## CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

### FORM C/OH COVER SHEET PG 1

Th	e C/OH Instruction Guid	e explains how to complete thi	s form.	ACCOUNT # Ethics Commission filers)	2 PAGE # 1 of 21	
-				11111111		.,
3	CANDIDATE / OFFICEHOLDER NAME	Ms/MRS/MR FIR Ms. Lesli		MI	OFFIGE U	<del></del>
		NICKNAME LAS Pool		SUFFIX	06T 27	STIN CIT
4	CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; APT / SUITE 4503 Shoal Creek Blvd Austin, TX 78756	в; спу;	STATE; ZIP CODE	Date Hand-delivered	MED VED
	Change of Address	•				53
					Receipt #	Amount
5	CAMPAIGN	MS/MRS/MR FIR	ST .	MI	Date Processed	
	TREASURER NAME	Mr. Cha	d	•	Date Imaged	
-		NICKNAME ŁAS		SUFFIX		
	, <u>, , , , , , , , , , , , , , , , , , </u>	Willia	ams			
6	CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEAS 7500 Greenhaven Dr Austin, TX 78757	SE); APT / SUITE #;	CITY; STATE;	ZIP CODE	
7	CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUM (512) 451-6976	MBER	EXTENSION		
8	REPORT TYPE	January 15 30tl	n day before election	Runoff	15th day after ca appointment (off	empaign treasurer iceholder only)
		July 15 X 8th	day before election	Exceeded \$500 limit	it Final report (Atta	ach C/OH - FR)
9	PERIOD COVERED	Month Day Year	•	Manth I	Day Year	
		09/26/2014	THROUGH	10/25	/2014	
10	ELECTION	ELECTION DATE	ELECTION TYPE		,	
		Month Day Year 11/04/2014	Primary	Runoff	X General	Special
11	OFFICE	OFFICE HELD (if any)		12 OFFICE SOUGHT (II In	nown)	_
	-			Austin City C	ouncil District 7	
			00.70.54			

# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

### FORM C/OH COVER SHEET PG 2

SOPPORT &	IOIALS	·		OVEH .	SHEET PG Z
13 C/OH NAME Pool,	Leslie (Ms.)		14 ACC	DUNT# (E	thics Commission filers)
15 NOTICE FROM POLITICAL	This box is for notice of political expenditures by political committees to support the candidate / officeholder. These expenditures may have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this information only if they receive notice of such expenditures  COMMITTEE NAME			ese expenditures may equired to report this	
COMMITTEE(S)	COMMITTEE TYPE	Sierra Club Political Committee of Texas		<u></u>	
	GENERAL	COMMITTEE ADDRESS 615 Willow San ANtonio, TX 78202			-
additional pages	SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME GONZAIEZ, Hector (Mr.)			·
additional pages		COMMITTEE CAMPAIGN TREASURER ADDRESS 615 Willow San Antonio, TX 78202		-	
16 CONTRIBUTION TOTALS		OLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER T S, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEM		\$	1,050.00
		POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS	)	\$	5,575.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED \$				79.35
	4. TOTAL I	POLITICAL EXPENDITURES		\$	46,016.05
CONTRIBUTION BALANCE		OLITICAL CONTRIBUTIONS MAINTAINED AS OF THE Y OF THE REPORTING PERIOD		\$.	24,258.08
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD \$ 40,500.00			40,500.00	
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.  ARMANDINA V. CASTANEDA  MY COMMISSION EXPIRES December 11, 2016					
	Signature of Candidate or Officeholder				
AFFIX NOTARY STAMP / SEAL ABOVE					
<u> </u>		ne said <u>Les lie Pool</u> tify which, witness my hand and seal of office.	, this	the $\underline{\delta}$	17 day
		aumond	lina V. 1	aster	nde
		Notary	13MP foc		

The Instruction	ON GUIDE explains how to complete this form.		1 PAGE# Schedule: 1/7	7 Report: 3/21
2 FILER NAME	Pool, Leslie (Ms.)		3 ACCOUNT # 11111111	(Ethics Commission filers)
4 Date	5 Full name of contributor	#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
10/11/2014	6 Contributor address; City; State; Zip Code 1101 Grove Blvd Apt 703 Austin, TX 78741-3513		\$300.00	i I I
			(If travel outside of	Texas, complete Schedule T)
9 Principal occup Professor	ation / Job title (See Instructions)	10 Employer (See In Austin Commun		
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
10/08/2014	Contributor address; City; State; Zip Code 12405 Willow Bend Dr Austin, TX 78758-2821	•••••	\$100.00	! !
			<u> </u>	Texas, complete Schedule T)
Principal occup Project Mana	pation / Job title (See Instructions) ger	Employer (See In Apple, Inc.	structions)	
Date	Full name of contributor	<i>f</i> )	Amount of contribution (\$)	In-kind contribution description (if applicable)
10/24/2014	Contributor address; City; State; Zip Code 12405 Willow Bend Dr Austin, TX 78758-2821		\$100.00	1   
			(If travel outside of	Texas, complete Schedule T)
Principal occup Project Mana	pation / Job title (See Instructions) ger	Employer (See In Apple, Inc.	structions)	
Date	Full name of contributor  Out-of-state PAC (ID Berkel, Suzanne	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
10/05/2014	Contributor address; City; State; Zip Code 4405 Sinclair Ave Austin, TX 78756		\$100.00	I 1 I
			(If travel outside of	Texas, complete Schedule T)
Principal occup	pation / Job title (See Instructions)	Employer (See In	structions)	
Date	Full name of contributor	#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
10/06/2014	Contributor address; City; State; Zip Code 6303 Danwood Dr Austin, TX 78759-4732		\$100.00	 
			(if travel outside of	Texas, complete Schedule T)
Principal occup	Lation / Job title (See Instructions)	Employer (See In	<u> </u>	

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	The Instruction	ON GUIDE explains how to comp	lete this form.		1 PAGE # Schedule: 2/7	7 Report: 4/21
2	FILER NAME	Pool, Leslie (Ms.)			3 ACCOUNT#	(Ethics Commission filers)
4	Date	5 Full name of contributor [ Bristol, Valarie	ut-of-state PAC (ID#		7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	09/26/2014	6 Contributor address; C 512 Bulian Ln Austin, TX 78746-5423	City; State; Zip Code		\$100.00	
			·		(If travel outside of	Texas, complete Schedule T)
9	Principal occup	ation / Job title (See Instructions)	)	10 Employer (See In	structions)	
	Date	Full name of contributor [Devin, Pat	out-of-state PAC (ID#	)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/11/2014	Contributor address; C 5805 Shoal Creek Blvd Austin, TX 78757-3123	City; State; Zip Code		\$100.00	 
		Ausun, 17 /0/3/-3123			If traval outside of	Texas, complete Schedule T)
_			<del></del>		<u> </u>	Texas, complete schedule 1)
	Principal occup	ation / Job title (See Instructions)	)	Employer (See In	structions)	
	Date	Full name of contributor [ Edwards, Carol	Out-of-state PAC (ID#	)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/05/2014	Contributor address; C 2702 Pegram Ave Austin, TX 78757	City; State; Zip Code		\$100.00	]   
					(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	)	Employer (See In	structions)	
	Date	Full name of contributor [ Edwards, Carol	Out-of-state PAC (ID#	<b>)</b>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/21/2014	Contributor address; C 2702 Pegram Ave Austin, TX 78757	city; State; Zip Code		\$25.00	 
					(If travel outside of	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions	)	Employer (See In	structions)	·
	Date	Full name of contributor [Fayhee, Jaelene	out-of-state PAC (ID#	)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/21/2014	Contributor address; C 4005 Wrightwood Rd Austin, TX 78722-1527	City; State; Zip Code	.1	\$100.00	 
		•		•	(it travel outside of	Texas, complete Schedule T)
	Principal occup	Leation / Job title (See Instructions)	) "	Employer (See In	<u> </u>	

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	The Instruction	on Guide explains how to complete this form.	****	1 PAGE # Schedule: 3/	7 Report: 5/21
2	FILER NAME	Pool, Leslie (Ms.)	•	3 ACCOUNT # 11111111	(Ethics Commission filers)
4	Date	5 Full name of contributor  ut-of-state PAC Grover, Bob and Kathy	(ID#)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	10/03/2014	6 Contributor address; City; State; Zip Co 10803 Basal Edge Rd Helotes, TX 78023-5109	:	\$100.00	 
		<u> </u>		(If travel outside of	Texas, complete Schedule T)
9	Principal occup	ation / Job title (See Instructions)	10 Employer (See II	nstructions)	
	Date	Full name of contributor  ut-of-state PAC Hanna, Jett	(ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	09/28/2014	Contributor address; City; State; Zip Co 6112 Highlandale Dr Austin, TX 78731	de	\$100.00	 
	1				Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See li	nstructions)	
	Date	Full name of contributor	(ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/21/2014	Contributor address; City; State; Zip Co 7104 West Rim Dr Austin, TX 78703	de	\$100.00	 
				(If travel outside of	Texas, complete Schedule T)
	Principal occup	etion / Job title (See Instructions)	Employer (See I	nstructions)	
	Date	Full name of contributor  ut-of-state PAC	(ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/09/2014	Contributor address; City; State; Zip Co 3904 Sycamore Dr Austin, TX 78722-1230	de	\$100.00	 
		·		<u></u>	Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See II	nstructions)	,
	Date	Full name of contributor	(ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/13/2014	Contributor address; City; State; Zip Co 755 E Oltorf St Apt 201 Austin, TX 78704-5691	de	\$100.00	 
				Di taganat na databat da	Town complete Outside To T
-	Principal occup	ation / Job title (See Instructions)	Employer (See		Texas, complete Schedule T)
-			• .		

	The Instruction	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 4//	7 Report: 6/21	
2	FILER NAME	Pool, Leslie (Ms.)		3 ACCOUNT#	(Ethics Commission filers)	
4	Date	5 Full name of contributor ☐ out-of-state PAC (ID# Lehman, Chris	)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)	
	10/01/2014	6 Contributor address; City; State; Zip Code 1914 Larchmont Dr Austin, TX 78704-5936		\$350.00	 	
		•		(If travel outside of	Texas, complete Schedule T) 🔲 📗	
9	Principal occup Real Estate A	ation / Job title (See Instructions) Appraiser	10 Employer (See In: Self-Employed	structions)		
٠	Date	Full name of contributor  out-of-state PAC (ID# Lopez, Carlos	)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	10/05/2014	Contributor address; City; State; Zip Code 10305 James Ryan Way Austin, TX 78730-1506		\$100.00	 	
				Of travel outside of	Texas, complete Schedule T)	
<u> </u>	Principal acqua	ation / Job title (See Instructions)	Employer (Coo In		reads, complete constant if	
	-ппорагоссор	ation 7 sou tille (see instructions)	Employer (See In:			
	Date	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable)	
	10/04/2014	Contributor address; City; State; Zip Code 11608 Knollpark Dr Austin, TX 78758-3818		\$200.00		
					Texas, complete Schedule T)	
	Principal occup Sociology Pro	ation / Job title (See Instructions)  fessor	Employer (See In: Austin Commun			
	Date	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable)	
	09/29/2014	Contributor address; City; State; Zip Code 4000 Pinckney St Austin, TX 78723-5397		\$100.00	 	
				(If travel outside of	Texas, complete Schedule T)	
-	Principal occup	ation / Job title (See Instructions)	Employer (See In:	structions)		
	Date	Full name of contributor	)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
	09/26/2014	Contributor address; City; State; Zip Code 1108 Snowy Owl Ct Austin, TX 78746-6647		\$100.00	! ! !	
			_	-	Texas, complete Schedule T)	
	Principal occup	ation / Job title (See Instructions)	Employer (See In	structions)		

The Instructi	ON GUIDE explains how to complete this form.		1 PAGE # Schedule: 5//	7 Report: 7/21	
2 FILER NAME	Pool, Leslie (Ms.)		3 ACCOUNT# 11111111	(Ethics Commission filers)	
4 Date	5 Full name of contributor  out-of-state PAC (IDE Romanczak, Marlene	<del>})</del>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)	
10/17 <i>[</i> 2014	6 Contributor address; City; State; Zip Code 11 Niles Rd Austin, TX 78703-3138		\$200.00	<b>!</b> 	
		ŧ	(If travel outside of	Texas, complete Schedule T)	
9 Principal occup Homemaker	pation / Job title (See Instructions)	10 Employer (See In None	structions)		
Date	Full name of contributor	)	Amount of contribution (\$)	In-kind contribution description (if applicable)	
10/16/2014	Contributor address; City; State; Zip Code 1502 Payne Ave Austin, TX 78757-2924	• • • • • • • • • • • • • • • • • • • •	\$350.00	] 	
l.				Texas, complete Schedule T)	
	pation / Job title (See Instructions) ject Manager	Employer (See In Travis County	structions)		
Date	Full name of contributor  ut-of-state PAC (IDA Seals, Bradley	<del>,</del> , , , , , , , , , , , , , , , , , ,	Amount of contribution (\$)	In-kind contribution description (if applicable)	
09/27/2014	Contributor address; City; State; Zip Code 2301 Lawnmont Ave Apt 3 Austin, TX 78756		\$100.00	]   	
			(If travel outside of	Texas, complete Schedule T)	
Principal occu	pation / Job title (See Instructions)	Employer (See In	structions)		
Date	Full name of contributor  ut-of-state PAC (ID: Von Quintus, Linda	<b>*</b>	Amount of contribution (\$)	In-kind contribution description (if applicable)	
10/22/2014	Contributor address; City; State; Zip Code 2303 Lear Ln Austin, TX 78745		\$100.00	! 	
	,		(If travel outside of	Texas, complete Schedule T)	
Principal occu	pation / Job title (See Instructions)	Employer (See In	structions)		
Date	Full name of contributor	<del> </del> )	Amount of contribution (\$)	In-kind contribution description (if applicable)	
10/15/2014	Contributor address; City; State; Zip Code 2905 Skylark Dr Austin, TX 78757-2032		\$200.00	 	
			(If travel outside of	Texas, complete Schedule T)	
Principal occu	pation / Job title (See Instructions)	Employer (See In	structions)		

	The Instruction	M Guide explains how to con	nplete this form.		1 PAGE# Schedule: 6//	7 Report: 8/21
2	FILER NAME	Pool, Leslie (Ms.)			3 ACCOUNT # 11111111	(Ethics Commission filers)
4	Date	5 Full name of contributor Walker, Mark	out-of-state PAC (ID#	)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
	09/27/2014	6 Contributor address; 4911 Strass Dr Austin, TX 78731	City; State; Zip Code	·	\$250.00 	
	*				(If travel outside of	Texas, complete Schedule T) 🔲 📗
9	Principal occup VP, Regulator	ation / Job title (See Instruction ry Affairs	ns)	10 Employer (See In NRG Energy Co		
	Date	Full name of contributor Walker, Mark	out-of-state PAC (IDa	·)	Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/25/2014	Contributor address; 4911 Strass Dr Austin, TX 78731	City; State; Zip Code		\$100.00	 
		Auguii, 17,70701			(If travel outside of	. Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instruction	ns)	Employer (See In	structions)	· · · · · · · · · · · · · · · · · · ·
				Employer (Oct in	a. a.a.	
	Date	Full name of contributor Wiederspahn, Susan	Out-of-state PAC (ID#	<b>*</b>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/09/2014	Contributor address; 1914 Patton Ln Austin, TX 78723	City; State; Zip Code		\$200.00	!
					(If travel outside of	Texas, complete Schedule T)
	Principal occur	ation / Job title (See Instruction	ne\	Employer (See In		Texas, complete constant 1,
	Laboratory Re		113)	Brackenndge H		
	Date	Full name of contributor Williams, Gisette	Out-of-state PAC (ID#	<b>'</b> )	Amount of contribution (\$)	In-kind contribution description (if applicable)
7	09/27/2014	Contributor address; 7500 Greenhaven Dr Austin, TX 78757	City; State; Zip Code		\$100.00	! !
					(If travel outside of	Texas, complete Schedule T)
	Principal occup Teacher	ation / Job title (See Instruction	ns)	Employer (See In AISD	structions)	
	Date	Full name of contributor Williams, Giselle	Out-of-state PAC (IDa	<b>#</b>	Amount of contribution (\$)	In-kind contribution description (if applicable)
	10/21/2014	Contributor address; 7500 Greenhaven Dr Austin, TX 78757	City; State; Zip Code		\$100.00	
					<b></b>	·
				<u> </u>		Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instruction	ns)	Employer (See In	structions)	

				<del>*************************************</del>	<del></del>
	The Instruction Guide explains how to complete this form.				7. Report: 9/21
2	Pool, Leslie (Ms.)			3 ACCOUNT # 11111111	(Ethics Commission filers)
4	Date 5 Full name of contributor O out-of-state PAC (ID#) Young, Linda		7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)	
	10/05/2014	05/2014 6 Contributor address; City; State; Zip Code 7000 Timarou Ter Austin, TX 78754		\$350.00	
				(If travel outside of	Texas, complete Schedule T)
9	Principal occup Assistant to the	eation / Job title (See Instructions) he President	10 Employer (See In: Austin Commun		

#### SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees

Gifts/Awards/Memorial Expense

Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

**EXPENDITURE CATEGORIES** Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District Travel Out Of District Office Overhead/Rental Expense

		The Instruction Guide explains ho	w to complete this form.	
1 PAGE#		2 FILER NAME		3 ACCOUNT # (TEC filers)
Schedule: 1/12 F		Pool, Leslie (Ms.)		11111111
4 Date	5 Payee name Austin Chron	niata		
10/17/2014				
6 Amount (\$)	7 Payee addres			
\$2,113.00	PO Box 490 Austin, TX 7			
			•	
8	(a) Category (Se	e Categories listed at the top of this schedule)	(b) Description (If travel outside of	f Texas, complete Schedule T)
PURPOSE	Advertising I	Expense	Newspaper ads	
EXPENDITURE			<u> _</u>	
			Check if Austin, TX, officeholder	living expense
9 Complete ONLY if direct expenditure	Candidate / O	fficeholder name	Office sought:	Office held:
to benefit C/OH		·		,
Date	Payee name		<del></del> -	
10/15/2014	Constant Co	ontact		
Amount (\$)	Payee addres	s City; State; Zip Code		
\$76.00	1601 Trapel	o Rd		
	Waltham, M	IA UZ451		
	0-4		I paratitive and a	
PURPOSE	Category (Se Advertising I	e Categories listed at the top of this schedule)	Description (II travel outside of Constant Contact subscrip	of Texas, complete Schedule T)
OF	Adversaring (	rvhei ia <u>a</u>		
EXPENDITURE			Check if Austin, TX, officeholder	livina expense
Complete ONLY il	Candidate / C	fficeholder name	Office sought:	Office held:
direct expenditure to benefit C/OH	İ			
Date	Payee name			<del></del>
10/25/2014	Dickinson, A	aron		
Amount (\$)	Payee addres			
\$178.00		• • • • • • • • • • • • • • • • • • • •		
ψ170.00	Austin, TX			
·	<u></u>			- <u></u> -
PURPOSE		e Categories listed at the top of this schedule)	Description (If travel outside of Campaign staffing	of Texas, complete Schedule T)
OF	Salaries/Wa	ges/Contract Labor	Campaign staining	
EXPENDITURE				0.4
Complete ONLY if	Candidate / O	fficeholder name	Check if Austin, TX, officeholder Office sought:	r living expense Office held:
direct expenditure	- Cardidate / C	moonedor reino	omeo sought.	Sillo Hold.
to benefil C/OH			· · · · · · · · · · · · · · · · · · ·	<u>.</u>
Date	Payee name	•		
10/21/2014	El Mercado			
Amount (\$)	Payee addres	• • •		
\$350.00	7414 Burnet Austin, TX			
	Addun, 1A			
	Category (Se	e Categories listed at the top of this schedule)	Description (II travel outside o	ri Texas, complete Schedule T)
PURPOSE	Event Exper	•	Food for campaign event	
OF EXPENDITURE	]		· •	
2 2			Check if Austin, TX, officeholder	r living expense
Complete ONLY if direct expenditure		fficeholder name	Office sought:	Office held:
allect exhaunting	•			

#### SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense Polling Expense

EXPENDITURE CATEGORIES

ense Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District

	H IISIEU ADOVE)
	JNT # (TEC filers)
Schedule, 2/12 Report, 11/21   1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1111
4 Date 5 Payee name	
09/29/2014 Emmons, Joe	
6 Amount (\$) 7 Payee address City, State; Zip Code	
\$625.00 403 Blackson Ave	
Austin, TX 78752	
8 (a) Category (See Categories listed at the top of this schedule) (b) Description (If travel outside of Texas, con	nplete Schedule T)
PURPOSE Salaries/Wages/Contract Labor Campaign staffing	
EXPENDITURE	
9 Complete ONLY ii Candidate / Officeholder name Office sought: Office	nse e held:
direct expenditure	e neio.
to benefit C/OH	
Date Payee name	
10/06/2014 Emmons, Joe	
Amount (\$) Payee address City; State; Zip Code	
	-
\$625.00 403 Blackson Ave	
\$625.00 403 Blackson Ave Austin, TX 78752	
Austin, TX 78752	
Austin, TX 78752  Category (See Categories listed at the top of this schedule)  Description (If travel outside of Texas, con	nplete Schedule T)
Austin, TX 78752  Category (See Categories listed at the top of this schedule) PURPOSE OF  Category (See Categories listed at the top of this schedule) Campaign staffing	nplete Schedule T)
Austin, TX 78752  Category (See Categories listed at the top of this schedule) PURPOSE OF EXPENDITURE  Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor  Description (If travel outside of Texas, con Campaign staffing	
Austin, TX 78752  Category (See Categories listed at the top of this schedule)  PURPOSE OF EXPENDITURE  Category (See Categories listed at the top of this schedule)  Campaign staffing  Check if Austin, TX, officeholder living expe	ense
Austin, TX 78752  PURPOSE OF EXPENDITURE  Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor  Campaign staffing  Check if Austin, TX, officeholder living expenditure direct expenditure  Candidate / Officeholder name  Office sought:  Office	
Austin, TX 78752  PURPOSE OF EXPENDITURE  Candidate / Officeholder name  Candidate / Officeholder name  Austin, TX 78752  Description (til travel outside of Texas, con Campaign staffing  Campaign staffing  Check if Austin, TX, officeholder living expenditure to benefit C/OH  Candidate / Officeholder name	ense
Austin, TX 78752  PURPOSE OF Salaries/Wages/Contract Labor  Complete ONLY II direct expenditure to benefit C/OH  Date Payee name  Category (See Categories listed at the top of this schedule)  Category (See Categories listed at the top of this schedule)  Campaign staffing  Campaign staffing  Check if Austin, TX, officeholder living expenditure to benefit C/OH  Payee name	ense
Austin, TX 78752  PURPOSE OF Salaries/Wages/Contract Labor  Complete ONLY if direct expenditure to benefit C/OH  Date Payee name  Emmons, Joe  Austin, TX 78752  Category (See Categories listed at the top of this schedule)  Campaign staffing  Check if Austin, TX, officeholder living expenditure to benefit C/OH  Payee name  Emmons, Joe	ense
Austin, TX 78752  PURPOSE OF EXPENDITURE  Candidate / Officeholder name  Complete ONLY is direct expenditure to benefit C/OH  Date Payee name  10/14/2014  Amount (\$) Payee address City: State; Zip Code	ense
Austin, TX 78752  PURPOSE OF Salaries/Wages/Contract Labor  Complete ONLY if direct expenditure to benefit C/OH  Date Payee name 10/14/2014  Amount (\$) Payee address City: State; Zip Code \$625.00  Austin, TX 78752  Description (If travel outside of Texas, con Campaign staffing)  Description (If travel outside of Texas, con Campaign staffing)  Check if Austin, TX, officeholder living expenditure to benefit C/OH  Office sought: Office sought: Office sought Code  Amount (\$) Payee address City: State; Zip Code	ense
Austin, TX 78752  PURPOSE OF EXPENDITURE  Candidate / Officeholder name  Complete ONLY is direct expenditure to benefit C/OH  Date Payee name  10/14/2014  Amount (\$) Payee address City: State; Zip Code	ense
PURPOSE OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/OH  Date 10/14/2014  Amount (\$) Payee address City; State; Zip Code 403 Blackson Ave Austin, TX 78752  Category (See Categories listed at the top of this schedule) Campaign staffing  Category (See Categories listed at the top of this schedule) Campaign staffing  Campaign staffing  Check if Austin, TX, officeholder living expenditure to benefit C/OH  Check if Austin, TX, officeholder living expenditure to benefit C/OH  Payee name  Emmons, Joe  403 Blackson Ave Austin, TX 78752	ense e held:
Austin, TX 78752  PURPOSE OF EXPENDITURE  Complete ONLY II direct expenditure to benefit C/OH  Date 10/14/2014  Amount (\$) \$625.00  Page address Categories listed at the top of this schedule)  Category (See Categories listed at the top of this schedule)  Category (See Categories listed at the top of this schedule)  Description (If travel outside of Texas, con Campaign staffing)  Campaign staffing  Check if Austin, TX, officeholder living expenditure to benefit C/OH  Office sought:  Office	ense e held:
Austin, TX 78752  PURPOSE OF EXPENDITURE  Complete ONLY is direct expenditure to benefit C/OH  Date 10/14/2014  Amount (\$) Payee address City; State; Zip Code 403 Blackson Ave Austin, TX 78752  Category (See Categories listed at the top of this schedule)  Category (See Categories listed at the top of this schedule)  Description (If travel outside of Texas, con Campaign staffing)  Check if Austin, TX, officeholder living expenditure to benefit C/OH  Office sought:  Office so	ense e held:
PURPOSE OF EXPENDITURE  Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor  Complete ONLY is direct expenditure to benefit C/OH  Date 10/14/2014  Amount (\$) Payee name Emmons, Joe Amount (\$) Payee address City: State; Zip Code 403 Blackson Ave Austin, TX 78752  PURPOSE OF EXPENDITURE  Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor  Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor  Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor  Campaign staffing  Description (If travel outside of Texas, con Campaign staffing)	e held:
Austin, TX 78752  PURPOSE OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/OH  Date 10/14/2014  Amount (\$) Payee address City: State; Zip Code  Amount (\$) Payee address City: State; Zip Code  403 Blackson Ave Austin, TX 78752  PURPOSE OF EXPENDITURE  Category (See Categories listed at the top of this schedule)  Salaries/Wages/Contract Labor  Check if Austin, TX, officeholder living experiments of the complete one of the comple	e held:
Austin, TX 78752  PURPOSE OF EXPENDITURE  Candidate / Officeholder name  Complete ONLY in direct expenditure to benefit C/OH  Date 10/14/2014  Amount (\$) \$625.00  Payee address OF EXPENDITURE  Category (See Categories listed at the top of this schedule) Check if Austin, TX, officeholder living expenditure to benefit C/OH  Candidate / Officeholder name  Office sought:  Office soug	e held:  nplete Schedule T)
Austin, TX 78752  PURPOSE OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/OH  Payee name Emmons, Joe Austin, TX 78752  Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor  Candidate / Officeholder name  Check if Austin, TX, officeholder living expenditure to benefit C/OH  Payee name Emmons, Joe Austin, TX 78752  Purpose of Expenditure Office Sought:  Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor  Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor  Category (See Categories listed at the top of this schedule) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor  Category (See Categories listed at the top of this schedule) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor  Category (See Categories listed at the top of this schedule) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor  Category (See Categories listed at the top of this schedule) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor  Category (See Categories listed at the top of this schedule) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor  Category (See Categories listed at the top of this schedule) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor  Category (See Categories listed at the top of this schedule) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor  Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor  Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor  Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	e held:  nplete Schedule T)
Austin, TX 78752  PURPOSE OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/OH  Page name  Category (See Categories listed at the top of this schedule)  Salaries/Wages/Contract Labor  Camplete ONLY if direct expenditure to benefit C/OH  Payee name  Emmons, Joe  Payee address City; State; Zip Code  403 Blackson Ave Austin, TX 78752  PURPOSE OF EXPENDITURE  Category (See Categories listed at the top of this schedule)  Salaries/Wages/Contract Labor  Camplete ONLY if direct expenditure to benefit C/OH  Candidate / Officeholder name  Candidate / Officeholder name  Office sought:  Candidate / Officeholder name  Office sought:  Office sou	e held:  nplete Schedule T)
Austin, TX 78752  PURPOSE OF EXPENDITURE  Complete ONLY II direct expenditure to benefit C/OH  Page address City: State: Zip Code  Austin, TX 78752  Category (See Categories listed at the top of this schedule)  Salaries/Wages/Contract Labor  Campaign staffing  Check if Austin, TX, officeholder living expenditure to benefit C/OH  Candidate / Officeholder name  Office sought:  Offi	e held:  nplete Schedule T)
Austin, TX 78752  PURPOSE OF Salaries/Wages/Contract Labor  Complete ONLY ii direct expenditure to benefit G/OH  Purpose OF Salaries/Wages/Contract Labor  Campaign staffing  Check if Austin, TX, officeholder fiving expenditure to benefit G/OH  Payee name  Emmons, Joe  Amount (\$) Payee address City; State; Zip Code  403 Blackson Ave Austin, TX 78752  PURPOSE OF EXPENDITURE  Category (See Categories listed at the top of this schedule)  Salaries/Wages/Contract Labor  Category (See Categories listed at the top of this schedule)  Salaries/Wages/Contract Labor  Carripaign staffing  Carripaign staffing  Carripaign staffing  Carripaign staffing  Check if Austin, TX, officeholder living expenditure to benefit G/OH  Date Payee name  Emmons, Joe  Payee name  Emmons, Joe  Amount (\$) Payee address City, State; Zip Code	e held:  nplete Schedule T)
Austin, TX 78752  PURPOSE OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/OH  Category (See Categories listed at the top of this schedule)  Salaries/Wages/Contract Labor  Campaign staffing  Check if Austin, TX, officeholder living expenditure to benefit C/OH  Date 10/14/2014  Amount (\$) Payee address City; State; Zip Code 403 Blackson Ave Austin, TX 78752  PURPOSE OF EXPENDITURE  Candidate / Officeholder name  Check if Austin, TX, officeholder living expending the payer name paye	e held:  nplete Schedule T)
Austin, TX 78752  PURPOSE OF Salaries/Wages/Contract Labor Campaign staffing  Complete ONLY ii direct expenditure to benefit C/OH  Payee address City: State: Zip Code  PURPOSE OF EXPENDITURE  Category (See Categories listed at the top of this schedule)  Complete ONLY iii direct expenditure to benefit C/OH  Date 10/14/2014 Emmons, Joe  Payee address City: State: Zip Code  403 Blackson Ave Austin, TX 78752  PURPOSE OF EXPENDITURE  Category (See Categories listed at the top of this schedule)  Salaries/Wages/Contract Labor  Campaign staffing  Description (if travel outside of Texas, cor Campaign staffing  Carriaging staffing  Category (See Categories listed at the top of this schedule)  Salaries/Wages/Contract Labor  Campaign staffing  Carriaging staffing  Carriaging staffing  Check if Austin, TX, officeholder living expective benefit C/OH  Date Payee name  Emmons, Joe  Amount (\$) Payee address City: State: Zip Code	e held:  nplete Schedule T)
Austin, TX 78752  PURPOSE OF Salaries/Wages/Contract Labor  Campaign staffing  Check if Austin, TX, officeholder name  Complete ONLY if direct expenditure to benefit C/OH  Date 10/14/2014  Amount (\$) Payee address City: State: Zip Code 403 Blackson Ave Austin, TX 78752  PURPOSE OF EXPENDITURE  Candidate / Officeholder name  Candidate / Officeholder name  Candidate / Officeholder name  City: State: Zip Code 403 Blackson Ave Austin, TX 78752  Candidate / Officeholder name  Check if Austin, TX, officeholder living experiments of the company of the comp	nplete Schedule T)
PURPOSE OF EXPENDITURE  Complete ONLY II direct expenditure to benefit C/OH  PURPOSE OF EXPENDITURE  Complete ONLY II direct expenditure to benefit C/OH  Complete ONLY II direct expenditure to benefit C/OH  Candidate / Officeholder name  Payee name  Emmons, Joe  Purpose OF EXPENDITURE  Candidate / Officeholder name  Office sought:  Office sought:  Candidate / Officeholder name  Office sought:  Office sought:  Candidate / Officeholder name  Office sought:  Office sought:  Officeholder living expendence name  Office sought:  Office sought:  Officeholder living expendence name  Offi	nplete Schedule T)
PURPOSE OF EXPENDITURE  Complete ONLY ii direct expenditure to benefit C/OH  Amount (\$)  PURPOSE OF EXPENDITURE  Candidate / Officeholder name  Check if Austin, TX, officeholder living expenditure to benefit C/OH  Amount (\$)  Payee address City; State; Zip Code  403 Blackson Ave Austin, TX 78752  PURPOSE OF EXPENDITURE  Candidate / Officeholder name  Candidate / Officeholder name  Candidate / Officeholder name  Candidate / Officeholder name  Complete ONLY ii direct expenditure to benefit C/OH  Date 10/21/2014  Amount (\$)  Payee name Emmons, Joe  Candidate / Officeholder name  City; State; Zip Code  Amount (\$)  Candidate / Officeholder name  City; State; Zip Code  Amount (\$)  Payee address City; State; Zip Code  403 Blackson Ave Austin, TX, officeholder living expenditure to benefit C/OH  Amount (\$)  Payee address City; State; Zip Code  403 Blackson Ave Austin, TX 78752   Category (See Categories listed at the top of this schedule)  Salaries/Wages/Contract Labor  Description (II travel outside of Texas, or Campaign staffing)  Description (II travel outside of Texas, or Campaign staffing)	nplete Schedule T)
PURPOSE OF EXPENDITURE  Complete ONLY II direct expenditure to benefit C/OH  PURPOSE OF EXPENDITURE  Complete ONLY II direct expenditure to benefit C/OH  Complete ONLY II direct expenditure to benefit C/OH  Candidate / Officeholder name  Payee name  Emmons, Joe  Purpose OF EXPENDITURE  Candidate / Officeholder name  Office sought:  Office sought:  Candidate / Officeholder name  Office sought:  Office sought:  Candidate / Officeholder name  Office sought:  Office sought:  Officeholder living expendence name  Office sought:  Office sought:  Officeholder living expendence name  Offi	nplete Schedule T)

#### SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense

**EXPENDITURE CATEGORIES** Gilts/Awards/Memorial Expense Legal Services Food/Beverage Expense Polling Expense

Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

Fees	Printing Expense Office Overh The INSTRUCTION Guide explains	eati/Rental Expense OTHER (enter a category not listed above)
1 PAGE#	2 FILER NAME	3 ACCOUNT # (TEC filers)
Schedule: 3/12 F	E B	11111111
4 Date	5 Pavee name	, , , , , , , , , , , , , , , , , , , ,
10/23/2014	Emmons, Joe	
6 Amount (\$)	7 Payee address City, State; Zip Code	
\$625.00		
φυ23.00	Austin, TX 78752	*
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule T)
PURPOSE	Salaries/Wages/Contract Labor	Campaign staffing
OF EXPENDITURE	_	
		Check if Austin, TX, officeholder living expense
9 Complete ONLY if	Candidate / Officeholder name	Office sought; Office held:
direct expenditure to benefit C/OH		
Date	Payee name	
10/06/2014	Evans, Chris	
Amount (\$)	Payee address City; State; Zip Code	
\$300.00	807 Brazos St Ste 316	
<b></b>	Austin, TX 78701	
**	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
PURPOSE	Salaries/Wages/Contract Labor	Finance report preparation
OF EXPENDITURE	_	<u> </u>
		Check if Austin, TX, officeholder living expense
Complete ONLY if	Candidate / Officeholder name	Office sought: Office held:
direct expenditure to benefit C/OH		
Date	Payee name	
09/26/2014	FedEx Office	
Amount (\$)	Payee address City, State, Zip Code	
\$119.35	I	
Ψ110.00	Austin, TX 78701	
DUDECCE	Category (See Categories listed at the top of this schedule)	Description (Il travel outside of Texas, complete Schedule T)
PURPOSE OF	Event Expense	Signs for event
EXPENDITURE		
	0-17	Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure	Candidate / Officeholder name	Office sought: Office held:
to benefit C/OH		
Date	Payee name	
10/01/2014	Gibbons, Heidi	
Amount (\$)	Payee address City; State; Zip Code	
\$500.00	613 Hearn St	
Ψ500.00	Austin, TX 78703	ſ
ALIAN CO.	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
PURPOSE OF	Salaries/Wages/Contract Labor	Campaign staffing
EXPENDITURE		
		Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure	Candidate / Officeholder name	Office sought: Office held:

#### SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense

**EXPENDITURE CATEGORIES** Gifts/Awards/Memorial Expense Legal Services Legal Services Expense Polling Expense

Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel in District

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By

Fees	Printing Expense Traver Out Of D Printing Expense Office Overhea  The Instruction Guide explains he	d/Rental Expense OTHER (enter a category not listed above)
1 PAGE#	2 FILER NAME	3 ACCOUNT # (TEC filers)
Schedule: 4/12 F	leport: 13/21 Pool, Leslie (Ms.)	11111111
4 Date	5 Payee name	
10/16/2014	Gibbons, Heidi	
6 Amount (\$)	7 Payee address City; State; Zip Code	
\$500.00	613 Hearn St Austin, TX 78703	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description (If travel outside of Texas, complete Schedule T) Campaign staffing
OF EVERNOTURE	Calanca Trages Contract Labor	J
EXPENDITURE	i.	Check if Austin, TX, officeholder living expense
9 Complete ONLY if	Candidate / Officeholder name	Office sought: Office held:
direct expenditure to benefit C/OH	•	
Date	Payee name	<del></del>
09/27/2014	Ginny's Little Longhorn Saloon	·
Amount (\$)	Payee address City: State: Zip Code	
\$425.00	5434 Burnet Rd	·
<b>\$</b> 120.00	Austin, TX 78756	
PURPOSE	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
OF	Event Expense	Event space rental, food
EXPENDITURE	3	Check if Austin, TX, officeholder living expense
Complete ONLY il	Candidate / Officeholder name	Office sought: Office held:
direct expenditure to benefit C/OH	•	
Date	Payee pame	<del></del>
09/29/2014	Payee name InFocus Campaigns, LLC	
Amount (\$)	Payee address City; State; Zip Code	
\$418.88	PO Box 10726	
ψ <del>4</del> 10.00	Fort Worth, TX 76114	
	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
PURPOSE OF	Advertising Expense	Automated calls
EXPENDITURE		
Complete ONLY if	Candidate / Officeholder name	Check if Austin, TX, officeholder living expense Office sought: Office held:
direct expenditure	Candidate / Chicerolder hame	Office sought: Office held:
to benefit C/OH		
Date	Payee name	
10/16/2014	InFocus Campaigns, LLC	
Amount (\$)	Payee address City; State; Zip Code	
\$220.00	PO Box 10726 Fort Worth, TX 76114	
	TOTE WORLD, TA FOLIA	
	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
PURPOSE	Advertising Expense	Automated calls
OF EXPENDITURE	· - · - · · · · · · · · · · · · · · · ·	
		Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure	Candidate / Officeholder name	Office sought: Office held:

#### SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense

EXPENDITURE CATEGORIES
ense Salaries/Wages/Contract Labor
Soficitation/Fundraising Expense
Travel In District
Travel Out Of District

Fees	Printing Expense Traver Our Or D Printing Expense Office Overhear The Instruction Guide explains he	t/Rental Expense OTHER (enter a category not listed above)
1 PAGE#	2 FILER NAME	3 ACCOUNT # (TEC filers)
Schedule: 5/12 R	Dool Looks (Max)	11111111
4 Date	5 Pavee name	
09/27/2014	OfficeMax	
6 Amount (\$)	7 Payee address City; State; Zip Code	
\$17.08	907 W Fifth St	
Ψ17.00	Austin, TX 78703	
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule T)
PURPOSE OF	Office Overhead/Rental Expense	Office supplies
EXPENDITURE		
0 Co 040 V B	0	Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date	Payee name	
10/07/2014	OfficeMax	
Amount (\$)	Payee address City; State; Zip Code	
\$5.40	4615 N Lamar Blvd	
• • •	Austin, TX 78756	
DUDDOOF	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
PURPOSE OF	Office Overhead/Rental Expense	CD-Rs —
EXPENDITURE		i <sub>m</sub>
O	On didney (Official and an analysis)	Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure	Candidate / Officeholder name	Office sought: Office held:
to benefit C/OH		
Date	Payee name	
10/08/2014	OfficeMax	
Amount (\$)	Payee address City; State; Zip Code	
\$136.75	4615 N Lamar Blvd	
<b>4</b> ,00%	Austin, TX 78756	
	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
PURPOSE OF	Office Overhead/Rental Expense	Ink and stationery
EXPENDITURE		
		Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure	Candidate / Officeholder name	Office sought: Office held:
to benefit C/OH		
Date	Payee name	
10/10/2014	OfficeMax	
Amount (\$)	Payee address City; State; Zip Code	·
\$34.95	907 W Fifth St	
ψ04.90	Austin, TX 78703	)
	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
PURPOSE OF	Office Overhead/Rental Expense	Office supplies
EXPENDITURE		<u> </u>
		Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure	Candidate / Officeholder name	Office sought: Office held:

#### SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense

**EXPENDITURE CATEGORIES** Gits/Awards/Memorial Expense Legal Services Food/Beverage Expense Politing Expense

Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District Travel Out Of District

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee

Fees	Printing Expense Office Overhead.  The Instruction Guide explains ho	, , , , , , , , , , , , , , , , , , , ,
1 PAGE#	2 FILER NAME	3 ACCOUNT # (TEC filers)
Schedule: 6/12 F	Report: 15/21 Pool, Leslie (Ms.)	1111111
4 Date	5 Payee name	•
10/25/2014	OfficeMax	
6 Amount (\$)	7 Payee address City, State; Zip Code	···-
\$33.91	907 W Fifth St Austin, TX 78703	
	7.03uri, 17.70700	
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule T)
PURPOSE OF	Office Overhead/Rental Expense	Office supplies
EXPENDITURE		<u> </u>
EV IIIO etelesco O	Condidate (Officeholder name	Check if Austin, TX, officeholder living expense
9 Complete ONLY il direct expenditure	Candidate / Officeholder name	Office sought: Office held:
to benefit C/OH		
Date	Payee name	· · · · · · · · · · · · · · · · · · ·
10/02/2014	Sage Payment Solutions	
Amount (\$)	Payee address City; State; Zip Code	
\$223.79	1750 Old Meadow Rd Ste 300 McLean, VA 22102	·
	,	•
	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
PURPOSE OF	Solicitation/Fundraising Expense	Online contribution fees
EXPENDITURE	,	
0	Candidate / Officeholder name	Check if Austin, TX, officeholder living expense
Complete ONLY il direct expenditure	Candidate / Officenoider name	Office sought: Office held:
to benefit C/OH		
Date	Payee name	
10/12/2014	Shutterstock, Inc.	
Amount (\$)	Payee address City; State; Zip Code	
\$29.00	350 Fifth Ave 21st Flr New York, NY 10118	
	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
PURPOSE OF	Advertising Expense	Art for mail piece
EXPENDITURE		
	0	Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure	Candidate / Officeholder name	Office sought: Office held:
to benefit C/OH	2	
Date	Payee name	
10/20/2014		
Amount (\$)	Payee address City, State; Zip Code	-
\$29.00	350 Fifth Ave 21st Flr New York, NY 10118	
	,	·
	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
PURPOSE OF	Advertising Expense	Art for mail piece
EXPENDITURE		
Complete City v =	Condidate / Officeholder name	Check if Austin, TX, officeholder living expense Office sought: Office held:
Complete ONLY if direct expenditure		Office saught: Office held:

#### SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense Gitts/Awards/Memorial Expense Legal Services Food/Beverage Expense Polling Expense

EXPENDITURE CATEGORIES

ense Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out of District

Fees	Printing Expense Office Overhead	(Rental Expense OTHER (enter a category not listed above)
1 PAGE#	2 FILER NAME	3 ACCOUNT # (TEC filers)
Schedule: 7/12 F	I	1111111
4 Date	5 Payee name	
10/18/2014	Smith, Natasha (M.)	
6 Amount (\$)	7 Payee address City; State; Zip Code	· <u> · · · · · · · · · · · · · · · · · </u>
\$540.00	l'	
Ψο το.σο	Austin, TX 78705	
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description (if travel outside of Texas, complete Schedule T)
PURPOSE OF	Salaries/Wages/Contract Labor	Campaign staffing
EXPENDITURE		
A C	Opendidate / Office holds	Check If Austin, TX, officeholder living expense
9 Complete ONLY il direct expenditure	Candidate / Officeholder name	Office sought: Office held:
to benefit C/OH		
Date ^	Payee name	
10/20/2014	Spence, Steven	
Amount (\$)	Payee address City; State; Zip Code	
\$132.00	7707 S IH-35 Apt 230	
	Austin, TX 78744	
PURPOSE	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
OF	Salaries/Wages/Contract Labor	Campaign stating
EXPENDITURE		O Charles Avenue TV effect of the living and the li
Complete ONLY ii	Candidate / Officeholder name	Check If Austin, TX, officeholder living expense Office sought: Office held:
direct expenditure		
to benefit C/OH		···
Date	Payee name	
10/25/2014	Spence, Steven	
Amount (\$)	Payee address City; State; Zip Code	
\$408.00	7707 S IH-35 Apt 230 Austin, TX 78744	
	Adoun, 1X 70744	
	Category (See Categories listed at the lop of this schedule)	Description (II travel outside of Texas, complete Schedule T)
PURPOSE	Salaries/Wages/Contract Labor	Campaign staffing
OF EXPENDITURE		
EXPENDITORE		Check if Austin, TX, officeholder living expense
Complete ONLY if	Candidate / Officeholder name	Office sought: Office held:
direct expenditure to benefit C/OH		
Date	Payee name	
09/30/2014	US Postal Service	
Amount (\$)	Payee address City; State; Zip Code	
• • •	l	
\$3,867.79	Austin, TX 78710	
	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
PURPOSE OF	Advertising Expense	Postage stamps
EXPENDITURE		<u> </u>
		Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure	Candidate / Officeholder name	Office sought: Office held:
	•	·

#### SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense Gifts/Awards/Memorial Expense Legal Services Food/Beverage Expense Polling Expense

EXPENDITURE CATEGORIES

anse Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District

Fees	Printing Expense	Office Overhead/Rental Expens Guide explains how to complet	
1 PAGE#		Goide explains now to complete	· · · · · · · · · · · · · · · · · · ·
•			3 ACCOUNT # (TEC filers)
Schedule: 8/12 F	5 Payee name	· · · · · · · · · · · · · · · · · · ·	11111111
-	US Postal Service		·
10/09/2014	+ - · · · · · · · · · · · · · · · · · ·		
6 Amount (\$)		e; Zip Code	· ·
\$26.46	2418 Spring Ln Austin, TX 78703		·
8 PURPOSE	(a) Category (See Categories listed at the to Advertising Expense		ription (It travel outside of Texas, complete Schedule T)
OF EXPENDITURE	, <del>-</del> .	ln	
O Complete ONLY #	Candidate / Officeholder name		k if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Cardidate / Onceroner name		Office sought: Office held:
Date 10/15/2014	Payee name US Postal Service		
Amount (\$)		e; Zip Code	
\$3,767.21	8225 Cross Park Dr Austin, TX 78710	o, aposac	·
	Category (See Categories listed at the to		ription (If travel outside of Texas, complete Schedule T)
PURPOSE OF	Advertising Expense	Posi	age stamps
EXPENDITURE		П	k if Austin, TX, officeholder living expense
Complete ONLY 8	Candidate / Officeholder name		Office sought: Office held:
Complete ONLY if direct expenditure to benefit C/OH	Calididate / Cilicensides statie		
direct expenditure	Payee name		
direct expenditure to benefit C/OH			
direct expenditure to benefit C/OH Date	Payee name		
direct expenditure to benefit C/OH  Date 10/20/2014	Payee name US Postal Service Payee address City; Stat		
Date 10/20/2014 Amount (\$) \$49.00	Payee name US Postal Service Payee address City; State 4300 Speedway	e; Zip Code p of this schedule) Desc	ription (If travel outside of Texas, complete Schedule T)
Date 10/20/2014 Amount (\$) \$49.00	Payee name US Postal Service Payee address City; Stat 4300 Speedway Austin, TX 78705  Category (See Categories listed at the to	e; Zip Code  p of this schedule) Desc	ription (If travel outside of Texas, complete Schedule T)
Date 10/20/2014 Amount (\$) \$49.00  PURPOSE OF	Payee name US Postal Service Payee address City; Stat 4300 Speedway Austin, TX 78705  Category (See Categories listed at the to	e; Zip Code  p of this schedule) Desc Pos	ription (If travel outside of Texas, complete Schedule T)
Date 10/20/2014 Amount (\$) \$49.00  PURPOSE OF EXPENDITURE  Complete ONLY if direct expenditure	Payee name US Postal Service Payee address City; State 4300 Speedway Austin, TX 78705  Category (See Categories listed at the to Advertising Expense	e; Zip Code  p of this schedule) Desc Pos	ription (If travel outside of Texas, complete Schedule T)
direct expenditure to benefit C/OH  Date 10/20/2014  Amount (\$) \$49.00  PURPOSE OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/OH	Payee name US Postal Service Payee address City; State 4300 Speedway Austin, TX 78705  Category (See Categories listed at the to Advertising Expense  Candidate / Officeholder name	e; Zip Code  p of this schedule) Desc Pos	ription (If travel outside of Texas, complete Schedule T)
direct expenditure to benefit C/OH  Date 10/20/2014  Amount (\$) \$49.00  PURPOSE OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/OH  Date 10/20/2014	Payee name US Postal Service Payee address City; State 4300 Speedway Austin, TX 78705  Category (See Categories listed at the total Advertising Expense  Candidate / Officeholder name  Payee name US Postal Service	e; Zip Code  p of this schedule) Desc Pos	ription (If travel outside of Texas, complete Schedule T)
direct expenditure to benefit C/OH  Date 10/20/2014  Amount (\$) \$49.00  PURPOSE OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/OH  Date	Payee name US Postal Service Payee address City; State 4300 Speedway Austin, TX 78705  Category (See Categories listed at the total Advertising Expense  Candidate / Officeholder name  Payee name US Postal Service Payee address City; State	e; Zip Code  p of this schedule) Desc Pos	ription (If travel outside of Texas, complete Schedule T)
direct expenditure to benefit C/OH  Date 10/20/2014  Amount (\$) \$49.00  PURPOSE OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/OH  Date 10/20/2014  Amount (\$) \$1,986.89	Payee name US Postal Service Payee address City; Stat 4300 Speedway Austin, TX 78705  Category (See Categories listed at the to Advertising Expense  Candidate / Officeholder name  Payee name US Postal Service Payee address City; Stat 8225 Cross Park Dr	e; Zip Code  p of this schedule)  Chec  City  Chec  City  Description   ription (If travel outside of Texas, complete Schedule T) age stamps  k if Austin, TX, officeholder living expense  Office sought: Office held:	
Date 10/20/2014 Amount (\$) \$49.00  PURPOSE OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/OH  Date 10/20/2014 Amount (\$) \$1,986.89	Payee name US Postal Service Payee address City; State 4300 Speedway Austin, TX 78705  Category (See Categories listed at the total Advertising Expense  Candidate / Officeholder name  Payee name US Postal Service Payee address City; State 8225 Cross Park Dr Austin, TX 78710	e; Zip Code  p of this schedule)  Chec  City  Chec  City  Description   ription (If travel outside of Texas, complete Schedule T)  age stamps  k if Austin, TX, officeholder living expense  Office sought: Office held:	
direct expenditure to benefit C/OH  Date 10/20/2014  Amount (\$) \$49.00  PURPOSE OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/OH  Date 10/20/2014  Amount (\$) \$1,986.89	Payee name US Postal Service Payee address City; State 4300 Speedway Austin, TX 78705  Category (See Categories listed at the total Advertising Expense  Candidate / Officeholder name  Payee name US Postal Service Payee address City; State 8225 Cross Park Dr Austin, TX 78710  Category (See Categories listed at the total	e; Zip Code  p of this schedule)  Chec  City  Chec  City  Description   ription (If travel outside of Texas, complete Schedule T) age stamps  k if Austin, TX, officeholder living expense  Office sought: Office held:	
Date 10/20/2014 Amount (\$) \$49.00  PURPOSE OF EXPENDITURE  Complete ONLY if direct expenditure to benefit C/OH  Date 10/20/2014 Amount (\$) \$1,986.89	Payee name US Postal Service Payee address City; State 4300 Speedway Austin, TX 78705  Category (See Categories listed at the total Advertising Expense  Candidate / Officeholder name  Payee name US Postal Service Payee address City; State 8225 Cross Park Dr Austin, TX 78710  Category (See Categories listed at the total	e; Zip Code  p of this schedule)  Chec  Chec	ription (If travel outside of Texas, complete Schedule T) age stamps  k if Austin, TX, officeholder living expense  Office sought: Office held:

#### SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense Gilts/Awards/Memorial Expense Legal Services Food/Beverage Expense Polling Expense

EXPENDITURE CATEGORIES

anse Salaries/Wages/Contract Labor
Soficitation/Fundraising Expense
Travel in District
Travel Out Of District

Fees	Printing Expense Office Overhead.  The Instruction Guide explains ho	
1 PAGE#	2 FILER NAME	3 ACCOUNT # (TEC filers)
Schedule: 9/12 F	Don't bentle (64n)	11111111
4 Date	5 Payee name	
10/22/2014	US Postal Service	
6 Amount (\$)	7 Payee address City; State; Zip Code	
\$2,278.72	8225 Cross Park Dr	
<del>4_,_</del> ,_,_,_	Austin, TX 78710	
8	(a) Category (See Categories listed at the top of this schedule)	(b) Description (if travel outside of Texas, complete Schedule T)
PURPOSE OF	Advertising Expense	Postage stamps
EXPENDITURE		
O Complete CNI V 2	Condidate / Officeholder come	Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure	Candidate / Officeholder name	Office sought: Office held:
to benefit C/OH		
Date	Payee name	
10/23/2014	US Postal Service	
Amount (\$)	Payee address City; State; Zip Code	
\$2,506.46	8225 Cross Park Dr	
•	Austin, TX 78710	
PURPOSE	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
OF	Advertising Expense	r osiage siamps
EXPENDITURE		n
Complete ONLY if	Candidate / Officeholder name	Check if Austin, TX, officeholder living expense  Office sought: Office held:
direct expenditure	Candidate / Officendide flame	Office sought. Office field.
to benefit C/OH		
Date	Payee name	
09/26/2014	Worley Printing	
Amount (\$)	Payee address City; State; Zip Code	
\$3,754.11	3217 N IH-35	·
	Austin, TX 78722	
PURPOSE	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
OF	Printing Expense	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
EXPENDITURE		Check if Austin, TX, officeholder living expense
Complete ONLY if	Candidate / Officeholder name	Office sought: Office held:
direct expenditure to benefit C/OH	· <del></del>	
Date	Payee name	
09/30/2014	Worley Printing	
Amount (\$)	Payee address City; State; Zip Code	
\$427.59	3217 N IH-35 Austin, TX 78722	
	AUGUII, IA IOIZE	
	Category (See Categories listed at the top of this selection)	Description (Il travel outside of Texas, complete Schedule T)
PURPOSE	Category (See Categories listed at the top of this schedule) Printing Expense	Pushcards
OF	Timing Expense	
EXPENDITURE	·	Check if Austin, TX, officeholder living expense
Complete ONLY if	Candidate / Officeholder name	Office sought: Office held:
direct expenditure		Ť

#### SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense Gits/Awards/Memorial Expense Legal Services Food/Beverage Expense Polling Expense

EXPENDITURE CATEGORIES

ense Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District

Fees	Printing Expense Office Overhead  The Instruction Guide explains hor	
1 PAGE#	2 FILER NAME	3 ACCOUNT # (TEC filers)
Schedule: 10/12	Death asia (Max)	1111111
4 Date	5 Payee name	
-	-	•
10/10/2014	Worley Printing	
6 Amount (\$)	7 Payee address City; State; Zip Code	
\$125.57	3217 N IH-35 Austin, TX 78722	
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description (if travel outside of Texas, complete Schedule T)
EXPENDITURE		D
- C	Operational Information	Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date 10/10/2014	Payee name Worley Printing	
Amount (\$)	Payee address City, State; Zip Code	
\$411.35	3217 N IH-35 Austin, TX 78722	
PURPOSE OF	Category (See Categories listed at the top of this schedule) Printing Expense	Description (If travel outside of Texas, complete Schedule T) Pushcards
EXPENDITURE		•
		Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date	Payee name	
10/13/2014	Worley Printing	
	, ,	
Amount (\$)	Payee address City; State; Zip Code	
\$132.07	3217 N IH-35 Austin, TX 78722	
	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
PURPOSE	Printing Expense	Event item printing
OF	· mining expenses	
EXPENDITURE		O
	On the Complete Compl	Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought: Office held:
Date	Payee name	
10/15/2014	Worley Printing	
		······································
Amount (\$)	Payee address City; State; Zip Code	
\$2,673.78	3217 N IH-35 Austin, TX 78722	
PURPOSE OF	Category (See Categories listed at the top of this schedule) Printing Expense	Description (If travel outside of Texas, complete Schedule T) Mailer printing
EXPENDITURE		<u> </u>
<del></del>		Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure	Candidate / Officeholder name	Office sought: Office held:

### SCHEDULE F

Advertising Expense Accounting/Banking Consulting Expense Event Expense

**EXPENDITURE CATEGORIES** Gifts/Awards/Memorial Expense Legal Services Food/Severage Expense Polling Expense

Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District Travel Out Of District

Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee

Fees	Printing Expense Office Overhead/ The Instruction Guide explains how	· ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '
1 PAGE#	2 FILER NAME	3 ACCOUNT # (TEC filers)
Schedule: 11/12	Don't 1 - E - (14 - 3	1111111
4 Date	5 Payee name	
10/15/2014	Worfey Printing	
6 Amount (\$)	7 Payee address City: State; Zip Code	
\$2,498.41	3217 N IH-35	
Ψ2,430.41	Austin, TX 78722	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description (It travel outside of Texas, complete Schedule T)
OF	Tillung Expense	
EXPENDITURE		Check if Austin, TX, officeholder living expense
9 Complete ONLY if	Candidate / Officeholder name	Office sought: Office held:
direct expenditure to benefit C/OH		·
Date	Payee name	
10/16/2014	Worley Printing	<u> </u>
Amount (\$)	Payee address City; State; Zip Code	
\$3,670.76	3217 N IH-35	
,	Austin, TX 78722	
PUPPOSE	Category (See Categories listed at the top of this schedule)	Description (if travel outside of Texas, complete Schedule T)
PURPOSE OF	Printing Expense	Mailer printing
EXPENDITURE		
	2 514 125 1 11	Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure	Candidate / Officeholder name	Office sought: Office held:
to benefit C/OH		
Date	Payee name	
10/20/2014	Worley Printing	
Amount (\$)	Payee address City; State; Zip Code	:
\$2,815.58	3217 N IH-35	
Ψ2,013.50	Austin, TX 78722	
	Category (See Categories listed at the top of this schedule)	Description (It travel outside of Texas, complete Schedule T)
PURPOSE	Printing Expense	Mailer printing
OF EXPENDITURE		<u> </u>
		Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure	Candidate / Officeholder name	Office sought: Office held:
to benefit C/OH		
Date	Payee name	·
10/24/2014	Worley Printing	
Amount (\$)	Payee address City; State; Zip Code	
• •	1	
\$2,413.98	Austin, TX 78722	
	Category (See Categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
PURPOSE	Printing Expense	Mailer printing
OF EXPENDITURE	,	
		Check if Austin, TX, officeholder living expense
Complete ONLY if		Office sought: Office held:
direct expenditure	I	·

#### **POLITICAL EXPENDITURES** SCHEDULE F **EXPENDITURE CATEGORIES** Salaries/Wages/Contract Labor Soficitation/Fundraising Expense Travel In District Travel Out Of District Loan Repayment/Reimbursement Transportation Equipment & Related Expense Commutions/Donations Made By Candidate/Officeholder/Political Committee Advertising Expense G@ts/Awards/Memorial Expense Accounting/Banking Consulting Expense Event Expense Legal Services Food/Beverage Expense Polling Expense OTHER (enter a category not listed above) Fees Printing Expense Office Overhead/Rental Expense The INSTRUCTION GUIDE explains how to complete this form. PAGE# FILER NAME 2 3 ACCOUNT # (TEC filers) Pool, Leslie (Ms.) Schedule: 12/12 Report: 21/21 11111111 4 Date Payee name 10/24/2014 Worley Printing 6 Amount (\$) City; State; Zip Code Payee address 3217 N IH-35 \$2,615.86 Austin, TX 78722 8 (a) Category (See Categories listed at the top of this schedule) (b) Description (If travel outside of Texas, complete Schedule T) **PURPOSE** Mailer printing **Printing Expense** OF **EXPENDITURE** Check If Austin, TX, officeholder living expense Candidate / Officeholder name 9 Complete ONLY if Office sought: Office held: direct expenditure to benefit C/OH