benefit C/OF	1						

SCHEDULE F1

Advertising Expense Accounting/Banking

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Food/Beverage Expense Gift/Awards/Memorials Exper Legal Services	Salaries/	Expense /Wages/C	Contract Labor		Travel in District Travel Out of District OTHER (enter a category not listed above)	
		The Instruction Guide 6	explains how to c	omplete	this form.			
1 Total pages Schedule F1: Sch: 7/7 Rpt: 17/21	2 FILER NAM Mathias, J					3	Filer ID	
4 Date	5 Payee nam	.				L		_
04/18/2016	The Rivas							
6 Amount (\$)	7 Payee addr		State; Zip C	ode	·			
\$75.00	PO BOX 4	· ·	June 1	50_				
<u> </u>	Austin, TX	〈 78704 						
8 PURPOSE OF EXPENDITURE		(See Categories listed at the toping Expense	of this schedule)		Check if Austin,	ı, TX,	ide of Texas. Complete Schedule T. , officeholder living expense nmunication Service	
9 Complete ONLY if direct expenditure to benefit C/OI		Officeholder name	Office so	<u>I</u> ught			Office held	
Date	Payee nam	ne	***************************************					
03/21/2016	The Rivas							
Amount (\$)	Payee addr	ress; City;	State; Zip Co	ode				_
\$50.00	РО ВОХ 4	•						
ļ	Austin, TX	C 78704						
PURPOSE	(a) Category	(See Categories listed at the top	of this schedule)	(b) D	escription			
OF EXPENDITURE		g Expense		[_		de of Texas. Complete Schedule T.	
w/	1			L			officeholder living expense	
	1			~	iONStituent C	Юm	munication Service	
Complete ONLY if direct expenditure to benefit C/OH		fficeholder name	Office sou	<u>l</u> ught			Office held	

SCHEDULE |

	The Instruction Coulds and I have	
	The Instruction Guide explains how to	complete this form.
Total pages Schedule I: Sch: 1/4 Rpt:	2 FILER NAME Mathias, Jayme	3 Filer ID
Date 06/07/2016	5 Payee name Allison Elementary PTA	
6 Amount (\$) 40.00	7 Payee Address; City; State; Zip 515 Vargas Road Austin, TX 78741	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Donation	(b) Description (See instructions regarding type of information required.) Non-Political Contribution
Date	Payee name	
06/03/2016	Brooke Elementary PTA	
Amount (\$) 40.00	Payee Address; City; State; Zip 3100 E. 4th Street	
PURPOSE OF EXPENDITURE	Austin, TX 78702 (a) Category (See instructions for examples of acceptable categories) Donation	(b) Description (See instructions regarding type of information required.) Non-Political Contribution
Date 05/25/2016	Payee name Galindo Elementary PTA	
Amount (\$) 40.00	Payee Address; City; State; Zip 3800 S. 2nd Street	
	Austin, TX 78704	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Donation	(b) Description (See instructions regarding type of information required.) Non-Political Contribution
Date 04/14/2016	Payee name Govalle Elementary PTA	
Amount (\$) 100.00	Payee Address; City; State; Zip 3601 Govalle Avenue	
PURPOSE OF EXPENDITURE	Austin, TX 78702 (a) Category (See instructions for examples of acceptable categories) Donation	(b) Description (See instructions regarding type of information required.) Non-Political Contribution

SCHEDULE I

	The Instruction Guide explains how to	complete this form.
Total pages Schedule I: Sch: 2/4 Rpt:	2 FILER NAME Mathias, Jayme	3 Filer ID
Date 06/07/2016	5 Payee name Houston Elementary PTA	
Amount (\$) 40.00	7 Payee Address; City; State; Zip 5409 Ponciana Drive	
PURPOSE OF EXPENDITURE	Austin, TX 78744 (a) Category (See instructions for examples of acceptable categories) (In Donation	b) Description (See instructions regarding type of information required.) Non-Political Contribution
Date 04/25/2016	Payee name Langford Elementary PTA	
Amount (\$) 150.00	Payee Address; City; State; Zip 2206 Blue Meadow Drive Austin, TX 78744	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) (b) Donation	Description (See instructions regarding type of information required.) Non-Political Donation
Date 05/15/2016	Payee name Martin Middle School PTA	
Amount (\$) 40.00	Payee Address; City; State; Zip 1601 Haskell Street Austin, TX 78744	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) (b Donation	Description (See instructions regarding type of information required.) Non-Political Contribution
Date 04/13/2016	Payee name Mendez Middle School PTA	
Amount (\$) 150.00	Payee Address; City; State; Zip 5106 Village Square Austin, TX 78744	
PURPOSE OF EXPENDITURE		Description (See instructions regarding type of information required.) Non-Political Contribution

SCHEDULE I

	The Instruction Guide explains how to complete this form.
Total pages Schedule I: Sch: 3/4 Rpt:	2 FILER NAME Mathias, Jayme 3 Filer ID
Date	5 Payee name
05/24/2016	Metz Elementary PTA
Amount (\$)	7 Payee Address; City; State; Zip
40.00	84 Robert Martinez, Jr. Street
,,,,,	Austin, TX 78702
PURPOSE	(a) Category (See instructions for examples of acceptable categories) (b) Description (See instructions regarding type of information required
OF EXPENDITURE	Donation Non-Political Contribution
Date	Payee name
05/02/2016	Palm Elementary PTA
Amount (\$)	Payee Address; City; State; Zip
40.00	7601 Dixie Drive
	Austin, TX 78744
PURPOSE	(a) Category (See instructions for examples of acceptable categories) (b) Description (See instructions regarding type of information required
OF EXPENDITURE	Donation Non-Political Contribution
Date	Payee name
05/15/2016	Perez Elementary PTA
Amount (\$)	Payee Address; City; State; Zip
40.00	7500 S Pleasant Valley Road
	Austin, TX 78744
PURPOSE	(a) Category (See instructions for examples of acceptable categories) (b) Description (See instructions regarding type of information required.
OF EXPENDITURE	Donation Non-Political Contribution
Date	Payee name
05/25/2016	Rodriguez Elementary PTA
Amount (\$)	Payee Address; City; State; Zip
40.00	4400 Franklin Park Drive
	Austin, TX 78744
PURPOSE	(a) Category (See instructions for examples of acceptable categories) (b) Description (See instructions regarding type of information required.
OF EXPENDITURE	Donation Non-Political Contribution

SCHEDULE |

The Instruction Guide explains how to complete this form.		
Total pages Schedule I: Sch: 4/4 Rpt:	2 FILER NAME Mathias, Jayme	3 Filer ID
4 Date 03/11/2016	5 Payee name Sanchez Elementary PTA	
6 Amount (\$) 150.00	7 Payee Address; City; State; Zip 73 San Marcos Street Austin, TX 78702	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Donation	(b) Description (See instructions regarding type of information required.) Non-Political Contribution
Date 05/07/2016	Payee name Uphaus ECC PTA	
Amount (\$) 100.00	Payee Address; City; State; Zip 5200 Freidrich Lane Austin, TX 78744	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Donation	(b) Description (See instructions regarding type of information required.) Non-Political Contribution
Date 05/24/2016	Payee name Zavala Elementary PTA	
Amount (\$) 40.00	Payee Address; City; State; Zip 310 Robert Martinez, Jr. Street Austin, TX 78702	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Donation	(b) Description (See instructions regarding type of information required.) Non-Political Contribution