

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		1 Filer ID	2 Total pages filed: 26
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST Leslie	MI
	NICKNAME	LAST Pool	SUFFIX
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY;		ZIP CODE
	4503 Shoal Creek Blvd		
	Austin, TX 78756		
	OFFICE USE ONLY		
Date Received			2016 OCT 31
Date Hand-delivered or Date Postmarked			NOV 10 2016
Receipt #			Amount
Date Processed			NOV 10 2016
Date Imaged			
5 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST Chad	MI
	NICKNAME	LAST Williams	SUFFIX
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE);		APT / SUITE #; CITY; STATE; ZIP CODE
	7500 Greenlawn		Austin, Texas 78757
7 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION
		512.451.6976	
8 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)		
	<input type="checkbox"/> July 15 <input checked="" type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final Report (Attach C/OH-FR)		
9 PERIOD COVERED	Month Day Year		Month Day Year
	09/30/2016		THROUGH 10/29/2016
10 ELECTION	ELECTION DATE		ELECTION TYPE
	Month Day Year 11/08/2016		<input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input checked="" type="checkbox"/> General <input type="checkbox"/> Special
11 OFFICE	OFFICE HELD (if any)		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**

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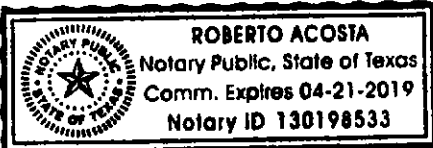
13 C / OH NAME Pool, Leslie	14 Filer ID
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15 NOTICE FROM POLITICAL COMMITTEE(S)	This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures.	
<input checked="" type="checkbox"/> Additional Pages	COMMITTEE TYPE	COMMITTEE NAME
	<input checked="" type="checkbox"/> GENERAL	Lockwood Andrews & Newnam PAC
	<input type="checkbox"/> SPECIFIC	COMMITTEE ADDRESS
		2925 Briarpark Dr
		Houston, TX 77042
		COMMITTEE CAMPAIGN TREASURER NAME
		Petersen, Dennis
		COMMITTEE CAMPAIGN TREASURER ADDRESS
		2925 Briarpark Dr
		Houston, TX 77042

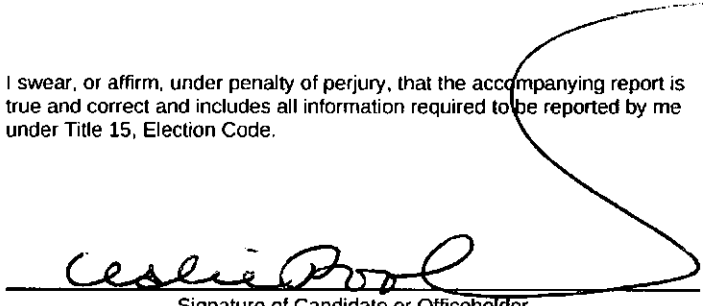
16 CONTRIBUTION TOTALS	1.	TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$	253.00
	2.	TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	9,412.33
EXPENDITURE TOTALS	3.	TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$	0.00
	4.	TOTAL POLITICAL EXPENDITURES	\$	55,312.98
CONTRIBUTION BALANCE	5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	11,415.04
OUTSTANDING LOAN TOTALS	6.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	0.00

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.




ROBERTO ACOSTA
Notary Public, State of Texas
Comm. Expires 04-21-2019
Notary ID 130198533



Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

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



Signature of officer administering

ROBERTO ACOSTA

Printed name of officer administering

NOTARY PUBLIC

Title of officer administering oath

**CANDIDATE / OFFICEHOLDER REPORT
SUPPORT & TOTALS**

**FORM C/OH
ADDENDUM**

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C / OH NAME Pool, Leslie	Filer ID
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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	COMMITTEE NAME
	<input checked="" type="checkbox"/> GENERAL	Communications Workers of American COPE PCC
	<input type="checkbox"/> SPECIFIC	COMMITTEE ADDRESS
		501 3rd St NW
		Washington, DC 20001
		COMMITTEE CAMPAIGN TREASURER NAME
		Steffens, Sara
		COMMITTEE CAMPAIGN TREASURER ADDRESS
		501 3rd St NW
		Washington, DC 20001

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
	<input checked="" type="checkbox"/> GENERAL	Philips Electronics North America Corp PAC
	<input type="checkbox"/> SPECIFIC	COMMITTEE ADDRESS
		1050 K St NW
		Washington, DC 20001
		COMMITTEE CAMPAIGN TREASURER NAME
		Olson, J.J.
		COMMITTEE CAMPAIGN TREASURER ADDRESS
		1050 K St NW
		Washington, DC 20001

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**CANDIDATE / OFFICEHOLDER REPORT
SUPPORT & TOTALS**

**FORM C/OH
ADDENDUM**

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C / OH NAME	Pool, Leslie	Filer ID
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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	COMMITTEE NAME
	<input checked="" type="checkbox"/> GENERAL	LIUNA Midwest Region Laborers Political League
	<input type="checkbox"/> SPECIFIC	COMMITTEE ADDRESS
		1 N Old State Capitol Plz Suite 525 Springfield, IL 62701
		COMMITTEE CAMPAIGN TREASURER NAME
		Stott, Sean
		COMMITTEE CAMPAIGN TREASURER ADDRESS
		1 N Old State Capitol Plz Springfield, IL 62701

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
	<input checked="" type="checkbox"/> GENERAL	HNTB Holdings Ltd PAC
	<input type="checkbox"/> SPECIFIC	COMMITTEE ADDRESS
		715 Kirk Dr Kansas City, MO 64105
		COMMITTEE CAMPAIGN TREASURER NAME
		Mann, Douglas
		COMMITTEE CAMPAIGN TREASURER ADDRESS
		715 Kirk Dr Kansas City, MO 64105

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SUBTOTALS - C/OH

18 FILER NAME Pool, Leslie	19 Filer ID
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20 SCHEDULE SUBTOTALS		SUBTOTAL AMOUNT
NAME OF SCHEDULE		
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 9,287.00
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 378.33
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 55,312.98
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/12 Rpt: 6/26
2 FILER NAME Pool, Leslie		3 Filer ID
4 Date 10/23/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baddour, Ann	7 Amount of Contribution (\$) \$50.00
	6 Contributor address; City; State; Zip Code 7102 Daugherty St Austin, TX 78757	
8 Principal occupation / Job title (See Instructions) Program Director		9 Employer (See Instructions) Texas Appleseed
Date 10/18/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bailey, Linda	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code 4104 Turkey Creek Dr Austin, TX 78730	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 10/04/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baker, Matt	Amount of Contribution (\$) \$150.00
	Contributor address; City; State; Zip Code 12405 Willow Bend Dr Austin, TX 78758	
Principal occupation / Job title (See Instructions) Project Manager		Employer (See Instructions) Apple Inc
Date 10/01/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blaylock, Lisa & Jeffrey	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code 1101 Brentwood St Austin, TX 78757	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/30/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brauen, Marsha	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code 1803 Cullen Ave Austin, TX 78757	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/12 Rpt: 7/26
2 FILER NAME Pool, Leslie		3 Filer ID
4 Date 10/21/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brooks, Lynn 6 Contributor address; City; State; Zip Code 1804 Lakeshore Dr Austin, TX 78746-3716	7 Amount of Contribution (\$) \$350.00
8 Principal occupation / Job title (See Instructions) homemaker		9 Employer (See Instructions) NA
Date 10/06/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burkhardt, William Contributor address; City; State; Zip Code 802 Christopher St Austin, TX 78704	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) architect		Employer (See Instructions) Burkhardt Studio
Date 10/08/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cadena-Mitchell, Kurt Contributor address; City; State; Zip Code 303 White Oak Dr Austin, TX 78753-6029	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Social Worker		Employer (See Instructions) Texas Department of State Health Services
Date 10/16/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cadena-Mitchell, Kurt Contributor address; City; State; Zip Code 303 White Oak Dr Austin, TX 78753-6029	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Social Worker		Employer (See Instructions) Texas Department of State Health Services
Date 10/07/2016	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: <u>FEC-1017412</u>) Communications Workers of American COPE PCC Contributor address; City; State; Zip Code 501 3rd St NW Washington, DC 20001	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/12 Rpt: 8/26
2 FILER NAME Pool, Leslie		3 Filer ID
4 Date 09/30/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Considine, Melissa & Dave	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code 1801 Princeton Ave Austin, TX 78757	
8 Principal occupation / Job title (See Instructions) Sr. Product Owner/Manager at Dell		9 Employer (See Instructions) Dell Inc.
Date 10/21/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crolley, Georgene	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code 1303 Oak Shadows Cir Austin, TX 78758	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 09/30/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Currens, Leslie	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code 6404 Deer Hollow Ln Austin, TX 78750	
Principal occupation / Job title (See Instructions) software		Employer (See Instructions) BMC
Date 10/28/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Griffin	Amount of Contribution (\$) \$350.00
	Contributor address; City; State; Zip Code 2604 Stratford Dr Austin, TX 78746	
Principal occupation / Job title (See Instructions) self		Employer (See Instructions) Public Relations
Date 10/01/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fero, Mary	Amount of Contribution (\$) \$30.00
	Contributor address; City; State; Zip Code 2713 Pegram Ave Austin, TX 78757	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/12 Rpt: 9/26
2 FILER NAME Pool, Leslie		3 Filer ID
4 Date 09/30/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Glasco, Alice	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code 5117B Valburn Ct Austin, TX 78731		
8 Principal occupation / Job title (See Instructions) Land Development Consultant		9 Employer (See Instructions) Alice Glasco Consulting
Date 10/21/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Griswold, Sam	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 4421 Crestway Dr Austin, TX 78731		
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Craftcorps, Inc.
Date 10/17/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guerrero, Linda	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 3204 Fairfax Walk Austin, TX 78705		
Principal occupation / Job title (See Instructions) self		Employer (See Instructions) consultant
Date 10/28/2016	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: <u>FEC-996387</u>) HNTB Holdings Ltd PAC	Amount of Contribution (\$) \$350.00
Contributor address; City; State; Zip Code 715 Kirk Dr Kansas City, MO 64105		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/05/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Halaburt, John	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code 1501 Palo Duro Rd Austin, TX 78757		
Principal occupation / Job title (See Instructions) Software Engineer		Employer (See Instructions) UT Austin

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/12 Rpt: 10/26
2 FILER NAME Pool, Leslie		3 Filer ID
4 Date 09/30/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hansen, Debra	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code 1700 Morrow St Austin, TX 78757		
8 Principal occupation / Job title (See Instructions) does not work		9 Employer (See Instructions)
Date 10/03/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hartley, Ann	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 2908 Toro Canyon Rd Austin, TX 78746		
Principal occupation / Job title (See Instructions) Lawyer		Employer (See Instructions) State of Texas
Date 10/20/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Heimsath, Ben	Amount of Contribution (\$) \$75.00
Contributor address; City; State; Zip Code 2104 Greenwood Ave Austin, TX 78723		
Principal occupation / Job title (See Instructions) architect		Employer (See Instructions) Heimsath Architects
Date 10/01/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Herring, Evangeline & Robert	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code 1712 Dartmouth Ave Austin, TX 78757		
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions) NA
Date 10/03/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hohengarten, Nancy	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code 4114 Avenue H Austin, TX 78751		
Principal occupation / Job title (See Instructions) Judge		Employer (See Instructions) Travis County

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/12 Rpt: 11/26
2 FILER NAME Pool, Leslie		3 Filer ID
4 Date 10/01/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ingle, Mary	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code 3406 Duval St Austin, TX 78705	
8 Principal occupation / Job title (See Instructions) Designer/tailor		9 Employer (See Instructions) self
Date 09/30/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jung, Carey	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code 8800 Little Laura Dr Austin, TX 78757	
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) IT Freedom
Date 10/16/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Knifton, Kristen	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code 3007 Savoy Pl Austin, TX 78756	
Principal occupation / Job title (See Instructions) speech-language pathologist		Employer (See Instructions) Capitol School of Austin
Date 10/07/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kocher, Karen	Amount of Contribution (\$) \$35.00
	Contributor address; City; State; Zip Code 2014 Enfield Rd Austin, TX 78703	
Principal occupation / Job title (See Instructions) artist		Employer (See Instructions) self
Date 09/30/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kramer, Ken	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code 4204 Sinclair Ave Austin, TX 78756	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/12 Rpt: 12/26
2 FILER NAME Pool, Leslie		3 Filer ID
4 Date 10/01/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kuehner, Kathryn Marie & Steve	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code 1811 Morrow St Austin, TX 78757	
8 Principal occupation / Job title (See Instructions) NA		9 Employer (See Instructions) NA
Date 10/04/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Labow, Joanna	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code 5013 Fort Clark Dr Austin, TX 78745	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 10/01/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lavigne, Leigh and Mike	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code 1514 Richcreek Rd Austin, TX 78757	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Mike Lavigne Public Relations
Date 10/16/2016	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: <u>FEC-431958</u>) LIUNA Midwest Region Laborers Political League	Amount of Contribution (\$) \$350.00
	Contributor address; City; State; Zip Code 1 N Old State Capitol Plz Springfield, IL 62701	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/05/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lippincott, Christopher	Amount of Contribution (\$) \$350.00
	Contributor address; City; State; Zip Code 1217 Piedmont Ave Austin, TX 78757	
Principal occupation / Job title (See Instructions) Founder		Employer (See Instructions) Hound's Creek Consulting, LLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/12 Rpt: 13/26
2 FILER NAME Pool, Leslie		3 Filer ID
4 Date 10/05/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lockwood Andrews & Newnam PAC	7 Amount of Contribution (\$) \$350.00
	6 Contributor address; City, State; Zip Code 2925 Briarpark Dr Houston, TX 77042	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 10/05/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McRae, Pete	Amount of Contribution (\$) \$250.00
	Contributor address; City, State; Zip Code 707 S Main St Georgetown, TX 78626	
Principal occupation / Job title (See Instructions) Vice President		Employer (See Instructions) Prevailing Trends, Inc
Date 09/30/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meade, Nikelle	Amount of Contribution (\$) \$25.00
	Contributor address; City, State; Zip Code 5363 Austral Loop Austin, TX 78739	
Principal occupation / Job title (See Instructions) attorney		Employer (See Instructions) Husch Blackwell LLP
Date 10/15/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meadows, Monica & Robert	Amount of Contribution (\$) \$50.00
	Contributor address; City, State; Zip Code 12005 Presa Dr Austin, TX 78753	
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions) NA
Date 10/19/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mitchell, Kirk	Amount of Contribution (\$) \$350.00
	Contributor address; City, State; Zip Code PO Box 4023 Austin, TX 78765	
Principal occupation / Job title (See Instructions) self		Employer (See Instructions) investor

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/12 Rpt: 14/26
2 FILER NAME Pool, Leslie		3 Filer ID
4 Date 10/23/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moffat, Susan	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code 4112 Speedway Austin, TX 78751		
8 Principal occupation / Job title (See Instructions) self		9 Employer (See Instructions) Writer/editor
Date 09/30/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Catherine	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code 12000 Saxony Ln Austin, TX 78727		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 10/12/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Jesse	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 1206 S 5th St Austin, TX 78704		
Principal occupation / Job title (See Instructions) lawyer		Employer (See Instructions) Dykema Cox Smith
Date 09/30/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, John Paul	Amount of Contribution (\$) \$350.00
Contributor address; City; State; Zip Code 12000 Saxony Ln Austin, TX 78727		
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 10/23/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nelson, Mock	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code 7102 Daugherty St Austin, TX 78757		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Texas Rio Grande Legal Aid

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/12 Rpt: 15/26
2 FILER NAME Pool, Leslie		3 Filer ID
4 Date 10/17/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Paver, James	7 Amount of Contribution (\$) \$200.00
	6 Contributor address; City; State; Zip Code 1910 Justin Ln Austin, TX 78757	
8 Principal occupation / Job title (See Instructions) Director		9 Employer (See Instructions) Paver Family Enterprises
Date 10/24/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Paver, Rhonda	Amount of Contribution (\$) \$350.00
	Contributor address; City; State; Zip Code 4613 Ridge Oak Dr Austin, TX 78731	
Principal occupation / Job title (See Instructions) self		Employer (See Instructions) self
Date 10/07/2016	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00239780) Philips Electronics North America Corp PAC	Amount of Contribution (\$) \$350.00
	Contributor address; City; State; Zip Code 1050 K St NW Washington, DC 20001	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/05/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roa, Ruby	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code 611 Terrell Hill Dr Austin, TX 78704	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 10/06/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rosenthal, Chip	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code 8313 Franwood Ln Austin, TX 78757	
Principal occupation / Job title (See Instructions) engineer		Employer (See Instructions) ARRIS

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 11/12 Rpt: 16/26
2 FILER NAME Pool, Leslie		3 Filer ID
4 Date 10/05/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sallis, Karen & Lance	7 Amount of Contribution (\$) \$350.00
	6 Contributor address; City; State; Zip Code 3105 Crowheart Cv Austin, TX 78746	
8 Principal occupation / Job title (See Instructions) commercial real estate		9 Employer (See Instructions) Stream Realty Partners
Date 10/22/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schkade, Bernice	Amount of Contribution (\$) \$350.00
	Contributor address; City; State; Zip Code 3803 Hyridge Dr Austin, TX 78759	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Schkade Enterprises
Date 10/01/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schmidt, Diana & Jerry	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code 1808 Justin Ln Austin, TX 78757	
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions) NA
Date 10/01/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Siegenthaler, Peter	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code 1700 Palo Duro Rd Austin, TX 78757	
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions) NA
Date 10/17/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Soliz-Chapa, Jackie	Amount of Contribution (\$) \$125.00
	Contributor address; City; State; Zip Code PO Box 152271 Austin, TX 78715	
Principal occupation / Job title (See Instructions) NA		Employer (See Instructions) NA

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 12/12 Rpt: 17/26
2 FILER NAME Pool, Leslie		3 Filer ID
4 Date 10/17/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stanley, Alfred	7 Amount of Contribution (\$) \$200.00
	6 Contributor address; City; State; Zip Code 1409 Hardouin Ave Austin, TX 78703	
8 Principal occupation / Job title (See Instructions) self		9 Employer (See Instructions) Alfred Stanley & Associates
Date 10/01/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stegant, Elaine	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code 1509 Aggie Ln Austin, TX 78757	
Principal occupation / Job title (See Instructions) Marketing		Employer (See Instructions) Dell Inc
Date 10/14/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Straub, Joseph	Amount of Contribution (\$) \$350.00
	Contributor address; City; State; Zip Code 7903 Jester Blvd Austin, TX 78750	
Principal occupation / Job title (See Instructions) Real Estate Developer		Employer (See Instructions) self
Date 10/15/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Kacey	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code 4504 Shoal Creek Blvd Austin, TX 78756	
Principal occupation / Job title (See Instructions) Seeds for Change Consulting, LLC		Employer (See Instructions) self
Date 10/15/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Webb, Shirley & Kenneth	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code PO Box 10646 Austin, TX 78766	
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: Sch: 1/1 Rpt: 18/26	
2 FILER NAME Pool, Leslie		3 Filer ID	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$ 0.00	
5 Date 10/22/2016	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Celia Israel Campaign 7 Contributor address; City; State; Zip Code P.O. Box 141246 Austin, TX 78714	8 Amount of contribution (\$) \$300.00	9 In-kind contribution description Canvass, signs and flyers <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		11 Employer (FOR NON-JUDICIAL) (See instructions)	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 10/26/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hersh, Matt 7 Contributor address; City; State; Zip Code 1409 Gorham St Austin, TX 78758	Amount of contribution (\$) \$51.33	In-kind contribution description canvass, signs and flyers <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) professor		Employer (FOR NON-JUDICIAL) (See instructions) UT Austin	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 10/15/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Workers Defense Action Fund 7 Contributor address; City; State; Zip Code 5604 Manor Rd Austin, TX 78723	Amount of contribution (\$) \$27.00	In-kind contribution description canvassing, signs and flyers <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		Employer (FOR NON-JUDICIAL) (See instructions)	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

PLEGGED CONTRIBUTIONS

SCHEDULE B

The Instruction Guide explains how to complete this form.		1 Total pages Schedule B: Sch: 1/1 Rpt: 19/26	
2 FILER NAME Pool, Leslie		3 Filer ID lesliepool@sbcglobal.net	
4 TOTAL OF UNITEMIZED PLEDGES		\$ 0.00	
5 Date	6 Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID#: _____)	8 Amount of pledge (\$)	9 In-kind description (If applicable)
	7 Pledgor Address; City; State; Zip Code		
		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (See Instructions)		11 Employer (See Instructions)	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/5 Rpt: 20/26	2 FILER NAME Pool, Leslie	3 Filer ID
4 Date 10/12/2016	5 Payee name Ad-People	
6 Amount (\$) \$3,529.09	7 Payee address; City; State; Zip Code 406 E Main St Round Rock, TX 78664	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense postage for mail
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/12/2016	Payee name Ad-People	
Amount (\$) \$6,133.55	Payee address; City; State; Zip Code 406 E Main St Round Rock, TX 78664	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense postage for mail
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/18/2016	Payee name Ad-People	
Amount (\$) \$4,008.61	Payee address; City; State; Zip Code 406 E Main St Round Rock, TX 78664	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense postage for mail
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 2/5 Rpt: 21/26		2 FILER NAME Pool, Leslie		3 Filer ID
4 Date 10/25/2016		5 Payee name Ad-People		
6 Amount (\$) \$3,864.83		7 Payee address; City; State; Zip Code 406 E Main St Round Rock, TX 78664		
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense postage for mail	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH				
Date 10/26/2016		Candidate/Officeholder name Payee name Ad-People		
Amount (\$) \$6,816.45		Office sought Payee address; City; State; Zip Code 406 E Main St Round Rock, TX 78664		
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense postage for mail	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH				
Date 10/21/2016		Candidate/Officeholder name Payee name Austin Chronicle		
Amount (\$) \$1,545.00		Office sought Payee address; City; State; Zip Code PO Box 4189 Austin, TX 78765		
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense ad in Chronicle	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH				

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 3/5 Rpt: 22/26		2 FILER NAME Pool, Leslie		3 Filer ID
4 Date 10/28/2016		5 Payee name Austin Chronicle		
6 Amount (\$) \$1,545.00		7 Payee address; City; State; Zip Code PO Box 4189 Austin, TX 78765		
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense ad in Chronicle	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH				
Candidate/Officeholder name		Office sought		Office held
Date 09/30/2016		Payee name Gibbons, Heidi		
Amount (\$) \$1,500.00		Payee address; City; State; Zip Code 613 Hearn Austin, TX 78703		
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense admin support	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH				
Candidate/Officeholder name		Office sought		Office held
Date 10/27/2016		Payee name Rindy & Associates		
Amount (\$) \$11,340.00		Payee address; City; State; Zip Code 2401 E 6th St Austin, TX 78702		
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense consulting	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH				
Candidate/Officeholder name		Office sought		Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 4/5 Rpt: 23/26		2 FILER NAME Pool, Leslie		3 Filer ID	
4 Date 10/27/2016		5 Payee name Rindy & Associates			
6 Amount (\$) \$1,150.00		7 Payee address; City; State; Zip Code 2401 E 6th St Austin, TX 78702			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Consulting Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense consulting	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 10/11/2016		Payee name Rindy & Associates			
Amount (\$) \$1,025.00		Payee address; City; State; Zip Code 2401 E 6th St Austin, TX 78702			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Consulting Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense consulting fees	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 10/07/2016		Payee name Sage Payment Solutions			
Amount (\$) \$897.97		Payee address; City; State; Zip Code 12120 Sunset Hills Road, Suite 500 Reston, VA 20190			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Accounting/Banking		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense fees	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 5/5 Rpt: 24/26	2 FILER NAME Pool, Leslie	3 Filer ID
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4 Date 10/12/2016	5 Payee name Worley Printing
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6 Amount (\$) \$6,737.48	7 Payee address; City; State; Zip Code 3217 N Interstate 35 Frontage Rd Austin, TX 78722
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense printing mailers
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 10/14/2016	Payee name Y Strategy
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Amount (\$) \$5,220.00	Payee address; City; State; Zip Code 3110 Manor Rd Austin, TX 78722
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense canvassing
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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UNPAID INCURRED OBLIGATIONS

SCHEDULE F2

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F2: Sch: 1/1 Rpt: 25/26	2 FILER NAME Pool, Leslie	3 Filer ID
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4 TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS	\$ 0.00
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5 Date	6 Payee name
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7 Amount (\$)	8 Payee address; City; State; Zip Code
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9 TYPE OF EXPENDITURE	<input type="checkbox"/> Political <input type="checkbox"/> Non-Political
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10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.

11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 1/1 Rpt: 26/26	2 FILER NAME Pool, Leslie	3 Filer ID
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4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$ 0.00
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5 Date	6 Payee name
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7 Amount (\$)	8 Payee address; City; State; Zip Code
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9 TYPE OF EXPENDITURE	<input type="checkbox"/> Political <input type="checkbox"/> Non-Political
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10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
		<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.

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