

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 1

The C/OH INSTRUCTION GUIDE explains how to complete this form.		1 ACCOUNT # (Ethics Commission filers) 11111111	2 PAGE # 1 of 21
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Ms.	FIRST Leslie	MI
	NICKNAME	LAST Pool	SUFFIX
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS  <input type="checkbox"/> Change of Address	ADDRESS / PO BOX;	APT / SUITE #;	CITY; STATE; ZIP CODE
	4503 Shoal Creek Blvd Austin, TX 78756		
5 CAMPAIGN TREASURER NAME	MS / MRS / MR 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 Greenhaven Dr 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
09/26/2014		THROUGH	10/25/2014
10 ELECTION	ELECTION DATE		ELECTION TYPE
	Month	Day	Year
11/04/2014		<input type="checkbox"/> Primary <input type="checkbox"/> Runoff <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	

**OFFICE USE ONLY**

Date Received: **OCT 27 PM 4:30**

Date Hand-delivered: \_\_\_\_\_ Date Postmarked: \_\_\_\_\_

Receipt # \_\_\_\_\_ Amount \_\_\_\_\_

Date Processed \_\_\_\_\_

Date Imaged \_\_\_\_\_

**AUSTIN CITY CLERK RECEIVED**

GO TO PAGE 2

# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH  
COVER SHEET PG 2

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

14 ACCOUNT # (Ethics Commission filers)  
11111111

15 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  
Sierra Club Political Committee of Texas

GENERAL

COMMITTEE ADDRESS  
615 Willow  
San Antonio, TX 78202

SPECIFIC

COMMITTEE CAMPAIGN TREASURER NAME  
Gonzalez, Hector (Mr.)

additional pages

COMMITTEE CAMPAIGN TREASURER ADDRESS  
615 Willow  
San Antonio, TX 78202

16 CONTRIBUTION TOTALS

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$	1,050.00
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2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	5,575.00
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EXPENDITURE TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$	79.35
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4. TOTAL POLITICAL EXPENDITURES	\$	46,016.05
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CONTRIBUTION BALANCE

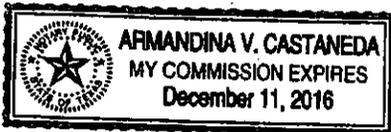
5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	24,258.08
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OUTSTANDING LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	40,500.00
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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.



*Leslie Pool*

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Leslie Pool this the 27 day of Oct, 2014, to certify which, witness my hand and seal of office.

*Armandina V. Castaneda*  
Notary Public

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

**SCHEDULE A**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #  
Schedule: 1/7 Report: 3/21

2 FILER NAME Pool, Leslie (Ms.)

3 ACCOUNT # (Ethics Commission filers)  
11111111

4 Date 10/11/2014  
5 Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Albert, David  
6 Contributor address; City; State; Zip Code  
1101 Grove Blvd Apt 703  
Austin, TX 78741-3513

7 Amount of contribution (\$) \$300.00  
8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)  
Professor

10 Employer (See Instructions)  
Austin Community College

Date 10/08/2014  
Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Baker, Matt  
Contributor address; City; State; Zip Code  
12405 Willow Bend Dr  
Austin, TX 78758-2821

Amount of contribution (\$) \$100.00  
In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)  
Project Manager

Employer (See Instructions)  
Apple, Inc.

Date 10/24/2014  
Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Baker, Matt  
Contributor address; City; State; Zip Code  
12405 Willow Bend Dr  
Austin, TX 78758-2821

Amount of contribution (\$) \$100.00  
In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)  
Project Manager

Employer (See Instructions)  
Apple, Inc.

Date 10/05/2014  
Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Berkel, Suzanne  
Contributor address; City; State; Zip Code  
4405 Sinclair Ave  
Austin, TX 78756

Amount of contribution (\$) \$100.00  
In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date 10/06/2014  
Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Bintiff, David  
Contributor address; City; State; Zip Code  
6303 Danwood Dr  
Austin, TX 78759-4732

Amount of contribution (\$) \$100.00  
In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)





# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

**SCHEDULE A**

The INSTRUCTION GUIDE explains how to complete this form.

**1 PAGE #**  
Schedule: 4/7 Report: 6/21

**2 FILER NAME** Pool, Leslie (Ms.)

**3 ACCOUNT #** (Ethics Commission filers)  
11111111

**4 Date** 10/01/2014  
**5 Full name of contributor**  out-of-state PAC (ID# \_\_\_\_\_)  
Lehman, Chris

**7 Amount of contribution (\$)** | **8 In-kind contribution description (if applicable)**

**6 Contributor address; City; State; Zip Code**  
1914 Larchmont Dr  
Austin, TX 78704-5936

\$350.00

(If travel outside of Texas, complete Schedule T)

**9 Principal occupation / Job title (See Instructions)**  
Real Estate Appraiser

**10 Employer (See Instructions)**  
Self-Employed

**Date** 10/05/2014  
**Full name of contributor**  out-of-state PAC (ID# \_\_\_\_\_)  
Lopez, Carlos

**Amount of contribution (\$)** | **In-kind contribution description (if applicable)**

**Contributor address; City; State; Zip Code**  
10305 James Ryan Way  
Austin, TX 78730-1506

\$100.00

(If travel outside of Texas, complete Schedule T)

**Principal occupation / Job title (See Instructions)**

**Employer (See Instructions)**

**Date** 10/04/2014  
**Full name of contributor**  out-of-state PAC (ID# \_\_\_\_\_)  
Maldonado, Alfred

**Amount of contribution (\$)** | **In-kind contribution description (if applicable)**

**Contributor address; City; State; Zip Code**  
11608 Knollpark Dr  
Austin, TX 78758-3818

\$200.00

(If travel outside of Texas, complete Schedule T)

**Principal occupation / Job title (See Instructions)**  
Sociology Professor

**Employer (See Instructions)**  
Austin Community College

**Date** 09/29/2014  
**Full name of contributor**  out-of-state PAC (ID# \_\_\_\_\_)  
McCann, Jana

**Amount of contribution (\$)** | **In-kind contribution description (if applicable)**

**Contributor address; City; State; Zip Code**  
4000 Pinckney St  
Austin, TX 78723-5397

\$100.00

(If travel outside of Texas, complete Schedule T)

**Principal occupation / Job title (See Instructions)**

**Employer (See Instructions)**

**Date** 09/26/2014  
**Full name of contributor**  out-of-state PAC (ID# \_\_\_\_\_)  
McCreary, Lou

**Amount of contribution (\$)** | **In-kind contribution description (if applicable)**

**Contributor address; City; State; Zip Code**  
1108 Snowy Owl Ct  
Austin, TX 78746-6647

\$100.00

(If travel outside of Texas, complete Schedule T)

**Principal occupation / Job title (See Instructions)**

**Employer (See Instructions)**

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

**SCHEDULE A**

The INSTRUCTION GUIDE explains how to complete this form.

**1 PAGE #**  
Schedule: 5/7 Report: 7/21

**2 FILER NAME** Pool, Leslie (Ms.)

**3 ACCOUNT #** (Ethics Commission filers)  
11111111

**4 Date** 10/17/2014  
**5 Full name of contributor**  out-of-state PAC (ID# \_\_\_\_\_)  
Romanczak, Marlene

**7 Amount of contribution (\$)** | **8 In-kind contribution description (if applicable)**

**6 Contributor address; City; State; Zip Code**  
11 Niles Rd  
Austin, TX 78703-3138

\$200.00

(If travel outside of Texas, complete Schedule T)

**9 Principal occupation / Job title (See Instructions)**  
Homemaker

**10 Employer (See Instructions)**  
None

**Date** 10/16/2014  
**Full name of contributor**  out-of-state PAC (ID# \_\_\_\_\_)  
Scaperotta, Wendy

**Amount of contribution (\$)** | **In-kind contribution description (if applicable)**

**Contributor address; City; State; Zip Code**  
1502 Payne Ave  
Austin, TX 78757-2924

\$350.00

(If travel outside of Texas, complete Schedule T)

**Principal occupation / Job title (See Instructions)**  
Planning Project Manager

**Employer (See Instructions)**  
Travis County

**Date** 09/27/2014  
**Full name of contributor**  out-of-state PAC (ID# \_\_\_\_\_)  
Seals, Bradley

**Amount of contribution (\$)** | **In-kind contribution description (if applicable)**

**Contributor address; City; State; Zip Code**  
2301 Lawnmont Ave Apt 3  
Austin, TX 78756

\$100.00

(If travel outside of Texas, complete Schedule T)

**Principal occupation / Job title (See Instructions)**

**Employer (See Instructions)**

**Date** 10/22/2014  
**Full name of contributor**  out-of-state PAC (ID# \_\_\_\_\_)  
Von Quintus, Linda

**Amount of contribution (\$)** | **In-kind contribution description (if applicable)**

**Contributor address; City; State; Zip Code**  
2303 Lear Ln  
Austin, TX 78745

\$100.00

(If travel outside of Texas, complete Schedule T)

**Principal occupation / Job title (See Instructions)**

**Employer (See Instructions)**

**Date** 10/15/2014  
**Full name of contributor**  out-of-state PAC (ID# \_\_\_\_\_)  
Walker, Bonnie

**Amount of contribution (\$)** | **In-kind contribution description (if applicable)**

**Contributor address; City; State; Zip Code**  
2905 Skylark Dr  
Austin, TX 78757-2032

\$200.00

(If travel outside of Texas, complete Schedule T)

**Principal occupation / Job title (See Instructions)**

**Employer (See Instructions)**

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

**SCHEDULE A**

The INSTRUCTION GUIDE explains how to complete this form.

**1 PAGE #**  
Schedule: 6/7 Report: 8/21

**2 FILER NAME** Pool, Leslie (Ms.)

**3 ACCOUNT #** (Ethics Commission filers)  
11111111

**4 Date** 09/27/2014  
**5 Full name of contributor**  out-of-state PAC (ID# \_\_\_\_\_)  
Walker, Mark

**7 Amount of contribution (\$)** | **8 In-kind contribution description (if applicable)**

**6 Contributor address; City; State; Zip Code**  
4911 Strass Dr  
Austin, TX 78731

\$250.00

(If travel outside of Texas, complete Schedule T)

**9 Principal occupation / Job title (See Instructions)**  
VP, Regulatory Affairs

**10 Employer (See Instructions)**  
NRG Energy Company

**Date** 10/25/2014  
**Full name of contributor**  out-of-state PAC (ID# \_\_\_\_\_)  
Walker, Mark

**Amount of contribution (\$)** | **In-kind contribution description (if applicable)**

**Contributor address; City; State; Zip Code**  
4911 Strass Dr  
Austin, TX 78731

\$100.00

(If travel outside of Texas, complete Schedule T)

**Principal occupation / Job title (See Instructions)**

**Employer (See Instructions)**

**Date** 10/09/2014  
**Full name of contributor**  out-of-state PAC (ID# \_\_\_\_\_)  
Wiederspahn, Susan

**Amount of contribution (\$)** | **In-kind contribution description (if applicable)**

**Contributor address; City; State; Zip Code**  
1914 Patton Ln  
Austin, TX 78723

\$200.00

(If travel outside of Texas, complete Schedule T)

**Principal occupation / Job title (See Instructions)**  
Laboratory Research

**Employer (See Instructions)**  
Brackenridge Hospital

**Date** 09/27/2014  
**Full name of contributor**  out-of-state PAC (ID# \_\_\_\_\_)  
Williams, Giselle

**Amount of contribution (\$)** | **In-kind contribution description (if applicable)**

**Contributor address; City; State; Zip Code**  
7500 Greenhaven Dr  
Austin, TX 78757

\$100.00

(If travel outside of Texas, complete Schedule T)

**Principal occupation / Job title (See Instructions)**  
Teacher

**Employer (See Instructions)**  
AISD

**Date** 10/21/2014  
**Full name of contributor**  out-of-state PAC (ID# \_\_\_\_\_)  
Williams, Giselle

**Amount of contribution (\$)** | **In-kind contribution description (if applicable)**

**Contributor address; City; State; Zip Code**  
7500 Greenhaven Dr  
Austin, TX 78757

\$100.00

(If travel outside of Texas, complete Schedule T)

**Principal occupation / Job title (See Instructions)**

**Employer (See Instructions)**

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #  
Schedule: 7/7 Report: 9/21

2 FILER NAME Pool, Leslie (Ms.)

3 ACCOUNT # (Ethics Commission filers)  
11111111

4 Date  
10/05/2014

5 Full name of contributor  out-of-state PAC (ID# \_\_\_\_\_)  
Young, Linda

7 Amount of contribution (\$) | 8 In-kind contribution description (if applicable)

\$350.00

6 Contributor address: City: State: Zip Code  
7000 Timarou Ter  
Austin, TX 78754

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)  
Assistant to the President

10 Employer (See Instructions)  
Austin Community College

# POLITICAL EXPENDITURES

# SCHEDULE F

### EXPENDITURE CATEGORIES

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

<b>1 PAGE #</b> Schedule: 1/12 Report: 10/21		<b>2 FILER NAME</b> Pool, Leslie (Ms.)		<b>3 ACCOUNT # (TEC filers)</b> 11111111	
<b>4 Date</b> 10/17/2014	<b>5 Payee name</b> Austin Chronicle				
<b>6 Amount (\$)</b> \$2,113.00	<b>7 Payee address</b> City, State, Zip Code PO Box 49066 Austin, TX 78765				
<b>8 PURPOSE OF EXPENDITURE</b>	<b>(a) Category</b> (See Categories listed at the top of this schedule) Advertising Expense		<b>(b) Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Newspaper ads		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>9 Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:	Office held:	
<b>Date</b> 10/15/2014	<b>Payee name</b> Constant Contact				
<b>Amount (\$)</b> \$76.00	<b>Payee address</b> City, State, Zip Code 1601 Trapelo Rd Waltham, MA 02451				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) Advertising Expense		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Constant Contact subscription		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:	Office held:	
<b>Date</b> 10/25/2014	<b>Payee name</b> Dickinson, Aaron				
<b>Amount (\$)</b> \$178.00	<b>Payee address</b> City, State, Zip Code 1905 Nueces Ave Austin, TX 78705				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign staffing		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:	Office held:	
<b>Date</b> 10/21/2014	<b>Payee name</b> El Mercado				
<b>Amount (\$)</b> \$350.00	<b>Payee address</b> City, State, Zip Code 7414 Burnet Rd Austin, TX 78757				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) Event Expense		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Food for campaign event		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>Complete ONLY if direct expenditure</b>	Candidate / Officeholder name		Office sought:	Office held:	

# POLITICAL EXPENDITURES

# SCHEDULE F

### EXPENDITURE CATEGORIES

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

<b>1 PAGE #</b> Schedule: 2/12 Report: 11/21		<b>2 FILER NAME</b> Pool, Leslie (Ms.)		<b>3 ACCOUNT # (TEC filers)</b> 11111111	
<b>4 Date</b> 09/29/2014	<b>5 Payee name</b> Emmons, Joe				
<b>6 Amount (\$)</b> \$625.00	<b>7 Payee address</b> City, State; Zip Code 403 Blackson Ave Austin, TX 78752				
<b>8 PURPOSE OF EXPENDITURE</b>	<b>(a) Category (See Categories listed at the top of this schedule)</b> Salaries/Wages/Contract Labor			<b>(b) Description (If travel outside of Texas, complete Schedule T)</b> <input type="checkbox"/> Campaign staffing	
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>9 Complete ONLY if direct expenditure to benefit C/OH</b>	<b>Candidate / Officeholder name</b>		<b>Office sought:</b>	<b>Office held:</b>	
<b>Date</b> 10/06/2014	<b>Payee name</b> Emmons, Joe				
<b>Amount (\$)</b> \$625.00	<b>Payee address</b> City, State; Zip Code 403 Blackson Ave Austin, TX 78752				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category (See Categories listed at the top of this schedule)</b> Salaries/Wages/Contract Labor			<b>Description (If travel outside of Texas, complete Schedule T)</b> <input type="checkbox"/> Campaign staffing	
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	<b>Candidate / Officeholder name</b>		<b>Office sought:</b>	<b>Office held:</b>	
<b>Date</b> 10/14/2014	<b>Payee name</b> Emmons, Joe				
<b>Amount (\$)</b> \$625.00	<b>Payee address</b> City, State; Zip Code 403 Blackson Ave Austin, TX 78752				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category (See Categories listed at the top of this schedule)</b> Salaries/Wages/Contract Labor			<b>Description (If travel outside of Texas, complete Schedule T)</b> <input type="checkbox"/> Campaign staffing	
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	<b>Candidate / Officeholder name</b>		<b>Office sought:</b>	<b>Office held:</b>	
<b>Date</b> 10/21/2014	<b>Payee name</b> Emmons, Joe				
<b>Amount (\$)</b> \$625.00	<b>Payee address</b> City, State; Zip Code 403 Blackson Ave Austin, TX 78752				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category (See Categories listed at the top of this schedule)</b> Salaries/Wages/Contract Labor			<b>Description (If travel outside of Texas, complete Schedule T)</b> <input type="checkbox"/> Campaign staffing	
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>Complete ONLY if direct expenditure</b>	<b>Candidate / Officeholder name</b>		<b>Office sought:</b>	<b>Office held:</b>	

# POLITICAL EXPENDITURES

# SCHEDULE F

### EXPENDITURE CATEGORIES

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

The INSTRUCTION GUIDE explains how to complete this form.

<b>1 PAGE #</b> Schedule: 3/12 Report: 12/21		<b>2 FILER NAME</b> Pool, Leslie (Ms.)		<b>3 ACCOUNT # (TEC filers)</b> 11111111	
<b>4 Date</b> 10/23/2014	<b>5 Payee name</b> Emmons, Joe				
<b>6 Amount (\$)</b> \$625.00	<b>7 Payee address</b> City, State; Zip Code 403 Blackson Ave Austin, TX 78752				
<b>8 PURPOSE OF EXPENDITURE</b>	<b>(a) Category</b> (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		<b>(b) Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign staffing		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>9 Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:	Office held:	
<b>Date</b> 10/06/2014	<b>Payee name</b> Evans, Chris				
<b>Amount (\$)</b> \$300.00	<b>Payee address</b> City, State; Zip Code 807 Brazos St Ste 316 Austin, TX 78701				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Finance report preparation		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:	Office held:	
<b>Date</b> 09/26/2014	<b>Payee name</b> FedEx Office				
<b>Amount (\$)</b> \$119.35	<b>Payee address</b> City, State; Zip Code 327 Congress Ave Austin, TX 78701				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) Event Expense		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Signs for event		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:	Office held:	
<b>Date</b> 10/01/2014	<b>Payee name</b> Gibbons, Heidi				
<b>Amount (\$)</b> \$500.00	<b>Payee address</b> City, State; Zip Code 613 Hearn St Austin, TX 78703				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Campaign staffing		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>Complete ONLY if direct expenditure</b>	Candidate / Officeholder name		Office sought:	Office held:	

# POLITICAL EXPENDITURES

# SCHEDULE F

## EXPENDITURE CATEGORIES

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

<b>1 PAGE #</b> Schedule: 4/12 Report: 13/21		<b>2 FILER NAME</b> Pool, Leslie (Ms.)		<b>3 ACCOUNT # (TEC filers)</b> 11111111	
<b>4 Date</b> 10/16/2014	<b>5 Payee name</b> Gibbons, Heidi				
<b>6 Amount (\$)</b> \$500.00	<b>7 Payee address</b> City: State: Zip Code 613 Hearn St Austin, TX 78703				
<b>8 PURPOSE OF EXPENDITURE</b>	<b>(a) Category (See Categories listed at the top of this schedule)</b> Salaries/Wages/Contract Labor		<b>(b) Description (If travel outside of Texas, complete Schedule T)</b> <input type="checkbox"/> Campaign staffing		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>9 Complete ONLY if direct expenditure to benefit C/OH</b>	<b>Candidate / Officeholder name</b>		<b>Office sought:</b>	<b>Office held:</b>	
<b>Date</b> 09/27/2014	<b>Payee name</b> Ginny's Little Longhorn Saloon				
<b>Amount (\$)</b> \$425.00	<b>Payee address</b> City: State: Zip Code 5434 Burnet Rd Austin, TX 78756				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category (See Categories listed at the top of this schedule)</b> Event Expense		<b>Description (If travel outside of Texas, complete Schedule T)</b> <input type="checkbox"/> Event space rental, food		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	<b>Candidate / Officeholder name</b>		<b>Office sought:</b>	<b>Office held:</b>	
<b>Date</b> 09/29/2014	<b>Payee name</b> InFocus Campaigns, LLC				
<b>Amount (\$)</b> \$418.88	<b>Payee address</b> City: State: Zip Code PO Box 10726 Fort Worth, TX 76114				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category (See Categories listed at the top of this schedule)</b> Advertising Expense		<b>Description (If travel outside of Texas, complete Schedule T)</b> <input type="checkbox"/> Automated calls		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	<b>Candidate / Officeholder name</b>		<b>Office sought:</b>	<b>Office held:</b>	
<b>Date</b> 10/16/2014	<b>Payee name</b> InFocus Campaigns, LLC				
<b>Amount (\$)</b> \$220.00	<b>Payee address</b> City: State: Zip Code PO Box 10726 Fort Worth, TX 76114				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category (See Categories listed at the top of this schedule)</b> Advertising Expense		<b>Description (If travel outside of Texas, complete Schedule T)</b> <input type="checkbox"/> Automated calls		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>Complete ONLY if direct expenditure</b>	<b>Candidate / Officeholder name</b>		<b>Office sought:</b>	<b>Office held:</b>	

# POLITICAL EXPENDITURES

# SCHEDULE F

## EXPENDITURE CATEGORIES

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

The INSTRUCTION GUIDE explains how to complete this form.

<b>1 PAGE #</b> Schedule: 5/12 Report: 14/21		<b>2 FILER NAME</b> Pool, Leslie (Ms.)		<b>3 ACCOUNT # (TEC filers)</b> 11111111	
<b>4 Date</b> 09/27/2014	<b>5 Payee name</b> OfficeMax				
<b>6 Amount (\$)</b> \$17.08	<b>7 Payee address</b> City; State; Zip Code 907 W Fifth St Austin, TX 78703				
<b>8 PURPOSE OF EXPENDITURE</b>	<b>(a) Category (See Categories listed at the top of this schedule)</b> Office Overhead/Rental Expense		<b>(b) Description (If travel outside of Texas, complete Schedule T)</b> <input type="checkbox"/> Office supplies		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>9 Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:	Office held:	
<b>Date</b> 10/07/2014	<b>Payee name</b> OfficeMax				
<b>Amount (\$)</b> \$5.40	<b>Payee address</b> City; State; Zip Code 4615 N Lamar Blvd Austin, TX 78756				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category (See Categories listed at the top of this schedule)</b> Office Overhead/Rental Expense		<b>Description (If travel outside of Texas, complete Schedule T)</b> <input type="checkbox"/> CD-Rs		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:	Office held:	
<b>Date</b> 10/08/2014	<b>Payee name</b> OfficeMax				
<b>Amount (\$)</b> \$136.75	<b>Payee address</b> City; State; Zip Code 4615 N Lamar Blvd Austin, TX 78756				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category (See Categories listed at the top of this schedule)</b> Office Overhead/Rental Expense		<b>Description (If travel outside of Texas, complete Schedule T)</b> <input type="checkbox"/> Ink and stationery		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:	Office held:	
<b>Date</b> 10/10/2014	<b>Payee name</b> OfficeMax				
<b>Amount (\$)</b> \$34.95	<b>Payee address</b> City; State; Zip Code 907 W Fifth St Austin, TX 78703				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category (See Categories listed at the top of this schedule)</b> Office Overhead/Rental Expense		<b>Description (If travel outside of Texas, complete Schedule T)</b> <input type="checkbox"/> Office supplies		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>Complete ONLY if direct expenditure</b>	Candidate / Officeholder name		Office sought:	Office held:	

# POLITICAL EXPENDITURES

# SCHEDULE F

### EXPENDITURE CATEGORIES

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

The INSTRUCTION GUIDE explains how to complete this form.

<b>1 PAGE #</b> Schedule: 6/12 Report: 15/21		<b>2 FILER NAME</b> Pool, Leslie (Ms.)		<b>3 ACCOUNT # (TEC filers)</b> 11111111	
<b>4 Date</b> 10/25/2014	<b>5 Payee name</b> OfficeMax				
<b>6 Amount (\$)</b> \$33.91	<b>7 Payee address</b> City, State; Zip Code 907 W Fifth St Austin, TX 78703				
<b>8 PURPOSE OF EXPENDITURE</b>	<b>(a) Category</b> (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		<b>(b) Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Office supplies		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>9 Complete ONLY if direct expenditure to benefit C/OH</b>	<b>Candidate / Officeholder name</b>		<b>Office sought:</b>	<b>Office held:</b>	
<b>Date</b> 10/02/2014	<b>Payee name</b> Sage Payment Solutions				
<b>Amount (\$)</b> \$223.79	<b>Payee address</b> City, State; Zip Code 1750 Old Meadow Rd Ste 300 McLean, VA 22102				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Online contribution fees		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	<b>Candidate / Officeholder name</b>		<b>Office sought:</b>	<b>Office held:</b>	
<b>Date</b> 10/12/2014	<b>Payee name</b> Shutterstock, Inc.				
<b>Amount (\$)</b> \$29.00	<b>Payee address</b> City, State; Zip Code 350 Fifth Ave 21st Flr New York, NY 10118				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) Advertising Expense		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Art for mail piece		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	<b>Candidate / Officeholder name</b>		<b>Office sought:</b>	<b>Office held:</b>	
<b>Date</b> 10/20/2014	<b>Payee name</b> Shutterstock, Inc.				
<b>Amount (\$)</b> \$29.00	<b>Payee address</b> City, State; Zip Code 350 Fifth Ave 21st Flr New York, NY 10118				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) Advertising Expense		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Art for mail piece		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>Complete ONLY if direct expenditure</b>	<b>Candidate / Officeholder name</b>		<b>Office sought:</b>	<b>Office held:</b>	

# POLITICAL EXPENDITURES

# SCHEDULE F

### EXPENDITURE CATEGORIES

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

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

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

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

The INSTRUCTION GUIDE explains how to complete this form.

<b>1 PAGE #</b> Schedule: 7/12 Report: 16/21		<b>2 FILER NAME</b> Pool, Leslie (Ms.)		<b>3 ACCOUNT # (TEC filers)</b> 11111111	
<b>4 Date</b> 10/18/2014	<b>5 Payee name</b> Smith, Natasha (M.)				
<b>6 Amount (\$)</b> \$540.00	<b>7 Payee address</b> City, State; Zip Code 2207 Leon St Austin, TX 78705				
<b>8 PURPOSE OF EXPENDITURE</b>	<b>(a) Category (See Categories listed at the top of this schedule)</b> Salaries/Wages/Contract Labor			<b>(b) Description (If travel outside of Texas, complete Schedule T)</b> <input type="checkbox"/> Campaign staffing	
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>9 Complete ONLY if direct expenditure to benefit C/OH</b>	<b>Candidate / Officeholder name</b>		<b>Office sought:</b>	<b>Office held:</b>	
<b>Date</b> 10/20/2014	<b>Payee name</b> Spence, Steven				
<b>Amount (\$)</b> \$132.00	<b>Payee address</b> City, State; Zip Code 7707 S IH-35 Apt 230 Austin, TX 78744				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category (See Categories listed at the top of this schedule)</b> Salaries/Wages/Contract Labor			<b>Description (If travel outside of Texas, complete Schedule T)</b> <input type="checkbox"/> Campaign staffing	
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	<b>Candidate / Officeholder name</b>		<b>Office sought:</b>	<b>Office held:</b>	
<b>Date</b> 10/25/2014	<b>Payee name</b> Spence, Steven				
<b>Amount (\$)</b> \$408.00	<b>Payee address</b> City, State; Zip Code 7707 S IH-35 Apt 230 Austin, TX 78744				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category (See Categories listed at the top of this schedule)</b> Salaries/Wages/Contract Labor			<b>Description (If travel outside of Texas, complete Schedule T)</b> <input type="checkbox"/> Campaign staffing	
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	<b>Candidate / Officeholder name</b>		<b>Office sought:</b>	<b>Office held:</b>	
<b>Date</b> 09/30/2014	<b>Payee name</b> US Postal Service				
<b>Amount (\$)</b> \$3,867.79	<b>Payee address</b> City, State; Zip Code 8225 Cross Park Dr Austin, TX 78710				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category (See Categories listed at the top of this schedule)</b> Advertising Expense			<b>Description (If travel outside of Texas, complete Schedule T)</b> <input type="checkbox"/> Postage stamps	
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>Complete ONLY if direct expenditure</b>	<b>Candidate / Officeholder name</b>		<b>Office sought:</b>	<b>Office held:</b>	

# POLITICAL EXPENDITURES

# SCHEDULE F

### EXPENDITURE CATEGORIES

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

The INSTRUCTION GUIDE explains how to complete this form.

<b>1 PAGE #</b> Schedule: 8/12 Report: 17/21		<b>2 FILER NAME</b> Pool, Leslie (Ms.)		<b>3 ACCOUNT # (TEC filers)</b> 11111111	
<b>4 Date</b> 10/09/2014	<b>5 Payee name</b> US Postal Service				
<b>6 Amount (\$)</b> \$26.46	<b>7 Payee address</b> City; State; Zip Code 2418 Spring Ln Austin, TX 78703				
<b>8 PURPOSE OF EXPENDITURE</b>	<b>(a) Category</b> (See Categories listed at the top of this schedule) Advertising Expense		<b>(b) Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Postage stamps		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>9 Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:	Office held:	
<b>Date</b> 10/15/2014	<b>Payee name</b> US Postal Service				
<b>Amount (\$)</b> \$3,767.21	<b>Payee address</b> City; State; Zip Code 8225 Cross Park Dr. Austin, TX 78710				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) Advertising Expense		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Postage stamps		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:	Office held:	
<b>Date</b> 10/20/2014	<b>Payee name</b> US Postal Service				
<b>Amount (\$)</b> \$49.00	<b>Payee address</b> City; State; Zip Code 4300 Speedway Austin, TX 78705				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) Advertising Expense		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Postage stamps		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:	Office held:	
<b>Date</b> 10/20/2014	<b>Payee name</b> US Postal Service				
<b>Amount (\$)</b> \$1,986.89	<b>Payee address</b> City; State; Zip Code 8225 Cross Park Dr Austin, TX 78710				
<b>PURPOSE OF EXPENDITURE</b>	<b>Category</b> (See Categories listed at the top of this schedule) Advertising Expense		<b>Description</b> (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Postage stamps		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>Complete ONLY if direct expenditure</b>	Candidate / Officeholder name		Office sought:	Office held:	

# POLITICAL EXPENDITURES

# SCHEDULE F

### EXPENDITURE CATEGORIES

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

The INSTRUCTION GUIDE explains how to complete this form.

<b>1</b> PAGE # Schedule: 9/12 Report: 18/21	<b>2</b> FILER NAME Pool, Leslie (Ms.)	<b>3</b> ACCOUNT # (TEC filers) 11111111
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<b>4</b> Date 10/22/2014	<b>5</b> Payee name US Postal Service
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<b>6</b> Amount (\$) \$2,278.72	<b>7</b> Payee address City, State, Zip Code 8225 Cross Park Dr Austin, TX 78710
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<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Postage stamps
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense	

<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 10/23/2014	Payee name US Postal Service
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Amount (\$) \$2,506.46	Payee address City, State, Zip Code 8225 Cross Park Dr Austin, TX 78710
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Postage stamps
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 09/26/2014	Payee name Worley Printing
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Amount (\$) \$3,754.11	Payee address City, State, Zip Code 3217 N IH-35 Austin, TX 78722
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Printing Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Printing mail piece
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 09/30/2014	Payee name Worley Printing
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Amount (\$) \$427.59	Payee address City, State, Zip Code 3217 N IH-35 Austin, TX 78722
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Printing Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Pushcards
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete ONLY if direct expenditure	Candidate / Officeholder name	Office sought:	Office held:
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# POLITICAL EXPENDITURES

# SCHEDULE F

### EXPENDITURE CATEGORIES

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

The INSTRUCTION GUIDE explains how to complete this form.

<b>1</b> PAGE # Schedule: 10/12 Report: 19/21	<b>2</b> FILER NAME Pool, Leslie (Ms.)	<b>3</b> ACCOUNT # (TEC filers) 11111111
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<b>4</b> Date 10/10/2014	<b>5</b> Payee name Worley Printing
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<b>6</b> Amount (\$) \$125.57	<b>7</b> Payee address City, State; Zip Code 3217 N IH-35 Austin, TX 78722
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<b>8</b> PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Invitations
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense	

<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 10/10/2014	Payee name Worley Printing
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Amount (\$) \$411.35	Payee address City, State; Zip Code 3217 N IH-35 Austin, TX 78722
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Printing Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Pushcards
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 10/13/2014	Payee name Worley Printing
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Amount (\$) \$132.07	Payee address City, State; Zip Code 3217 N IH-35 Austin, TX 78722
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Printing Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Event item printing
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:
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Date 10/15/2014	Payee name Worley Printing
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Amount (\$) \$2,673.78	Payee address City, State; Zip Code 3217 N IH-35 Austin, TX 78722
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Printing Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Mailer printing
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete ONLY if direct expenditure	Candidate / Officeholder name	Office sought:	Office held:
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# POLITICAL EXPENDITURES

# SCHEDULE F

### EXPENDITURE CATEGORIES

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

The INSTRUCTION GUIDE explains how to complete this form.

<b>1</b> PAGE # Schedule: 11/12 Report: 20/21	<b>2</b> FILER NAME Pool, Leslie (Ms.)	<b>3</b> ACCOUNT # (TEC filers) 11111111
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<b>4</b> Date 10/15/2014	<b>5</b> Payee name Worley Printing
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<b>6</b> Amount (\$) \$2,498.41	<b>7</b> Payee address City, State, Zip Code 3217 N IH-35 Austin, TX 78722
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<b>8</b> PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Mailer printing
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense	

<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:

Date 10/16/2014	Payee name Worley Printing
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Amount (\$) \$3,670.76	Payee address City, State, Zip Code 3217 N IH-35 Austin, TX 78722
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Printing Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Mailer printing
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:

Date 10/20/2014	Payee name Worley Printing
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Amount (\$) \$2,815.58	Payee address City, State, Zip Code 3217 N IH-35 Austin, TX 78722
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Printing Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Mailer printing
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought:	Office held:

Date 10/24/2014	Payee name Worley Printing
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Amount (\$) \$2,413.98	Payee address City, State, Zip Code 3217 N IH-35 Austin, TX 78722
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<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Printing Expense	Description (If travel outside of Texas, complete Schedule T) <input type="checkbox"/> Mailer printing
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete ONLY if direct expenditure	Candidate / Officeholder name	Office sought:	Office held:

# POLITICAL EXPENDITURES

# SCHEDULE F

### EXPENDITURE CATEGORIES

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

The INSTRUCTION GUIDE explains how to complete this form.

<b>1 PAGE #</b> Schedule: 12/12 Report: 21/21		<b>2 FILER NAME</b> Pool, Leslie (Ms.)		<b>3 ACCOUNT # (TEC filers)</b> 11111111	
<b>4 Date</b> 10/24/2014	<b>5 Payee name</b> Worley Printing				
<b>6 Amount (\$)</b> \$2,615.86	<b>7 Payee address</b> City, State, Zip Code 3217 N IH-35 Austin, TX 78722				
<b>8 PURPOSE OF EXPENDITURE</b>	<b>(a) Category (See Categories listed at the top of this schedule)</b> Printing Expense		<b>(b) Description (if travel outside of Texas, complete Schedule T)</b> <input type="checkbox"/> Mailer printing		
	<input type="checkbox"/> Check if Austin, TX, officeholder living expense				
<b>9 Complete ONLY if direct expenditure to benefit C/OH</b>	Candidate / Officeholder name		Office sought:	Office held:	