

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

**FORM C/OH
COVER SHEET PG 1**

OFFICIAL RECORD

**CITY SECRETARY
FT. WORTH, TX**

The C/OH Instruction Guide explains how to complete this form.

2 Total pages filed:
22

3 CANDIDATE /
OFFICEHOLDER
NAME

MS / MRS / MR FIRST MI
Mr. Leonard
NICKNAME LAST SUFFIX
Firestone

OFFICE USE ONLY

Date Received

**RECEIVED
APR -1 2021
CITY OF FORT WORTH
CITY SECRETARY**

Date Hand-delivered or Date Postmarked

4 CANDIDATE /
OFFICEHOLDER
MAILING
ADDRESS

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE

[REDACTED]

Change of Address

5 CANDIDATE/
OFFICEHOLDER
PHONE

AREA CODE PHONE NUMBER EXTENSION
(817) 932-3792

Receipt # Amount \$

6 CAMPAIGN
TREASURER
NAME

MS / MRS / MR FIRST MI
Mr. Paxton
NICKNAME LAST SUFFIX
Motheral

Date Processed

Date Imaged

7 CAMPAIGN
TREASURER
ADDRESS

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE

1401 Washington Terrace Fort Worth TX 76107

(Residence or Business)

8 CAMPAIGN
TREASURER
PHONE

AREA CODE PHONE NUMBER EXTENSION
(817) 312-0231

9 REPORT TYPE

January 15 30th day before election Runoff 15th day after campaign treasurer appointment (Officeholder Only)
 July 15 8th day before election Exceeded Modified Reporting Limit Final Report (Attach C/OH - FR)

10 PERIOD
COVERED

Month Day Year Month Day Year
02 / 12 / 2021 THROUGH 03 / 22 / 2021

11 ELECTION

ELECTION DATE ELECTION TYPE
Month Day Year Primary Runoff Other Description
05 / 01 / 2021 General Special

12 OFFICE

OFFICE HELD (if any)

13 OFFICE SOUGHT (if known)

Fort Worth City Council District 7

14 NOTICE FROM
POLITICAL
COMMITTEE(S)

THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. 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

GENERAL

COMMITTEE ADDRESS

SPECIFIC

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

Additional Pages

GO TO PAGE 2

SUBTOTALS - C/OH

FORM C/OH
COVER SHEET PG 3

19 FILER NAME

Leonard Firestone

20 Filer ID (Ethics Commission Filers)

21 SCHEDULE SUBTOTALS
NAME OF SCHEDULE

SUBTOTAL
AMOUNT

1.	<input checked="" type="checkbox"/>	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 69250.00
2.	<input type="checkbox"/>	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 0
3.	<input type="checkbox"/>	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ 0
4.	<input checked="" type="checkbox"/>	SCHEDULE E: LOANS	\$ 25000.00
5.	<input checked="" type="checkbox"/>	SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 17154.72
6.	<input type="checkbox"/>	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ 0
7.	<input type="checkbox"/>	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$ 0
8.	<input type="checkbox"/>	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 0
9.	<input checked="" type="checkbox"/>	SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$ 100.00
10.	<input type="checkbox"/>	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$ 0
11.	<input type="checkbox"/>	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 0
12.	<input type="checkbox"/>	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$ 0

LOANS**SCHEDULE E**If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E: 1
2 FILER NAME Leonard Firestone		3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED LOANS		\$ 25,000.00
5 Date of loan 3/4/2021	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) Leonard & Nicole Firestone	9 Loan Amount (\$) 25,000.00
6 Is lender a financial institution? Y N	8 Lender address; City; State; Zip Code 3905 Monticello Dr Fort Worth TX 76107	10 Interest rate N/A
		11 Maturity date N/A
12 Principal occupation / Job title (See Instructions)		13 Employer (See Instructions)
14 Description of Collateral <input checked="" type="checkbox"/> none		15 <input checked="" type="checkbox"/> Check if personal funds were deposited into political account (See Instructions)
16 GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	17 Name of guarantor	19 Amount Guaranteed (\$)
	18 Guarantor address; City; State; Zip Code	
20 Principal Occupation (See Instructions)		21 Employer (See Instructions)
Date of loan	Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____)	Loan Amount (\$)
Is lender a financial institution? Y N	Lender address; City; State; Zip Code	Interest rate
		Maturity date
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Description of Collateral <input type="checkbox"/> none		<input type="checkbox"/> Check if personal funds were deposited into political account (See Instructions)
GUARANTOR INFORMATION <input type="checkbox"/> not applicable	Name of guarantor	Amount Guaranteed (\$)
	Guarantor address; City; State; Zip Code	
Principal Occupation (See Instructions)		Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If lender is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 12
2 FILER NAME Leonard Firestone		3 Filer ID (Ethics Commission Filers)
4 Date 3/4/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PSEL PAC	7 Amount of contribution (\$) 1250
6 Contributor address; City; State; Zip Code 201 Main Street #2500 Fort Worth TX 76102		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 3/4/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Good Government Fund	Amount of contribution (\$) 1250
Contributor address; City; State; Zip Code 201 Main Street #2500 Fort Worth TX 76102		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 3/8/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dee Kelly Jr.	Amount of contribution (\$) 1000
Contributor address; City; State; Zip Code 5756 Merrymount Rd Fort Worth TX 76107		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 3/10/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mike and Rosie Moncrief	Amount of contribution (\$) 250
Contributor address; City; State; Zip Code 777 Taylor St #1030 Fort Worth TX 76102		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 12
2 FILER NAME Leonard Firestone		3 Filer ID (Ethics Commission Filers)
4 Date 3/10/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bryan Eppstein 6 Contributor address; City; State; Zip Code 2908 Alton Road Fort Worth TX 76109	7 Amount of contribution (\$) 250
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 3/10/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maribeth Miller Contributor address; City; State; Zip Code 6321 Indian Creek Drive Fort Worth TX 76116	Amount of contribution (\$) 100
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 3/10/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) James McDonald Contributor address; City; State; Zip Code 5350 Nassau Circle East Englewood CO 80113	Amount of contribution (\$) 250
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 3/10/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brant Martin Contributor address; City; State; Zip Code 111 Rivercrest Drive Fort Worth TX 76107	Amount of contribution (\$) 500
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>		

MONETARY POLITICAL CONTRIBUTIONS

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 12
2 FILER NAME Leonard Firestone		3 Filer ID (Ethics Commission Filers)
4 Date 3/10/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) William Firestone 6 Contributor address; City; State; Zip Code 50 Roberts Way Hillsborough CA 94010	7 Amount of contribution (\$) 350
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 3/10/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kimball Firestone Contributor address; City; State; Zip Code PO Box 76 Middletown MD 21769	Amount of contribution (\$) 1000
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 3/10/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) William Butler Contributor address; City; State; Zip Code 3812 Monticello Dr Fort Worth TX 76107	Amount of contribution (\$) 2500
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 3/10/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marsha Kleinheinz Contributor address; City; State; Zip Code 1101 Broad Avenue Fort Worth TX 76107	Amount of contribution (\$) 5000
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 12
2 FILER NAME Leonard Firestone		3 Filer ID (Ethics Commission Filers)
4 Date 3/10/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adam Firestone	7 Amount of contribution (\$) 500
6 Contributor address; City; State; Zip Code 620 McMurray Road Buelton CA 93427		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 3/12/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Michael Gibson Duwe	Amount of contribution (\$) 500
Contributor address; City; State; Zip Code 4001 Hartwood Dr. Fort Worth TX 76109		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 3/12/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kyle K. Poulson	Amount of contribution (\$) 500
Contributor address; City; State; Zip Code 1635 Rogers Rd Fort Worth TX 76107		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 3/12/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) John B. Kleinheinz	Amount of contribution (\$) 5000
Contributor address; City; State; Zip Code 301 Commerce St #1900 Fort Worth TX 76102		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 12
2 FILER NAME Leonard Firestone		3 Filer ID (Ethics Commission Filers)
4 Date 3/12/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Richard Stuart II 6 Contributor address; City; State; Zip Code PO Box 1690 Weatherford TX 76086	7 Amount of contribution (\$) 500
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 3/12/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jefferson Bennett Contributor address; City; State; Zip Code 1 Potters Lane Savannah GA 31411	Amount of contribution (\$) 250
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 3/14/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roger Gates Contributor address; City; State; Zip Code 4620 Washburn Avenue Fort Worth TX 76107	Amount of contribution (\$) 1000
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 3/15/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Progress Fund Contributor address; City; State; Zip Code 201 Main Street #2500 Fort Worth TX 76102	Amount of contribution (\$) 5000
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 12
2 FILER NAME Leonard Firestone		3 Filer ID (Ethics Commission Filers)
4 Date 3/15/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Susan Ford Bales 6 Contributor address; City; State; Zip Code 2712 Piersall Dr McKinney TX 75072	7 Amount of contribution (\$) 500
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 3/15/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jared and Mary Shope Contributor address; City; State; Zip Code 6633 Cahoba Dr Fort Worth TX 76135	Amount of contribution (\$) 500
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 3/15/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ann Corrigan Contributor address; City; State; Zip Code 1717 West Loop South #1900 Houston TX 77027	Amount of contribution (\$) 2500
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 3/15/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) T.M. Roe Patterson Contributor address; City; State; Zip Code 9341 Bella Terra Dr Fort Worth TX 76126	Amount of contribution (\$) 500
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 12
2 FILER NAME Leonard Firestone		3 Filer ID (Ethics Commission Filers)
4 Date 3/16/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dennis P Shingleton Campaign 6 Contributor address; City; State; Zip Code PO Box 470336 Fort Worth TX 76147	7 Amount of contribution (\$) 500
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 3/16/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brooks Firestone Contributor address; City; State; Zip Code 619 Rancho Alisal Dr. Solvang CA 93463	Amount of contribution (\$) 5000
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 3/16/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tim Wray Contributor address; City; State; Zip Code 223 Bedford Ave 202 Brooklyn NY 11211	Amount of contribution (\$) 1000
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 3/16/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dorothy Slover Contributor address; City; State; Zip Code 875 5th Avenue 19E New York NY 10066	Amount of contribution (\$) 250
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 12
2 FILER NAME Leonard Firestone		3 Filer ID (Ethics Commission Filers)
4 Date 3/16/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martha Leonard 6 Contributor address; City; State; Zip Code 1411 Shady Oaks Ln Fort Worth TX 76107	7 Amount of contribution (\$) 1000
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 3/18/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Trevor Armstrong Contributor address; City; State; Zip Code 1501 Ems Rd E Fort Worth TX 76116	Amount of contribution (\$) 250
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 3/18/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nicholas Firestone Contributor address; City; State; Zip Code 7001 N. 40th St Paradise Valley AZ 85253	Amount of contribution (\$) 1000
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 3/19/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greater FW Realtors Assoc Contributor address; City; State; Zip Code 2650 Parkview Dr Fort Worth TX 76102	Amount of contribution (\$) 5000
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 12
2 FILER NAME Leonard Firestone		3 Filer ID (Ethics Commission Filers)
4 Date 3/19/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) John Boswell	7 Amount of contribution (\$) 500
6 Contributor address; City; State; Zip Code 1320 Lake Street Fort Worth TX 76102		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 3/19/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Andrew Blake	Amount of contribution (\$) 100
Contributor address; City; State; Zip Code 300 Crestwood Drive Fort Worth TX 76107		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 3/19/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Christopher Firestone	Amount of contribution (\$) 250
Contributor address; City; State; Zip Code BOX 131449901 Sioux Falls SD 57186		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 3/20/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garland & Mollie Lasater	Amount of contribution (\$) 1000
Contributor address; City; State; Zip Code 3815 Lisbon St #203 Fort Worth TX 76107		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 12
2 FILER NAME Leonard Firestone		3 Filer ID (Ethics Commission Filers)
4 Date 3/20/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) James Rainbolt 6 Contributor address; City; State; Zip Code 709 Alta Dr. Fort Worth TX 76107	7 Amount of contribution (\$) 1000
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 3/20/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ronald Goldman Contributor address; City; State; Zip Code 1880 Hulen Street Fort Worth TX 76107	Amount of contribution (\$) 250
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 3/20/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carey Romer Contributor address; City; State; Zip Code 1500 Chelsea Rd Palos Verdes Estates CA 90274	Amount of contribution (\$) 500
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 3/21/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Paxton Motheral Campaign Contributor address; City; State; Zip Code 4200 S Hulen St #614 Fort Worth TX 76109	Amount of contribution (\$) 10000
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: 12
2 FILER NAME Leonard Firestone		3 Filer ID (Ethics Commission Filers)
4 Date 3/21/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Raleigh Green V 6 Contributor address; City; State; Zip Code 3821 Hamilton Ave Fort Worth TX 76107	7 Amount of contribution (\$) 100
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 3/21/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tommy Henderson Contributor address; City; State; Zip Code 3816 Hamilton Fort Worth TX 76107	Amount of contribution (\$) 500
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 3/22/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) FW Firefighters Committee for Responsible Government Contributor address; City; State; Zip Code 3855 Tulsa Way Fort Worth TX 76107	Amount of contribution (\$) 5000
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 3/22/2021	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) John Sellers Contributor address; City; State; Zip Code 3724 Helen St Fort Worth TX 76107	Amount of contribution (\$) 5000
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME Leonard Firestone		3 Filer ID (Ethics Commission Filers)
4 Date 03/22/2021	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Matt Montague 6 Contributor address; City; State; Zip Code 3909 Monticello Drive Fort Worth TX 76107	7 Amount of contribution (\$) 100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 5	2 FILER NAME Leonard Firestone	3 Filer ID (Ethics Commission Filers)
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4 Date 3/22/2021	5 Payee name Raise The Money
-----------------------------------	---

6 Amount (\$) 5.15	7 Payee address; City; State; Zip Code PO Box 26466 Little Rock AR 72221
-------------------------------------	---

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fundraising Expense	(b) Description Fees
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

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

Date 3/22/2021	Payee name The Eppstein Group
--------------------------	---

Amount (\$) 4845.27	Payee address; City; State; Zip Code 2830 S Hulen St #361 Fort Worth TX 76109
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Printing Expense	Description Signs
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

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

Date	Payee name
------	------------

Amount (\$)	Payee address; City; State; Zip Code
-------------	--------------------------------------

PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

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

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, **DO NOT** include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Credit Card Payment	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: 5	2 FILER NAME Leonard Firestone	3 Filer ID (Ethics Commission Filers)
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4 Date 3/19/2021	5 Payee name Raise The Money
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6 Amount (\$) 42.40	7 Payee address; City; State; Zip Code PO Box 26466 Little Rock AR 72221
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fundraising Expense	(b) Description Fees
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 3/20/2021	Payee name Raise The Money
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Amount (\$) 86.50	Payee address; City; State; Zip Code PO Box 26466 Little Rock AR 72221
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fundraising Expense	Description Fees
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 3/21/2021	Payee name Raise The Money
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Amount (\$) 29.90	Payee address; City; State; Zip Code PO Box 26466 Little Rock AR 72221
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fundraising Expense	Description Fees
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 5	2 FILER NAME Leonard Firestone	3 Filer ID (Ethics Commission Filers)
4 Date 3/15/2021	5 Payee name Raise The Money	
6 Amount (\$) 147.50	7 Payee address; City; State; Zip Code PO Box 26466 Little Rock AR 72221	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fundraising Expense	(b) Description Fees
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 3/16/2021	Payee name Raise The Money	
Amount (\$) 111.00	Payee address; City; State; Zip Code PO Box 26466 Little Rock AR 72221	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fundraising Expense	Description Fees
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 3/18/2021	Payee name Raise The Money	
Amount (\$) 61.75	Payee address; City; State; Zip Code PO Box 26466 Little Rock AR 72221	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fundraising Expense	Description Fees
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 5	2 FILER NAME Leonard Firestone	3 Filer ID (Ethics Commission Filers)
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4 Date 3/10/2021	5 Payee name Raise The Money
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6 Amount (\$) 514.30	7 Payee address; City; State; Zip Code PO Box 26466 Little Rock AR 72221
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fundraising Expense	(b) Description Fees
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 3/12/2021	Payee name Raise The Money
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Amount (\$) 12.50	Payee address; City; State; Zip Code PO Box 26466 Little Rock AR 72221
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fundraising Expense	Description Fees
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 3/14/2021	Payee name Raise The Money
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Amount (\$) 49.25	Payee address; City; State; Zip Code PO Box 26466 Little Rock AR 72221
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fundraising Expense	Description Fees
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

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EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Credit Card Payment	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: 5	2 FILER NAME Leonard Firestone	3 Filer ID (Ethics Commission Filers)
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4 Date 3/10/2021	5 Payee name The Eppstein Group
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6 Amount (\$) 7500.00	7 Payee address; 2830 S Hulen St #361 Fort Worth TX 76109	City;	State;	Zip Code
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description Consulting
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 3/10/2021	Payee name The Eppstein Group
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Amount (\$) 3749.20	Payee address; 2830 S Hulen St #361 Fort Worth TX 76109	City;	State;	Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description Web site & expenses
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date	Payee name
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Amount (\$)	Payee address;	City;	State;	Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

If the requested information is not applicable, **DO NOT** include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: 1	2 FILER NAME Leonard Firestone	3 Filer ID (Ethics Commission Filers)
4 Date 2/12/2021	5 Payee name City of Fort Worth	
6 Amount (\$) 100.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 200 Texas Street Fort Worth TX 76102	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description Filing Fee
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date	Candidate / Officeholder name Office sought Office held	
Amount (\$)	Payee name	
<input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date	Candidate / Officeholder name Office sought Office held	
Amount (\$)	Payee name	
<input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date	Candidate / Officeholder name Office sought Office held	
Amount (\$)	Payee name	
<input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

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