

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH INSTRUCTION GUIDE explains how to complete this form.		1 ACCOUNT # (Ethics Commission filers) 11111111		2 PAGE # 1 of 19	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI Ms. Leslie			OFFICE USE ONLY Date Received Date Hand-delivered or Date Postmarked Receipt # Amount	
	NICKNAME LAST SUFFIX Pool				
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 4503 Shoal Creek Blvd Austin, TX 78756				
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Mr. Chad			Date Processed	
	NICKNAME LAST SUFFIX Williams			Date Imaged	
6 CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 7500 Greenhaven Dr Austin, TX 78757				
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (512) 451-6976				
8 REPORT TYPE	<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final report (Attach C/OH - FR)				
9 PERIOD COVERED	Month Day Year Month Day Year 12/07/2014 THROUGH 12/31/2014				
10 ELECTION	ELECTION DATE Month Day Year 12/16/2014		ELECTION TYPE <input type="checkbox"/> Primary <input checked="" type="checkbox"/> Runoff <input type="checkbox"/> General <input type="checkbox"/> Special		
11 OFFICE	OFFICE HELD (if any)		12 OFFICE SOUGHT (if known) Austin City Council District 7		
GO TO PAGE 2					

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

13 C/OH NAME Pool, Leslie (Ms.)

14 ACCOUNT # (Ethics Commission filers)
1111111115 NOTICE
FROM
POLITICAL
COMMITTEE(S)

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

COMMITTEE TYPE

COMMITTEE NAME

Austin Police Association PAC

☒ GENERAL

COMMITTEE ADDRESS

5817 Wilcab Rd
Austin, TX 78721☐ SPECIFIC

COMMITTEE CAMPAIGN TREASURER NAME

Escobar, Valencia

☒ additional pages

COMMITTEE CAMPAIGN TREASURER ADDRESS

5817 Wilcab Rd
Austin, TX 7872116 CONTRIBUTION
TOTALS1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN
PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED

\$

775.00

2. TOTAL POLITICAL CONTRIBUTIONS
(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)

\$

18,900.00

EXPENDITURE
TOTALS

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

\$

219.11

4. TOTAL POLITICAL EXPENDITURES

\$

10,265.42

CONTRIBUTION
BALANCE5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE
LAST DAY OF THE REPORTING PERIOD

\$

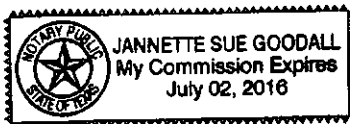
16,860.42

OUTSTANDING
LOAN TOTALS6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE
LAST DAY OF THE REPORTING PERIOD

\$

40,500.00

17 AFFIDAVIT



I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Leslie Pool, this the 14th day of January, 20 15, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Jannette Sue Goodall

Print name of officer administering oath

Notary

Title of officer administering oath

**CANDIDATE / OFFICEHOLDER REPORT:
NOTICE FROM POLITICAL COMMITTEE(S)****FORM C/OH
ADDENDUM**

Page 3 of 19

C/OH NAME Pool, Leslie (Ms.)

ACCOUNT # (Ethics Commission filers)
11111111**17 NOTICE
FROM
POLITICAL
COMMITTEE(S)**

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

COMMITTEE TYPE☒ **GENERAL**☐ **SPECIFIC****COMMITTEE NAME**

Austinites for Equity

COMMITTEE ADDRESS1812 Centre Creek Dr Ste 310
Austin, TX 78754**COMMITTEE CAMPAIGN
TREASURER NAME**

Kirkman, Jack

**COMMITTEE CAMPAIGN
TREASURER ADDRESS**1812 Centre Creek Dr Ste 310
Austin, TX 78754**NOTICE
FROM
POLITICAL
COMMITTEE(S)**

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

COMMITTEE TYPE☒ **GENERAL**☐ **SPECIFIC****COMMITTEE NAME**

Sierra Club Political Committee of Texas

COMMITTEE ADDRESS615 Willow
San Antonio, TX 78202**COMMITTEE CAMPAIGN
TREASURER NAME**

Gonzalez, Hector

**COMMITTEE CAMPAIGN
TREASURER ADDRESS**615 Willow
San Antonio, TX 78202

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 1/10 Report: 4/19	
2 FILER NAME Pool, Leslie (Ms.)		3 ACCOUNT # (Ethics Commission filers) 11111111	
4 Date 12/16/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Arndt, Thomas 6 Contributor address; City; State; Zip Code 19907 Kennemer Dr Pflugerville, TX 78660	7 Amount of contribution (\$) \$350.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions) Engineer		10 Employer (See Instructions) Dannenbaum Engineering Corp.	
Date 12/10/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Austin Police Association PAC Contributor address; City; State; Zip Code 5817 Wilcab Rd Ste 4 Austin, TX 78721	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 12/10/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Bartram, John & Ashley Contributor address; City; State; Zip Code 309 McConnell Dr West Lake Hills, TX 78746-4434	Amount of contribution (\$) \$700.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Attorney; Attorney		Employer (See Instructions) Armbrust & Brown, PLLC; State of Texas	
Date 12/10/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Beckham, Brian & Kimberly Contributor address; City; State; Zip Code 11205 Limoncillo Ct Austin, TX 78750-3688	Amount of contribution (\$) \$700.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Manager; Attorney		Employer (See Instructions) Beckham Real Estate; Armbrust & Brown, PLLC	
Date 12/10/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Burnett, Michael & Claudia Contributor address; City; State; Zip Code 1601 Forest Trl Austin, TX 78703-3231	Amount of contribution (\$) \$700.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Attorney; Homemaker		Employer (See Instructions) Armbrust & Brown, PLLC; None	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 2/10 Report: 5/19	
2 FILER NAME Pool, Leslie (Ms.)		3 ACCOUNT # (Ethics Commission filers) 11111111	
4 Date 12/10/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Byars, Anne 6 Contributor address; City; State; Zip Code 2103 Schulle Ave Austin, TX 78703-2141	7 Amount of contribution (\$) \$350.00 (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Farmer		10 Employer (See Instructions) Self Employed	
Date 12/10/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Byars, Sam Contributor address; City; State; Zip Code 2103 Schulle Ave Austin, TX 78703-2141	Amount of contribution (\$) \$350.00 (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Armbrust & Brown, PLLC	
Date 12/10/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Carlson, Michelle Contributor address; City; State; Zip Code 1609 Mohle Dr Austin, TX 78703-1937	Amount of contribution (\$) \$350.00 (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Reed & Scardino LLP	
Date 12/10/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Carlson, Patrick Contributor address; City; State; Zip Code 1609 Mohle Dr Austin, TX 78703-1937	Amount of contribution (\$) \$350.00 (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Armbrust & Brown, PLLC	
Date 12/16/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Celauro, F. Paul Contributor address; City; State; Zip Code 5326 McCulloch Cir Houston, TX 77056	Amount of contribution (\$) \$350.00 (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Dannenbaum Engineering Corp.	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 3/10 Report: 6/19

2 FILER NAME Pool, Leslie (Ms.)

3 ACCOUNT # (Ethics Commission filers)

11111111

4 Date

5 Full name of contributor ☐ out-of-state PAC (ID# _____)

Chernet, Tsegaye

7 Amount of contribution (\$)

8 In-kind contribution description (if applicable)

12/15/2014

6 Contributor address; City; State; Zip Code

PO Box 144542
Austin, TX 78714

\$350.00

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)
Cab Driver

10 Employer (See Instructions)
Lone Star Cab Company

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)

Dannenbaum, James

Amount of contribution (\$)

In-kind contribution description (if applicable)

12/16/2014

Contributor address; City; State; Zip Code

3100 W Alabama St
Houston, TX 77098

\$350.00

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
Chairman and President

Employer (See Instructions)
Dannenbaum Engineering Corp.

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)

Edgar, Donna

Amount of contribution (\$)

In-kind contribution description (if applicable)

12/08/2014

Contributor address; City; State; Zip Code

5409 Highland Crest Dr
Austin, TX 78731

\$100.00

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)

Ejigu, Daniel

Amount of contribution (\$)

In-kind contribution description (if applicable)

12/12/2014

Contributor address; City; State; Zip Code

1522 Thibodeaux Dr
Round Rock, TX 78664

\$350.00

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
IT Manager

Employer (See Instructions)
Lone Star Cab Company

Date

Full name of contributor ☐ out-of-state PAC (ID# _____)

Gregory, Kay & Bobby

Amount of contribution (\$)

In-kind contribution description (if applicable)

12/16/2014

Contributor address; City; State; Zip Code

2939 Westlake Cv
Austin, TX 78746-1961

\$700.00

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
Homemaker; Owner/CEO

Employer (See Instructions)
None; Texas Disposal Systems

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.			1 PAGE # Schedule: 4/10 Report: 7/19	
2 FILER NAME Pool, Leslie (Ms.)			3 ACCOUNT # (Ethics Commission filers) 11111111	
4 Date 12/13/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Harter, Steven 6 Contributor address; City; State; Zip Code 8 Winston Woods Dr Houston, TX 77024		7 Amount of contribution (\$) \$350.00	8 In-kind contribution description (if applicable)
			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions) Cab Driver			10 Employer (See Instructions) Yellow Cab	
Date 12/13/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Harter, Suzanne Contributor address; City; State; Zip Code 8 Winston Woods Dr Houston, TX 77024		Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Cab Driver			Employer (See Instructions) Yellow Cab	
Date 12/10/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hobbs, Jeff Contributor address; City; State; Zip Code 3700 Hillbrook Dr Austin, TX 78731-4042		Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Attorney			Employer (See Instructions) Armbrust & Brown, PLLC	
Date 12/10/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hobbs, Lisa Contributor address; City; State; Zip Code 3700 Hillbrook Dr Austin, TX 78731-4042		Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Attorney			Employer (See Instructions) KuhnHobbs PLLC	
Date 12/10/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hollingsworth, Wayne & Desirée Contributor address; City; State; Zip Code 100 Congress Ave Ste 1300 Austin, TX 78701-4072		Amount of contribution (\$) \$700.00	In-kind contribution description (if applicable)
			(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Attorney; Jewelry retailer			Employer (See Instructions) Armbrust & Brown, PLLC; Self-employed	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 5/10 Report: 8/19	
2 FILER NAME Pool, Leslie (Ms.)		3 ACCOUNT # (Ethics Commission filers) 11111111	
4 Date 12/16/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Husch Blackwell LLP 6 Contributor address; City; State; Zip Code 4801 Main St Ste 1000 Kansas City, MO 64112	7 Amount of contribution (\$) \$350.00	8 In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 12/16/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Husch Blackwell State PAC Contributor address; City; State; Zip Code 111 Congress Ave Ste 1400 Austin, TX 78701	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 12/10/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Jones, Kenneth & Annette Contributor address; City; State; Zip Code 100 Congress Ave Ste 1300 Austin, TX 78701-2744	Amount of contribution (\$) \$700.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Attorney; Homemaker		Employer (See Instructions) Armbrust & Brown, PLLC; None	
Date 12/12/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kassa, Solomon Contributor address; City; State; Zip Code 2958 Donnell Dr Round Rock, TX 78664	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) ABCABO, Inc.	
Date 12/12/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kassa, Yodit Contributor address; City; State; Zip Code 2958 Donnell Dr Round Rock, TX 78664	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Yaa Transportation	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 6/10 Report: 9/19	
2 FILER NAME Pool, Leslie (Ms.)		3 ACCOUNT # (Ethics Commission filers) 11111111	
4 Date 12/16/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) King, Bill 6 Contributor address; City; State; Zip Code 4507 Shoal Creek Blvd Austin, TX 78756-2912	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 12/11/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kralj, Elliot Contributor address; City; State; Zip Code 3809 Gaines Ct Austin, TX 78735-6489	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 12/10/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Krumme, Gregg & Robin Contributor address; City; State; Zip Code 10702 Hastings Ln Austin, TX 78750-4042	Amount of contribution (\$) \$700.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Attorney; Retired		Employer (See Instructions) Armbrust & Brown, PLLC; None	
Date 12/11/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Leonard, Robert & Linda Contributor address; City; State; Zip Code 7122 Royal Ln Dallas, TX 75230-3608	Amount of contribution (\$) \$700.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Chairman; Homemaker		Employer (See Instructions) Force Multiplier Solutions, Inc.; None	
Date 12/10/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Littlefield, Sue Contributor address; City; State; Zip Code 204 Westhaven Dr West Lake Hills, TX 78746-4443	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Armbrust & Brown, PLLC	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 7/10 Report: 10/19	
2 FILER NAME Pool, Leslie (Ms.)		3 ACCOUNT # (Ethics Commission filers) 11111111	
4 Date 12/13/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Martinez, Diana 6 Contributor address; City; State; Zip Code 510 E 7th St Houston, TX 77007	7 Amount of contribution (\$) \$350.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions) Homemaker		10 Employer (See Instructions) None	
Date 12/13/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Martinez, Roman Contributor address; City; State; Zip Code 510 E 7th St Houston, TX 77007	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Texas Taxi Inc.	
Date 12/12/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Melesse, Genet Contributor address; City; State; Zip Code 1522 Thibodeaux Dr Round Rock, TX 78664	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Small business owner		Employer (See Instructions) Self-Employed	
Date 12/12/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mersha, Zenaw Contributor address; City; State; Zip Code 4501 E Riverside Apt 2032 Austin, TX 78741	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Cab Driver		Employer (See Instructions) Lone Star Cab Company	
Date 12/13/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mintz, David Contributor address; City; State; Zip Code 2705 Northland Dr Austin, TX 78756-1021	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 8/10 Report: 11/19	
2 FILER NAME Pool, Leslie (Ms.)		3 ACCOUNT # (Ethics Commission filers) 11111111	
4 Date 12/12/2014	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Nazor, Craig 6 Contributor address; City; State; Zip Code 11701 Barchetta Dr Austin, TX 78758-3762	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 12/10/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rodriguez, Eddie Contributor address; City; State; Zip Code PO Box 2436 Austin, TX 78768-2436	Amount of contribution (\$) \$125.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 12/10/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Scrafford, Bruce & Nora Contributor address; City; State; Zip Code 105 Brooks Hollow Rd Lakeway, TX 78734-3488	Amount of contribution (\$) \$700.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Attorney; Homemaker		Employer (See Instructions) Armbrust & Brown, PLLC; None	
Date 12/08/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Stuart, Donald Contributor address; City; State; Zip Code 4105 Long Champ Dr Austin, TX 78746	Amount of contribution (\$) \$175.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 12/11/2014	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Sullivan, Michael Contributor address; City; State; Zip Code 1613 W 9 1/2 St Austin, TX 78703	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Lieutenant		Employer (See Instructions) Austin Firefighters Association	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 9/10 Report: 12/19

2 FILER NAME Pool, Leslie (Ms.)

3 ACCOUNT # (Ethics Commission filers)

11111111

4 Date

12/10/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Swartwood, Slater & Alison

6 Contributor address; City; State; Zip Code
12604 Rush Creek Ln
Austin, TX 78732-1992

7 Amount of
contribution (\$)

\$700.00

8 In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

9 Principal occupation / Job title (See Instructions)
Marketing; Homemaker

10 Employer (See Instructions)
Force Multiplier Solutions, Inc.; None

Date

12/10/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Taylor, Scott & Kimberly

Contributor address; City; State; Zip Code
10919 Enchanted Rock Cv
Austin, TX 78726-1336

Amount of
contribution (\$)

\$700.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
Attorney; Retired

Employer (See Instructions)
Armbrust & Brown, PLLC; None

Date

12/13/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Texas Taxi PAC

Contributor address; City; State; Zip Code
919 Congress Ave Ste 1500
Austin, TX 78701

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/08/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Wolff, David

Contributor address; City; State; Zip Code
1206 W 8th St
Austin, TX 78701

Amount of
contribution (\$)

\$175.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/12/2014

Full name of contributor ☐ out-of-state PAC (ID# _____)
Zelege, Mulugeta

Contributor address; City; State; Zip Code
17205 Tobermory Dr
Pflugerville, TX 78660

Amount of
contribution (\$)

\$350.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T) ☐

Principal occupation / Job title (See Instructions)
Cab Driver

Employer (See Instructions)
Lone Star Cab Company

**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS****SCHEDULE A**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 10/10 Report: 13/19

2 FILER NAME Pool, Leslie (Ms.)**3 ACCOUNT #** (Ethics Commission filers)

11111111

4 Date

12/15/2014

5 Full name of contributor ☐ out-of-state PAC (ID# _____)
Zewdie, Tesfaye**6 Contributor address; City; State; Zip Code**
PO Box 144542
Austin, TX 78714**7 Amount of
contribution (\$)**

\$350.00

**8 In-kind contribution
description (if applicable)**(If travel outside of Texas, complete Schedule T) ☐**9 Principal occupation / Job title (See Instructions)**
Quality Control**10 Employer (See Instructions)**
Hospira Corporation

POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

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

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 1/6 Report: 14/19		2 FILER NAME Pool, Leslie (Ms.)		3 ACCOUNT # (TEC filers) 11111111	
4 Date 12/09/2014		5 Payee name Bean, Sam			
6 Amount (\$) \$120.00		7 Payee address City: State: Zip Code 2604 Paramount Ave Austin, TX 78704			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign staffing <input type="checkbox"/> 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 12/18/2014		Payee name Bean, Sam			
Amount (\$) \$60.00		Payee address City: State: Zip Code 2606 Paramount Ave Austin, TX 78706			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign staffing <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 12/18/2014		Payee name Bean, Sam			
Amount (\$) \$120.00		Payee address City: State: Zip Code 2605 Paramount Ave Austin, TX 78705			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign staffing <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 12/18/2014		Payee name Dickinson, Aaron			
Amount (\$) \$420.00		Payee address City: State: Zip Code 1905 Nueces Ave Austin, TX 78705			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign staffing <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	

POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

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

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 2/6 Report: 15/19		2 FILER NAME Pool, Leslie (Ms.)		3 ACCOUNT # (TEC filers) 11111111	
4 Date 12/18/2014	5 Payee name Dickinson, Aaron				
6 Amount (\$) \$312.00	7 Payee address City: State: Zip Code 1905 Nueces Ave Austin, TX 78705				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign staffing		
	<input type="checkbox"/> 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 12/18/2014	Payee name Dickinson, Aaron				
Amount (\$) \$252.00	Payee address City: State: Zip Code 1905 Nueces Ave Austin, TX 78705				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign staffing		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Office sought: Office held:				
Date 12/18/2014	Payee name Dickinson, Aaron				
Amount (\$) \$120.00	Payee address City: State: Zip Code 1905 Nueces Ave Austin, TX 78705				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign staffing		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Office sought: Office held:				
Date 12/08/2014	Payee name Emmons, Joe				
Amount (\$) \$625.00	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		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign staffing		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Office sought: Office held:				

POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

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

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 3/6 Report: 16/19		2 FILER NAME Pool, Leslie (Ms.)		3 ACCOUNT # (TEC filers) 11111111	
4 Date 12/15/2014		5 Payee name Emmons, Joe			
6 Amount (\$) \$650.00		7 Payee address City: State: Zip Code 403 Blackson Ave Austin, TX 78752			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign staffing <input type="checkbox"/> 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 12/23/2014		Payee name Emmons, Joe			
Amount (\$) \$625.00		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		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign staffing <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 12/30/2014		Payee name Emmons, Joe			
Amount (\$) \$500.00		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		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign staffing <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	
Date 12/09/2014		Payee name Evans, Chris			
Amount (\$) \$300.00		Payee address City: State: Zip Code 807 Brazos St Ste 316 Austin, TX 78701			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Finance report preparation <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought: Office held:	

POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

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

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 4/6 Report: 17/19	2 FILER NAME Pool, Leslie (Ms.)	3 ACCOUNT # (TEC filers) 11111111
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4 Date 12/09/2014	5 Payee name Gibbons, Heidi
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6 Amount (\$) \$500.00	7 Payee address City: State: Zip Code 613 Hearn St Austin, TX 78703
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign staffing
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense	

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Office sought: Office held:
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Date 12/24/2014	Payee name Gibbons, Heidi
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Amount (\$) \$500.00	Payee address City: State: Zip Code 613 Hearn St Austin, TX 78703
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign staffing
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Office sought: Office held:
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Date 12/08/2014	Payee name Smith, Natasha
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Amount (\$) \$330.00	Payee address City: State: Zip Code 2207 Leon St Austin, TX 78705
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Mailer design
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Office sought: Office held:
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Date 12/08/2014	Payee name Spence, Steven
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Amount (\$) \$372.00	Payee address City: State: Zip Code 7707 S IH-35 Apt 230 Austin, TX 78744
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign staffing
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Office sought: Office held:
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POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

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

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 5/6 Report: 18/19		2 FILER NAME Pool, Leslie (Ms.)		3 ACCOUNT # (TEC filers) 11111111	
4 Date 12/15/2014	5 Payee name Spence, Steven				
6 Amount (\$) \$420.00	7 Payee address City: State: Zip Code 7707 S IH-35 Apt 230 Austin, TX 78744				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign staffing		
	<input type="checkbox"/> 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 12/17/2014	Payee name Spence, Steven				
Amount (\$) \$324.00	Payee address City: State: Zip Code 7707 S IH-35 Apt 230 Austin, TX 78744				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign staffing		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 12/07/2014	Payee name US Postal Service				
Amount (\$) \$8.82	Payee address City: State: Zip Code 2418 Spring Ln Austin, TX 78703				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Postage stamps		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:
Date 12/09/2014	Payee name US Postal Service				
Amount (\$) \$62.00	Payee address City: State: Zip Code 2418 Spring Ln Austin, TX 78703				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Postage stamps		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name		Office sought:		Office held:

POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES**

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gifts/Awards/Memorial Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

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

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE # Schedule: 6/6 Report: 19/19		2 FILER NAME Pool, Leslie (Ms.)		3 ACCOUNT # (TEC filers) 11111111	
4 Date 12/10/2014	5 Payee name US Postal Service				
6 Amount (\$) \$17.64	7 Payee address City; State; Zip Code 2418 Spring Ln Austin, TX 78703				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Postage stamps		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Office sought: Office held:				
Date 12/11/2014	Payee name US Postal Service				
Amount (\$) \$1,366.87	Payee address City; State; Zip Code 8225 Cross Park Dr Austin, TX 78710				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Postage		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Office sought: Office held:				
Date 12/09/2014	Payee name Worley Printing				
Amount (\$) \$2,040.98	Payee address City; State; Zip Code 3217 N IH-35 Austin, TX 78722				
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense		Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Postcards		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Office sought: Office held:				

AUSTIN CITY CLERK
RECEIVED

2015 JAN 14 PM 4 29

BANK RECONCILIATION

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

Name of candidate, officeholder or campaign committee: Leslie Pool, Austin City Council District 7

For each checking, savings or other financial institution account maintained during 20____, enter the following information indicated. For each additional institution, use a copy of this schedule.

The name of the financial institution: Frost Bank

Type of account: checking

The beginning balance: \$500

The ending balance: \$16,860.42

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

Date	Payee	Amount
1.9.2015	Campaign credit card	\$2,796.75
	Leslie Pool - partial loan repayment	\$14,063.67

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

Date of receipt	Contributor	Amount

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

Amount of interest or dividends earned: NA

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

Date of deposit or withdrawal	Amount of deposit	Amount of withdrawal

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

Date of receipt	Contributor	Amount

AUSTIN CITY CLERK
RECEIVED

2015 JAN 14 PM 4 29

CAMPAIGN DEBT RECONCILIATION

(To be filed by officeholders only during an election year)

Period Covered: January 1, 2014 to December 31, 2014

Name of officeholder: Leslie Pool

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

Campaign debt* existing as of the last day of the calendar year: \$40,500

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

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

Creditor	Principal amount owed	Interest rate	Date of maturity

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

Creditor/Vendor	Principal amount owed
<u>Leslie Pool</u>	<u>\$ 40,500 -</u>

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

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