

**CANDIDATE / OFFICEHOLDER
CAMPAIGN FINANCE REPORT**

**FORM C/OH
COVER SHEET PG 1**

16001910291091

The C/OH Instruction Guide explains how to complete this form.		1 Filer ID	2 Total pages filed: 26
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST Jayme	MI
	NICKNAME	LAST Mathias	SUFFIX
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; P.O. Box 2386 Austin, TX 78702		ZIP CODE
	Date Hand-delivered or Date Postmarked		
	Receipt #	Amount	
	Date Processed		
Date Imaged			
5 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST	MI
	NICKNAME	LAST	SUFFIX
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE		
7 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION
8 REPORT TYPE	<input 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 checked="" type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final Report (Attach C/OH-FR)		
9 PERIOD COVERED	Month	Day	Year
	10/09/2016		
	THROUGH		
	Month	Day	Year
	11/08/2016		10/29/2016
10 ELECTION	ELECTION DATE Month Day Year 11/08/2016		ELECTION TYPE
	<input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input checked="" type="checkbox"/> General <input type="checkbox"/> Special		
11 OFFICE	OFFICE HELD (if any) Austin Independent School District Board of Trustees, Place 2		12 OFFICE SOUGHT (if known) None

GO TO PAGE 2

**CANDIDATE / OFFICEHOLDER REPORT:
SUPPORT & TOTALS**

**FORM C/OH
COVER SHEET PG 2**
2 of 26

13 C / OH NAME Mathias, Jayme 14 Filer ID _____

15 NOTICE FROM POLITICAL COMMITTEE(S)
 Additional Pages

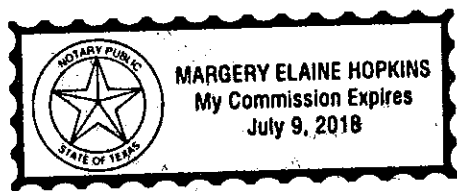
This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. *These expenditures may have been made without the candidate's or officeholder's knowledge or consent.* Candidates and officeholders are required to report this information only if they receive notice of such expenditures.

COMMITTEE TYPE	COMMITTEE NAME
<input type="checkbox"/> GENERAL	COMMITTEE ADDRESS
<input type="checkbox"/> SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME
	COMMITTEE CAMPAIGN TREASURER ADDRESS

16 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$	0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	8,244.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$	0.00
	4. TOTAL POLITICAL EXPENDITURES	\$	2,798.30
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	6,740.40
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	2,000.00

17 AFFADAVIT

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]
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Jayme Mathias, this the 31st day of October, 2016, to certify which, witness my hand and seal of office.

Margery Elaine Hopkins Margery Elaine Hopkins, Exec. Assist
Signature of officer administering Printed name of officer administering Title of officer administering oath

SUBTOTALS - C/OH

18 FILER NAME Mathias, Jayme		19 Filer ID
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 7,940.00
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 304.00
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 2,798.30
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/10 Rpt: 4/26
2 FILER NAME Mathias, Jayme		3 Filer ID
4 Date 10/24/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Avila, Pauline 6 Contributor address; City; State; Zip Code 6801 Dubuque Lane Austin, TX 78723	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 10/18/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blazier, John Contributor address; City; State; Zip Code 901 S. MoPac, Bldg. V, Ste. 200 Austin, TX 78746	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Blazier, Christensen, Browder & Virr, P.C.
Date 10/18/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bly, Rhonda Rae Contributor address; City; State; Zip Code 8450 Antero Drive Austin, TX 78759	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Business Development Director		Employer (See Instructions) American Constructors
Date 10/18/2016	Full name of contributor <input type="checkbox"/> 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 occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 10/18/2016	Full name of contributor <input type="checkbox"/> 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 occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/10 Rpt: 5/26
2 FILER NAME Mathias, Jayme		3 Filer ID
4 Date 10/18/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burger, Martin ----- 6 Contributor address; City; State; Zip Code 11212 Limoncillo Court Austin, TX 78750	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Vice President		9 Employer (See Instructions) American Constructors
Date 10/18/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carroll, David ----- Contributor address; City; State; Zip Code 2000 Homedale Drive Austin, TX 78704	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) DAVCAR
Date 10/25/2016	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00002089 _____) Communications Workers of America COPE PCC ----- Contributor address; City; State; Zip Code 501 3rd Street, NW Washington, DC 20001	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/23/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cuellar, Margaret ----- Contributor address; City; State; Zip Code 1621 Bowerton Drive Austin, TX 78754	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 10/26/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cuevas, Rita ----- Contributor address; City; State; Zip Code 3212 Silk Oak Drive Austin, TX 78748	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/10 Rpt: 6/26
2 FILER NAME Mathias, Jayme		3 Filer ID
4 Date 10/19/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) David, Albert (Dr.) <hr/> 6 Contributor address; City; State; Zip Code 1101 Grove Blvd., #703 Austin, TX 78741	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Associate Professor		9 Employer (See Instructions) Austin Community College
Date 10/25/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Estrada, Teresa C. <hr/> Contributor address; City; State; Zip Code 2618 E. 3rd Street Austin, TX 78702	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/29/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Everitt, Patti <hr/> Contributor address; City; State; Zip Code 4007 Crescent Drive Austin, TX 78722	Amount of Contribution (\$) \$125.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Self
Date 10/24/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guerra, Rick & Ann <hr/> Contributor address; City; State; Zip Code 2107 Key West Cove Austin, TX 78746	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Principal		Employer (See Instructions) Jose I. Guerra, Inc.
Date 10/27/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hall, Donald <hr/> Contributor address; City; State; Zip Code 5328 Acacia Grove St North Las Vegas, NV 89031	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Systems Analyst		Employer (See Instructions) HP

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/10 Rpt: 7/26
2 FILER NAME Mathias, Jayme		3 Filer ID
4 Date 10/12/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hall, Mark 6 Contributor address; City; State; Zip Code 3005 S. Lamar Blvd., Suite D109-359 Austin, TX 78704	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Filmmaker		9 Employer (See Instructions) Self
Date 10/28/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haynes, James Contributor address; City; State; Zip Code 1807 Maple Avenue Austin, TX 78702	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) 		Employer (See Instructions)
Date 10/26/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hopkins, Balbina Contributor address; City; State; Zip Code 2409 E. 2nd Street Austin, TX 78702	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 10/18/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hutton, Grant Contributor address; City; State; Zip Code 221 Courtnes Way Georgetown, TX 78626	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Project Manager		Employer (See Instructions) American Constructors
Date 10/20/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keeton, Carole (The Honorable) Contributor address; City; State; Zip Code 2904 Bowman Avenue Austin, TX 78703	Amount of Contribution (\$) \$300.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 6/10 Rpt: 9/26
2 FILER NAME Mathias, Jayme			3 Filer ID
4 Date 10/17/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Malfaro, Louis <hr/> 6 Contributor address; City; State; Zip Code 1510 E. 11th Street Austin, TX 78702	7 Amount of Contribution (\$) \$100.00	
8 Principal occupation / Job title (See Instructions) President		9 Employer (See Instructions) Texas AFT	
Date 10/18/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martinez, Lynett <hr/> Contributor address; City; State; Zip Code 10550 Rodriguez Road Austin, TX 78747	Amount of Contribution (\$) \$100.00	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)	
Date 10/25/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCabe, Tim <hr/> Contributor address; City; State; Zip Code P.O. Box 5236 Austin, TX 78763	Amount of Contribution (\$) \$2,000.00	
Principal occupation / Job title (See Instructions) Managing Director		Employer (See Instructions) McCabe Development	
Date 10/20/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meltzer, Bradley <hr/> Contributor address; City; State; Zip Code 11116 Schmidt Lane Manor, TX 78653	Amount of Contribution (\$) \$100.00	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Sumo Restaurant	
Date 10/23/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moffatt, Susan <hr/> Contributor address; City; State; Zip Code 4112 Speedway Austin, TX 78751	Amount of Contribution (\$) \$50.00	
Principal occupation / Job title (See Instructions) Writing & Editing Professional		Employer (See Instructions) Self	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/10 Rpt: 10/26
2 FILER NAME Mathias, Jayme		3 Filer ID
4 Date 10/13/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Newman, Jack 6 Contributor address; City; State; Zip Code 3801 N. Capital of Texas Hwy., #E240-161 Austin, TX 78746	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) CEO		9 Employer (See Instructions) Austin Tennis Academy
Date 10/14/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pedrosa-Thompson, Sara, Hawk & Ines Contributor address; City; State; Zip Code 1608 Willow Street Austin, TX 78702	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) 		Employer (See Instructions)
Date 10/29/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pina, Mary Lou Contributor address; City; State; Zip Code 1129 Map Street Austin, TX 78721	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)
Date 10/19/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Puente, Sebastian Contributor address; City; State; Zip Code 106 Timpanagos Austin, TX 78734	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Cultural Strategies, Inc.
Date 10/29/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Quintero, Mary Helen Contributor address; City; State; Zip Code 11700 Long Rifle Cove Austin, TX 78754	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/10 Rpt: 12/26
2 FILER NAME Mathias, Jayme		3 Filer ID
4 Date 10/17/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Salazar, Rene <hr/> 6 Contributor address; City; State; Zip Code 1107 Cherrywood Kyle, TX 78640	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Teacher		9 Employer (See Instructions) Pflugerville ISD
Date 10/27/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Santos, Alfredo <hr/> Contributor address; City; State; Zip Code P.O. Box 19457 Austin, TX 78760	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Editor		Employer (See Instructions) La Voz Newspapers
Date 10/28/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Margaret <hr/> Contributor address; City; State; Zip Code 3645 Newport Bay Drive Alpharetta, GA 30005	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/18/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Valdes, Cristina <hr/> Contributor address; City; State; Zip Code 902 E. 2nd Street Austin, TX 78702	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Broker Associate		Employer (See Instructions) Realty Austin
Date 10/18/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weiner, David <hr/> Contributor address; City; State; Zip Code 8402 Appalachian Drive Austin, TX 78759	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/10 Rpt: 13/26
2 FILER NAME Mathias, Jayme		3 Filer ID
4 Date 10/13/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yorke, Jane (Dr.) 6 Contributor address; City; State; Zip Code 11906 Loomis Drive Austin, TX 78738	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Psychotherapist		9 Employer (See Instructions) Austin Behavioral Health Center

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: Sch: 1/1 Rpt: 14/26	
2 FILER NAME Mathias, Jayme		3 Filer ID	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 10/24/2016	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) South Austin Democrats	8 Amount of contribution (\$) \$304.00	9 In-kind contribution description Mailer
	7 Contributor address; City; State; Zip Code P.O. Box 152592 Austin, TX 78715		
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		11 Employer (FOR NON-JUDICIAL) (See instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

Check if travel outside of Texas. Complete Schedule T.

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/12 Rpt: 15/26	2 FILER NAME Mathias, Jayme	3 Filer ID
4 Date 10/13/2016	5 Payee name DonateWay	
6 Amount (\$) \$5.30	7 Payee address; City; State; Zip Code P.O. Box 301267 Austin, TX 78703	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Online giving service
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/13/2016	Payee name DonateWay	
Amount (\$) \$56.22	Payee address; City; State; Zip Code P.O. Box 301267 Austin, TX 78703	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Online giving service
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/14/2016	Payee name DonateWay	
Amount (\$) \$5.30	Payee address; City; State; Zip Code P.O. Box 301267 Austin, TX 78703	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Online giving service
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 2/12 Rpt: 16/26		2 FILER NAME Mathias, Jayme		3 Filer ID
4 Date 10/17/2016		5 Payee name DonateWay		
6 Amount (\$) \$11.22		7 Payee address; City; State; Zip Code P.O. Box 301267 Austin, TX 78703		
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Online giving service	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name	Office sought	Office held
Date 10/18/2016		Payee name DonateWay		
Amount (\$) \$17.46		Payee address; City; State; Zip Code P.O. Box 301267 Austin, TX 78703		
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Online giving service	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name	Office sought	Office held
Date 10/19/2016		Payee name DonateWay		
Amount (\$) \$8.10		Payee address; City; State; Zip Code P.O. Box 301267 Austin, TX 78703		
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Online giving service	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 3/12 Rpt: 17/26	2 FILER NAME Mathias, Jayme		3 Filer ID
4 Date 10/20/2016	5 Payee name DonateWay		
6 Amount (\$) \$25.30	7 Payee address; City; State; Zip Code P.O. Box 301267 Austin, TX 78703		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Online giving service	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 10/23/2016	Payee name DonateWay		
Amount (\$) \$2.80	Payee address; City; State; Zip Code P.O. Box 301267 Austin, TX 78703		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Online giving service	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 10/26/2016	Payee name DonateWay		
Amount (\$) \$5.30	Payee address; City; State; Zip Code P.O. Box 301267 Austin, TX 78703		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Online giving service	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 4/12 Rpt: 18/26	2 FILER NAME Mathias, Jayme	3 Filer ID
4 Date 10/29/2016	5 Payee name DonateWay	
6 Amount (\$) \$5.30	7 Payee address; City; State; Zip Code P.O. Box 301267 Austin, TX 78703	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Online giving service
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/28/2016	Payee name DonateWay	
Amount (\$) \$2.86	Payee address; City; State; Zip Code P.O. Box 301267 Austin, TX 78703	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Online giving service
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/29/2016	Payee name DonateWay	
Amount (\$) \$10.30	Payee address; City; State; Zip Code P.O. Box 301267 Austin, TX 78703	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Online giving service
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 5/12 Rpt: 19/26		2 FILER NAME Mathias, Jayme		3 Filer ID
4 Date 10/19/2016	5 Payee name Four Seasons Hotel			
6 Amount (\$) \$12.00	7 Payee address; City; State; Zip Code 98 San Jacinto Boulevard Austin, TX 78701			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Parking for AVANCE fundraising luncheon	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH				
Candidate/Officeholder name		Office sought		Office held
Date 10/11/2016	Payee name Friends of the MACC			
Amount (\$) \$50.00	Payee address; City; State; Zip Code 600 River Street Austin, TX 78701			
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Sponsorship of Dia de la Raza celebration	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH				
Candidate/Officeholder name		Office sought		Office held
Date 10/11/2016	Payee name H-E-B			
Amount (\$) \$36.47	Payee address; City; State; Zip Code 2701 E. 7th Street Austin, TX 78702			
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Food & drink for school tour & community conversation	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH				
Candidate/Officeholder name		Office sought		Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 6/12 Rpt: 20/26		2 FILER NAME Mathias, Jayme		3 Filer ID
4 Date 10/16/2016	5 Payee name H-E-B			
6 Amount (\$) \$137.20	7 Payee address; City; State; Zip Code 2701 E. 7th Street Austin, TX 78702			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Food & drink for school tour & community conversation, and for wine & cheese reception	
9 Complete ONLY if direct expenditure to benefit C/OH				
Candidate/Officeholder name		Office sought		Office held
Date 10/24/2016	Payee name H-E-B			
Amount (\$) \$38.71	Payee address; City; State; Zip Code 2701 E. 7th Street Austin, TX 78702			
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Food & drink for school tour & community conversation	
Complete ONLY if direct expenditure to benefit C/OH				
Candidate/Officeholder name		Office sought		Office held
Date 10/26/2016	Payee name H-E-B			
Amount (\$) \$17.24	Payee address; City; State; Zip Code 2701 E. 7th Street Austin, TX 78702			
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Food & drink for school tour & community conversation	
Complete ONLY if direct expenditure to benefit C/OH				
Candidate/Officeholder name		Office sought		Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 7/12 Rpt: 21/26		2 FILER NAME Mathias, Jayme		3 Filer ID	
4 Date 10/19/2016		5 Payee name La Placita			
6 Amount (\$) \$11.74		7 Payee address; City; State; Zip Code 5310 S. Pleasant Valley Road Austin, TX 78744			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Breakfast with constituent	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 10/11/2016		Payee name Lozano, Carlos			
Amount (\$) \$65.00		Payee address; City; State; Zip Code 10716 Sierra Oaks Austin, TX 78759			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Event Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Photography	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 10/25/2016		Payee name Lozano, Carlos			
Amount (\$) \$75.00		Payee address; City; State; Zip Code 10716 Sierra Oaks Austin, TX 78759			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Event Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Photography	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 8/12 Rpt: 22/26	2 FILER NAME Mathias, Jayme	3 Filer ID
4 Date 10/27/2016	5 Payee name Lozano, Carlos	
6 Amount (\$) \$75.00	7 Payee address; City; State; Zip Code 10716 Sierra Oaks Austin, TX 78759	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Photography
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 10/14/2016	Payee name Mail Chimp	
Amount (\$) \$50.00	Payee address; City; State; Zip Code 675 Ponce de Leon Ave NE, Suite 5000 Atlanta, GA 30308	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Online solicitation platform
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 10/29/2016	Payee name Mathias, Jayme (The Honorable)	
Amount (\$) \$500.58	Payee address; City; State; Zip Code P.O. Box 2386 Austin, TX 78768	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Reimbursement for 927 miles
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 9/12 Rpt: 23/26		2 FILER NAME Mathias, Jayme		3 Filer ID
4 Date 10/14/2016	5 Payee name Office Depot			
6 Amount (\$) \$25.97	7 Payee address; City; State; Zip Code 907 W. 5th Street Austin, TX 78703			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Supplies for fundraising appeal	
9 Complete ONLY if direct expenditure to benefit C/OH				
Candidate/Officeholder name		Office sought		Office held
Date 10/14/2016	Payee name Office Depot			
Amount (\$) \$60.59	Payee address; City; State; Zip Code 907 W. 5th Street Austin, TX 78703			
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Supplies for fundraising appeal	
Complete ONLY if direct expenditure to benefit C/OH				
Candidate/Officeholder name		Office sought		Office held
Date 10/14/2016	Payee name Office Depot			
Amount (\$) \$28.57	Payee address; City; State; Zip Code 907 W. 5th Street Austin, TX 78703			
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Supplies for fundraising appeal	
Complete ONLY if direct expenditure to benefit C/OH				
Candidate/Officeholder name		Office sought		Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 10/12 Rpt: 24/26		2 FILER NAME Mathias, Jayme		3 Filer ID	
4 Date 10/15/2016		5 Payee name Radio Coffee & Beer			
6 Amount (\$) \$13.25		7 Payee address; City; State; Zip Code 4204 Manchaca Road Austin, TX 78704			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Event Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Food & drink for block walking event	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 10/27/2016		Payee name Takoba			
Amount (\$) \$60.00		Payee address; City; State; Zip Code 1411 E. 7th Street Austin, TX 78702			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Event Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Public Education Advocate Olympics	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 10/16/2016		Payee name Tovar, Vincent			
Amount (\$) \$800.00		Payee address; City; State; Zip Code 6207 Mayhall Drive Austin, TX 78721			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Consulting Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign consultant	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 11/12 Rpt: 25/26		2 FILER NAME Mathias, Jayme		3 Filer ID
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 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ice
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name Office sought Office held		
Date 10/14/2016		Payee name U.S. Postmaster		
Amount (\$) \$155.10		Payee address; City; State; Zip Code 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 <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Postage
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name Office sought Office held		
Date 10/12/2016		Payee name Worley Printing		
Amount (\$) \$211.09		Payee address; City; State; Zip Code 3217 N. Interstate 35 Frontage Road Austin, TX 78722		
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Printing Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Printing of pushcards
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name Office sought Office held		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 12/12 Rpt: 26/26	2 FILER NAME Mathias, Jayme	3 Filer ID
4 Date 10/20/2016	5 Payee name Worley Printing	
6 Amount (\$) \$217.58	7 Payee address; City; State; Zip Code 3217 N. Interstate 35 Frontage Road Austin, TX 78722	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Pushcards & rally signs
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate/Officeholder name	Office sought	Office held