

CORRECTION/AMENDMENT AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

FORM COR-C/OH

1 Filer ID (Ethics Commission Filers) 00090154		2 Total pages filed: 22		OFFICE USE ONLY	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST	MI	ELECTRONICALLY FILED 10/26/2020	
		Leslie			
	NICKNAME	LAST	SUFFIX	Date Hand-delivered or Date Postmarked	
		Pool		Receipt #	
4 ORIGINAL REPORT TYPE	<input type="checkbox"/> January 15	<input type="checkbox"/> Runoff	<input type="checkbox"/> Other (specify)	Amount	
	<input type="checkbox"/> July 15	<input type="checkbox"/> Exceeded \$500 limit		Date Processed	
	<input type="checkbox"/> 30th day before election	<input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)		Date Imaged	
	<input checked="" type="checkbox"/> 8th day before election	<input type="checkbox"/> Final Report (Attach C/OH-FR)			
5 ORIGINAL PERIOD COVERED	Month Day Year	THROUGH	Month Day Year		
	09/25/2020		10/24/2020		

6 EXPLANATION OF CORRECTION

resubmitted to include current elected position (District 7) and position running for (District 7) that were missing on the cover sheet.

7 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that this corrected report is true and correct.

Check the box next to any and all applicable statements:

☐ **Semiannual reports:** I swear, or affirm that the original report was made in good faith and without an intent to mislead or to misrepresent the information contained in the report.

☒ **Other reports:** I swear, or affirm, that I am filing this corrected report not later than the 14th business day after the date I learned that the report as originally filed is inaccurate or incomplete. I swear, or affirm, that any error or omission in the report as originally filed was made in good faith.

Leslie Pool

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office.

Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

**Remember To Attach Any Part Of The Campaign Finance Report Form
Needed To Report And Explain Corrections**

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 (Ethics Commission Filers) 00090154		2 Total pages filed: 22	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI Leslie		OFFICE USE ONLY Date Received ELECTRONICALLY FILED 10/26/2020		
	NICKNAME LAST SUFFIX Pool				
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			Date Hand-delivered or Date Postmarked	
				Receipt #	Amount
				Date Processed	
				Date Imaged	
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Chad				
	NICKNAME LAST SUFFIX Williams				
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 7500 Greenhaven Austin, TX 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 THROUGH Month Day Year 09/25/2020 10/24/2020				
10 ELECTION	ELECTION DATE Month Day Year 11/03/2020		ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input checked="" type="checkbox"/> General <input type="checkbox"/> Special		
11 OFFICE	OFFICE HELD (if any) Council Member, District 7			12 OFFICE SOUGHT (if known) Council Member, 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	(Ethics Commission Filers)
		00090154	

15 NOTICE FROM POLITICAL COMMITTEE(S) <input checked="" type="checkbox"/> Additional Pages	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.	
	COMMITTEE TYPE	COMMITTEE NAME
	<input checked="" type="checkbox"/> GENERAL	Austin Firefighters Association PAC
	<input type="checkbox"/> SPECIFIC	COMMITTEE ADDRESS
		7537 Cameron Rd
		Austin, TX 78752
	COMMITTEE CAMPAIGN TREASURER NAME	
	Lake, Jacob	
	COMMITTEE CAMPAIGN TREASURER ADDRESS	
	7537 Cameron Rd	
	Austin, TX 78752	

16 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ 40.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 10,600.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 50,243.02
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 16,824.48
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

17 AFFADAVIT

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

Leslie Pool

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office.

Signature of officer administering Printed name of officer administering Title of officer administering oath

CANDIDATE / OFFICEHOLDER REPORT SUPPORT & TOTALS

FORM C/OH
ADDENDUM

Page 4 of 22

C / OH NAME	Pool, Leslie	Filer ID	(Ethics Commission Filers)
		00090154	

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	Stonewall Democrats PAC
	<input type="checkbox"/> SPECIFIC	COMMITTEE ADDRESS
		P.O. Box 40898
		Austin, TX 78704
COMMITTEE CAMPAIGN TREASURER NAME		
Bailey, Rich		
COMMITTEE CAMPAIGN TREASURER ADDRESS		
	TX	

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	Liberal Austin Democrats
	<input type="checkbox"/> SPECIFIC	COMMITTEE ADDRESS
		PO Box 49712
		Austin, TX 78765
COMMITTEE CAMPAIGN TREASURER NAME		
Bailey, Rich		
COMMITTEE CAMPAIGN TREASURER ADDRESS		
	TX	

CANDIDATE / OFFICEHOLDER REPORT SUPPORT & TOTALS

FORM **C/OH**
ADDENDUM

Page 5 of 22

C / OH NAME	Pool, Leslie	Filer ID	(Ethics Commission Filers)
		00090154	
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	Austin Environmental Democrats	
	<input type="checkbox"/> SPECIFIC	COMMITTEE ADDRESS	
		1908 Barton Pkwy	
		Austin, TX 78704	
COMMITTEE CAMPAIGN TREASURER NAME			
	Neely, Mary Ann		
	COMMITTEE CAMPAIGN TREASURER ADDRESS		
	TX		

SUBTOTALS - C/OH**FORM C/OH
COVER SHEET PG 3**

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18 FILER NAME Pool, Leslie	19 Filer ID (Ethics Commission Filers) 00090154
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20 SCHEDULE SUBTOTALS NAME OF SCHEDULE	SUBTOTAL AMOUNT
1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 10,600.00
2. <input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
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	\$ 50,243.02
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: 1/13 Rpt: 7/22
2 FILER NAME Pool, Leslie		3 Filer ID (Ethics Commission Filers) 00090154
4 Date 10/05/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arndt, Timothy <hr/> 6 Contributor address; City; State; Zip Code 3915 Becker Ave Austin, TX 78751	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Project Mgr		9 Employer (See Instructions) 360 Energy Savers
Date 10/24/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Austin Environmental Democrats PAC <hr/> Contributor address; City; State; Zip Code 1908 Barton Pkwy Austin, TX 78704	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/09/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Austin Firefighters Association PAC <hr/> Contributor address; City; State; Zip Code 7537 Cameron Rd Austin, TX 78752	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/07/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blizzard, Mike <hr/> Contributor address; City; State; Zip Code 2100 Southern Oaks Dr Austin, TX 78745	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Film/PR		Employer (See Instructions) Blizco Productions, LLC
Date 10/09/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bope, Elizabeth <hr/> Contributor address; City; State; Zip Code 1512 Holstein Dr Austin, TX 78758	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Teacher		Employer (See Instructions) Pflugerville ISD

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/13 Rpt: 8/22
2 FILER NAME Pool, Leslie		3 Filer ID (Ethics Commission Filers) 00090154
4 Date 09/30/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bope, Flannery <hr/> 6 Contributor address; City; State; Zip Code 1512 Holstein Dr Austin, TX 78758	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Senior Digital Marketing Manager		9 Employer (See Instructions) Concierge Auctions
Date 10/09/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bope, Flannery <hr/> Contributor address; City; State; Zip Code 1512 Holstein Dr Austin, TX 78758	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) senior digital marketing manager		Employer (See Instructions) Concierge Auctions
Date 10/09/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brinsmade, Louisa <hr/> Contributor address; City; State; Zip Code 1000 E 15th St Austin, TX 78702	Amount of Contribution (\$) \$300.00
Principal occupation / Job title (See Instructions) policy advisor		Employer (See Instructions) City of Austin
Date 10/08/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brodnax, Pat Gordon <hr/> Contributor address; City; State; Zip Code 1105 W Annie St Austin, TX 78704	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Managing Director		Employer (See Instructions) Save Our Springs Alliance
Date 10/23/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coronado, Santiago <hr/> Contributor address; City; State; Zip Code 5602 Palisade Ct Austin, TX 78731	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) attorney/judge		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/13 Rpt: 9/22
2 FILER NAME Pool, Leslie		3 Filer ID (Ethics Commission Filers) 00090154
4 Date 09/30/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Croom, Carolyn <hr/> 6 Contributor address; City; State; Zip Code 2502 Albata Ave Austin, TX 78757	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) childcare		9 Employer (See Instructions) not employed
Date 10/14/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DiLeo, Tracy <hr/> Contributor address; City; State; Zip Code 9 Niles Rd Austin, TX 78703	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Partner		Employer (See Instructions) Killam Companies
Date 10/24/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dulzaides, Beatrice <hr/> Contributor address; City; State; Zip Code 902B Ramble Ln Austin, TX 78745	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Project Manager		Employer (See Instructions) Beckman Coulter
Date 10/09/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edwards, Carol <hr/> Contributor address; City; State; Zip Code 2702 Pegram Ave Austin, TX 78757	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 10/10/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eiserloh, Laurie <hr/> Contributor address; City; State; Zip Code 3900 Avenue C Austin, TX 78751	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Attorney		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: 4/13 Rpt: 10/22
2 FILER NAME Pool, Leslie		3 Filer ID (Ethics Commission Filers) 00090154
4 Date 09/28/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gaudini, Michael <hr/> 6 Contributor address; City; State; Zip Code 7324 Easy Wind Dr Austin, TX 78757	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Consultant		9 Employer (See Instructions) Armbrust & Brown, PLLC
Date 10/11/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Glasco, Alice <hr/> Contributor address; City; State; Zip Code 5117 Valburn Ct Austin, TX 78731	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Land Development Consultant		Employer (See Instructions) self
Date 10/10/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goldman, Howard <hr/> Contributor address; City; State; Zip Code 6400 Santolina Cv Austin, TX 78731	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 10/07/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gray, Rachel and Dale <hr/> Contributor address; City; State; Zip Code 4812 Shoalwood Ave Austin, TX 78756	Amount of Contribution (\$) \$800.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Miller Gray LLC
Date 10/08/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greenberg, Betsy <hr/> Contributor address; City; State; Zip Code 3009 Washington Sq Austin, TX 78705	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) University of Texas at Austin

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/13 Rpt: 11/22
2 FILER NAME Pool, Leslie		3 Filer ID (Ethics Commission Filers) 00090154
4 Date 10/14/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guerrero, Linda <hr/> 6 Contributor address; City; State; Zip Code 3204 Fairfax Walk Austin, TX 78705	7 Amount of Contribution (\$) \$75.00
8 Principal occupation / Job title (See Instructions) Educator		9 Employer (See Instructions) self-employed
Date 10/02/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Halley, Shannon <hr/> Contributor address; City; State; Zip Code 1017 County Road 130 Burnet, TX 78611	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Policy Advisor		Employer (See Instructions) City of Austin
Date 10/24/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harris, Nancy & Chip <hr/> Contributor address; City; State; Zip Code 1718 Aggie Lane Austin, TX 78757	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 10/10/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haverlah, Kirsha <hr/> Contributor address; City; State; Zip Code 6904 Star Dr Austin, TX 78745	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Family Violence Director		Employer (See Instructions) Travis County
Date 10/15/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Houghton, Mari & Dudley <hr/> Contributor address; City; State; Zip Code 3219 Bridle Path Austin, TX 78703	Amount of Contribution (\$) \$200.00
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: 6/13 Rpt: 12/22
2 FILER NAME Pool, Leslie		3 Filer ID (Ethics Commission Filers) 00090154
4 Date 10/11/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hurt, Tom 6 Contributor address; City; State; Zip Code 809 W 32nd St Austin, TX 78705	7 Amount of Contribution (\$) \$400.00
8 Principal occupation / Job title (See Instructions) architect		9 Employer (See Instructions) Tom Hurt Architecture
Date 10/09/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Israel, Celia (The Honorable) Contributor address; City; State; Zip Code 3604 Carla Dr Austin, TX 78754	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) realtor		Employer (See Instructions) self-employed
Date 10/05/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jackson, Burgess Contributor address; City; State; Zip Code 1206 W Saint Johns Ave Austin, TX 78757	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) attorney		Employer (See Instructions) self
Date 10/23/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Liberal Austin Democrats Contributor address; City; State; Zip Code PO Box 49712 Austin, TX 78765	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/09/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lorenz, Sheridan Contributor address; City; State; Zip Code 1311 E 6th St, Ste A Austin, TX 78701	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) hospitality		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/13 Rpt: 13/22
2 FILER NAME Pool, Leslie		3 Filer ID (Ethics Commission Filers) 00090154
4 Date 10/11/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mace, Robert <hr/> 6 Contributor address; City; State; Zip Code 6909 Daugherty St Austin, TX 78757	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Scientist		9 Employer (See Instructions) Texas State University
Date 10/09/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maldonado, Alfred <hr/> Contributor address; City; State; Zip Code 11608 Knollpark Dr Austin, TX 78758	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) sociology professor		Employer (See Instructions) retired
Date 10/09/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McArthur, Barbara <hr/> Contributor address; City; State; Zip Code 5700 Clay Ave Austin, TX 78756	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) astronomer		Employer (See Instructions) UT Austin
Date 10/09/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCormick, Donna Beth <hr/> Contributor address; City; State; Zip Code 5703 Shoalwood Ave Austin, TX 78756	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 10/08/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McGlashan, Michael <hr/> Contributor address; City; State; Zip Code 401 Guadalupe St Austin, TX 78701	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Investor		Employer (See Instructions) Karlin Real Estate

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/13 Rpt: 14/22
2 FILER NAME Pool, Leslie		3 Filer ID (Ethics Commission Filers) 00090154
4 Date 10/11/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McIver, Diana <hr/> 6 Contributor address; City; State; Zip Code 4101 Parkstone Heights Dr Austin, TX 78746	7 Amount of Contribution (\$) \$200.00
8 Principal occupation / Job title (See Instructions) President		9 Employer (See Instructions) DMA Development Company
Date 10/11/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mitchell, Kathy <hr/> Contributor address; City; State; Zip Code 1403 Ulit Ave Austin, TX 78702	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Policy Analyst		Employer (See Instructions) Just Liberty
Date 10/01/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moffat, Susan <hr/> Contributor address; City; State; Zip Code 4112 Speedway Austin, TX 78751	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Editor		Employer (See Instructions) self
Date 10/07/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Craig <hr/> Contributor address; City; State; Zip Code 13405 Capadocia Cv Austin, TX 78727	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Travis County District Attorney's Office
Date 10/22/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pool, Emily <hr/> Contributor address; City; State; Zip Code 1115 Broadway Apt 7H New York, NY 11106	Amount of Contribution (\$) \$300.00
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Perennials & Sutherland LLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/13 Rpt: 15/22
2 FILER NAME Pool, Leslie		3 Filer ID (Ethics Commission Filers) 00090154
4 Date 10/22/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Porter, Adam <hr/> 6 Contributor address; City; State; Zip Code 1115 Broadway Apt 7H New York, NY 11106	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Barstool Sports		9 Employer (See Instructions) Producer
Date 09/29/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Redd, William <hr/> Contributor address; City; State; Zip Code 300 Arboretum Pl North Chesterfield, VA 23236	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) Brandywine Realty Trust
Date 10/21/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Riddell, Joe <hr/> Contributor address; City; State; Zip Code PO Box 41898 Austin, TX 78704	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) attorney		Employer (See Instructions) mostly retired
Date 10/22/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rivera, Jane <hr/> Contributor address; City; State; Zip Code 1000 Glen Oaks Ct Austin, TX 78702	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 10/10/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rosenthal, Courtney <hr/> Contributor address; City; State; Zip Code 8313 Franwood Ln Austin, TX 78757	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) software engineer		Employer (See Instructions) CommScope

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/13 Rpt: 16/22
2 FILER NAME Pool, Leslie		3 Filer ID (Ethics Commission Filers) 00090154
4 Date 10/07/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ryan, Stephanie <hr/> 6 Contributor address; City; State; Zip Code 7305 Daugherty St Austin, TX 78757	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 10/08/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Salas-Porras, Ana <hr/> Contributor address; City; State; Zip Code 4507 Shoal Creek Blvd Austin, TX 78756	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 10/21/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scaperotta, Wendy <hr/> Contributor address; City; State; Zip Code 1502 Payne Ave Austin, TX 78757	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 10/10/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shaw, Robert <hr/> Contributor address; City; State; Zip Code 6503 Ponton Austin, TX 78731	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) real estate broker		Employer (See Instructions) Advocate Properties LLC
Date 10/10/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Siff, Ted <hr/> Contributor address; City; State; Zip Code 604 W 11th St Austin, TX 78701	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Park Place Publications, L.P.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 11/13 Rpt: 17/22
2 FILER NAME Pool, Leslie		3 Filer ID (Ethics Commission Filers) 00090154
4 Date 10/09/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Amy <hr/> 6 Contributor address; City; State; Zip Code 902 Ramble Ln Austin, TX 78745	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) not employed		9 Employer (See Instructions) not employed
Date 10/13/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Amy <hr/> Contributor address; City; State; Zip Code 902 Ramble Ln Austin, TX 78745	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) not employed		Employer (See Instructions) not employed
Date 10/24/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Amy <hr/> Contributor address; City; State; Zip Code 902 Ramble Ln Austin, TX 78745	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) not employed		Employer (See Instructions) not employed
Date 10/11/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sprute, Dana <hr/> Contributor address; City; State; Zip Code 5109 Turnabout Ln Austin, TX 78756	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) physician		Employer (See Instructions) Ascencion
Date 10/10/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stonewall Democrats PAC <hr/> Contributor address; City; State; Zip Code P.O. Box 40898 Austin, TX 78704	Amount of Contribution (\$) \$100.00
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: 12/13 Rpt: 18/22
2 FILER NAME Pool, Leslie		3 Filer ID (Ethics Commission Filers) 00090154
4 Date 09/30/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stumpf, Suzanne <hr/> 6 Contributor address; City; State; Zip Code 5304 Wheeler Branch Cir Austin, TX 78749	7 Amount of Contribution (\$) \$400.00
8 Principal occupation / Job title (See Instructions) Manager		9 Employer (See Instructions) Brandywine Realty Trust
Date 09/30/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sweeney, Jerry <hr/> Contributor address; City; State; Zip Code 2929 Walnut St Philadelphia, PA 19104	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Executive		Employer (See Instructions) Brandywine Realty Trust
Date 10/11/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taebel, Kay <hr/> Contributor address; City; State; Zip Code 4200 Jackson Ave Austin, TX 78731	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) no employer
Date 10/06/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Todd, Wendy & David <hr/> Contributor address; City; State; Zip Code 1304 Mariposa Dr Austin, TX 78704	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) community volunteer		Employer (See Instructions) self
Date 10/10/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Welty, Jaynee <hr/> Contributor address; City; State; Zip Code 11701 Barchetta Dr Austin, TX 78758	Amount of Contribution (\$) \$200.00
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: 13/13 Rpt: 19/22
2 FILER NAME Pool, Leslie		3 Filer ID (Ethics Commission Filers) 00090154
4 Date 10/06/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whatley, Melba & Ted <hr/> 6 Contributor address; City; State; Zip Code PO Box 5623 Austin, TX 78763	7 Amount of Contribution (\$) \$800.00
8 Principal occupation / Job title (See Instructions) self / retired		9 Employer (See Instructions) Clarite / retired
Date 10/09/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Chad <hr/> Contributor address; City; State; Zip Code 7500 Greenhaven Dr Austin, TX 78757	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Web editor		Employer (See Instructions) Accenture
Date 10/10/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wright, Steve <hr/> Contributor address; City; State; Zip Code 6503 Ponton Pl Austin, TX 78731	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) actor & writer		Employer (See Instructions) self

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: 1/3 Rpt: 20/22	2 FILER NAME Pool, Leslie	3 Filer ID (Ethics Commission Filers) 00090154
4 Date 10/01/2020	5 Payee name NGPVAN, Inc.	
6 Amount (\$) \$811.88	7 Payee address; City; State; Zip Code 1445 New York Ave. NW, Suite 200 Washington DC, TX 20005	
8 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 fundraising app subscription
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/25/2020	Payee name Paragon Payment Solutions	
Amount (\$) \$800.00	Payee address; City; State; Zip Code 2141 East Broadway Road Suite 202 Tempe, AZ 85282	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense merchant fees - donor processing
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/02/2020	Payee name Paragon Payment Solutions	
Amount (\$) \$481.93	Payee address; City; State; Zip Code 2141 East Broadway Road Suite 202 Tempe, AZ 85282	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense merchant fees - donor processing
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: 2/3 Rpt: 21/22	2 FILER NAME Pool, Leslie	3 Filer ID (Ethics Commission Filers) 00090154
4 Date 10/07/2020	5 Payee name Premiere Political Communications	
6 Amount (\$) \$837.21	7 Payee address; City; State; Zip Code 4805 Woodview Avenue Austin, TX 78756	
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 text messages
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/12/2020	Payee name Rindy Miller Media	
Amount (\$) \$23,931.00	Payee address; City; State; Zip Code 2401 E. 6th Street, Suite 1007 Austin, TX 78702	
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 mail & Chronicle ads
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/18/2020	Payee name Rindy Miller Media	
Amount (\$) \$2,950.00	Payee address; City; State; Zip Code 2401 E. 6th Street, Suite 1007 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 website, web maintenance, lists, etc.
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: 3/3 Rpt: 22/22	2 FILER NAME Pool, Leslie	3 Filer ID (Ethics Commission Filers) 00090154
4 Date 10/19/2020	5 Payee name Rindy Miller Media	
6 Amount (\$) \$20,431.00	7 Payee address; City; State; Zip Code 2401 E. 6th Street, Suite 1007 Austin, TX 78702	
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 mail
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held