



Pre-Election Report Candidates and Officeholders Form ATX.7COH

AUSTIN CITY CLERK
RECEIVED

2016 NOV 4 PM 12 29

Use this form to report contributions received, expenditures made from personal funds, or loans made from personal funds between the 9th day before the election and the day before the election that have met the monetary thresholds identified in City Code 2-2-29. For detailed instructions on how to complete this form, see the **Pre-Election Report: Candidates and Officeholders Instruction Guide**

| | | | | | | | | | | | | | |
|--|--|------------------------|---------------------------|-----------------------|----------|--------|----------------|---------------|----------------------------|--------|--------------------|--------------------|--|
| 1 FILER NAME | <table> <tr> <td>Title</td> <td>First Name*</td> <td>Middle Initial</td> </tr> <tr> <td></td> <td>Leslie</td> <td></td> </tr> <tr> <td>Nickname</td> <td>Last Name*</td> <td>Suffix</td> </tr> <tr> <td></td> <td>Pool</td> <td></td> </tr> </table> | Title | First Name* | Middle Initial | | Leslie | | Nickname | Last Name* | Suffix | | Pool | |
| Title | First Name* | Middle Initial | | | | | | | | | | | |
| | Leslie | | | | | | | | | | | | |
| Nickname | Last Name* | Suffix | | | | | | | | | | | |
| | Pool | | | | | | | | | | | | |
| 2 FILER ADDRESS | <table> <tr> <td>Address/ PO Box</td> <td>Apartment or Suite Number</td> </tr> <tr> <td>4503 Shoal Creek Blvd</td> <td></td> </tr> <tr> <td>City</td> <td>State Zip Code</td> </tr> <tr> <td>Austin</td> <td>TX 78756</td> </tr> </table> | Address/ PO Box | Apartment or Suite Number | 4503 Shoal Creek Blvd | | City | State Zip Code | Austin | TX 78756 | | | | |
| Address/ PO Box | Apartment or Suite Number | | | | | | | | | | | | |
| 4503 Shoal Creek Blvd | | | | | | | | | | | | | |
| City | State Zip Code | | | | | | | | | | | | |
| Austin | TX 78756 | | | | | | | | | | | | |
| 3 CAMPAIGN TREASURER NAME | <table> <tr> <td>Title</td> <td>First Name</td> <td>Middle Initial</td> </tr> <tr> <td></td> <td>Chad</td> <td></td> </tr> <tr> <td>Nickname</td> <td>Last Name</td> <td>Suffix</td> </tr> <tr> <td></td> <td>Williams</td> <td></td> </tr> </table> | Title | First Name | Middle Initial | | Chad | | Nickname | Last Name | Suffix | | Williams | |
| Title | First Name | Middle Initial | | | | | | | | | | | |
| | Chad | | | | | | | | | | | | |
| Nickname | Last Name | Suffix | | | | | | | | | | | |
| | Williams | | | | | | | | | | | | |
| 4 CAMPAIGN TREASURER ADDRESS | <table> <tr> <td>Address/ PO Box</td> <td>Apartment or Suite Number</td> </tr> <tr> <td>7500 Greenlawn</td> <td></td> </tr> <tr> <td>City</td> <td>State Zip Code</td> </tr> <tr> <td>Austin</td> <td>TX 78757</td> </tr> </table> | Address/ PO Box | Apartment or Suite Number | 7500 Greenlawn | | City | State Zip Code | Austin | TX 78757 | | | | |
| Address/ PO Box | Apartment or Suite Number | | | | | | | | | | | | |
| 7500 Greenlawn | | | | | | | | | | | | | |
| City | State Zip Code | | | | | | | | | | | | |
| Austin | TX 78757 | | | | | | | | | | | | |
| 5 REPORTING PERIOD AND OFFICE INFORMATION | <table> <tr> <td>Start Date (yyyymmdd)*</td> <td>THROUGH</td> <td>End Date (yyyymmdd)*</td> </tr> <tr> <td>20161030</td> <td></td> <td>20161104</td> </tr> <tr> <td>Office Sought</td> <td colspan="2">Office Held, if applicable</td> </tr> <tr> <td>District 7 Council</td> <td colspan="2">District 7 Council</td> </tr> </table> | Start Date (yyyymmdd)* | THROUGH | End Date (yyyymmdd)* | 20161030 | | 20161104 | Office Sought | Office Held, if applicable | | District 7 Council | District 7 Council | |
| Start Date (yyyymmdd)* | THROUGH | End Date (yyyymmdd)* | | | | | | | | | | | |
| 20161030 | | 20161104 | | | | | | | | | | | |
| Office Sought | Office Held, if applicable | | | | | | | | | | | | |
| District 7 Council | District 7 Council | | | | | | | | | | | | |

* Indicates a required field



Pre-Election Report Candidates and Officeholders Form ATX.7COH

6

SCHEDULES

ATTACHED

Check box for each form
attached

- ☒ Schedule ATX.7A - Pre-Election Report of Contributions
- ☒ Schedule ATX.7E: Loans Made from Personal Funds
- ☐ Schedule ATX.7G: Expenditures Made from Personal Funds

AFFIDAVIT

By signature below, I certify that the preceding Pre-Election Report filed herewith is in all things true and correct and fully shows all information required to be reported by me pursuant to City Code, Section 2-2-29 for the reporting period indicated.

Signature of Affiant



Pre-Election Report of Contributions: Schedule ATX.7A

(Attach to Form ATX.7COH Coversheet)

Contribution

Itemize each contribution in Sections 1-3.

For additional contributions, click "Add Another Contribution Page" below.

* Indicates a required field

| | | | | | | | | | | | | | | | | | | | | | | | | | |
|---|---|---------------------------------------|---------------------------|---------------------------------------|---------|--|--------------------|------|--|-------------------|--------------------|-----------------------|--|--------|----|-------|--|----------------------|--|------------------------|--|--------------------|--|----------|--|
| 1 CONTRIBUTOR NAME <input checked="" type="checkbox"/> Contributor is an individual | <table><tr><td>Contributor Title</td><td>Contributor First Name*</td></tr><tr><td></td><td>Jim</td></tr><tr><td>Organization Name or Contributor Last Name, as applicable*</td><td>Contributor Suffix</td></tr><tr><td>Nias</td><td></td></tr></table> | Contributor Title | Contributor First Name* | | Jim | Organization Name or Contributor Last Name, as applicable* | Contributor Suffix | Nias | | | | | | | | | | | | | | | | | |
| Contributor Title | Contributor First Name* | | | | | | | | | | | | | | | | | | | | | | | | |
| | Jim | | | | | | | | | | | | | | | | | | | | | | | | |
| Organization Name or Contributor Last Name, as applicable* | Contributor Suffix | | | | | | | | | | | | | | | | | | | | | | | | |
| Nias | | | | | | | | | | | | | | | | | | | | | | | | | |
| 2 CONTRIBUTOR ADDRESS AND EMPLOYER | <table><tr><td colspan="2">Contributor Address/ PO Box*</td><td colspan="2">Contributor Apartment or Suite Number</td></tr><tr><td colspan="2">1116 Reagan Terrace</td><td colspan="2"></td></tr><tr><td>Contributor City*</td><td>Contributor State*</td><td colspan="2">Contributor Zip Code*</td></tr><tr><td>Austin</td><td>TX</td><td colspan="2">78704</td></tr><tr><td colspan="2">Contributor Employer</td><td colspan="2">Contributor Occupation</td></tr><tr><td colspan="2">Jackson Walker LLP</td><td colspan="2">Attorney</td></tr></table> <p>Per City Code 2-2-29(d), employer and occupation are required for individuals whose contribution is \$200 or more</p> | Contributor Address/ PO Box* | | Contributor Apartment or Suite Number | | 1116 Reagan Terrace | | | | Contributor City* | Contributor State* | Contributor Zip Code* | | Austin | TX | 78704 | | Contributor Employer | | Contributor Occupation | | Jackson Walker LLP | | Attorney | |
| Contributor Address/ PO Box* | | Contributor Apartment or Suite Number | | | | | | | | | | | | | | | | | | | | | | | |
| 1116 Reagan Terrace | | | | | | | | | | | | | | | | | | | | | | | | | |
| Contributor City* | Contributor State* | Contributor Zip Code* | | | | | | | | | | | | | | | | | | | | | | | |
| Austin | TX | 78704 | | | | | | | | | | | | | | | | | | | | | | | |
| Contributor Employer | | Contributor Occupation | | | | | | | | | | | | | | | | | | | | | | | |
| Jackson Walker LLP | | Attorney | | | | | | | | | | | | | | | | | | | | | | | |
| 3 CONTRIBUTION DETAILS | <table><tr><td>Contribution Date (yyyymmdd)*</td><td>(\$) Contribution Amount*</td></tr><tr><td>20161030</td><td>\$25.00</td></tr><tr><td colspan="2">In-Kind Contribution Description, if applicable</td></tr><tr><td colspan="2"></td></tr></table> | Contribution Date (yyyymmdd)* | (\$) Contribution Amount* | 20161030 | \$25.00 | In-Kind Contribution Description, if applicable | | | | | | | | | | | | | | | | | | | |
| Contribution Date (yyyymmdd)* | (\$) Contribution Amount* | | | | | | | | | | | | | | | | | | | | | | | | |
| 20161030 | \$25.00 | | | | | | | | | | | | | | | | | | | | | | | | |
| In-Kind Contribution Description, if applicable | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | | |

Add Another Contribution Page



Pre-Election Report of Contributions: Schedule ATX.7A

(Attach to Form ATX.7COH Coversheet)

Contribution

Itemize each contribution in Sections 1-3.

For additional contributions, click "Add Another Contribution Page" below.

* Indicates a required field

| | | | | |
|---|---|---|-----------------------------------|---|
| 1 | CONTRIBUTOR NAME <input checked="" type="checkbox"/> Contributor is an individual | Contributor Title | Contributor First Name* Leanne | |
| | | Organization Name or Contributor Last Name, as applicable* Nias | | Contributor Suffix |
| 2 | CONTRIBUTOR ADDRESS AND EMPLOYER | Contributor Address/ PO Box* 1116 Reagan Terrace | | Contributor Apartment or Suite Number |
| | | Contributor City* Austin | Contributor State* TX | Contributor Zip Code* 78704 |
| | | Contributor Employer homemaker | | Contributor Occupation NA |
| | | Per City Code 2-2-29(d), employer and occupation are required for individuals whose contribution is \$200 or more | | |
| 3 | CONTRIBUTION DETAILS | Contribution Date (yyyymmdd)* 20161030 | | (*) Contribution Amount* \$25.00 |
| | | In-Kind Contribution Description, if applicable | | |

Add Another Contribution Page



Pre-Election Report of Contributions: Schedule ATX.7A

(Attach to Form ATX.7COH Coversheet)

Contribution

Itemize each contribution in Sections 1-3.

For additional contributions, click "Add Another Contribution Page" below.

* Indicates a required field

| | | | | | | | | | | | | | | | | | | | | | | | | | |
|---|---|---------------------------------------|---------------------------|---------------------------------------|----------|--|--------------------|-------|--|-------------------|--------------------|-----------------------|--|--------|----|-------|--|----------------------|--|------------------------|--|---------|--|---------------|--|
| 1 CONTRIBUTOR NAME <input checked="" type="checkbox"/> Contributor is an individual | <table><tr><td>Contributor Title</td><td>Contributor First Name*</td></tr><tr><td></td><td>Joanne</td></tr><tr><td>Organization Name or Contributor Last Name, as applicable*</td><td>Contributor Suffix</td></tr><tr><td>Labow</td><td></td></tr></table> | Contributor Title | Contributor First Name* | | Joanne | Organization Name or Contributor Last Name, as applicable* | Contributor Suffix | Labow | | | | | | | | | | | | | | | | | |
| Contributor Title | Contributor First Name* | | | | | | | | | | | | | | | | | | | | | | | | |
| | Joanne | | | | | | | | | | | | | | | | | | | | | | | | |
| Organization Name or Contributor Last Name, as applicable* | Contributor Suffix | | | | | | | | | | | | | | | | | | | | | | | | |
| Labow | | | | | | | | | | | | | | | | | | | | | | | | | |
| 2 CONTRIBUTOR ADDRESS AND EMPLOYER | <table><tr><td colspan="2">Contributor Address/ PO Box*</td><td colspan="2">Contributor Apartment or Suite Number</td></tr><tr><td colspan="2">5013 Fort Clark Drive</td><td colspan="2"></td></tr><tr><td>Contributor City*</td><td>Contributor State*</td><td colspan="2">Contributor Zip Code*</td></tr><tr><td>Austin</td><td>TX</td><td colspan="2">78745</td></tr><tr><td colspan="2">Contributor Employer</td><td colspan="2">Contributor Occupation</td></tr><tr><td colspan="2">retired</td><td colspan="2">social worker</td></tr></table> <p>Per City Code 2-2-29(d), employer and occupation are required for individuals whose contribution is \$200 or more</p> | Contributor Address/ PO Box* | | Contributor Apartment or Suite Number | | 5013 Fort Clark Drive | | | | Contributor City* | Contributor State* | Contributor Zip Code* | | Austin | TX | 78745 | | Contributor Employer | | Contributor Occupation | | retired | | social worker | |
| Contributor Address/ PO Box* | | Contributor Apartment or Suite Number | | | | | | | | | | | | | | | | | | | | | | | |
| 5013 Fort Clark Drive | | | | | | | | | | | | | | | | | | | | | | | | | |
| Contributor City* | Contributor State* | Contributor Zip Code* | | | | | | | | | | | | | | | | | | | | | | | |
| Austin | TX | 78745 | | | | | | | | | | | | | | | | | | | | | | | |
| Contributor Employer | | Contributor Occupation | | | | | | | | | | | | | | | | | | | | | | | |
| retired | | social worker | | | | | | | | | | | | | | | | | | | | | | | |
| 3 CONTRIBUTION DETAILS | <table><tr><td>Contribution Date (yyyymmdd)*</td><td>(\$) Contribution Amount*</td></tr><tr><td>20161101</td><td>\$100.00</td></tr></table> <p>In-Kind Contribution Description, if applicable</p> <div></div> | Contribution Date (yyyymmdd)* | (\$) Contribution Amount* | 20161101 | \$100.00 | | | | | | | | | | | | | | | | | | | | |
| Contribution Date (yyyymmdd)* | (\$) Contribution Amount* | | | | | | | | | | | | | | | | | | | | | | | | |
| 20161101 | \$100.00 | | | | | | | | | | | | | | | | | | | | | | | | |

Add Another Contribution Page



Pre-Election Report of Contributions: Schedule ATX.7A

(Attach to Form ATX.7COH Coversheet)

Contribution

Itemize each contribution in Sections 1-3.

For additional contributions, click "Add Another Contribution Page" below.

* Indicates a required field

| | | | | | |
|---|---|---|---|---|---|
| 1 | CONTRIBUTOR NAME <input checked="" type="checkbox"/> Contributor is an individual | Contributor Title <input type="text"/> | Contributor First Name* <input type="text" value="James"/> | Organization Name or Contributor Last Name, as applicable* <input type="text" value="Christianson"/> | Contributor Suffix <input type="text"/> |
| 2 | CONTRIBUTOR ADDRESS AND EMPLOYER | Contributor Address/ PO Box* <input type="text" value="1520 Windsor Road"/> | | Contributor Apartment or Suite Number <input type="text"/> | |
| | | Contributor City* <input type="text" value="Austin"/> | | Contributor State* <input type="text" value="TX"/> | Contributor Zip Code* <input type="text" value="78703"/> |
| | | Contributor Employer <input type="text" value="retire"/> | | Contributor Occupation <input type="text" value="NA"/> | |
| | | Per City Code 2-2-29(d), employer and occupation are required for individuals whose contribution is \$200 or more | | | |
| 3 | CONTRIBUTION DETAILS | Contribution Date (yyyymmdd)* <input type="text" value="20161102"/> | | (\$) Contribution Amount* <input type="text" value="\$100.00"/> | |
| | | In-Kind Contribution Description, if applicable <input type="text"/> | | | |

Add Another Contribution Page



Pre-Election Report of Loans Made From Personal Funds: Schedule ATX.7E

(Attach to Form ATX.7COH Coversheet)

Loan

Itemize each loan made from personal funds below.

* Indicates a required field

| Loan Date* | Loan Amount* |
|------------|--------------|
| 20161103 | \$25,000.00 |
| | |
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Pre-Election Report of Expenditures Made From Personal Funds: Schedule ATX.7G

(Attach to Form ATX.7COH Coversheet)

Expenditure

Itemize each expenditure made from personal funds in Sections 1-3.
For additional expenditures, click "Add Another Expenditure Page" below.

Note: To report a Direct Campaign Expenditure as defined in City Code 2-2-31, use form **ATX.1: Report of Direct Campaign Expenditures**

* Indicates a required field

| | | | | | |
|---|---|---|---|--|---|
| 1 | PAYEE NAME <input checked="" type="checkbox"/> Payee is an individual | Payee Title <input type="text"/> | Payee First Name* <input type="text" value="Heidi"/> | Organization Name or Payee Last Name, as applicable* <input type="text" value="Gibbons"/> | Payee Suffix <input type="text"/> |
| 2 | PAYEE ADDRESS | Payee Address/ PO Box* <input type="text" value="613 Hearn"/> | | Payee Apartment or Suite Number <input type="text"/> | |
| | | Payee City* <input type="text" value="Austin"/> | | Payee State* <input type="text" value="TX"/> | Payee Zip Code* <input type="text" value="78703"/> |
| 3 | EXPENDITURE DETAILS | Category* <input type="text" value="Salaries/Wages/Contract labor"/> | | (\$) Expenditure Amount* <input type="text" value="\$1,500.00"/> | |
| | | Description (If Category is "Other") <input type="text" value="office and volunteers coordination"/> | | Expenditure Date* <input type="text" value="20161031"/> | |

Add Another Expenditure Page



Pre-Election Report of Expenditures Made From Personal Funds: Schedule ATX.7G

(Attach to Form ATX.7COH Coversheet)

Expenditure

Itemize each expenditure made from personal funds in Sections 1-3.
For additional expenditures, click "Add Another Expenditure Page" below.

Note: To report a Direct Campaign Expenditure as defined in City Code 2-2-31, use form **ATX.1: Report of Direct Campaign Expenditures**

* Indicates a required field

| | | | | |
|---|--|--|--|--------------------------|
| 1 | PAYEE NAME <input type="checkbox"/> Payee is an individual | Organization Name or Payee Last Name, as applicable* Y Strategy | | |
| 2 | PAYEE ADDRESS | Payee Address/ PO Box* 3110 Manor Road | Payee Apartment or Suite Number | |
| | | Payee City* Austin | Payee State* TX | Payee Zip Code* 78723 |
| 3 | EXPENDITURE DETAILS | Category* Consulting Expense | (\$) Expenditure Amount* \$2,627.00 | |
| | | Description (If Category is "Other") field canvass | Expenditure Date* 20161103 | |

Add Another Expenditure Page



Pre-Election Report of Expenditures Made From Personal Funds: Schedule ATX.7G

(Attach to Form ATX.7COH Coversheet)

Expenditure

Itemize each expenditure made from personal funds in Sections 1-3.
For additional expenditures, click "Add Another Expenditure Page" below.

Note: To report a Direct Campaign Expenditure as defined in City Code 2-2-31, use form **ATX.1: Report of Direct Campaign Expenditures**

* Indicates a required field

| | | | | |
|---|--|---|---|--------------------------|
| 1 | PAYEE NAME <input type="checkbox"/> Payee is an individual | Organization Name or Payee Last Name, as applicable* Worley Printing | | |
| 2 | PAYEE ADDRESS | Payee Address/ PO Box* 3217 N Interstate 35 Frontage Rd | Payee Apartment or Suite Number | |
| | | Payee City* Austin | Payee State* TX | Payee Zip Code* 78722 |
| 3 | EXPENDITURE DETAILS | Category* Advertising Expense | (\$) Expenditure Amount* \$20,270.90 | |
| | | Description (If Category is "Other") printing | Expenditure Date* 20161103 | |

Add Another Expenditure Page



Pre-Election Report of Expenditures Made From Personal Funds: Schedule ATX.7G

(Attach to Form ATX.7COH Coversheet)

Expenditure

Itemize each expenditure made from personal funds in Sections 1-3.

For additional expenditures, click "Add Another Expenditure Page" below.

Note: To report a Direct Campaign Expenditure as defined in City Code 2-2-31, use form **ATX.1: Report of Direct Campaign Expenditures**

* Indicates a required field

| | | | | |
|---|--|---|--|--------------------------|
| 1 | PAYEE NAME <input type="checkbox"/> Payee is an individual | Organization Name or Payee Last Name, as applicable* Ad-People | | |
| 2 | PAYEE ADDRESS | Payee Address/ PO Box* 406 E Main Street | Payee Apartment or Suite Number | |
| | | Payee City* Round Rock | Payee State* TX | Payee Zip Code* 78664 |
| 3 | EXPENDITURE DETAILS | Category* Advertising Expense | (\$) Expenditure Amount* \$4,490.41 | |
| | | Description (If Category is "Other") postage | Expenditure Date* 20161101 | |

Add Another Expenditure Page