CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction	Guide explains how to comp	olete this form.	1 Filer ID (Ethics Comm 00090749		2 Total pages	s filed: 15
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST Benjamin		MI	Date Received	CALLY FILED
	NICKNAME	LAST Leffler		SUFFIX	01/11/2023	CALLY FILED
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; AP 3509 Werner Avenue	T / SUITE #; CIT	Υ;	ZIP CODE	Date Hand-delivere	d or Date Postmarked Amount
Change of Address	Austin, TX 78722				Date Processed	
					Date Imaged	
5 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST Sonia		MI		
	NICKNAME	LAST Van Meter		SUFFIX		
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO 4510 W. Guadalupe St. C-321 Austin, TX 78751	O BOX PLEASE);	AP	T / SUITE #; CIT	Y; S	STATE; ZIP CODE
7 CAMPAIGN TREASURER PHONE	AREA CODE PHO (512) 569-3454	NE NUMBER E	EXTENSION			
8 REPORT TYPE	X January 15 [30th day before		Runoff Exceeded modified reporting limit	appointment (d	campaign treasurer officeholder only) Attach C/OH-FR)
9 PERIOD COVERED	Month Day Year 10/30/2022		HROUGH	Month Day 12/31/20		
10 ELECTION	ELECTION DATE Month Day Year 11/08/2022		rimary Seneral	ELECTION TYPE Runoff Special	Other	
11 OFFICE	OFFICE HELD (if any)	ı		12 OFFICE SOUGH Council Memb		
GO TO PAGE 2						

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

2 of 15

13 C / OH NAME	Leffler, Benjamin			14 Filer ID 00090749	(Ethics Con	nmission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	These expenditure	ns accepted or political expersions may have been made with required to report this inform	out the candidate's or off	iceholder's kr	owledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NA	ME			
_	GENERAL					
		COMMITTEE AD	DRESS			
	SPECIFIC					
		COMMITTEE CA	MPAIGN TREASURER NAM	1E		
		COMMITTEE CA	MPAIGN TREASURER ADD	PRESS		
16 CONTRIBUTION TOTALS			NS OF \$50 OR LESS (OTH DANS), UNLESS ITEMIZED	ER THAN PLEDGES,	\$	0.00
		AL CONTRIBUTION PLEDGES, LOANS	DNS 5, OR GUARANTEES OF LO	ANS)	\$	1,168.20
EXPENDITURE TOTALS	3. TOTAL POLITIC	AL EXPENDITURE	ES OF \$100 OR LESS, UNLI	ESS ITEMIZED	\$	0.00
	4. TOTAL POLITIC	AL EXPENDITUR	ES		\$	50,384.43
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE		NS MAINTAINED AS OF TH	HE LAST DAY OF THE	\$	96.99
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR		ALL OUTSTANDING LOANS	S AS OF THE LAST DAY	\$	0.00
17 AFFADAVIT						
			I swear, or affirm, under pe true and correct and includ- under Title 15, Election Cod	es all information required	accompanyinį d to be report	g report is ed by me
				Benjamin Leffler		
			Signatu	re of Candidate or Officeh	nolder	<u></u>
AFFIX NO	TARY STAMP / SEAL AB	OVE				
Sworn to and subso	cribed before me, by the s	aid		, this the		day
of	, 20, to ce	ertify which, witnes	s my hand and seal of office.			
Signature of office	er administering	Printed name	e of officer administering	Title of office	cer administe	ring oath

SUBTOTALS - C/OH

FORM C/OH

			C	JVEK SI	3 of 15
I	ER NAN	19 Filer ID 00090749	(Ethics Com	nmission Filers)	
I		E SUBTOTALS SCHEDULE		SUBTO	OTAL AMOUNT
1.	Х	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	1,168.20
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.		SCHEDULE E: LOANS		\$	
5.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	6	\$	50,384.43
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
8.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
9.		SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	
10		SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$	
11	. 🔲	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	DNS	\$	
12	. 🔲	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS IT TO FILER	RETURNED	\$	

MONETARY POLITICAL CONTRIBUTIONS					SCHEDULE A1		
	The Instruction Guide explains how to complete this form.				Total pages Schedule A1: Sch: 1/3 Rpt: 4/15		
2	FILER NAME Leffler, Benja	FILER NAME Leffler, Benjamin			Filer ID (Ethics Commission 00090749	n Filers)	
4 Date 11/01/2022		 Full name of contributor		7	Amount of Contribution (\$)	\$26.63	
		403 St Johns Pl., Apt.4A Brooklyn, NY 11238					
8	Principal occu Pursuit	pation / Job title (See Instructions)	9 Employer (See Instructions Biz Dec	5)			
	Date Full name of contributor out-of-state PAC (ID#:) 11/04/2022 Crockett, Jacqueline Contributor address; City; State; Zip Code 4676 E Camino Rosa Tuscon, AZ 85718			•	Amount of Contribution (\$)	\$450.00	
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions None	5)			
	Date 11/02/2022	Full name of contributor out-of-state PAC (ID#:_ Dupuy, Andrew Contributor address; City; State; Zip Code 147 W. Lafayette Ave. Baltimore, MD 21217-4211			Amount of Contribution (\$)	\$21.37	
		pation / Job title (See Instructions) s Conservancy	Employer (See Instructions Nonprofit Director	<u>l</u> s)			
	Date 10/30/2022	Full name of contributor out-of-state PAC (ID#:_ Dyer, David Contributor address; City; State; Zip Code 7404 Tovar Dr			Amount of Contribution (\$)	\$79.26	
	Principal occu CEO	Austin, TX 78729 pation / Job title (See Instructions)	Employer (See Instructions Austin People Works	<u> </u> s)			
	Date 11/01/2022	Full name of contributor out-of-state PAC (ID#:_ Harris, Caroline Contributor address; City; State; Zip Code 1760 2nd Avenue, #11B #11B New York, NY 10128)		Amount of Contribution (\$)	\$105.58	
	Principal occu GoldmanHar	pation / Job title (See Instructions) ris LLC	Employer (See Instructions lawyer	5)			

	MONET	ARY POLITICAL CONTRIBUTION	SCHEDULE A			
	The Instru	The Instruction Guide explains how to complete this form.			Total pages Schedule A1: Sch: 2/3 Rpt: 5/15	
2	FILER NAME Leffler, Benja	amin		3	Filer ID (Ethics Commission 00090749	n Filers)
4	Date 10/30/2022	5 Full name of contributor out-of-state PAC (ID#:)		7	Amount of Contribution (\$)	\$263.47
_		Austin, TX 78723		L		
8	Principal occu Retired	pation / Job title (See Instructions)	9 Employer (See Instructions Retired	5)		
	Date Full name of contributor out-of-state PAC (ID#:) 11/04/2022 Jolink, Chaille Contributor address; City; State; Zip Code 100 West 55th Street Austin, TX 78751			Amount of Contribution (\$)	\$26.63	
	Principal occu Sales	pation / Job title (See Instructions)	Employer (See Instructions Nordstrom	5)		
	Date 11/01/2022	Full name of contributor out-of-state PAC (ID#:_Linehan, Tom Contributor address; City; State; Zip Code 6005 Bullard Dr Austin, TX 78757)		Amount of Contribution (\$)	\$26.63
	Principal occuretired	pation / Job title (See Instructions)	Employer (See Instructions me	<u> </u> 5)		
	Date 11/04/2022	Full name of contributor out-of-state PAC (ID#:_Liro, Joe Contributor address; City; State; Zip Code 617 East 43rd Austin, TX 78751			Amount of Contribution (\$)	\$105.58
	Principal occu Emeritus	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 11/01/2022	Full name of contributor out-of-state PAC (ID#:_ Massey, Barry Contributor address; City; State; Zip Code 1707 Schieffer Avenue Austin, TX 78722)		Amount of Contribution (\$)	\$26.63
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions Retired	5)		

	MONETARY POLITICAL CONTRIBUTIONS	Se	CHEDULE A1
	The Instruction Guide explains how to complete this form.	1 Total pages Sche Sch: 3/3 Rpt: 6/	
2	FILER NAME Leffler, Benjamin	3 Filer ID (Ethics 0 00090749	Commission Filers)
4	Date 5 Full name of contributor out-of-state PAC (ID#:) Querejazu, Daniel 6 Contributor address; City; State; Zip Code 2807 5th St NE Washington, DC 20017	7 Amount of Contrib	oution (\$) \$26.63
8	Principal occupation / Job title (See Instructions) Consultant 9 Employer (See Instructions) WB	ions)	
	Date Full name of contributor out-of-state PAC (ID#:) 11/01/2022 Wilson, Steve Contributor address; City; State; Zip Code 3311 Lafayette Ave. Austin, TX 78722	Amount of Contrib	oution (\$) \$9.79
	Principal occupation / Job title (See Instructions) Employer (See Instructions) Writer Self	ions)	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committe Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	
	Sch: 1/9 Rpt: 7/15	Leffler, Benjamin 00090749
4	Date	5 Payee name
	11/29/2022	Donateway
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$63.20	PO Box 301267
		Austin, TX 78703
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		Credit Card Processing
_	Operation ONLY if allowed	Out it is to the later where where the later where where the later where the later where the later where where the later where
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
_		
	Date	Payee name
	12/13/2022	Jose Velasquez Campaign
	Amount (\$)	Payee address; City; State; Zip Code
	\$300.00	3110 Manor Rd
		St H
		Austin, TX 78723
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
		Candidate/Officeholder/Political Committee Contribution
		Contribution
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
_	Date	Payee name
	11/10/2022	Rocket Science Group
	Amount (\$)	Payee address; City; State; Zip Code
	\$24.52	675 Ponce de Leon NE
	Ψ24.32	0731 Office de Leoff NE
		Atlanta, GA 30308
		I
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Advertising Expanse (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Email Email
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
1		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to c	ompl	ete this form.
1	Total pages Schedule F1:			3 Filer ID (Ethics Commission Filers)
L	Sch: 2/9 Rpt: 8/15	Leffler, Benjamin		00090749
4		5 Payee name		
	12/02/2022	US Postal Service		
6	Amount (\$)	7 Payee address; City; State; Zip C	ode	
l	\$331.20	823 Congress Ave		
L		Austin, TX 78701		
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	EXPENDITURE	Office Overhead/Rental Expense		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
				Postage
9	Complete ONLY if direct	Candidate/Officeholder name Office so	ught	Office held
	expenditure to benefit C/Ol	1		
Г	Date	Payee name		
	11/29/2022	Worley Printing		
	Amount (\$)	Payee address; City; State; Zip C	ode	
	\$186.19	3217 N Interstate 35 Frontage Rd,		
		Austin, TX 78722		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE	Printing Expense		Check if travel outside of Texas. Complete Schedule T.
				Check if Austin, TX, officeholder living expense Printing
┝	Complete ONLY if direct	Candidate/Officeholder name Office so	<u>l</u> ught	Office held
	expenditure to benefit C/O	1		
F	Date	Payee name		
	10/30/2022	Y-Strategy		
H	Amount (\$)	Payee address; City; State; Zip C	ode	
l	\$2,158.92	3110 Manor Rd		
l		Ste H		
		Austin, TX 78722		
Н	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE	Advertising Expense		Check if travel outside of Texas. Complete Schedule T.
l	EXPENDITORE			Check if Austin, TX, officeholder living expense
				Texts
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office so	ught	Office hold
	Complete ONLY if direct expenditure to benefit C/Ol		ugnt	Office held
\vdash				

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to compl	ete this form.
1	Total pages Schedule F1: Sch: 3/9 Rpt: 9/15	2 FILER NAME Leffler, Benjamin	3 Filer ID (Ethics Commission Filers) 00090749
4	Date 10/30/2022	5 Payee name Y-Strategy	
	Amount (\$) \$8,394.43	7 Payee address; City; State; Zip Code 3110 Manor Rd Ste H Austin, TX 78722	
8	PURPOSE OF EXPENDITURE	(a) Category (see Categories listed at the top of this schedule) Printing Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Mail
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held
	Date 10/30/2022	Payee name Y-Strategy	
	Amount (\$) \$1,077.12	Payee address; City; State; Zip Code 3110 Manor Rd Ste H Austin, TX 78722	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Postage reimbursement for postcards
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held
	Date 10/30/2022	Payee name Y-Strategy	
	Amount (\$) \$2,994.78	Payee address; City; State; Zip Code 3110 Manor Rd Ste H Austin, TX 78722	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Canvassers
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
rtising Expense Event Expense Loan Repayment/Reimbu

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1: Sch: 4/9 Rpt: 10/15	2 FILER NAME 2 FILER NAME 3 Filer ID (Ethics Commission Filers) 00090749
4 Date 10/30/2022	5 Payee name Y-Strategy
6 Amount (\$) \$2,500.00	7 Payee address; City; State; Zip Code 3110 Manor Rd Ste H Austin, TX 78722
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Field Management
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H
Date 10/30/2022	Payee name Y-Strategy
Amount (\$) \$3,500.00	Payee address; City; State; Zip Code 3110 Manor Rd Ste H Austin, TX 78722
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign Services
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date 10/30/2022	Payee name Y-Strategy
Amount (\$) \$101.87	Payee address; City; State; Zip Code 3110 Manor Rd Ste H Austin, TX 78722
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Print flyers
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
rtising Expense Event Expense Loan Repayment/Reimbu

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

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1: Sch: 5/9 Rpt: 11/15	2 FILER NAME Leffler, Benjamin	3 Filer ID (Ethics Commission Filers) 00090749
4	Date 10/30/2022	5 Payee name Y-Strategy	•
	Amount (\$) \$3,090.00	7 Payee address; City; State; Zip Code 3110 Manor Rd Ste H Austin, TX 78722	
8	PURPOSE OF EXPENDITURE	Advertising Expense	evel outside of Texas. Complete Schedule T. Sistin, TX, officeholder living expense Print Ads
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	Date 10/30/2022	Payee name Y-Strategy	
	Amount (\$) \$1,860.00	Payee address; City; State; Zip Code 3110 Manor Rd Ste H Austin, TX 78722	
	PURPOSE OF EXPENDITURE		evel outside of Texas. Complete Schedule T. Sistin, TX, officeholder living expense
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought	Office held
	Date 10/30/2022	Payee name Y-Strategy	
	Amount (\$) \$250.00	Payee address; City; State; Zip Code 3110 Manor Rd Ste H Austin, TX 78722	
	PURPOSE OF EXPENDITURE	Advertising Expense	evel outside of Texas. Complete Schedule T. Sistin, TX, officeholder living expense
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 6/9 Rpt: 12/15	Leffler, Benjamin 00090749
4	Date	5 Payee name
	11/09/2022	Y-Strategy
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$4,600.00	3110 Manor Rd
		Ste H
		Austin, TX 78722
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Online Ads
		Offinite / Nas
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	11/09/2022	Y-Strategy
	Amount (\$)	Payee address; City; State; Zip Code
	\$7,981.28	3110 Manor Rd
		Ste H
		Austin, TX 78722
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Printing Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Mail
		IVIAII
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	11/09/2022	Y-Strategy
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,545.00	3110 Manor Rd
		Ste H
		Austin, TX 78722
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Reimburse Print Ads
		Reinibulse Filiti Aus
-	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		
1 Total pages Schedule F1: Sch: 7/9 Rpt: 13/15	2 FILER NAME 2 FILER NAME 3 Filer ID (Ethics Commission Filers) 00090749	
4 Date 11/09/2022	5 Payee name Y-Strategy	
6 Amount (\$) \$927.03	7 Payee address; City; State; Zip Code 3110 Manor Rd Ste H Austin, TX 78722	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Texts	
Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held	
Date 11/09/2022	Payee name Y-Strategy	
Amount (\$) \$2,397.84	Payee address; City; State; Zip Code 3110 Manor Rd Ste H Austin, TX 78722	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Phones	
Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH		
Date 11/09/2022	Payee name Y-Strategy	
Amount (\$) \$1,065.23	Payee address; City; State; Zip Code 3110 Manor Rd Ste H Austin, TX 78722	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Canvassers	
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		
1 Total pages Schedule F1: Sch: 8/9 Rpt: 14/15	2 FILER NAME 2 FILER NAME 3 Filer ID (Ethics Commission Filers) 00090749	
4 Date 11/08/2022	5 Payee name Y-Strategy	
6 Amount (\$) \$1,227.45	7 Payee address; City; State; Zip Code 3110 Manor Rd Ste H Austin, TX 78722	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Texts	
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H	
Date 11/08/2022	Payee name Y-Strategy	
Amount (\$) \$1,201.37	Payee address; City; State; Zip Code 3110 Manor Rd Ste H Austin, TX 78722	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Phones	
Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH		
Date 11/08/2022	Payee name Y-Strategy	
Amount (\$) \$980.13	Payee address; City; State; Zip Code 3110 Manor Rd Ste H Austin, TX 78722	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Canvassers	
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1: Sch: 9/9 Rpt: 15/15	2 FILER NAME Leffler, Benjamin 3 Filer ID (Ethics Commission Filers) 00090749
4	Date	5 Payee name
	11/08/2022	Y-Strategy
	Amount (\$) \$101.87	7 Payee address; City; State; Zip Code 3110 Manor Rd Ste H Austin, TX 78722
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Polling Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Flyers
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date 11/08/2022	Payee name Y-Strategy
	Amount (\$) \$900.00	Payee address; City; State; Zip Code 3110 Manor Rd Ste H Austin, TX 78722
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Sign Delivery
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date 11/08/2022	Payee name Y-Strategy
	Amount (\$) \$625.00	Payee address; City; State; Zip Code 3110 Manor Rd Ste H Austin, TX 78722
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Field Management
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held