

**SPECIFIC-PURPOSE COMMITTEE
CAMPAIGN FINANCE REPORT**

8452

**FORM SPAC
COVER SHEET PG 1**

The SPAC Instruction Guide explains how to complete this form.	1 ACCOUNT # (Ethics Commission Filers)	2 Total pages filed: 1087
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3 COMMITTEE NAME Bass For Texas Comm. At-Large	OFFICE USE ONLY
	Date Received

4 COMMITTEE ADDRESS <input type="checkbox"/> change of address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE P.O. Box 81423 Austin, Tx. 78708	Date Hand-delivered or Postmarked
		Receipt # Amount

5 CAMPAIGN TREASURER NAME	MS / MRS / MR <input checked="" type="checkbox"/> FIRST MI Billy F.	Date Processed
	NICKNAME LAST SUFFIX Paol	Date Imaged

6 CAMPAIGN TREASURER'S STREET ADDRESS (residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 7713 Mesa Dr. Austin, Tx. 78731
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7 CAMPAIGN TREASURER'S MAILING ADDRESS <input checked="" type="checkbox"/> change of address	STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE P.O. Box 81423 Austin, Tx. 78708
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8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (512) 345-4899
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9 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> July 15 <input checked="" type="checkbox"/> 8th day before election <input type="checkbox"/> Dissolution (attach PAC-DR) <input type="checkbox"/> Runoff <input type="checkbox"/> 10th day after campaign treasurer termination
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10 PERIOD COVERED	Month Day Year THROUGH Month Day Year 9 / 26 / 14 10 / 25 / 14
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11 ELECTION	ELECTION DATE ELECTION TYPE
Month Day Year 11 / 4 / 14	<input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input checked="" type="checkbox"/> General <input type="checkbox"/> Special

GO TO PAGE 2

**SPECIFIC-PURPOSE COMMITTEE REPORT:
PURPOSE AND TOTALS**

**FORM SPAC
COVER SHEET PG 2**

12 COMMITTEE NAME Bass For Texas Committee ACCOUNT # (Ethics Commission Filers)

13 COMMITTEE PURPOSE
(Attach lists on plain paper to complete this report if necessary.)

CANDIDATE

OFFICEHOLDER

OPPOSE (Candidate or Measure)

ASSIST (Officeholder)

CANDIDATE / OFFICEHOLDER NAME
S. Glenn Bass

OFFICE SOUGHT (candidate) / OFFICE HELD (officeholder)
Justice of the Peace, Pet. 2

BALLOT IDENTIFICATION / # _____ ELECTION DATE
Month / Day / Year

DESCRIPTION

14 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ <u>0</u>
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ <u>5,450.-</u>
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ <u>269.56</u>
	4. TOTAL POLITICAL EXPENDITURES	\$ <u>269.56</u>
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ <u>4,679.52</u>
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ <u>0</u>

15 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.

Billy J. Pool
Signature of Campaign Treasurer

AFFIX NOTARY STAMP AND SEAL ABOVE

Sworn to and subscribed before me, by the said Billy Pool, this the 27 day of October, 20 14, to certify which, witness my hand and seal of office.

Cindy Muller
Signature of officer administering oath

CINDY MULLER
Printed name of officer administering oath

Notary
Title of officer administering oath

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

2 FILER NAME

Bass For Texas Committee

3 ACCOUNT # (Ethics Commission Filers)

4 Date

9/30/14

5 Full name of contributor out-of-state PAC (ID#:

James Dickey

7 Amount of contribution (\$)

20.-

8 In-kind contribution description (if applicable)

6 Contributor address; City; State; Zip Code

7901 Cameron Rd, Ste 3-202
Austin, TX 78754

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

10/2/14

Full name of contributor out-of-state PAC (ID#:

Cassie Daniel

Amount of contribution (\$)

25.-

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

9712 Copper Creek Dr.
Austin, Tx. 78729

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/8/14

Full name of contributor out-of-state PAC (ID#:

John Daywalt

Amount of contribution (\$)

50.-

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

2208 Pearl St. Apt. 206
Austin, Tx. 78705

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/8/14

Full name of contributor out-of-state PAC (ID#:

Michael Morris

Amount of contribution (\$)

100.-

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

4208 Canoas Dr.
Austin, Tx. 78730

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/10/14

Full name of contributor out-of-state PAC (ID#:

Kevin Cook

Amount of contribution (\$)

20.-

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

11501 Century Oaks Terrace, Apt. 3302
Austin, Tx. 78758

(If travel outside of Texas, complete Schedule T)

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.

**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A:	
2 FILER NAME Bass For Texas Committee		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 10/11/14	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carole Keeton	7 Amount of contribution (\$) 250 -	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code 2904 Bowman Ave. Austin, Tx. 78703		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 10/14/14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) David Whitehead	Amount of contribution (\$) 20 -	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code P.O. Box 141873 Austin, Tx. 78714		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/15/14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kirk Brewer	Amount of contribution (\$) 25 -	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 3220 Feathergrass Ct., Apt. 9101 Austin, Tx. 78758		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/24/14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Larry & Barbara Hill	Amount of contribution (\$) 100 -	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 4204 Churchill Downs Dr. Austin, Tx. 78746		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 10/25/14	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sandra Hanley	Amount of contribution (\$) 50 -	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code 3022 N. Bosy Ln, Apt. 2202 Carrollton, Tx. 75007		(If travel outside of Texas, complete Schedule T)	
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.

**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

2 FILER NAME

Pass For Texas Committee

3 ACCOUNT # (Ethics Commission Filers)

4 Date

10/22/14

5 Full name of contributor

out-of-state PAC (ID#: _____)

William Lutz

7 Amount of contribution (\$)

50. -

8 In-kind contribution description (if applicable)

6 Contributor address; City; State; Zip Code

1900 Scovell Ridge, #4402
Austin, TX, 78727

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

10/17/14

Full name of contributor

out-of-state PAC (ID#: _____)

Toby Miller

Amount of contribution (\$)

100. -

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

7608 White Oak Dr.
Lago Vista, TX, 78645

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/17/14

Full name of contributor

out-of-state PAC (ID#: _____)

Kristine Miller

Amount of contribution (\$)

100. -

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

7608 White Oak Dr.
Lago Vista, TX, 78645

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/17/14

Full name of contributor

out-of-state PAC (ID#: _____)

Koreen Hughes

Amount of contribution (\$)

40. -

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

18937 Canyon Sage Ln.
Pflugerville, TX, 78660

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/10/14

Full name of contributor

out-of-state PAC (ID#: _____)

Law office of Brian C. Cullen

Amount of contribution (\$)

50. -

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

3311 Richmond Ave, St. 305
Houston, TX, 77098

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A:	
2 FILER NAME <i>Bass For Texas Committee</i>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <i>10/25/14</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Julie Witte</i>	7 Amount of contribution (\$) <i>250</i>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <i>14302 Jannave Ln. Austin, TX. 78728</i>		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date <i>10/25/14</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Republican Club of Austin Political Action Committee</i>	Amount of contribution (\$) <i>500</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>811 W. Live Oak St. Austin, Tx. 78704</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>10/22/14</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Bob Woody</i>	Amount of contribution (\$) <i>350</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>2204 Point Bluff Dr. Austin, Tx. 78746</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>10/22/14</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Brenda Woody</i>	Amount of contribution (\$) <i>350</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>2204 Point Bluff Dr. Austin, Tx. 78746</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>10/22/14</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Preferred Spine and Pain PLLC</i>	Amount of contribution (\$) <i>500</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>12319 N. Mopac Expy., Ste. 350 Austin, TX. 78758</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

2 FILER NAME

Bass For Texas Committee

3 ACCOUNT # (Ethics Commission Filers)

4 Date

10/8/14

5 Full name of contributor out-of-state PAC (ID#: _____)

Austin Apartment Association PAC

6 Contributor address; City; State; Zip Code

*4107 Medical Pkwy, #100
Austin, TX 78756*

7 Amount of contribution (\$)

1,000

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

10/17/14

Full name of contributor out-of-state PAC (ID#: _____)

N.W. Austin Republican Women's Club PAC

Contributor address; City; State; Zip Code

*9712 Copper Creek Dr.
Austin, TX 78729*

Amount of contribution (\$)

500

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10/17/14

Full name of contributor out-of-state PAC (ID#: _____)

Travis County Republican Party

Contributor address; City; State; Zip Code

*2401 Cameron Rd, Ste. 3-502
Austin, TX 78754*

Amount of contribution (\$)

1,000

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor out-of-state PAC (ID#: _____)

Contributor address; City; State; Zip Code

Amount of contribution (\$)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor out-of-state PAC (ID#: _____)

Contributor address; City; State; Zip Code

Amount of contribution (\$)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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