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*Board Certified in Criminal Law
**Board Certified in Appellate Criminal Law
Texas Board of Legal Specialization

Frank Maloney, Of Counsel*
Woody Roark, Of Counsel

June 7, 2012

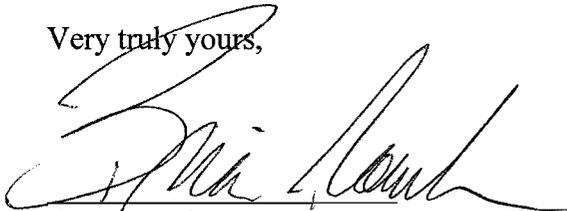
The Honorable Dana DeBeauvoir
Travis County Clerk
Elections Division
5501 Airport Blvd
Austin, Texas 78751FILED FOR RECORD
2012 JUN - 7 PM 3:50
Dana DeBeauvoir
County Clerk
Travis County Texas

Re: Commissioner Margaret Gomez' Amended Schedules

Dear Ms. DeBeauvoir,

Please find enclosed Commissioner Gomez' amended schedules for the January 15, 2009, July 15, 2009, January 15, 2010, February 1, 2010, February 22, 2010, July 15, 2010, October 2, 2010 and October 25, 2010 filing periods. In addition, a statement of organization for *American Federation of State County and Municipal Employees People PAC* is attached to the July 15, 2010 schedule.

Very truly yours,


Brian Roark

January 15, 2009

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: 1 of 10	
2 FILER NAME Margaret Gómez Campaign		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 7/3/08	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: NO) Michael R. McHone	7 Amount of contribution (\$) \$50.00	8 In-kind contribution description (if applicable) —
6 Contributor address; City; State; Zip Code P.O. Box 8142 Austin, TX 78713-8142		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions) Don't know		10 Employer (See Instructions) Don't know	
Date 7/3/08	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: NO) Daron Butler TCOPAC	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable) —
Contributor address; City; State; Zip Code 5757 Woodway, Ste 101.W Aberdeen, TX 77057		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Turner, Collie, Braden	
Date 7/3/08	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: NO) Timmy Baranoff	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable) —
Contributor address; City; State; Zip Code 2307 2307 Jansen Drive Austin, TX 78703		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Don't know	
Date 7/3/08	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: NO) The Honorable Diane Henson	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable) —
Contributor address; City; State; Zip Code 908 Jansen Mountain Drive Austin, TX 78746		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) Appellate Court Judge		Employer (See Instructions) State of Texas	
Date 7/3/08	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: NO) Betty D. Hunt	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable) —
Contributor address; City; State; Zip Code 2822 Woodridge Drive Austin, TX 78703		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) Don't know		Employer (See Instructions) Don't know	
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>			

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: 2 of 10	
2 FILER NAME		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 7/3/08	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <u>NO</u>) <u>Renea Hicks</u> 6 Contributor address; City; State; Zip Code <u>4112 Ramsay Avenue Austin TX 78756-3511</u>	7 Amount of contribution (\$) <u>\$30.00</u>	8 In-kind contribution description (if applicable) — (If travel outside of Texas, complete Schedule T)
9 Principal occupation / Job title (See Instructions) <u>Attorney</u>		10 Employer (See Instructions)	
Date 7/3/08	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <u>NO</u>) <u>Ross B. Langham, III</u> Contributor address; City; State; Zip Code <u>10320 Boulder Lane, # 821 Austin, TX 78726</u>	Amount of contribution (\$) <u>\$300.00</u>	In-kind contribution description (if applicable) — (If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions) <u>Engineer</u>		Employer (See Instructions) <u>Journeyman Company</u>	
Date 7/3/08	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <u>NO</u>) <u>Stephen D. Danner</u> Contributor address; City; State; Zip Code <u>4204 Hempstead Court Austin, TX 78746</u>	Amount of contribution (\$) <u>\$100.00</u>	In-kind contribution description (if applicable) — (If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions) <u>Don't know</u>		Employer (See Instructions) <u>Don't know.</u>	
Date 7/10/08	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <u>NO</u>) <u>Sanjeev Kema Kumar</u> Contributor address; City; State; Zip Code <u>1628 Westlake Drive Austin, TX 78746</u>	Amount of contribution (\$) <u>\$300.00</u>	In-kind contribution description (if applicable) — (If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions) <u>Engineer</u>		Employer (See Instructions) <u>Journeyman Company</u>	
Date 7/25/08	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <u>NO</u>) <u>Verbi Callahan</u> Contributor address; City; State; Zip Code <u>P.O. Box 644 Austin Bastrop, TX 78602</u>	Amount of contribution (\$) <u>\$200.00</u>	In-kind contribution description (if applicable) — (If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions) <u>Owner - Callahan Feed Store</u>		Employer (See Instructions) <u>Callahan Feed Store</u>	

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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: 3 of 10	
2 FILER NAME		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 8/12/08	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <u>NO</u>) <i>Kenneth L. Altus</i>	7 Amount of contribution (\$) \$25.00	8 In-kind contribution description (if applicable) —
6 Contributor address; City; State; Zip Code <i>2204 South Third Austin, TX 78704</i>		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions) <i>Environment</i>		10 Employer (See Instructions) <i>City of Austin</i>	
Date 8/12/08	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <u>NO</u>) <i>Michael A. Trumble</i>	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) —
Contributor address; City; State; Zip Code <i>902 Kerensoph Drive Austin, TX 78748</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Program Manager</i>		Employer (See Instructions) <i>City of Austin</i>	
Date 8/13/08	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <u>YES</u>) <i>Allied Waste Employees</i>	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable) —
Contributor address; City; State; Zip Code <i>DeHo Government PAC 18500 North Allied Way Phoenix, AZ 85054</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Solid Waste</i>		Employer (See Instructions)	
Date 9/22/02	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <u>NO</u>) <i>Dianne T. Mendoza</i>	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) —
Contributor address; City; State; Zip Code <i>1619 Vista Del Monte San Antonio, TX 78216</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Public Service</i>		Employer (See Instructions) <i>Capital Metropolitan Transportation Authority</i>	
Date 10/10/08	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <u>NO</u>) <i>Aida Berdes Dougan</i>	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable) —
Contributor address; City; State; Zip Code <i>12925 Latchwood Lane Austin, TX 78753</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>MBE/HUB Coordinator</i>		Employer (See Instructions) <i>Capital Metropolitan Transportation Authority</i>	

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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: <i>4 of 10</i>	
2 FILER NAME		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <i>10/9/08</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>NO</i>) <i>Gilbert Jimela</i>	7 Amount of contribution (\$) <i>\$500.00</i>	8 In-kind contribution description (if applicable) —
6 Contributor address; City; State; Zip Code <i>1122 Colorado, #2399 Austin, TX 78701</i>		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions) <i>Don't know</i>		10 Employer (See Instructions) <i>Don't know</i>	
Date <i>10/7/08</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>NO</i>) <i>Mary C. Alonzo</i>	Amount of contribution (\$) <i>\$10.00</i>	In-kind contribution description (if applicable) —
Contributor address; City; State; Zip Code <i>1120 W. Goforth Road Austin, TX 78610</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>10/17/08</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>NO</i>) <i>Mrs and Mr Donato Rodriguez</i>	Amount of contribution (\$) <i>\$10.00</i>	In-kind contribution description (if applicable) —
Contributor address; City; State; Zip Code <i>9000 Hays Trail Austin, TX 78754-4932</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Retired</i>		Employer (See Instructions) <i>State of Texas</i>	
Date <i>10/17/08</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>NO</i>) <i>Yolanda Velazquez</i>	Amount of contribution (\$) <i>\$20.00</i>	In-kind contribution description (if applicable) —
Contributor address; City; State; Zip Code <i>2311 Willow Street Austin, TX 78702</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Constitutional Worker</i>		Employer (See Instructions) <i>Sin State Gonzalo Serritos</i>	
Date <i>10/17/08</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>NO</i>) <i>Carlos and Jennifer Lopez</i>	Amount of contribution (\$) <i>\$20.00</i>	In-kind contribution description (if applicable) —
Contributor address; City; State; Zip Code <i>10846 Redmond Road Austin, TX 78739</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Deputy Constable, Per 5</i>		Employer (See Instructions) <i>Harris County</i>	

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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: <i>5 of 10</i>	
2 FILER NAME		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <i>10/17/08</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>NO</i>) <i>Jack A. Wilson</i>	7 Amount of contribution (\$) <i>\$25.00</i>	8 In-kind contribution description (if applicable) —
6 Contributor address; City; State; Zip Code <i>4803 Arroyo H Austin, TX 78751</i>		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions) <i>Retired</i>		10 Employer (See Instructions) <i>Don't know</i>	
Date <i>10/17/08</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Jesse Oatis</i>	Amount of contribution (\$) <i>\$25.00</i>	In-kind contribution description (if applicable) —
Contributor address; City; State; Zip Code <i>1000 Locke Lane Austin, TX 78704-6136</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Retired physician</i>		Employer (See Instructions) <i>Texas County</i>	
Date <i>10/17/08</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>NO</i>) <i>John H. Legierande</i>	Amount of contribution (\$) <i>\$1 50.00</i>	In-kind contribution description (if applicable) —
Contributor address; City; State; Zip Code <i>6600 Mesa Drive Austin, TX 78731</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Attorney</i>		Employer (See Instructions) <i>Texas County Attorney</i>	
Date <i>10/17/08</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>NO</i>) <i>Ben S. Aleman</i>	Amount of contribution (\$) <i>\$50.00</i>	In-kind contribution description (if applicable) —
Contributor address; City; State; Zip Code <i>417 Clarke Street Austin, TX 78745-1129</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Retired</i>		Employer (See Instructions) <i>Capital Metropolitan Transportation Authority</i>	
Date <i>10/17/08</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>NO</i>) <i>Bucky Lamb</i>	Amount of contribution (\$) <i>\$100.00</i>	In-kind contribution description (if applicable) —
Contributor address; City; State; Zip Code <i>3205 Clearview Drive Austin, TX 78703</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Don't know</i>		Employer (See Instructions) <i>Don't know</i>	

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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: <i>6 of 10</i>	
2 FILER NAME		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <i>10/17/08</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>NO</i>) <i>Adam A. Matthews</i>	7 Amount of contribution (\$) <i>\$/00.00</i>	8 In-kind contribution description (if applicable) —
6 Contributor address; City; State; Zip Code <i>7529 Harlow Drive Austin, TX 78739-1979</i>		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions) <i>Don't know</i>		10 Employer (See Instructions) <i>Don't know</i>	
Date <i>10/17/08</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>NO</i>) <i>Ruben G. Valdez Jr.</i>	Amount of contribution (\$) <i>\$/00.00</i>	In-kind contribution description (if applicable) —
Contributor address; City; State; Zip Code <i>6901 Hill Meadow Drive Austin, TX 78736-1956</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Educator</i>		Employer (See Instructions) <i>Austin Independent School District</i>	
Date <i>10/17/08</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>NO</i>) <i>John J. Vay</i>	Amount of contribution (\$) <i>\$/00.00</i>	In-kind contribution description (if applicable) —
Contributor address; City; State; Zip Code <i>6654 Whiternush Valley Woods Austin, TX 78746</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Attorney</i>		Employer (See Instructions)	
Date <i>10/17/08</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>NO</i>) <i>Marion Sanchez</i>	Amount of contribution (\$) <i>\$/00.00</i>	In-kind contribution description (if applicable) —
Contributor address; City; State; Zip Code <i>5934 Republic of Texas Boulevard Austin, TX 78735-6479</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Public Relations</i>		Employer (See Instructions) <i>Self-Employed - Estilo Communications</i>	
Date <i>10/17/08</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>NO</i>) <i>Ero International, LLP Eli Ochoa</i>	Amount of contribution (\$) <i>\$/00.00</i>	In-kind contribution description (if applicable) —
Contributor address; City; State; Zip Code <i>300 South 8 McAllen, TX 78501</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Architects</i>		Employer (See Instructions) <i>Ero International, LLP</i>	

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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: <i>7 of 10</i>	
2 FILER NAME		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <i>10/17/08</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>NO</i>) <i>Herbert Evans</i>	7 Amount of contribution (\$) <i>\$150.00</i>	8 In-kind contribution description (if applicable) —
6 Contributor address; City; State; Zip Code <i>1302 West Avenue Austin, TX 78701-1716</i>		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions) <i>Justice of the Peace, Pa 5</i>		10 Employer (See Instructions) <i>Jesus County</i>	
Date <i>10/17/08</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>NO</i>) <i>Long Donald State Account</i>	Amount of contribution (\$) <i>\$250.00</i>	In-kind contribution description (if applicable) —
Contributor address; City; State; Zip Code <i>P.O. Box 5843 Austin, TX 78763</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>U.S. Congressman</i>		Employer (See Instructions) <i>United States Congress</i>	
Date <i>10/17/08</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>NO</i>) <i>Peter Low</i>	Amount of contribution (\$) <i>\$400.00</i>	In-kind contribution description (if applicable) —
Contributor address; City; State; Zip Code <i>4242 West Lake Drive Austin, TX 78746-1453</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Attorney</i>		Employer (See Instructions) <i>Self-Employed</i>	
Date <i>10/17/08</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>NO</i>) <i>Brian Rice</i>	Amount of contribution (\$) <i>\$250.00</i>	In-kind contribution description (if applicable) —
Contributor address; City; State; Zip Code <i>LAN-PAC 2925 Breigard Drive, FL4 Houston, TX 77042</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Partner</i>		Employer (See Instructions) <i>Lockwood, Andrews & Newcom, Inc</i>	
Date <i>10/17/08</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>NO</i>) <i>Eddie Ledesma</i>	Amount of contribution (\$) <i>\$250.00</i>	In-kind contribution description (if applicable) —
Contributor address; City; State; Zip Code <i>9508 Altom Way Austin, TX 78717</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Business owner</i>		Employer (See Instructions) <i>Capital Chassis</i>	

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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: 8 of 10	
2 FILER NAME		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 10/17/08	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <u>NO</u>) <i>John C. Gustafson, Jr.</i>	7 Amount of contribution (\$) \$300.00	8 In-kind contribution description (if applicable) —
6 Contributor address; City; State; Zip Code <i>905 Willis Creek McKinnon, TX 75070</i>		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions) <i>Don't know</i>		10 Employer (See Instructions) <i>Don't know</i>	
Date 10/20/08	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <u>NO</u>) <i>Victor Murruta</i>	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable) —
Contributor address; City; State; Zip Code <i>3502 Paulson Road Austin, TX 78741-7227</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Don't know</i>		Employer (See Instructions) <i>Don't know</i>	
Date 10/21/08	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <u>NO</u>) <i>Olivia Chambers</i>	Amount of contribution (\$) \$205.00	In-kind contribution description (if applicable) —
Contributor address; City; State; Zip Code <i>16900 Foyquist Road Del Valle, TX 78617</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Don't know</i>		Employer (See Instructions) <i>City of Austin</i>	
Date 10/22/08	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <u>NO</u>) <i>E. Scott Paddock</i>	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable) —
Contributor address; City; State; Zip Code <i>2105 Weston Avenue Franklin Ft. Worth, TX 76107</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Planner</i>		Employer (See Instructions) <i>Gateway Planning Group - Ft. Worth</i>	
Date 10/22/08	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <u>NO</u>) <i>John Joseph Clark, Shuman & Winters</i>	Amount of contribution (\$) \$1000.00	In-kind contribution description (if applicable) —
Contributor address; City; State; Zip Code <i>P.O. Box 1148 Austin, TX 78767</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Attorney</i>		Employer (See Instructions) <i>Clark, Shuman & Winters</i>	

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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: <i>9 of 10</i>	
2 FILER NAME		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <i>10/27/08</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>NO</i>) <i>Rechel Cortez</i>	7 Amount of contribution (\$) <i>\$50.00</i>	8 In-kind contribution description (if applicable) —
6 Contributor address; City; State; Zip Code <i>2209 Kevin Drive Austin, TX 78748</i>		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions) <i>Real Estate Agent</i>		10 Employer (See Instructions) <i>Self-Employed</i>	
Date <i>10/27/08</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Jim Estrada</i>	Amount of contribution (\$) <i>\$50.00</i>	In-kind contribution description (if applicable) —
Contributor address; City; State; Zip Code <i>1803-C River Crossing Circle Austin, TX 78741</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Administrative Assistant</i>		Employer (See Instructions) <i>Capital Metropolitan Transportation Authority</i>	
Date <i>10/29/08</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>NO</i>) <i>Thack Thacker, III</i>	Amount of contribution (\$) <i>\$50.00</i>	In-kind contribution description (if applicable) —
Contributor address; City; State; Zip Code <i>40 I-35 N 74C2 Austin, TX 78701</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Attorney</i>		Employer (See Instructions) <i>Texas County Attorney</i>	
Date <i>10/29/08</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>NO</i>) <i>Dubois Bryan & Campbell, LLP Jerry Gilmore</i>	Amount of contribution (\$) <i>\$250.00</i>	In-kind contribution description (if applicable) —
Contributor address; City; State; Zip Code <i>700 Lavaca, Ste 1300 Austin, TX 78701</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Attorney</i>		Employer (See Instructions) <i>Dubois Bryan & Campbell, LLP</i>	
Date <i>10/29/08</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>NO</i>) <i>Kathryn A. Kronenberg</i>	Amount of contribution (\$) <i>\$500.00</i>	In-kind contribution description (if applicable) —
Contributor address; City; State; Zip Code <i>1702 Rockcliff Road Austin, TX 78746</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Don't Know</i>		Employer (See Instructions) <i>Don't Know</i>	

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: <i>10 of 10</i>	
2 FILER NAME		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <i>11/14/08</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>NO</i>) <i>Thomas Cosgrove II</i>	7 Amount of contribution (\$) <i>\$ 50.00</i>	8 In-kind contribution description (if applicable) <i>—</i>
6 Contributor address; City; State; Zip Code <i>6717 Valburn Drive</i>		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions) <i>Retail Doctor</i>		10 Employer (See Instructions) <i>Don't know.</i>	
Date <i>12/1/08</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>NO</i>) <i>Peter The Rice</i>	Amount of contribution (\$) <i>\$ 500.00</i>	In-kind contribution description (if applicable) <i>—</i>
Contributor address; City; State; Zip Code <i>2313 W. Loop Austin/Bartonville, TX 204 Austin, TX 78703</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Partner</i>		Employer (See Instructions) <i>Peter Public Affairs Consulting LLP</i>	
Date <i>12/30/08</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>NO</i>) <i>Rosendo Chapa</i>	Amount of contribution (\$) <i>\$ 100.00</i>	In-kind contribution description (if applicable) <i>—</i>
Contributor address; City; State; Zip Code <i>9405 Monmouth Drive Austin, TX 78737</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Vice President</i>		Employer (See Instructions) <i>Austin Bank of Commerce</i>	
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#:	Amount of contribution (\$)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#:	Amount of contribution (\$)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials 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.

1 Total pages Schedule F: <i>1 of 10</i>	2 FILER NAME <i>Citizen For Gomez</i> Margaret Gomez Campaign	3 ACCOUNT # (Ethics Commission Filers)
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4 Date 7-1-2008	5 Payee name St. Edward's Fund
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6 Amount (\$) \$250.00	7 Payee address; City; State; Zip Code 3001 S. Congress Austin, TX 78704
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Other Political Expenditures	(b) Description (If travel outside of Texas, complete Schedule T) Campaign calls on Cell/No travel
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez, County Commissioner, Precinct 4 in Travis County	Office sought No travel	Office held No travel
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Date 7-4-2008	Payee name Robin Cravey Campaign Fund
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Amount (\$) \$100.00	Payee address; City; State; Zip Code P. O. Box 5674 Austin, TX 78763
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other Political Expenditures	Description (If travel outside of Texas, complete Schedule T) Campaign calls on Cell/No travel
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez, County Commissioner, Precinct 4 in Travis County	Office sought No travel	Office held No travel
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Date 7-4-2008	Payee name <i>Jeff Smith</i>
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Amount (\$) \$72.22	Payee address; City; State; Zip Code Opinion Analysts, Inc.; 908 Rio Grande; Austin, TX 78701
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other Political Expenditures	Description (If travel outside of Texas, complete Schedule T) Campaign calls on Cell/No travel
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez, County Commissioner, Precinct 4 in Travis County	Office sought No travel	Office held No travel
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Date 7-8-2008	Payee name Sprint
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Amount (\$) \$35.00	Payee address; City; State; Zip Code P. O. Box 219718 Kansas City, MO 64121
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other Political Expenditures	Description (If travel outside of Texas, complete Schedule T) Campaign calls on Cell/No travel
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez, County Commissioner, Precinct 4 in Travis County	Office sought No travel	Office held No travel
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials 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.

1 Total pages Schedule F: <i>2 of 10</i>	2 FILER NAME <i>Petition for Governor Margaret Gorman Campaign</i>	3 ACCOUNT # (Ethics Commission Filers)
4 Date <i>7-11-08</i>	5 Payee name <i>Austin APL-CIO Council</i>	
6 Amount (\$) <i>\$310.00</i>	7 Payee address; City; State; Zip Code <i>Co Susan Harry 2520 Longview, Ste 211 Austin, TX, 78705</i>	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) <i>Advertising Expense</i>	(b) Description (If travel outside of Texas, complete Schedule T) <i>Half Page Ad in program</i>
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name <i>Margaret Gorman / Co Comm Pet 4</i>	Office sought <i>Co-Comm Pet 4</i> / Office held <i>No travel required</i>
Date <i>7-11-08</i>	Payee name <i>Best Buy</i>	
Amount (\$) <i>\$1,786.10</i>	Payee address; City; State; Zip Code <i>4970 W. Highway 290 Austin, TX 78705 78735</i>	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>Other Political Expenditures</i>	Description (If travel outside of Texas, complete Schedule T) <i>Upgrade of desktop/laptop</i>
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name <i>Margaret Gorman, Travis Co Comm, Travis County</i>	Office sought <i>Travis County</i> / Office held <i>No travel required</i>
Date <i>7/11/08</i>	Payee name <i>Best Buy</i>	
Amount (\$) <i>\$54.11</i>	Payee address; City; State; Zip Code <i>4970 W. Highway 290 Austin, TX 78735</i>	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>Other Political Expenditures</i>	Description (If travel outside of Texas, complete Schedule T) <i>Travel Cost - Virus for desktop/laptop</i>
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name <i>Margaret Gorman, Travis Co Comm, Travis County</i>	Office sought <i>Travis County</i> / Office held <i>No travel required</i>
Date <i>8/4/08</i>	Payee name <i>Jane Warren</i>	
Amount (\$) <i>\$60.46</i>	Payee address; City; State; Zip Code <i>P.O. Box 660597 Dallas, TX 75266-0097</i>	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>Other political Expenditures</i>	Description (If travel outside of Texas, complete Schedule T) <i>Internet Service in Campaign office</i>
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name <i>Margaret Gorman, Travis Co. Comm</i>	Office sought <i>Travis Co. Comm</i> / Office held <i>No travel</i>

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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials 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.

1 Total pages Schedule F: 3 of 10	2 FILER NAME Candidates for Governor Margaret Johnson Campaign	3 ACCOUNT # (Ethics Commission Filers)
4 Date 8/4/08	5 Payee name Circuit City	
6 Amount (\$) \$75.76	7 Payee address; City; State; Zip Code 5000 Blvd 9600 South 1435 Austin, TX 78748	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Other Political Expenditures	(b) Description (If travel outside of Texas, complete Schedule T) Purchase wireless cell phone for laptop
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Johnson	Office sought / Office held / no travel required / Travis Co. Comm. Prec 4
Date 8/7/08	Payee name Exxon	
Amount (\$) \$50.00	Payee address; City; State; Zip Code Processing Center Des Moines, IA 50361-0001	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other Political Expenditures	Description (If travel outside of Texas, complete Schedule T) Purchase gas for vehicle during getting Vote Out in Prec 423
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Johnson	Office sought / Office held / no travel required / Travis Co. Comm, Prec 4
Date 8/8/08	Payee name OK Paper Center	
Amount (\$) \$6.78	Payee address; City; State; Zip Code 304 East Cesar Chavez Austin, TX 78701	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Office Overhead expense	Description (If travel outside of Texas, complete Schedule T) Purchase of hard stock for fast pay tickets
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Johnson	Office sought / Office held / no travel required / Travis Co. Comm, Prec 4
Date 8/25/08	Payee name Pamela Reimer	
Amount (\$) \$100.00	Payee address; City; State; Zip Code Santa Rose Austin, TX 78702	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Contribution by officeholder	Description (If travel outside of Texas, complete Schedule T) Contribution to medical benefit account
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Johnson	Office sought / Office held / no travel required / Travis Co. Comm, Prec 4

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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials 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.

1 Total pages Schedule F: <i>4 of 10</i>	2 FILER NAME <i>Margaret Gorman Campaign</i>	3 ACCOUNT # (Ethics Commission Filers)
4 Date <i>8/30/08</i>	5 Payee name <i>Jane Warner</i>	
6 Amount (\$) <i>\$60.70</i>	7 Payee address; City; State; Zip Code <i>P.O. Box 660097 Dallas, TX 75266-0097</i>	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) <i>Other Political Expenditures</i>	(b) Description (If travel outside of Texas, complete Schedule T) <i>Internet services at campaign office</i>
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name <i>Margaret Gorman / no travel required</i>	Office sought <i>Jessie Co. Comm Post 4</i>
Date <i>8/30/08</i>	Payee name <i>South Austin Democrats</i>	
Amount (\$) <i>\$125.00</i>	Payee address; City; State; Zip Code <i>P.O. Box 152592 Austin, TX 78711 78715</i>	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>Event Expense</i>	Description (If travel outside of Texas, complete Schedule T) <i>Sponsor of Yellow Doves Fund Raiser</i>
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name <i>Margaret Gorman / no travel required</i>	Office held <i>Jessie Co Comm, Post 4</i>
Date <i>8/30/08</i>	Payee name <i>Copul Area Democratic Women</i>	
Amount (\$) <i>\$100.00</i>	Payee address; City; State; Zip Code <i>P.O. Box 12962 Austin, TX 78711</i>	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>Event Expense</i>	Description (If travel outside of Texas, complete Schedule T) <i>Sponsor of 2008 Cheeryins</i>
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name <i>Margaret Gorman / no travel required</i>	Office held <i>Jessie Co. Comm Post 4</i>
Date <i>9/19/08</i>	Payee name <i>Office Depot</i>	
Amount (\$) <i>\$318.26</i>	Payee address; City; State; Zip Code <i>2101 South Lamar Austin, TX 78704</i>	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>Other Political Expenditures</i>	Description (If travel outside of Texas, complete Schedule T) <i>Flyers for PR 423 to Get out Vote</i>
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name <i>Margaret Gorman / no travel required</i>	Office held <i>Jessie Co. Comm Post 4</i>

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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials 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.

1 Total pages Schedule F: 5 of 10	2 FILER NAME <i>Maureen Gorman</i>	3 ACCOUNT # (Ethics Commission Filers)
4 Date 9/19/08	5 Payee name <i>Exxon</i>	
6 Amount (\$) \$75.00	7 Payee address; City; State; Zip Code <i>Processing Center Des Moines, IA 50361-0001</i>	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) <i>Other Political Expenditures</i>	(b) Description (If travel outside of Texas, complete Schedule T) <i>Gas for campaign trip to get vote out in Pt 423.</i>
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name <i>Maureen Gorman / no travel required</i>	Office sought / Office held <i>Jessie Co. Comm, Pt 4</i>
Date 9/25/08	Payee name <i>Ace Printing</i>	
Amount (\$) \$889.99	Payee address; City; State; Zip Code <i>7807 Doncaster Austin, TX 78745</i>	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>Other Political Expenditures</i>	Description (If travel outside of Texas, complete Schedule T) <i>Yard signs for getting vote out in Pt 423</i>
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name <i>Maureen Gorman / no travel</i>	Office sought / Office held <i>Jessie Co. Comm, Pt 4</i>
Date 9/30/08	Payee name <i>Sprint</i>	
Amount (\$) \$45.51	Payee address; City; State; Zip Code <i>P.O. Box 219718 Austin, TX Kansas City, MO 64121</i>	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>Other Political Expenditures</i>	Description (If travel outside of Texas, complete Schedule T) <i>Campaign calls on cell</i>
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name <i>Maureen Gorman / no travel</i>	Office sought / Office held <i>Jessie Co. Comm, Pt 4</i>
Date 10/1/08	Payee name <i>Austin Bank of Commerce</i>	
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code <i>P.O. Box 2027 Austin, TX 78768</i>	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>Accounting/ Bank Transaction</i>	Description (If travel outside of Texas, complete Schedule T) <i>Open new acct to be transferred from Credit Union</i>
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name <i>Maureen Gorman / no travel required</i>	Office sought / Office held <i>Jessie Co. Comm, Pt 4</i>

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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials 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.

1 Total pages Schedule F: <i>6 of 10</i>		2 EILER NAME <i>Maryann Goin / No Travel Required Campaign</i>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <i>10/4/08</i>		5 Payee name <i>Jim Warner</i>			
6 Amount (\$) <i>\$57.27</i>		7 Payee address; City; State; Zip Code <i>P.O. Box 660097 Austin, TX 75266-0097</i>			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) <i>Other Political Expenditures</i>		(b) Description (If travel outside of Texas, complete Schedule T) <i>Internet Service at Campaign Office</i>	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name <i>Maryann Goin</i>		Office sought / Office held <i>no travel required / Travis Co. Comm. Post 4</i>	
Date <i>10/15/08</i>		Payee name <i>Sun Dragon Seiko Kusate</i>			
Amount (\$) <i>\$300.00</i>		Payee address; City; State; Zip Code <i>2425 Westgate Boulevard, Suite 101 Austin, TX 78745</i>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <i>Contribution by Officeholder</i>		Description (If travel outside of Texas, complete Schedule T) <i>Contribution for scholarship fund</i>	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name <i>Maryann Goin</i>		Office sought / Office held <i>no travel required / Travis Co. Comm. Post 4</i>	
Date <i>10/17/08</i>		Payee name <i>City of Austin</i>			
Amount (\$) <i>\$35.00</i>		Payee address; City; State; Zip Code <i>P.O. Box 1088 Austin, TX 78767</i>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <i>Event Expense</i>		Description (If travel outside of Texas, complete Schedule T) <i>Temporary food permit for fish fry</i>	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name <i>Maryann Goin</i>		Office sought / Office held <i>no travel required / Travis Co. Comm. Post 4</i>	
Date <i>10/17/08</i>		Payee name <i>Robert Caserio</i>			
Amount (\$) <i>\$275.00</i>		Payee address; City; State; Zip Code <i>3584 Foster Monica Austin, TX 78741</i>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <i>Event Expense</i>		Description (If travel outside of Texas, complete Schedule T) <i>Tent rental for fish fry</i>	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name <i>Maryann Goin</i>		Office sought / Office held <i>no travel required / Travis Co. Comm. Post 4</i>	

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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials 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.

1 Total pages Schedule F: 7 of 10	2 FILER NAME Margaret Gorman Campaign	3 ACCOUNT # (Ethics Commission Filers)
4 Date 10/19/08	5 Payee name Exxon	
6 Amount (\$) \$100.00	7 Payee address; City; State; Zip Code Processing Center Des Moines, IA 50361-0001	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Transportation related expense	(b) Description (If travel outside of Texas, complete Schedule T) Gas for campaign trip - first day
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gorman / no travel required	Office sought / Office held / Travis Co. Comm Post 4
Date 10/19/08	Payee name Diana Maldonado Campaign	
Amount (\$) \$ 500.00	Payee address; City; State; Zip Code P.O. Box 6446 Round Rock, TX 78683	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Contribution by Officeholder	Description (If travel outside of Texas, complete Schedule T) Contribution to Campaign Fund
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gorman / no travel required	Office sought / Office held / Travis Co. Comm Post 4
Date 10/20/08	Payee name League of Women Voters	
Amount (\$) \$100.00	Payee address; City; State; Zip Code 1011 West 31 Austin, TX 78705	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Contribution by Officeholder	Description (If travel outside of Texas, complete Schedule T) Newbusdip Renewal
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gorman / no travel required	Office sought / Office held / Travis Co. Comm Post 4
Date 10/22/08	Payee name Alice Chambers	
Amount (\$) \$107.43	Payee address; City; State; Zip Code 16900 Fagerquist Road Del Valle, TX 78617	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Political Expenditure by Officeholder	Description (If travel outside of Texas, complete Schedule T) Loan Payment
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gorman / no travel required	Office sought / Office held / Travis Co. Comm Post 4

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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials 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.

1 Total pages Schedule F: <i>8 of 10</i>		2 FILER NAME <i>Margaret Goins Campaign</i>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <i>10-24/08</i>		5 Payee name <i>United East Austin Coalition</i>			
6 Amount (\$) <i>\$100.00</i>		7 Payee address; City; State; Zip Code <i>1511 Washell Austin, TX 78702</i>			
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) <i>Contribution by officeholder</i>		(b) Description (If travel outside of Texas, complete Schedule T) <i>Sponsor of event</i>		
	9 Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name <i>Margaret Goins</i>		Office sought <i>No travel required</i>		Office held <i>Janis Co Comm Pet 4</i>
Date <i>10/31/08</i>	Payee name <i>Jane Wasmer</i>				
Amount (\$) <i>\$57.27</i>	Payee address; City; State; Zip Code <i>P.O. Box 660097 Dallas, TX 75266-0097</i>				
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>Other Political Expenditures</i>		Description (If travel outside of Texas, complete Schedule T) <i>Internet Service in campaign office</i>		
	Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name <i>Margaret Goins</i>		Office sought <i>No travel required</i>		Office held <i>Janis Co Comm Pet 4</i>
Date <i>11/16/08</i>	Payee name <i>Office Depot</i>				
Amount (\$) <i>\$29.22</i>	Payee address; City; State; Zip Code <i>2101 S. Leman Austin, TX 78704</i>				
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>Other Political Expenditures</i>		Description (If travel outside of Texas, complete Schedule T) <i>"Depot" stamp for checks</i>		
	Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name <i>Margaret Goins</i>		Office sought <i>No travel required</i>		Office held <i>Janis Co Comm Pet 4</i>
Date <i>11/16/08</i>	Payee name <i>Office Depot</i>				
Amount (\$) <i>\$49.20</i>	Payee address; City; State; Zip Code <i>2101 S. Leman Austin, TX 78704</i>				
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>Office Overhead Expense</i>		Description (If travel outside of Texas, complete Schedule T) <i>Campaign office supplies</i>		
	Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name <i>Margaret Goins</i>		Office sought <i>No travel required</i>		Office held <i>Janis Co Comm. Pet 4</i>

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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials 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.

1 Total pages Schedule F: 9 of 10		2 FILER NAME Margaret Goins Campaign		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 11/21/08		5 Payee name Hezira Women's Network of Texas			
6 Amount (\$) \$100.00		7 Payee address; City; State; Zip Code P.O. Box 1356 Austin, TX 78767-1356			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Donation by Officeholder		(b) Description (If travel outside of Texas, complete Schedule T) Sponsor of event	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name Margaret Goins		Office sought / Office held No travel required / Travis Co. Comm Pct 4	
Date 11/21/08		Payee name U.S. Postmaster			
Amount (\$) \$42.08		Payee address; City; State; Zip Code South Congress Station Austin, TX 78704			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Office Overhead Expense		Description (If travel outside of Texas, complete Schedule T) Campaign office supplies	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name Margaret Goins		Office sought / Office held No travel required / Travis Co. Comm Pct 4	
Date 11/28/08		Payee name Jane Warren			
Amount (\$) \$157.27		Payee address; City; State; Zip Code P.O. Box 66097 Dallas, TX 75266-0097			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Other Political Expenditures		Description (If travel outside of Texas, complete Schedule T) Internet services for campaign office	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name Margaret Goins		Office sought / Office held No travel required / Travis Co. Comm Pct 4	
Date 12/14/08		Payee name Austin Women's Political Caucus			
Amount (\$) \$100.00		Payee address; City; State; Zip Code P.O. Box 12383 Austin, TX 78711			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Other Political Expenditures		Description (If travel outside of Texas, complete Schedule T) Sponsor of Holiday Party	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name Margaret Goins		Office sought / Office held No travel required / Travis Co. Comm Pct 4	

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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials 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.

1 Total pages Schedule F: <i>10 of 10</i>	2 FILER NAME <i>Margaret Joan Gains Margaret Gains Campaign</i>	3 ACCOUNT # (Ethics Commission Filers)
4 Date <i>12/22/08</i>	5 Payee name <i>Perle Coverage Campaign</i>	
6 Amount (\$) <i>\$ 350.00</i>	7 Payee address; City; State; Zip Code <i>P.O. Box 11530 Austin, TX 78711</i>	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) <i>Contribution by officeholder</i>	(b) Description (If travel outside of Texas, complete Schedule T) <i>Contribution to candidate</i>
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name <i>Margaret Gains</i>	Office sought <i>No travel required</i>
		Office held <i>Travis Co Comm Pct 4</i>
Date <i>7/2/08</i>	Payee name <i>Travis County Democratic Party</i>	
Amount (\$) <i>\$ 1000.00</i>	Payee address; City; State; Zip Code <i>1311 East 6 Austin, TX 78702</i>	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>Contribution by officeholder</i>	Description (If travel outside of Texas, complete Schedule T) <i>Contribution to Finance Council</i>
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name <i>Margaret J. Gains, County Comm Pct 4</i>	Office sought <i>No travel required</i>
		Office held <i>Co Comm Pct 4</i>
Date <i>7/2/08</i>	Payee name <i>Travis County Democratic Party</i>	
Amount (\$) <i>\$ 1,500.00</i>	Payee address; City; State; Zip Code <i>1311 East 6 Austin, TX 78702</i>	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>Contribution by officeholder</i>	Description (If travel outside of Texas, complete Schedule T) <i>Contribution to Combined Campaign</i>
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name <i>Margaret Gains, Comm Pct 4</i>	Office sought <i>Co Comm. Pct 4</i>
		Office held <i>Co Comm Pct 4</i>
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought
		Office held

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LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E: <i>1 of 1</i>
2 FILER NAME <i>Margaret Gomez Campaign</i>		3 ACCOUNT # (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED LOANS: ⇨ ⇨ ⇨ ⇨ ⇨ ⇨		\$
5 Date of loan <i>10/22/08</i>	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: <i>NO</i>) <i>Alice Chambless</i>	9 Loan Amount (\$) <i>\$107.43</i>
6 Is lender a financial institution? Y <input checked="" type="radio"/> N	8 Lender address; City; State; Zip Code <i>16900 Fajerguine Road Del Valle TX - 78617</i>	10 Interest rate —
		11 Maturity date —
12 Principal occupation / Job title (See Instructions)		13 Employer (See Instructions)
14 Description of Collateral <input type="checkbox"/> none		
15 GUARANTOR INFORMATION <input type="checkbox"/> not applicable	16 Name of guarantor	18 Amount Guaranteed (\$)
	17 Guarantor address; City; State; Zip Code	
19 Principal Occupation (See Instructions)		20 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		
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)

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

July 15, 2009

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: <i>1 of 16</i>	
2 FILER NAME		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <i>5/27/09</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>NO</i>) <i>John Joseph Clark Thomas - Writer</i>	7 Amount of contribution (\$) <i>\$1,000.00</i>	8 In-kind contribution description (if applicable) —
6 Contributor address; City; State; Zip Code <i>P.O. Box 1148 Austin, TX 78767</i>		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions) <i>Attorney</i>		10 Employer (See Instructions) <i>Clark Thomas & Writers</i>	
Date <i>5/27/09</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#:) <i>Jerry Harris</i>	Amount of contribution (\$) <i>\$1,000.00</i>	In-kind contribution description (if applicable) —
Contributor address; City; State; Zip Code <i>Brown: The Carroll PAC 111 Congress Avenue, Ste 1400 Austin, TX 78701</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Attorney</i>		Employer (See Instructions) <i>Brown The Carroll</i>	
Date <i>5/27/09</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>NO</i>) <i>Bob E. Gregory</i>	Amount of contribution (\$) <i>\$1,000.00</i>	In-kind contribution description (if applicable) —
Contributor address; City; State; Zip Code <i>2939 Winstead Cove Austin, TX 78746</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Brown</i>		Employer (See Instructions) <i>Texas Disposal Systems</i>	
Date <i>5/27/09</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>NO</i>) <i>David Armburst</i>	Amount of contribution (\$) <i>\$500.00</i>	In-kind contribution description (if applicable) —
Contributor address; City; State; Zip Code <i>Armburst & Brown, LLP 100 Congress Avenue, Ste 1300 Austin, TX 78701-2744</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Attorney</i>		Employer (See Instructions) <i>Armburst & Brown, LLP</i>	
Date <i>5/27/09</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>NO</i>) <i>Jini M. Rice</i>	Amount of contribution (\$) <i>\$500.00</i>	In-kind contribution description (if applicable) —
Contributor address; City; State; Zip Code <i>1110 Ryan Terrace Austin, TX 78704</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Attorney</i>		Employer (See Instructions)	

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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: <i>2 of 16</i>	
2 FILER NAME		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <i>5/27/09</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>NO</i>) <i>Jonny Cowan</i>	7 Amount of contribution (\$) <i>\$250.00</i>	8 In-kind contribution description (if applicable) —
6 Contributor address; City; State; Zip Code <i>400 Bowie Street Austin, TX 78746</i>		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions) <i>Architect</i>		10 Employer (See Instructions)	
Date <i>5/27/09</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>NO</i>) <i>Gary Taylor Erwin</i>	Amount of contribution (\$) <i>\$250.00</i>	In-kind contribution description (if applicable) —
Contributor address; City; State; Zip Code <i>No. 3 Jeffery Cove Austin, TX 78746</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>5/27/09</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>NO</i>) <i>Paul King</i>	Amount of contribution (\$) <i>\$250.00</i>	In-kind contribution description (if applicable) —
Contributor address; City; State; Zip Code <i>309 Cumberland Road Austin, TX 78704</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Attorney</i>		Employer (See Instructions) <i>Clark Thomas & Winters</i>	
Date <i>5/27/09</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>NO</i>) <i>Jessica Pinielli</i>	Amount of contribution (\$) <i>\$250.00</i>	In-kind contribution description (if applicable) —
Contributor address; City; State; Zip Code <i>P.O. Box 50038 Austin, TX 78763</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Consultant</i>		Employer (See Instructions) <i>Self-Employed</i>	
Date <i>5/27/09</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>NO</i>) <i>Rhett Dawson</i>	Amount of contribution (\$) <i>\$100.00</i>	In-kind contribution description (if applicable) —
Contributor address; City; State; Zip Code <i>1717 West 6, Ste 260 Austin, TX 78703</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Developer</i>		Employer (See Instructions) <i>Self-Employed</i>	

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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: 3 of 16	
2 FILER NAME		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 5/27/09	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: NO) Bruce Todd Bruce Todd Public Affairs	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable) —
6 Contributor address; City; State; Zip Code 823 Congress Avenue, Ste 1506 Austin, TX 78701		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions) Public Relations		10 Employer (See Instructions) Bruce Todd Public Affairs	
Date 5/27/09	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: NO) Shedone Jeff	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable) —
Contributor address; City; State; Zip Code 604 W. 11 Austin, TX 78701		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) Environmental Work		Employer (See Instructions) Self Employed	
Date 8/3/09	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: NO) Leroy Shelton	Amount of contribution (\$) \$2500	In-kind contribution description (if applicable) —
Contributor address; City; State; Zip Code 6418 Zedock Woods Drive Austin, TX 78749		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) Budget Officer		Employer (See Instructions) Texas County	
Date 8/3/09	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: NO) Tring Bearoff	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable) —
Contributor address; City; State; Zip Code 2307 Lumen Drive Austin, TX 78703		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 6/3/09	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: NO) Brandy Mueller	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable) —
Contributor address; City; State; Zip Code 605 W. 10 Austin, TX 78701		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Mueller Law Firm	

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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: <i>4 of 16</i>	
2 FILER NAME		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <i>6/3/09</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>NO</i>) <i>Nash Moreno Martinez</i>	7 Amount of contribution (\$) <i>\$25.00</i>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <i>6903 Edinburgh Lane Austin, TX 78749-2403</i>		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions) <i>Photographer</i>		10 Employer (See Instructions) <i>Self-Employed</i>	
Date <i>6/3/09</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>NO</i>) <i>Alicia Del Rio</i>	Amount of contribution (\$) <i>\$25.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>7400 Laddle Lane Austin, TX 78749</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Communication</i>		Employer (See Instructions) <i>Communications Workers of America</i>	
Date <i>6/3/09</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>NO</i>) <i>Terrell Blodgett</i>	Amount of contribution (\$) <i>\$25.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>1801 Lissaco, 13-E Austin, TX 78761-1332</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Don't know</i>		Employer (See Instructions) <i>Don't know</i>	
Date <i>6/3/09</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>NO</i>) <i>T. Shaun Suggen</i>	Amount of contribution (\$) <i>\$50.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>2921 Jan Drive Pflugerville, TX 78660</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Don't know</i>		Employer (See Instructions) <i>Don't know</i>	
Date <i>6/3/09</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>NO</i>) <i>Bryan D. Leich</i>	Amount of contribution (\$) <i>\$50.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>2095. Ridge Circle Georgetown, TX 78828</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Don't know</i>		Employer (See Instructions) <i>Don't know</i>	

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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: <i>5 of 816</i>	
2 FILER NAME		3 ACCOUNT # (Ethics Commission Filers) <i>1</i>	
4 Date <i>6/3/09</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>NO</i>) <i>John Lewis, Jr.</i>	7 Amount of contribution (\$) <i>\$50.00</i>	8 In-kind contribution description (if applicable) —
6 Contributor address; City; State; Zip Code <i>12517 Zella Lane Austin, TX 78753-7231</i>		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions) <i>Purchaser</i>		10 Employer (See Instructions) <i>University of Texas at Austin</i>	
Date <i>6/3/09</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>NO</i>) <i>Craig Smith</i>	Amount of contribution (\$) <i>\$50.00</i>	In-kind contribution description (if applicable) —
Contributor address; City; State; Zip Code <i>1908 Barton Parkway Austin, TX 78704-3212</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Attorney</i>		Employer (See Instructions) <i>Texas County Attorney</i>	
Date <i>6/3/09</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>NO</i>) <i>Elliott Nesbitt Campaign</i>	Amount of contribution (\$) <i>\$50.00</i>	In-kind contribution description (if applicable) —
Contributor address; City; State; Zip Code <i>6401 Wilbur Drive Austin, TX 78757</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>State Representative</i>		Employer (See Instructions) <i>State of Texas</i>	
Date <i>6/3/09</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>NO</i>) <i>Wilham Martin, AEA</i>	Amount of contribution (\$) <i>\$50.00</i>	In-kind contribution description (if applicable) —
Contributor address; City; State; Zip Code <i>8802 Silverarrow Court Austin, TX 78759</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Architect</i>		Employer (See Instructions) <i>Don't know</i>	
Date <i>6/3/09</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>NO</i>) <i>Brian Lehn</i>	Amount of contribution (\$) <i>\$50.00</i>	In-kind contribution description (if applicable) —
Contributor address; City; State; Zip Code <i>9706 Lybourn Lane Austin, TX 78759-6165</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Don't know</i>		Employer (See Instructions) <i>Don't know</i>	

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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: <i>6 of 16</i>	
2 FILER NAME		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <i>6/3/09</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>NO</i>) <i>Whitney Eledge</i>	7 Amount of contribution (\$) <i>*50.00</i>	8 In-kind contribution description (if applicable) —
6 Contributor address; City; State; Zip Code <i>1000 Liberty Park Drive, No. 208 Austin, TX 78746</i>		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions) <i>Don't know</i>		10 Employer (See Instructions) <i>Don't know</i>	
Date <i>6/3/09</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>NO</i>) <i>David Linn Green</i>	Amount of contribution (\$) <i>*50.00</i>	In-kind contribution description (if applicable) —
Contributor address; City; State; Zip Code <i>404 Westwood Trace Austin, TX 78746-5354</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Executive Director</i>		Employer (See Instructions) <i>Integral Care of Texas</i>	
Date <i>6/3/09</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>NO</i>) <i>Santiago Coronado</i>	Amount of contribution (\$) <i>\$ 50.00</i>	In-kind contribution description (if applicable) —
Contributor address; City; State; Zip Code <i>5602 Parkside Court Austin, TX 78731-4508</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Associate Judge</i>		Employer (See Instructions) <i>Tarrant County</i>	
Date <i>6/3/09</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>NO</i>) <i>Rich Benavise</i>	Amount of contribution (\$) <i>*50.00</i>	In-kind contribution description (if applicable) —
Contributor address; City; State; Zip Code <i>9801 Stonelike Boulevard, Apt 437 Austin, TX 78759-6574</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Don't know</i>		Employer (See Instructions) <i>Don't know</i>	
Date <i>6/3/09</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>NO</i>) <i>Jonathan M. Beall</i>	Amount of contribution (\$) <i>*50.00</i>	In-kind contribution description (if applicable) —
Contributor address; City; State; Zip Code <i>2001 Justin Lane Austin, TX 78757-2412</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Don't know</i>		Employer (See Instructions) <i>Don't know</i>	

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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:

~~7 of 16~~ 7 of 16

2 FILER NAME

Margaret Gomez Campaign

3 ACCOUNT # (Ethics Commission Filers)

4 Date
6-3-09

5 Full name of contributor out-of-state PAC (ID# NO)

Walter Timberlake

6 Contributor address; City; State; Zip Code
2006 Bouldin Avenue
Austin, TX 78704

7 Amount of contribution (\$)

\$50.00

8 In-kind contribution description (if applicable)

NO

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

Retired

10 Employer (See Instructions)

International Brotherhood of Electrical Workers

Date
6-3-09

Full name of contributor out-of-state PAC (ID# NO)

Gerald Daugherty

Contributor address; City; State; Zip Code

1403 Club Ridge Cove
Austin, TX 78735-1625

Amount of contribution (\$)

\$50.00

In-kind contribution description (if applicable)

No

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Part Owner

Employer (See Instructions)

Jack Allen's Restaurant

Date
6-3-09

Full name of contributor out-of-state PAC (ID# NO)

Jeffrey L. Nash

Contributor address; City; State; Zip Code

8200 Bell Mountain Drive
Austin, TX 78730

Amount of contribution (\$)

\$75.00

In-kind contribution description (if applicable)

NO

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Don't know

Employer (See Instructions)

Don't know

Date
6-3-09

Full name of contributor out-of-state PAC (ID# NO)

Karen L. Huber

Contributor address; City; State; Zip Code

23020 Pedernales Canyon Trail
Spicewood, TX 78669

Amount of contribution (\$)

\$100.00

In-kind contribution description (if applicable)

NO

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Co. Commissioner, Precinct 3

Employer (See Instructions)

Travis County

Date
6-3-09

Full name of contributor out-of-state PAC (ID# NO)

Dianne T. Mendoza

Contributor address; City; State; Zip Code

1750 Timberwood Drive
Austin, TX 78741

Amount of contribution (\$)

\$100.00

In-kind contribution description (if applicable)

NO

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Communications

Employer (See Instructions)

Capital Metropolitan Transportation Authority

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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:

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2 FILER NAME

Margaret Gomez Campaign

3 ACCOUNT # (Ethics Commission Filers)

4 Date
6-3-09

5 Full name of contributor out-of-state PAC (ID# NO _____)

Fred M. Weber, Jr.

6 Contributor address; City; State; Zip Code

2006 Bouldin Avenue
Austin, TX 78704

7 Amount of
contribution (\$)

\$100.00

8 In-kind contribution
description (if applicable)

NO

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

Don't know

10 Employer (See Instructions)

Don't know

Date
6-3-09

Full name of contributor out-of-state PAC (ID# NO _____)

Karen Sonleitner

Contributor address; City; State; Zip Code

1712 Pasadena Drive
Austin, TX 78757

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

No

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Senior Planner

Employer (See Instructions)

Travis County auditor

Date
6-3-09

Full name of contributor out-of-state PAC (ID# NO _____)

Steve Skinner

Contributor address; City; State; Zip Code

P. O. Box 26660
Austin, TX 78756

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

NO

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Don't know

Employer (See Instructions)

Don't know

Date
6-3-09

Full name of contributor out-of-state PAC (ID# NO _____)

John Calvin Oliver IV

Contributor address; City; State; Zip Code

23020 Pedernales Canyon Trail
Spicewood, TX 78669

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

NO

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Don't know

Employer (See Instructions)

Don't know

Date
6-3-09

Full name of contributor out-of-state PAC (ID# NO _____)

John H. Lipscombe

Contributor address; City; State; Zip Code

6600 Mesa Drive
Austin, TX 78731

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

NO

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Attorney

Employer (See Instructions)

Travis County Attorney

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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: 9 of 16	
2 FILER NAME Margaret Gomez Campaign		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 6-3-09	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# NO) Haskell Griffin	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable) NO
6 Contributor address; City; State; Zip Code 3506 Darby Street Austin, TX 78721		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions) Don't know		10 Employer (See Instructions) Don't know	
Date 6-3-09	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# NO) Dr. Charles W. Graham	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) No
Contributor address; City; State; Zip Code P. O. Box 488 Elgin, TX 78621		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) Don't know		Employer (See Instructions) Don't know	
Date 6-3-09	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# NO) Carl A. "Hap" Feuerbacher	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) NO
Contributor address; City; State; Zip Code 9708 Sephora Cove Austin, TX 78759-6165		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) Don't know		Employer (See Instructions) Don't know	
Date 6-3-09	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# NO) John Calvin Oliver IV	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) NO
Contributor address; City; State; Zip Code 23020 Pedernales Canyon Trail Spicewood, TX 78669		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) Don't know		Employer (See Instructions) Don't know	
Date 6-3-09	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# NO) Robert L. Halford	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) NO
Contributor address; City; State; Zip Code 1614 West 14 Austin, TX 78703-3923		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Halford & Associates	
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>			

**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: <i>10 of 16</i>	
2 FILER NAME Margaret Gomez Campaign		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 6-3-09	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: NO) Therese M. Baer	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable) NO
6 Contributor address; City; State; Zip Code 5904 Mountainclimb Drive, #1 Austin, TX 78731-3853		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions) Engineer		10 Employer (See Instructions) Baer Engineering Firm	
Date 6-3-09	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: NO) Jim Achilles, Jr.	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) No
Contributor address; City; State; Zip Code 7758 Northcross Drive, Suite 204 Austin, TX 78757		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) Don't know		Employer (See Instructions) Don't know	
Date 6-3-09	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: NO) Juan J. Sanchez	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) NO
Contributor address; City; State; Zip Code 6105 Highlandale Drive Austin, X 78731		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Southwest Key	
Date 6-3-09	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: NO) E. Scott Polikov	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) NO
Contributor address; City; State; Zip Code 2105 Western Avenue Fort Worth, TX 76107		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) Transportation Planner		Employer (See Instructions) Don't know	
Date 6-3-09	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: NO) Donald G. Martin	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) NO
Contributor address; City; State; Zip Code 1221 South Mopac, Suite 115 Austin, TX 78746		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) Public Relations		Employer (See Instructions) Don Martin Agency	
<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>			

**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

SCHEDULE A

The Instruction Guide explains how to complete this form. 1 Total pages Schedule A:
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2 FILER NAME **Margaret Gomez Campaign** 3 ACCOUNT # (Ethics Commission Filers)

4 Date 6-3-09	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: NO) Rhett M. Dawson	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable) NO
6 Contributor address; City; State; Zip Code 1717 West 6, Suite 260 Austin, TX 78703		(If travel outside of Texas, complete Schedule T)	

9 Principal occupation / Job title (See Instructions) **Developer** 10 Employer (See Instructions)
Self-Employed

Date 6-3-09	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: NO) Mary J. Crockett	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) No
Contributor address; City; State; Zip Code P. O. Box 2066 Austin, TX 78768-2066		(If travel outside of Texas, complete Schedule T)	

Principal occupation / Job title (See Instructions) **Don't know** Employer (See Instructions)
Don't know

Date 6-3-09	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: NO) Peter E. Barlin	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) NO
Contributor address; City; State; Zip Code 3306 Windsor Road Austin, TX 78703		(If travel outside of Texas, complete Schedule T)	

Principal occupation / Job title (See Instructions) **Owner** Employer (See Instructions)
Ruta Maya Coffee Shop

Date 6-3-09	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: NO) Jay C. Evans	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) NO
Contributor address; City; State; Zip Code 4002 Gaines Court Austin, TX 78735		(If travel outside of Texas, complete Schedule T)	

Principal occupation / Job title (See Instructions) **Construction** Employer (See Instructions)
Don't know

Date 6-3-09	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: NO) George Cofer	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) NO
Contributor address; City; State; Zip Code 3308 Gentry Drive Austin, TX 78746-5507		(If travel outside of Texas, complete Schedule T)	

Principal occupation / Job title (See Instructions) **Environmentalist** Employer (See Instructions)
Don't know

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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:

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2 FILER NAME

Margaret Gomez Campaign

3 ACCOUNT # (Ethics Commission Filers)

4 Date

6-3-09

5 Full name of contributor out-of-state PAC (ID#: NO)

Vera D. Massaro

6 Contributor address; City; State; Zip Code

3000 Savoy Place
Astin, TX 78757

7 Amount of contribution (\$)

\$150.00

8 In-kind contribution description (if applicable)

NO

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

Engineer

10 Employer (See Instructions)

Don't know

Date

6-3-09

Full name of contributor out-of-state PAC (ID#: NO)

Verlin Callahan

Contributor address; City; State; Zip Code

P. O. Box 844
Bastrop, TX 78602

Amount of contribution (\$)

\$200.00

In-kind contribution description (if applicable)

No

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Part owner

Employer (See Instructions)

Callahan's Feed Store

Date

6-3-09

Full name of contributor out-of-state PAC (ID#: NO)

Eddie Ledesma

Contributor address; City; State; Zip Code

9508 Altona Way
Austin, TX 78717

Amount of contribution (\$)

\$200.00

In-kind contribution description (if applicable)

NO

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Owner

Employer (See Instructions)

Capital Cleaners

Date

6-3-09

Full name of contributor out-of-state PAC (ID#: NO)

Steve Skinner

Contributor address; City; State; Zip Code

P. O. Box 26660
Austin, TX 78755

Amount of contribution (\$)

\$300.00

In-kind contribution description (if applicable)

NO

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Don't know

Employer (See Instructions)

Don't know

Date

6-3-09

Full name of contributor out-of-state PAC (ID#: NO)

John S. Sharp

Contributor address; City; State; Zip Code

P. O. Box 236
Austin, TX 78767

Amount of contribution (\$)

\$250.00

In-kind contribution description (if applicable)

NO

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Retired

Employer (See Instructions)

State of Texas

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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: 13 of 16	
2 FILER NAME Margaret Gomez Campaign		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 6-3-09	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: NO) Ken Oden 6 Contributor address; City; State; Zip Code 1508 Gaston Avenue Austin, TX 78703-2419	7 Amount of contribution (\$) \$250.00	8 In-kind contribution description (if applicable) NO <small>(If travel outside of Texas, complete Schedule T)</small>
9 Principal occupation / Job title (See Instructions) Attorney		10 Employer (See Instructions) Linebarger, Goggan, Blair & Sampson	
6-3-09	Michael R. Eledge Contributor address; City; State; Zip Code 3705-A Gilbert Street QAustin, TX 78703	\$250.00	No <small>(If travel outside of Texas, complete Schedule T)</small>
Principal occupation / Job title (See Instructions) Don't know		Employer (See Instructions) Don't know	
6-3-09	Scott Dukette Contributor address; City; State; Zip Code 4410 Twisted Tree Drive Austin, TX 78735-6432	\$250.00	NO <small>(If travel outside of Texas, complete Schedule T)</small>
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Klotz & Associates	
6-3-09	Herbert Evans Contributor address; City; State; Zip Code 1302 West Avenue Austin, TX 78701-1716	\$250.00	NO <small>(If travel outside of Texas, complete Schedule T)</small>
Principal occupation / Job title (See Instructions) Justice of the Peace, Precinct 5		Employer (See Instructions) Travis County	
6-3-09	Paul Gosselink Contributor address; City; State; Zip Code Gosselink, rochelle & Townsend, PC P. O. Box 1725; Austin, TX 78767	\$250.00	NO <small>(If travel outside of Texas, complete Schedule T)</small>
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Gosselink, Rochelle & Townsend	

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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:

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2 FILER NAME

Margaret Gomez Campaign

3 ACCOUNT # (Ethics Commission Filers)

4 Date

6-3-09

5 Full name of contributor out-of-state PAC (ID# NO _____)

Santo J. Ruiz

6 Contributor address; City; State; Zip Code

10211 Brantley Bend
Austin, TX 78748-1208

7 Amount of contribution (\$)

\$350.00

8 In-kind contribution description (if applicable)

NO

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

=Development Director

10 Employer (See Instructions)

Workers Defense Project

Date

6-3-09

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

Employees Better Government PAC

Contributor address; City; State; Zip Code

18500 North Allied Way
Phoenix, AZ 85054

Amount of contribution (\$)

\$350.00

In-kind contribution description (if applicable)

No

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Don't know

Employer (See Instructions)

Repubic Services, Inc.

Date

6-3-09

Full name of contributor out-of-state PAC (ID# NO _____)

McGinnis, Lochridge and Kilgore, LLP

Contributor address; City; State; Zip Code

Jack Erskine; 800 Congress Avenue, Suite 2100
Austin, TX 78701

Amount of contribution (\$)

\$500.00

In-kind contribution description (if applicable)

NO

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Attorney

Employer (See Instructions)

McGinnis, Lochridge & Kilgore, LLP

Date

6-3-09

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

Susan M. Patterson

Contributor address; City; State; Zip Code

451 CR 451
Hondo, TX 78861

Amount of contribution (\$)

\$500.00

In-kind contribution description (if applicable)

NO

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Don't know

Employer (See Instructions)

Don't know

Date

6-3-09

Full name of contributor out-of-state PAC (ID# NO _____)

Graves Dougherty, Hearon & Moody/Terry Bray

Contributor address; City; State; Zip Code

P. O. Box 98
Austin, TX 78767

Amount of contribution (\$)

\$250.00

In-kind contribution description (if applicable)

NO

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Attorney

Employer (See Instructions)

Graves, Dougherty, Hearon & Moody

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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: <i>15 of 16</i>	
2 FILER NAME Margaret Gomez Campaign		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 6-3-09	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: NO) Kirkpatrick & Lockhart, Preston Gates, Ellis LLP	7 Amount of contribution (\$) \$500.00	8 In-kind contribution description (if applicable) NO
6 Contributor address; City; State; Zip Code Committee for Good Government/Jack Erskine 1717 Main Street, Ste 2800; Dallas, TX 75201		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions) Attorney		10 Employer (See Instructions) Kirkpatrick & Lockhart, Preston Gates & Ellis, LLP	
Date 6-3-09	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: NO) Half Associates State PAC/Michael Moya	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable) No
Contributor address; City; State; Zip Code 1201 North Bowser Road Richardson, TX 75081		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) Engineers		Employer (See Instructions) Half Associates	
Date 6-3-09	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: NO) Fulbright & Jaworski, LLP Texas Committee	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable) NO
Contributor address; City; State; Zip Code Pike Powers/1304 McKinney, Suite 100 Houston, TX 77010		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Fulbright & Jaworski, LLP	
Date 6-3-09	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: NO) Roger Dale Linebarger	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable) NO
Contributor address; City; State; Zip Code 901 West 9, Apt. 405 Austin, TX 78703-4634		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Linebarger, Goggan, Blair, & Sampson	
Date 6-3-09	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: NO) Lockwood, Andrews & Newman, PAC/Brian Rice	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable) NO
Contributor address; City; State; Zip Code 2925 Briarpark Drive, FL4 Houston, TX 77042		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) Transportation Planners		Employer (See Instructions) Lockwood, Andrews & Newman	
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**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

SCHEDULE A

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2 FILER NAME **Margaret Gomez Campaign** 3 ACCOUNT# (Ethics Commission Filers)

4 Date 6-8-09	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# NO _____) Ricardo J. Chapa	7 Amount of contribution (\$) \$50.00	8 In-kind contribution description (if applicable) NO
6 Contributor address; City; State; Zip Code 9405 Morninghill Drive Austin, TX 78737		(If travel outside of Texas, complete Schedule T)	

9 Principal occupation / Job title (See Instructions) **Vice President** 10 Employer (See Instructions)
Austin Bank of Commerce

Date 6-16-09	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# NO _____) Sarah Eckhardt Campaign	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) No
Contributor address; City; State; Zip Code P. O. Box 301586 Austin, TX 78703		(If travel outside of Texas, complete Schedule T)	

Principal occupation / Job title (See Instructions) **County Commissioner, Precinct 2** Employer (See Instructions)
Travis County

Date 6-25-09	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# NO _____) Travis County Sheriff's Officers Association, PAC	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if applicable) NO
Contributor address; City; State; Zip Code Brett Spicer; 400 West 14, Suite 220 Austin, TX 78701		(If travel outside of Texas, complete Schedule T)	

Principal occupation / Job title (See Instructions) **Deputy Sheriff** Employer (See Instructions)
Travis County Sheriff

Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# NO _____)	Amount of contribution (\$)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code		(If travel outside of Texas, complete Schedule T)	

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

Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# NO _____)	Amount of contribution (\$)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code		(If travel outside of Texas, complete Schedule T)	

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

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POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense	Gift/Awards/Memorials 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.

1 Total pages Schedule F: 1 of 10	2 FILER NAME Margaret Gomez Campaign	3 ACCOUNT # (Ethics Commission Filers)
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4 Date 1-2-09	5 Payee name Time Warner
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6 Amount (\$) \$59.54	7 Payee address; City; State; Zip Code P. O. Box 660097 Dallas, TX 75266-0097
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Other Political Expenditures	(b) Description (If travel outside of Texas, complete Schedule T) Internet Service at Campaign Office
---------------------------------	--	--

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel Required	Office sought	Office held Travis Co. Comm. 4
--	--	---------------	-----------------------------------

Date 1-30-09	Payee name Austin Community College
-----------------	--

Amount (\$) \$30.00	Payee address; City; State; Zip Code 5930 Middle Fiskville Road Austin, TX 78752
------------------------	--

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other Political Expenditures	Description (If travel outside of Texas, complete Schedule T) Registration for Immigration Conference
------------------------	--	--

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel Required	Office sought	Office held Travis Co. Comm. 4
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Date 1-30-09	Payee name U. S. Postmaster
-----------------	--------------------------------

Amount (\$) \$25.20	Payee address; City; State; Zip Code South Congress Station Austin, TX 78704
------------------------	--

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T) Postage for Christmas mailer
------------------------	---	---

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought	Office held Travis Co. Comm. 4
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Date 2-6-09	Payee name Office Depot
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Amount (\$) \$173.19	Payee address; City; State; Zip Code 2101 South Lamar Austin, TX 78704
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Overhead Expense	Description (If travel outside of Texas, complete Schedule T) Campaign office supplies
------------------------	--	---

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought	Office held Travis Co. Comm. 4
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

- | | | | |
|---------------------|-------------------------------|----------------------------------|--|
| Advertising Expense | Gift/Awards/Memorials 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.

1 Total pages Schedule F: 2 of 10	2 FILER NAME Margaret Gomez Campaign	3 ACCOUNT # (Ethics Commission Filers)
---	--	---

4 Date 2-14-09	5 Payee name Pat Crow Trust Fund
--------------------------	--

6 Amount (\$) \$1,000.00	7 Payee address; City; State; Zip Code 5517 Avenue G Austin, TX 78751
------------------------------------	--

8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Contribution by Candidate	(b) Description (If travel outside of Texas, complete Schedule T) Contribution to Medical Fund
---------------------------------	---	---

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel Required	Office sought	Office held Travis Co. Comm. 4
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Date 2-14-09	Payee name United Farmworkers
-----------------	----------------------------------

Amount (\$) \$100.00	Payee address; City; State; Zip Code P. O. box 62 Keene, CA 93531-9989
-------------------------	--

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Contribution by Candidate	Description (If travel outside of Texas, complete Schedule T) Contribution to program work
------------------------	---	---

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel Required	Office sought	Office held Travis Co. Comm. 4
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Date 2-14-09	Payee name National Resources Defense Council
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Amount (\$) \$150.00	Payee address; City; State; Zip Code 40 West 20 Street New York, NY 10011
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Contribution by Candidate	Description (If travel outside of Texas, complete Schedule T) Contribution for program work
------------------------	---	--

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought	Office held Travis Co. Comm. 4
---	--	---------------	-----------------------------------

Date 2-26-09	Payee name Jupiter Index
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Amount (\$) \$75.00	Payee address; City; State; Zip Code P. O. Box 2024 Austin, TX 78768
------------------------	--

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Contribution by Candidate	Description (If travel outside of Texas, complete Schedule T) Contribution for art class for kids
------------------------	---	--

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought	Office held Travis Co. Comm. 4
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials 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.

1 Total pages Schedule F: 3 of 10	2 FILER NAME Margaret Gomez Campaign	3 ACCOUNT # (Ethics Commission Filers)
---	--	---

4 Date 2-27-09	5 Payee name Sprint
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6 Amount (\$) \$39.80	7 Payee address; City; State; Zip Code P. O. box 660075 Dallas, TX 75266-0075
---------------------------------	--

8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Other Political Expenditures	(b) Description (If travel outside of Texas, complete Schedule T) Campaign calls on cell
---------------------------------	--	---

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel Required	Office sought	Office held Travis Co. Comm. 4
--	--	---------------	-----------------------------------

Date 3-5-09	Payee name Central Christian Church
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Amount (\$) \$75.00	Payee address; City; State; Zip Code 1111 Guadalupe Austin, TX 78701
------------------------	--

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Memorial Expense	Description (If travel outside of Texas, complete Schedule T) Memorial for Chief Dan Richards
------------------------	--	--

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel Required	Office sought	Office held Travis Co. Comm. 4
--	--	---------------	-----------------------------------

Date 3-5-09	Payee name Allan Elementary School
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Amount (\$) \$75.00	Payee address; City; State; Zip Code 4900 Gonzales Austin, TX 78702
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Contribution by Candidate	Description (If travel outside of Texas, complete Schedule T) Contribution for students' bicycles
------------------------	---	--

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought	Office held Travis Co. Comm. 4
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Date 3-5-09	Payee name Pat Crow Trust Fund
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Amount (\$) \$25.00	Payee address; City; State; Zip Code 5517 Avenue G Austin, TX 78751
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Contribution by Candidate	Description (If travel outside of Texas, complete Schedule T) Contribution to medical fund
------------------------	---	---

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought	Office held Travis Co. Comm. 4
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials 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.

1 Total pages Schedule F: 4 of 10	2 FILER NAME Margaret Gomez Campaign	3 ACCOUNT # (Ethics Commission Filers)
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4 Date 3-9-09	5 Payee name St. Thomas Moore Church
-------------------------	--

6 Amount (\$) \$10.00	7 Payee address; City; State; Zip Code 10205 rural Road 620N Austin, TX 78726
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Memorial Expense	(b) Description (If travel outside of Texas, complete Schedule T) Contribution to Jose Armando Yebra
---------------------------------	---	--

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel Required	Office sought	Office held Travis Co. Comm. 4
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Date 3-11-09	Payee name People Organized to Defend Earth's Resources
-----------------	--

Amount (\$) \$250.00	Payee address; City; State; Zip Code P. O. Box 6237 Austin, TX 78762-6237
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T) Half Page ad in program for C. Chavez
-------------------------------	---	--

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel Required	Office sought	Office held Travis Co. Comm. 4
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Date 3-26-09	Payee name Sun Dragon Seido Karate
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Amount (\$) \$50.00	Payee address; City; State; Zip Code 4534 Westgate Boulevard, #101 Austin, TX 78745
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Contribution by Candidate	Description (If travel outside of Texas, complete Schedule T) Contribution to scholarship fund
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought	Office held Travis Co. Comm. 4
---	--	---------------	-----------------------------------

Date 3-11-09	Payee name Democratic Congressional Campaign Committee
-----------------	---

Amount (\$) \$150.00	Payee address; City; State; Zip Code 430 South Capitol Street, SE Washington, DC 20003
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Contribution by Candidate	Description (If travel outside of Texas, complete Schedule T) Contribution to campaign fund
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought	Office held Travis Co. Comm. 4
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense	Gift/Awards/Memorials 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.

1 Total pages Schedule F: 5 of 10	2 FILER NAME Margaret Gomez Campaign	3 ACCOUNT # (Ethics Commission Filers)
4 Date 3-31-09	5 Payee name La Voz Newspaper	
6 Amount (\$) \$227.25	7 Payee address; City; State; Zip Code P.O. Box 19457 Austin, TX 78760	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense	(b) Description (If travel outside of Texas, complete Schedule T) Contribution to Hipanic Almanac
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel Required	Office sought Office held Travis Co. Comm. 4
Date 4-1-09	Payee name Time Warner	
Amount (\$) \$64.65	Payee address; City; State; Zip Code P. O. box 660097 Dallas, TX 75266-0097	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other Political Expenditures	Description (If travel outside of Texas, complete Schedule T) Internet service to campaign office
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel Required	Office sought Office held Travis Co. Comm. 4
Date 4-2-09	Payee name Sprint	
Amount (\$) \$53.60	Payee address; City; State; Zip Code P. O. Box 660075 Dallas, TX 75266-0075	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other Political Expenditures	Description (If travel outside of Texas, complete Schedule T) Campaign calls on cell
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought Office held Travis Co. Comm. 4
Date 4-21-09	Payee name Cinco de Mayo Celebration	
Amount (\$) \$25.00	Payee address; City; State; Zip Code P. O. Box 1748 Austin, TX 78767	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Contribution by Candidate	Description (If travel outside of Texas, complete Schedule T) Contribution to County event
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought Office held Travis Co. Comm. 4

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense	Gift/Awards/Memorials 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.

1 Total pages Schedule F: 6 of 10	2 FILER NAME Margaret Gomez Campaign	3 ACCOUNT # (Ethics Commission Filers)
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4 Date 4-23-09	5 Payee name St. Edward's Fund
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6 Amount (\$) \$250.00	7 Payee address; City; State; Zip Code 3001 South Congress Austin, TX 78704
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Contribution by Candidate	(b) Description (If travel outside of Texas, complete Schedule T) Contribution to scholarship fund
---------------------------------	---	---

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel Required	Office sought	Office held Travis Co. Comm. 4
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Date 5-2-09	Payee name Diana's Flower Shop
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Amount (\$) \$6.29	Payee address; City; State; Zip Code 2614 East 7 Austin, TX 78702
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Memorial Expense	Description (If travel outside of Texas, complete Schedule T) Flowers for David Aleman's funeral
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel Required	Office sought	Office held Travis Co. Comm. 4
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Date 5-6-09	Payee name Tikkun
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Amount (\$) \$80.00	Payee address; City; State; Zip Code 2342 Shattuck Avenue Berkeley, CA 94704-9914
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other Political Expenditures	Description (If travel outside of Texas, complete Schedule T) Renewal of membership dues
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought	Office held Travis Co. Comm. 4
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Date 5-9-09	Payee name Sprint
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Amount (\$) \$56.97	Payee address; City; State; Zip Code P. O. Box 660075 Dallas, TX 75266-0075
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other Political Expenditures	Description (If travel outside of Texas, complete Schedule T) Campaign calls on cell
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought	Office held Travis Co. Comm. 4
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POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense	Gift/Awards/Memorials 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.

1 Total pages Schedule F: 7 of 10	2 FILER NAME Margaret Gomez Campaign	3 ACCOUNT # (Ethics Commission Filers)
4 Date 5-20-09	5 Payee name U. S. Postmaster	
6 Amount (\$) \$70.00	7 Payee address; City; State; Zip Code South Congress Station Austin, TX 78704	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Other Political Contribution	(b) Description (If travel outside of Texas, complete Schedule T) Renewal of P. O. Box
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel Required	Office sought Office held Travis Co. Comm. 4
Date 5-21-09	Payee name Scott Van Osdol	
Amount (\$) \$189.44	Payee address; City; State; Zip Code 7908 Swindon Lane Austin, TX 78745	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other Political Expenditures	Description (If travel outside of Texas, complete Schedule T) Photo for campaign
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel Required	Office sought Office held Travis Co. Comm. 4
Date 5-22-09	Payee name Office Depot	
Amount (\$) \$29.88	Payee address; City; State; Zip Code 2101 South Lamar Austin, TX 78704	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Office Overhead Expense	Description (If travel outside of Texas, complete Schedule T) Campaign office supplies
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought Office held Travis Co. Comm. 4
Date 5-29-09	Payee name U. S. Postmaster	
Amount (\$) \$44.00	Payee address; City; State; Zip Code South Congress Station Austin, TX 78704	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T) Postage for "Thank you" letters, supporters
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought Office held Travis Co. Comm. 4

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POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense	Gift/Awards/Memorials 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.

1 Total pages Schedule F: 8 of 10	2 FILER NAME Margaret Gomez Campaign	3 ACCOUNT # (Ethics Commission Filers)
4 Date 6-1-09	5 Payee name Sprint	
6 Amount (\$) \$14.34	7 Payee address; City; State; Zip Code P. O. box 660075 Dallas, TX 75266-0075	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Other Political Contribution	(b) Description (If travel outside of Texas, complete Schedule T) Campaign Calls on cell
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel Required	Office sought Office held Travis Co. Comm. 4
Date 6-3-09	Payee name Susan Harry Consulting	
Amount (\$) \$2,948.07	Payee address; City; State; Zip Code 2520 Longview Street, Suite 211 Austin, TX 78705	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Consulting Expense	Description (If travel outside of Texas, complete Schedule T) June 3 Event planning
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel Required	Office sought Office held Travis Co. Comm. 4
Date 6-3-09	Payee name Nuevo Leon Restaurant	
Amount (\$) \$378.12	Payee address; City; State; Zip Code 1501 East 6 Austin, TX 78702	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Food/Beverage Expense	Description (If travel outside of Texas, complete Schedule T) Meeting to discuss campaign issues
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought Office held Travis Co. Comm. 4
Date 6-5-09	Payee name Diana's Flower Shop	
Amount (\$) \$60.00	Payee address; City; State; Zip Code 2614 East 7 Austin, TX 78702	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Memorial Expense	Description (If travel outside of Texas, complete Schedule T) Flower for David Aleman's funeral
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought Office held Travis Co. Comm. 4

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials 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.

1 Total pages Schedule F: 9 of 10	2 FILER NAME Margaret Gomez Campaign	3 ACCOUNT # (Ethics Commission Filers)
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4 Date 6-7-09	5 Payee name National Wildlife Federation
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6 Amount (\$) \$100.00	7 Payee address; City; State; Zip Code P. O. box 1691 Merrifield, VA 22116-1691
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Contribution by Candidate	(b) Description (If travel outside of Texas, complete Schedule T) Contribution for program work
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel Required	Office sought	Office held Travis Co. Comm. 4
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Date 6-7-09	Payee name Annie's List
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Amount (\$) \$100.00	Payee address; City; State; Zip Code P. O. box 699 Austin, TX 78767
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Contribution by Candidate	Description (If travel outside of Texas, complete Schedule T) Contribution for program work
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel Required	Office sought	Office held Travis Co. Comm. 4
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Date 6-15-09	Payee name Time Warner
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Amount (\$) \$146.00	Payee address; City; State; Zip Code P. O. box 660097 Dallas, TX 75266-0097
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Office Overhead Expense	Description (If travel outside of Texas, complete Schedule T) Internet, fax, phone service at camp. ofc.
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought	Office held Travis Co. Comm. 4
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Date 6-16-09	Payee name Juneteenth Celebration
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Amount (\$) \$25.00	Payee address; City; State; Zip Code P. O. Box 1748 Austin, TX 78767
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Contribution by Candidate	Description (If travel outside of Texas, complete Schedule T) Contribution to county event
------------------------	---	---

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought	Office held Travis Co. Comm. 4
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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

- | | | | |
|---------------------|-------------------------------|----------------------------------|--|
| Advertising Expense | Gift/Awards/Memorials 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.

1 Total pages Schedule F: 10 of 10	2 FILER NAME Margaret Gomez Campaign	3 ACCOUNT # (Ethics Commission Filers)
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4 Date 6-17-09	5 Payee name Target
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6 Amount (\$) \$54.11	7 Payee address; City; State; Zip Code 2300 West Ben White Austin, TX 78704
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Office Overhead Expense	(b) Description (If travel outside of Texas, complete Schedule T) Anti-virus software for desktop/laptop
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel Required	Office sought	Office held Travis Co. Comm. 4
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Date 6-16-09	Payee name Holland Photo Imaging
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Amount (\$) \$21.90	Payee address; City; State; Zip Code 1700 South Lamar Boulevard Austin, TX 78704
------------------------	--

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T) 10 5x7 photos for campaign
-------------------------------	---	---

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel Required	Office sought	Office held Travis Co. Comm. 4
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Date	Payee name
------	------------

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 (If travel outside of Texas, complete Schedule T)
-------------------------------	--	---

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

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 (If travel outside of Texas, complete Schedule T)
-------------------------------	--	---

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

January 15, 2010

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

1 of 20

2 FILER NAME

Margaret Giam Campaign

3 ACCOUNT # (Ethics Commission Filers)

4 Date

7/5/09

5 Full name of contributor out-of-state PAC (ID# NO)

Christopher L. Elliott

7 Amount of contribution (\$)

\$ 250.00

8 In-kind contribution description (if applicable)

—

6 Contributor address; City; State; Zip Code

*1705 Robt Road
Austin, TX 78704*

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

Attorney

10 Employer (See Instructions)

Graves, Dougherty, Herson & Moody

Date

7/17/09

Full name of contributor out-of-state PAC (ID# NO)

Veronica Delgado Sandoz

Amount of contribution (\$)

\$ 40.00

In-kind contribution description (if applicable)

—

Contributor address; City; State; Zip Code

*2929 Lagerway Cove
Austin, TX 78748*

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Don't Know

Employer (See Instructions)

Southeast Key

Date

7/17/09

Full name of contributor out-of-state PAC (ID# NO)

Eddie Rodriguez Campaign

Amount of contribution (\$)

\$ 100.00

In-kind contribution description (if applicable)

—

Contributor address; City; State; Zip Code

*P.O. Box 2436
Austin, TX 78768*

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

State Representative

Employer (See Instructions)

State of Texas

Date

7/17/09

Full name of contributor out-of-state PAC (ID# NO)

Robert R. Karim

Amount of contribution (\$)

\$ 100.00

In-kind contribution description (if applicable)

—

Contributor address; City; State; Zip Code

*1304 Guadalupe
Austin, TX 78701*

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Attorney

Employer (See Instructions)

Self-Employed

Date

7-17-09

Full name of contributor out-of-state PAC (ID# NO)

Yagna McDaniel

Amount of contribution (\$)

\$ 100.00

In-kind contribution description (if applicable)

—

Contributor address; City; State; Zip Code

*3910 Knollwood Drive
Austin, TX 78731*

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Attorney

Employer (See Instructions)

Richardstiff Heath Delgado Acosta LLP

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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 of 20	
2 FILER NAME <i>Margaret Green Campaign</i>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 7/17/09	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <u>NO</u>) <i>Daron K. Butler</i>	7 Amount of contribution (\$) \$125.00	8 In-kind contribution description (if applicable) -
6 Contributor address; City; State; Zip Code <i>1708 Tracy Miller Cedar Park TX 78613</i>		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions) <i>Attorney</i>		10 Employer (See Instructions) <i>Turner, Collier and Braden</i>	
Date 7/17/09	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Christopher T. Ellis</i>	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable) -
Contributor address; City; State; Zip Code <i>3005 Sparkling Brook Lane Austin, TX 78746-1988</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Don't Know</i>		Employer (See Instructions) <i>Endeavor</i>	
Date 10/16/09	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <u>NO</u>) <i>Rosal A. Gonzalez</i>	Amount of contribution (\$) \$15.00	In-kind contribution description (if applicable) -
Contributor address; City; State; Zip Code <i>2707 Connorwood Austin, TX 78704-6429</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Treasury of the Peace, Pct 4</i>		Employer (See Instructions) <i>Tarrant County</i>	
Date 10/16/09	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <u>NO</u>) <i>Carlos B. Lopez</i>	Amount of contribution (\$) \$20.00	In-kind contribution description (if applicable) -
Contributor address; City; State; Zip Code <i>16846 Redmond Road Austin, TX 78739</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Chief Deputy Constable, Pct 5</i>		Employer (See Instructions) <i>Tarrant County</i>	
Date 10/16/09	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <u>NO</u>) <i>Julie Fitch</i>	Amount of contribution (\$) \$2500	In-kind contribution description (if applicable) -
Contributor address; City; State; Zip Code <i>1509-A Shred Creek Boulevard Austin, TX 78701</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Don't Know</i>		Employer (See Instructions) <i>Downtown Austin Alliance</i>	

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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:

3 of 20

2 FILER NAME

Margaret Green Campaign

3 ACCOUNT # (Ethics Commission Filers)

4 Date

10/16/09

5 Full name of contributor out-of-state PAC (ID# NO)

Molly Alexander

6 Contributor address; City; State; Zip Code

*18 North Main Street
Elgin, TX 78621*

7 Amount of contribution (\$)

\$ 25.00

8 In-kind contribution description (if applicable)

—

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

Don't Know

10 Employer (See Instructions)

Downtown Austin Alliance

Date

10/16/09

Full name of contributor out-of-state PAC (ID# NO)

Acc Printing

Contributor address; City; State; Zip Code

*7807 Doncaster
Austin, TX 78745*

Amount of contribution (\$)

\$ 25.00

In-kind contribution description (if applicable)

—

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Chief Deputy Constable

Employer (See Instructions)

Jessie County

Date

10/16/09

Full name of contributor out-of-state PAC (ID# NO)

Karen Sorletson

Contributor address; City; State; Zip Code

*1712 Pasadena Lane
Austin, TX 78757*

Amount of contribution (\$)

\$ 50.00

In-kind contribution description (if applicable)

—

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Jessie Planner

Employer (See Instructions)

Jessie County Auditor

Date

10/16/09

Full name of contributor out-of-state PAC (ID# NO)

John A. Lepicouche

Contributor address; City; State; Zip Code

*6600 Mesa Drive
Austin, TX 78731*

Amount of contribution (\$)

\$ 50.00

In-kind contribution description (if applicable)

—

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Attorney

Employer (See Instructions)

Jessie County Attorney

Date

8/30/09

Full name of contributor out-of-state PAC (ID# NO)

Reese Hicks

Contributor address; City; State; Zip Code

*4112 Roney Avenue
Austin, TX 78756-3511*

Amount of contribution (\$)

\$ 50.00

In-kind contribution description (if applicable)

—

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Attorney

Employer (See Instructions)

Self-Employed

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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: <i>7 of 20</i>	
2 FILER NAME <i>Marquet Green Campaign</i>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <i>9/25/09</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Olivia Guerrero</i>	7 Amount of contribution (\$) <i>\$ 50.00</i>	8 In-kind contribution description (if applicable) —
6 Contributor address; City; State; Zip Code <i>2313 South First Austin, TX 78704</i>		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions) <i>Owner</i>		10 Employer (See Instructions) <i>H.A Guerrero Carpet Cleaners</i>	
Date <i>10/16/09</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>John J. Vay</i>	Amount of contribution (\$) <i>\$ 100.00</i>	In-kind contribution description (if applicable) —
Contributor address; City; State; Zip Code <i>6654 Whitmarsh Valley Walk Austin, TX 78746</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Attorney</i>		Employer (See Instructions) <i>Don't know</i>	
Date <i>10/13/09</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>No</i>) <i>Dan Pearson</i>	Amount of contribution (\$) <i>\$ 100.00</i>	In-kind contribution description (if applicable) —
Contributor address; City; State; Zip Code <i>9300 Ashton Ridge Austin TX 78750</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Attorney</i>		Employer (See Instructions) <i>Don't know</i>	
Date <i>10/14/09</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>No</i>) <i>Godwin D. Peckham, Jr</i>	Amount of contribution (\$) <i>\$ 100.00</i>	In-kind contribution description (if applicable) —
Contributor address; City; State; Zip Code <i>4001 Dellman Drive East Roanoke, TX 76262-3344</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Don't know</i>		Employer (See Instructions) <i>Don't know</i>	
Date <i>10/16/09</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>No</i>) <i>Rosa Rosa Valdez</i>	Amount of contribution (\$) <i>\$ 100.00</i>	In-kind contribution description (if applicable) —
Contributor address; City; State; Zip Code <i>6901 Hill Meadow Drive Austin, TX 78736-1956</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Executive Director</i>		Employer (See Instructions) <i>BCE of Texas</i>	

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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: 5 of 20	
2 FILER NAME <i>Marquet Green Campaign</i>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <i>10/16/09</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>NO</i>) <i>Santa A. Reis</i>	7 Amount of contribution (\$) <i>\$100.00</i>	8 In-kind contribution description (if applicable) —
6 Contributor address; City; State; Zip Code <i>10211 Brantley Boulevard Austin, TX 78748-1206</i>		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions) <i>Development Director</i>		10 Employer (See Instructions) <i>Workforce Defense Project</i>	
Date <i>10/15/09</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>NO</i>) <i>Sylvia Betts</i>	Amount of contribution (\$) <i>\$150.00</i>	In-kind contribution description (if applicable) —
Contributor address; City; State; Zip Code <i>14741 Arrowhead Drive Austin, TX 78741</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Don't know</i>		Employer (See Instructions) <i>Don't know</i>	
Date <i>10/16/09</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>NO</i>) <i>Glean Sharble</i>	Amount of contribution (\$) <i>\$150.00</i>	In-kind contribution description (if applicable) —
Contributor address; City; State; Zip Code <i>2105 Naas Drive Austin, TX 78728</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Don't know</i>		Employer (See Instructions) <i>Don't know</i>	
Date <i>10/2/09</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>NO</i>) <i>Thomas L. Brown</i>	Amount of contribution (\$) <i>\$200.00</i>	In-kind contribution description (if applicable) —
Contributor address; City; State; Zip Code <i>502 Glenview Court Trophy Club, TX 76262-5250</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Don't know</i>		Employer (See Instructions) <i>Don't know</i>	
Date <i>10/16/09</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>NO</i>) <i>Aden A. Matthews</i>	Amount of contribution (\$) <i>\$200.00</i>	In-kind contribution description (if applicable) —
Contributor address; City; State; Zip Code <i>7529 Harlow Drive Austin, TX 78739</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Don't know</i>		Employer (See Instructions) <i>Don't know</i>	

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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:

6 of 20

2 FILER NAME

Margaret Gomez Campaign

3 ACCOUNT # (Ethics Commission Filers)

4 Date

10/13/09

5 Full name of contributor out-of-state PAC (ID#: NO)

Charles F. Baird

7 Amount of contribution (\$)

\$250.00

8 In-kind contribution description (if applicable)

—

6 Contributor address; City; State; Zip Code

P.O. Box 1242
Austin, TX 78767

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

District Judge

10 Employer (See Instructions)

Jewis County

Date

10/16/09

Full name of contributor out-of-state PAC (ID#: NO)

Jerry R. Reed

Amount of contribution (\$)

\$1,000.00

In-kind contribution description (if applicable)

—

Contributor address; City; State; Zip Code

2525 W. Anderson Lane, # 430
Austin, TX 78757

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Don't know

Employer (See Instructions)

White Construction Company

Date

10/18/09

Full name of contributor out-of-state PAC (ID#: NO)

Aida Berduo Dominguez

Amount of contribution (\$)

\$25.00

In-kind contribution description (if applicable)

—

Contributor address; City; State; Zip Code

12925 Lakewood Lane
Austin, TX 78753-1628

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

HUB Coordinator

Employer (See Instructions)

Capital Metropolitan Transportation Authority

Date

10/28/09

Full name of contributor out-of-state PAC (ID#: NO)

Cathy L. Bonner

Amount of contribution (\$)

\$100.00

In-kind contribution description (if applicable)

—

Contributor address; City; State; Zip Code

22 Margarita Crescent
Austin, TX 78703-1717

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Public Relations

Employer (See Instructions)

Self-Employed

Date

11/1/11

Full name of contributor out-of-state PAC (ID#: NO)

John Joseph
Clark Thomas & Winters

Amount of contribution (\$)

\$1,000.00

In-kind contribution description (if applicable)

—

Contributor address; City; State; Zip Code

P.O. Box 1148
Austin, TX 78767

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Attorney

Employer (See Instructions)

Clark Thomas & Winters

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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:

7 of 20

2 FILER NAME

Margaret Green Campaign

3 ACCOUNT # (Ethics Commission Filers)

4 Date

11/9/09

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

Ron Davis Campaign

6 Contributor address; City; State; Zip Code

*P.O. Box 16665
Austin, TX 78767*

7 Amount of contribution (\$)

\$ 100.00

8 In-kind contribution description (if applicable)

—

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

Co. Comm, Pct 1

10 Employer (See Instructions)

Texas County

Date

11/20/09

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

Christopher Shultz

Contributor address; City; State; Zip Code

*1005 Congress Avenue, Ste 480
Austin, TX 78701*

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)

Attorney

Employer (See Instructions)

Self-Employed

Date

11/20/09

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

James McNeil

Contributor address; City; State; Zip Code

*1116 Reagan Terrace
Austin, TX 78704*

Amount of contribution (\$)

\$ 500.00

In-kind contribution description (if applicable)

—

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Attorney

Employer (See Instructions)

Self-Employed

Date

12/3/09

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

Cecelia Burke

Contributor address; City; State; Zip Code

*6500 Sartoria's Cove
Austin, TX 78731-2806*

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)

Retired

Employer (See Instructions)

Texas County

Date

12/7/09

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

Betty J. Grant

Contributor address; City; State; Zip Code

*2703 Pecan Street
Austin, TX 78703*

Amount of contribution (\$)

\$ 50.00

In-kind contribution description (if applicable)

—

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Don't know

Employer (See Instructions)

Don't know

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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:

8 of 20

2 FILER NAME

Maryland Green Campaign

3 ACCOUNT # (Ethics Commission Filers)

4 Date

12/17/09

5 Full name of contributor

out-of-state PAC (ID# *NO*)

Ken Oden

6 Contributor address; City; State; Zip Code

*1506 Gaston Avenue
Austin, TX 78703-2419*

7 Amount of contribution (\$)

\$ 250.00

8 In-kind contribution description (if applicable)

—

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

Attorney

10 Employer (See Instructions)

Lieberman, Grogan, Blair and Sangston

Date

12/7/09

Full name of contributor

out-of-state PAC (ID# *NO*)

Peter Low

Contributor address; City; State; Zip Code

*4242 W. Lake Drive
Austin, TX 78746-1453*

Amount of contribution (\$)

\$ 300.00

In-kind contribution description (if applicable)

—

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Attorney

Employer (See Instructions)

Self-Employed

Date

12/11/09

Full name of contributor

out-of-state PAC (ID# *NO*)

Carolyn Goldston

Contributor address; City; State; Zip Code

*3521 Starline Drive
Austin, TX 78759-8941*

Amount of contribution (\$)

\$ 25.00

In-kind contribution description (if applicable)

—

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Retired

Employer (See Instructions)

Don't Know

Date

12/11/09

Full name of contributor

out-of-state PAC (ID# *NO*)

David N. Smith

Contributor address; City; State; Zip Code

*P.O. Box 537
Austin, TX 78767-0537*

Amount of contribution (\$)

\$ 25.00

In-kind contribution description (if applicable)

—

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Attorney

Employer (See Instructions)

Self-Employed

Date

12/11/09

Full name of contributor

out-of-state PAC (ID# *NO*)

Santo J. Ruiz

Contributor address; City; State; Zip Code

*10211 Brentley Road
Austin, TX 78748-1206*

Amount of contribution (\$)

\$ 25.00

In-kind contribution description (if applicable)

—

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Development Director

Employer (See Instructions)

Workers Defense Project

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:
9 of 20

2 FILER NAME

Margaret Green Campaign

3 ACCOUNT # (Ethics Commission Filers)

4 Date

12/14/09

5 Full name of contributor

David Tim Evans

out-of-state PAC (ID#)

7 Amount of contribution (\$)

\$ 25.00

8 In-kind contribution description (if applicable)

—

6 Contributor address; City; State; Zip Code

*404 Westwood Terrace
Austin, TX 78746-5354*

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

Executive Director

10 Employer (See Instructions)

Integral Care

Date

12/11/09

Full name of contributor

Douglas Bell

out-of-state PAC (ID#)

Amount of contribution (\$)

\$ 25.00

In-kind contribution description (if applicable)

—

Contributor address; City; State; Zip Code

*9202 Cedar Crest Drive
Austin, TX 78750*

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Don't know

Employer (See Instructions)

Don't know

Date

12/11/09

Full name of contributor

Neal M. McLanen

out-of-state PAC (ID#)

Amount of contribution (\$)

\$ 50.00

In-kind contribution description (if applicable)

—

Contributor address; City; State; Zip Code

*1406 Thundershower Road
Austin, TX 78703*

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Don't know

Employer (See Instructions)

Metrolink

Date

12/11/09

Full name of contributor

Karen M. Soultine

out-of-state PAC (ID#)

Amount of contribution (\$)

\$ 50.00

In-kind contribution description (if applicable)

—

Contributor address; City; State; Zip Code

*1712 Pasadena Drive
Austin, TX 78757*

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Senior Planner

Employer (See Instructions)

Travis County Auditor

Date

12/11/09

Full name of contributor

Gary A. Cobb

out-of-state PAC (ID#)

Amount of contribution (\$)

\$ 50.00

In-kind contribution description (if applicable)

—

Contributor address; City; State; Zip Code

*4325 Triboro Trail
Austin, TX 78749*

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Assistant District Attorney

Employer (See Instructions)

Travis County

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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:

10 of 20

2 FILER NAME

Margaret Giam Campaign

3 ACCOUNT # (Ethics Commission Filers)

4 Date

12/11/09

5 Full name of contributor out-of-state PAC (ID# NO)

Meghan Bailey

6 Contributor address; City; State; Zip Code

1130 Maple Street
Lockhart, TX 78644-2910

7 Amount of contribution (\$)

\$ 50.00

8 In-kind contribution description (if applicable)

—

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

Don't know

10 Employer (See Instructions)

Don't know

Date

12/11/09

Full name of contributor out-of-state PAC (ID# NO)

Granger and Mueller, P.C.

Contributor address; City; State; Zip Code

605 West 10
Austin, TX 78701-2042

Amount of contribution (\$)

\$ 50.00

In-kind contribution description (if applicable)

—

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

12/11/09

Full name of contributor out-of-state PAC (ID# NO)

Lewis County Teachers Union

Contributor address; City; State; Zip Code

7201 South Congress, # 332
Austin, TX 78745-7342

Amount of contribution (\$)

\$ 75.00

In-kind contribution description (if applicable)

—

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Volunteer Firefighter in Lewis County

Employer (See Instructions)

Emergency Services District 11

Date

12/11/09

Full name of contributor out-of-state PAC (ID# NO)

John Langmore

Contributor address; City; State; Zip Code

1403 Preston Avenue
Austin, TX 78703

Amount of contribution (\$)

\$ 75.00

In-kind contribution description (if applicable)

—

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Don't know

Employer (See Instructions)

Don't know

Date

12/11/09

Full name of contributor out-of-state PAC (ID# NO)

Thomas B. Casperson, II

Contributor address; City; State; Zip Code

6717 Valburn Drive
Austin, TX 78731

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)

Retired Physician

Employer (See Instructions)

Don't know

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:
11 of 20

2 FILER NAME

Margaret Giam Campaign

3 ACCOUNT # (Ethics Commission Filers)

4 Date

12/11/09

5 Full name of contributor

Theodore Seft

out-of-state PAC (ID# *NO*)

6 Contributor address; City; State; Zip Code

*604 West 11
Austin, TX 78701*

7 Amount of contribution (\$)

\$ 100.00

8 In-kind contribution description (if applicable)

—

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

Environmentalist

10 Employer (See Instructions)

Self-Employed

Date

12/11/09

Full name of contributor

Andrew W. Clements

out-of-state PAC (ID# *NO*)

Contributor address; City; State; Zip Code

*1014 East 9
Austin, TX 78702-2609*

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)

Don't Know

Employer (See Instructions)

Don't Know

Date

12/11/09

Full name of contributor

R. Clarke Heidrich

out-of-state PAC (ID# *NO*)

Contributor address; City; State; Zip Code

*3702 Eastledge Drive
Austin, TX 78731-5851*

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)

Attorney

Employer (See Instructions)

Self-Employed

Date

12/11/09

Full name of contributor

Sherrisa Baer

out-of-state PAC (ID# *NO*)

Contributor address; City; State; Zip Code

*5904 Mountainclimb Drive, Apt 1
Austin, TX 78731-3853*

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)

Engineer

Employer (See Instructions)

Self-Employed

Date

12/11/09

Full name of contributor

Michael Aubich

out-of-state PAC (ID# *NO*)

Contributor address; City; State; Zip Code

*700 S. Creekwood Drive
Austin, TX ~~78701~~ 78619
Dufftown*

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)

Transportation Planner

Employer (See Instructions)

Huntt-Zollner

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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:

12 of 20

3 ACCOUNT # (Ethics Commission Filers)

2 FILER NAME

Margaret Green Campaign

4 Date

12/11/09

5 Full name of contributor out-of-state PAC (ID#: NO)

Craig B. Allen

6 Contributor address; City; State; Zip Code
11600 Emerald Falls Drive
Austin TX 78738

7 Amount of contribution (\$)

\$ 100.00

8 In-kind contribution description (if applicable)

—

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

Advertiser

10 Employer (See Instructions)

Texas County Housing Authority

Date

12/11/09

Full name of contributor out-of-state PAC (ID#: NO)

Keith Rudy

Contributor address; City; State; Zip Code
2111 Highgrove Terrace
Austin, TX 78703

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)

Developer

Employer (See Instructions)

Endeavor

Date

12/11/09

Full name of contributor out-of-state PAC (ID#: NO)

Jason D. Olson

Contributor address; City; State; Zip Code
P.O. Box 600609
Dallas, TX 75360

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)

Attorney

Employer (See Instructions)

Self Employed

Date

12/11/09

Full name of contributor out-of-state PAC (ID#: NO)

Jeffrey S. Newberg

Contributor address; City; State; Zip Code
3830 Hartwood Point
Austin, TX 78746

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)

Developer

Employer (See Instructions)

Endeavor

Date

12/11/09

Full name of contributor out-of-state PAC (ID#: NO)

A. Bruce Miller

Contributor address; City; State; Zip Code
221 West 6, Ste 1300
Austin, TX 78701

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)

Attorney

Employer (See Instructions)

Endeavor

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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:

13 of 20

2 FILER NAME

Margaret Green Campaign

3 ACCOUNT # (Ethics Commission Filers)

4 Date

12/11/09

5 Full name of contributor out-of-state PAC (ID# NO)

Donald G. Martin

6 Contributor address; City; State; Zip Code

*901 Rio Grande
Austin, TX 78701*

7 Amount of contribution (\$)

\$ 100.00

8 In-kind contribution description (if applicable)

—

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

Public Relations

10 Employer (See Instructions)

Don Martin Agency

Date

12/11/09

Full name of contributor out-of-state PAC (ID# NO)

Michael Whelan

Contributor address; City; State; Zip Code

*Green, Dougherty, Hearon & Moody
P.O. Box 98
Austin, TX 78767*

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)

Attorney

Employer (See Instructions)

Green, Dougherty, Hearon & Moody

Date

12/11/09

Full name of contributor out-of-state PAC (ID# NO)

CDM-PAC

Contributor address; City; State; Zip Code

*3050 Post Oak Boulevard, Ste 300
Houston, TX 77056*

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)

Don't Know

Employer (See Instructions)

Don't Know

Date

12/11/09

Full name of contributor out-of-state PAC (ID# NO)

Daron Butler

Contributor address; City; State; Zip Code

*1708 Jersey Miller
Austin, TX 78613
Cedar Creek*

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)

Attorney

Employer (See Instructions)

Lucas Collier & Braden

Date

12/11/09

Full name of contributor out-of-state PAC (ID# NO)

Cecelia Burke

Contributor address; City; State; Zip Code

*6500 Astoria Lane
Austin, TX 78731*

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)

Retired

Employer (See Instructions)

Harris County

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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:

14 of 20

2 FILER NAME

Margaret Giam Campaign

3 ACCOUNT # (Ethics Commission Filers)

4 Date

12/11/09

5 Full name of contributor out-of-state PAC (ID#: *NO*)

Sam Biscoe Campaign

6 Contributor address; City; State; Zip Code

*6711 Bridgwater Drive
Austin, TX 78723*

7 Amount of contribution (\$)

\$100.00

8 In-kind contribution description (if applicable)

—

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

County Judge

10 Employer (See Instructions)

Tarrant County

Date

12/11/09

Full name of contributor out-of-state PAC (ID#: *NO*)

Ken Bailey

Contributor address; City; State; Zip Code

*4004 Merrimac Drive
Austin, TX 78731*

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)

Retired

Employer (See Instructions)

Don't know

Date

12/11/09

Full name of contributor out-of-state PAC (ID#: *NO*)

Pat D. Powell

Contributor address; City; State; Zip Code

*P.O. Box 663
Wimberly, TX 78676*

Amount of contribution (\$)

\$150.00

In-kind contribution description (if applicable)

—

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Retired

Employer (See Instructions)

Don't know

Date

12/11/09

Full name of contributor out-of-state PAC (ID#: *NO*)

Andrew R. Pactor

Contributor address; City; State; Zip Code

*2908 Sparkling Brook Lane
Austin, TX 78746*

Amount of contribution (\$)

\$200.00

In-kind contribution description (if applicable)

—

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Developer

Employer (See Instructions)

Endeavor

Date

12/11/09

Full name of contributor out-of-state PAC (ID#: *NO*)

Gary Taylor Erwin

Contributor address; City; State; Zip Code

*No 3, Jeffrey Cove
Austin, TX 78746*

Amount of contribution (\$)

\$250.00

In-kind contribution description (if applicable)

—

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Public Relations

Employer (See Instructions)

Self Employed

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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: <i>15 of 20</i>	
2 FILER NAME <i>Margaret Quinn Campaign</i>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <i>12/11/09</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Scott Dubette</i> NO	7 Amount of contribution (\$) <i>\$250.00</i>	8 In-kind contribution description (if applicable) —
6 Contributor address; City; State; Zip Code <i>4410 Sunbelt Tree Drive Austin, TX 78735-6432</i>		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions) <i>Engineer</i>		10 Employer (See Instructions) <i>Klotz and Associates</i>	
Date <i>12/11/09</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Cell Photograph, LLC</i> NO	Amount of contribution (\$) <i>\$250.00</i>	In-kind contribution description (if applicable) —
Contributor address; City; State; Zip Code <i>Rich Waller 905 East 7 Austin, TX 78702-3216</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Verding Machine Operator</i>		Employer (See Instructions) <i>Cell Photograph LLC</i>	
Date <i>12/11/09</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Helf Associates State PAC</i> NO	Amount of contribution (\$) <i>\$250.00</i>	In-kind contribution description (if applicable) —
Contributor address; City; State; Zip Code <i>Michael Moya 1201 North Bowman Road Richardson, TX 75081</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Engineer</i>		Employer (See Instructions) <i>Helf Associates</i>	
Date <i>12/11/09</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Jody L. Hagemann</i> NO	Amount of contribution (\$) <i>\$250.00</i>	In-kind contribution description (if applicable) —
Contributor address; City; State; Zip Code <i>1808 Barton Parkway Austin, TX 78704</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Don't know</i>		Employer (See Instructions) <i>Don't know</i>	
Date <i>12/11/09</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Thad Evans</i> NO	Amount of contribution (\$) <i>\$250.00</i>	In-kind contribution description (if applicable) —
Contributor address; City; State; Zip Code <i>1302 West Avenue Austin, TX 78701-1716</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Justice of the Peace, Prec 4</i>		Employer (See Instructions) <i>Travis County</i>	

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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: <i>16 of 20</i>	
2 FILER NAME <i>Margaret Green Campaign</i>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <i>12/11/09</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>NO</i>) <i>Rudy Colmerus Mitchell & Colmerus, LLP</i>	7 Amount of contribution (\$) <i>\$250.00</i>	8 In-kind contribution description (if applicable) —
6 Contributor address; City; State; Zip Code <i>700 Lavaca, Suite 607 Austin, TX 78701</i>		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions) <i>Certified Public Accountant</i>		10 Employer (See Instructions) <i>Mitchell & Colmerus, LLP</i>	
Date <i>12/11/09</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>NO</i>) <i>Bill Milburn</i>	Amount of contribution (\$) <i>\$200.00</i>	In-kind contribution description (if applicable) —
Contributor address; City; State; Zip Code <i>3801 N. Capital of Texas Highway Austin, TX 78746</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Homeholder</i>		Employer (See Instructions) <i>Self Employed</i>	
Date <i>12/11/09</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>NO</i>) <i>Paul Gressitt</i>	Amount of contribution (\$) <i>\$250.00</i>	In-kind contribution description (if applicable) —
Contributor address; City; State; Zip Code <i>Lloyd Gressitt, Rodelle & Janssen PC P.O. Box 1725 Austin, TX 78767</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Attorney</i>		Employer (See Instructions) <i>Lloyd Gressitt, Rodelle & Janssen PC</i>	
Date <i>12/11/09</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>NO</i>) <i>Tommy Neal Cowan</i>	Amount of contribution (\$) <i>\$250.00</i>	In-kind contribution description (if applicable) —
Contributor address; City; State; Zip Code <i>100 Congress, Ste 100 Austin, TX 78701</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Architect</i>		Employer (See Instructions) <i>Self Employed</i>	
Date <i>12/11/09</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>NO</i>) <i>George Mufesa</i>	Amount of contribution (\$) <i>\$500.00</i>	In-kind contribution description (if applicable) —
Contributor address; City; State; Zip Code <i>2601 Velasquez Austin, TX 78703</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Engineer</i>		Employer (See Instructions) <i>Mufesa Engineering</i>	

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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: <i>17 of 20</i>	
2 FILER NAME <i>Margaret Green Campaign</i>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <i>12/11/09</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>NO</i>) <i>Gregory A. Kozmetshy</i>	7 Amount of contribution (\$) <i>\$500.00</i>	8 In-kind contribution description (if applicable) —
6 Contributor address; City; State; Zip Code <i>P.O. Box 684924 Austin, TX 78768</i>		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions) <i>Lawdowner</i>		10 Employer (See Instructions) <i>Self Employed</i>	
Date <i>12/11/09</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>NO</i>) <i>Austin/ Travis Co. EMS Employee Association PAC</i>	Amount of contribution (\$) <i>\$500.00</i>	In-kind contribution description (if applicable) —
Contributor address; City; State; Zip Code <i>900 W 14th Ste 230 Austin, TX 78701</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Executive Director</i>		Employer (See Instructions) <i>Austin/ Travis County Emergency Medical Services</i>	
Date <i>12/11/09</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>NO</i>) <i>Austin Police Association PAC</i>	Amount of contribution (\$) <i>\$500.00</i>	In-kind contribution description (if applicable) —
Contributor address; City; State; Zip Code <i>400 W. 14th Ste 230 Austin, TX 78701</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Executive Director</i>		Employer (See Instructions) <i>Austin Police Department</i>	
Date <i>12/11/09</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>NO</i>) <i>Gary A. Farner</i>	Amount of contribution (\$) <i>\$500.00</i>	In-kind contribution description (if applicable) —
Contributor address; City; State; Zip Code <i>309 Lake Cliff Trail Austin, TX 78746-4628</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Real Estate</i>		Employer (See Instructions) <i>Austin Heritage Leth Company</i>	
Date <i>12/11/09</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>NO</i>) <i>Roger Dale Lindeburg</i>	Amount of contribution (\$) <i>\$500.00</i>	In-kind contribution description (if applicable) —
Contributor address; City; State; Zip Code <i>3 Nelson Road Austin, TX 78703-3137</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Retired Attorney</i>		Employer (See Instructions) <i>Lindeburg Goyen Blair & Sangron</i>	

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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: <i>18 of 20</i>	
2 FILER NAME <i>Margaret Green Campaign</i>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <i>12/11/09</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>James Milton</i> <i>James Milton</i> Contributor address; City; State; Zip Code <i>400 W. 14, St 220</i> <i>Austin, TX 78701</i>	7 Amount of contribution (\$) <i>\$1,500.00</i>	8 In-kind contribution description (if applicable) —
9 Principal occupation / Job title (See Instructions) <i>Deputy Sheriff</i>		10 Employer (See Instructions) <i>Justice County Sheriff</i>	
Date <i>12/11/09</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Ray Milton</i> <i>Milton, Benton Foster & Collins</i> Contributor address; City; State; Zip Code <i>1100 Guadalupe</i> <i>Austin, TX 78701</i>	Amount of contribution (\$) <i>\$1,500.00</i>	In-kind contribution description (if applicable) —
Principal occupation / Job title (See Instructions) <i>Attorney</i>		Employer (See Instructions) <i>Milton, Benton Foster & Collins</i>	
Date <i>12/11/09</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Brown McCarroll PAC</i> <i>Jeremy Harris</i> Contributor address; City; State; Zip Code <i>111 Congress, St 1400</i> <i>Austin, TX 78701</i>	Amount of contribution (\$) <i>\$1,500.00</i>	In-kind contribution description (if applicable) —
Principal occupation / Job title (See Instructions) <i>Attorney</i>		Employer (See Instructions) <i>Brown McCarroll</i>	
Date <i>12/11/09</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Glen Opel</i> <i>Vision & Elkins, Texas PAC</i> Contributor address; City; State; Zip Code <i>2300 First City Tower</i> <i>Austin, TX 78702-6760</i>	Amount of contribution (\$) <i>\$1,000.00</i>	In-kind contribution description (if applicable) —
Principal occupation / Job title (See Instructions) <i>Attorney</i>		Employer (See Instructions) <i>Vision & Elkins</i>	
Date <i>12/21/09</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>Christopher T. Ellis</i> Contributor address; City; State; Zip Code <i>3005 Sparkling Brook Lane</i> <i>Austin, TX 78746-1988</i>	Amount of contribution (\$) <i>\$100.00</i>	In-kind contribution description (if applicable) —
Principal occupation / Job title (See Instructions) <i>Developer</i>		Employer (See Instructions) <i>Endeavor</i>	

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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: <i>19 of 20</i>	
2 FILER NAME <i>Margaret Green Campaign</i>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <i>12/30/09</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>NO</i>) <i>David L. Roche</i>	7 Amount of contribution (\$) <i>\$100.00</i>	8 In-kind contribution description (if applicable) —
6 Contributor address; City; State; Zip Code <i>1600 Mount Larson Austin, TX 78746</i>		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions) <i>Developer</i>		10 Employer (See Instructions) <i>Enderson</i>	
Date <i>12/30/09</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>NO</i>) <i>Michael A. Trumble</i>	Amount of contribution (\$) <i>\$60.00</i>	In-kind contribution description (if applicable) —
Contributor address; City; State; Zip Code <i>7101 Wheeler Burnt Trail Austin, TX 78749-2264</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Content Administrator</i>		Employer (See Instructions) <i>City of Austin</i>	
Date <i>12/30/09</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>NO</i>) <i>Tommy G. Warren</i>	Amount of contribution (\$) <i>\$250.00</i>	In-kind contribution description (if applicable) —
Contributor address; City; State; Zip Code <i>P.O. Box 9269 The Woodlands, TX 77367-9269</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Architect</i>		Employer (See Instructions) <i>Self Employed</i>	
Date <i>12/30/09</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>NO</i>) <i>Pete Winstead</i>	Amount of contribution (\$) <i>\$500.00</i>	In-kind contribution description (if applicable) —
Contributor address; City; State; Zip Code <i>Winstead PC PAC 5400 Renaissance Tower 1201 Elm Street Dallas, TX 75270</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Attorney</i>		Employer (See Instructions) <i>Winstead PC</i>	
Date <i>12/10/09</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>NO</i>) <i>Kelly Faro</i>	Amount of contribution (\$) <i>\$100.00</i>	In-kind contribution description (if applicable) —
Contributor address; City; State; Zip Code <i>2713 Regan Avenue Austin, TX 78757</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Writer</i>		Employer (See Instructions) <i>Self Employed</i>	
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>			

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: <i>20 of 20</i>	
2 FILER NAME <i>Margaret Green Campaign</i>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <i>12/10/09</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>NO</i>) <i>Howard Falkenberg</i>	7 Amount of contribution (\$) <i>\$250.00</i>	8 In-kind contribution description (if applicable) —
6 Contributor address; City; State; Zip Code <i>P.O. Box 123 Austin, TX 78767</i>		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions) <i>Public Relations</i>		10 Employer (See Instructions) <i>Self-Employed</i>	
Date <i>11/14/09</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>NO</i>) <i>Nichelle Susanna Meade</i>	Amount of contribution (\$) <i>\$250.00</i>	In-kind contribution description (if applicable) —
Contributor address; City; State; Zip Code <i>111 Congress, Ste 1400 Austin, TX 78701</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Attorney</i>		Employer (See Instructions) <i>Brown & McCarroll</i>	
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials 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.

1 Total pages Schedule F: 1 of 20	2 FILER NAME	3 ACCOUNT # (Ethics Commission Filers)
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4 Date 7-1-09	5 Payee name Sprint
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6 Amount (\$) \$14.40	7 Payee address; City; State; Zip Code P. O. Box 660075 Austin, TX 75266-0075
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Other Political Expenditures	(b) Description (If travel outside of Texas, complete Schedule T) Campaign calls on cell
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez /No travel required	Office sought	Office held Travis Co. Comm., Pa
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Date 7-12-09	Payee name Diana's Flower Shop
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Amount (\$) \$56.29	Payee address; City; State; Zip Code 2614 East 7 Austin, TX 78702
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Memorial Expense	Description (If travel outside of Texas, complete Schedule T) Flowers for Dolores Carter's mother
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret gomez /No travel required	Office sought	Office held Travis Co. Comm., Pa
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Date 7-11-09	Payee name Adobe Creative Suite 4
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Amount (\$) \$658.13	Payee address; City; State; Zip Code 13755 Hutton Drive, Suite 500 Dallas, TX 75234
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other Political Expenditures	Description (If travel outside of Texas, complete Schedule T) Web Page and Pro Office software for desktop/laptop
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez /No travel required	Office sought	Office held Travis Co. Comm., 4
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Date 7-17-09	Payee name Save Our Springs Coalition
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Amount (\$) \$150.00	Payee address; City; State; Zip Code P. O. Box 684881 Austin, TX 78766
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Contribution by Candidate	Description (If travel outside of Texas, complete Schedule T) Contribution to program work
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez / No travel required	Office sought	Office held Travis Co. Comm.4
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense	Gift/Awards/Memorials 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.

1 Total pages Schedule F: <i>2 of 20</i>		2 FILER NAME		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 7-18-09		5 Payee name South Austin Democrats			
6 Amount (\$) \$100.00		7 Payee address; City; State; Zip Code P. O. box 152592 Austin, TX 78715-2592			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Contribution by Candidate		(b) Description (If travel outside of Texas, complete Schedule T) Sponsor, Yeller Dawg Event	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Margaret Gomez/No travel required		Office sought Office held Travis Co. Comm. 4	
Date 7-18-09		Payee name Diocese of Austin			
Amount (\$) \$200.00		Payee address; City; State; Zip Code P. O. Box 15405 Austin, TX 78761			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Contribution by Candidate		Description (If travel outside of Texas, complete Schedule T) Basic Needs for Constituents <i>Fund</i>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Margaret Gomez/No travel required		Office sought Office held Travis Co. Comm. 4	
Date 7-26-09		Payee name Courtney Enriquez			
Amount (\$) \$100.00		Payee address; City; State; Zip Code 306 Tillery Square Austin, TX 78702			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Contribution by Candidate		Description (If travel outside of Texas, complete Schedule T) Child's Summer Baseball Camp	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Margaret Gomez/No travel required		Office sought Office held Travis Co. Comm. 4	
Date 7-27-09		Payee name Eddie Rodriguez Campaign			
Amount (\$) \$100.00		Payee address; City; State; Zip Code P. O. Box 2436 Austin, TX 78768			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Contribution by Candidate		Description (If travel outside of Texas, complete Schedule T) Birthday fund raiser	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Margaret Gomez/No travel required		Office sought Office held Travis Co. Comm. 4	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials 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.

1 Total pages Schedule F: <i>3 of 20</i>	2 FILER NAME	3 ACCOUNT # (Ethics Commission Filers)
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4 Date 8-2-09	5 Payee name Spay Austin Coalition
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6 Amount (\$) \$100.00	7 Payee address; City; State; Zip Code P. O. Box 40165 Austin, TX 78704
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Contribution by Candidate	(b) Description (If travel outside of Texas, complete Schedule T) Contribution to program work
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought	Office held Travis Co. Comm. 4
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Date 8-5-09	Payee name Time Warner
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Amount (\$) \$65.00	Payee address; City; State; Zip Code P. O. Box 660097 Dallas, TX 75266-0097
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other Political Expenditures	Description (If travel outside of Texas, complete Schedule T) Internet services in campaign office
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought	Office held Travis Co. Comm. 4
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Date 8-5-09	Payee name Sprint
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Amount (\$) \$23.00	Payee address; City; State; Zip Code P. O. Box 660075 Dallas, TX 75266-0075
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other Political Expenditures	Description (If travel outside of Texas, complete Schedule T) Campaign calls on Cell
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought	Office held Travis Co. Comm. 4
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Date 8-5-09	Payee name Manos de Cristo
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Amount (\$) \$20.00	Payee address; City; State; Zip Code 4911 Harmon Avenue Austin, TX 78751
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other Political Expenditures	Description (If travel outside of Texas, complete Schedule T) 2 t-shirts at fund raiser <i>for students' school supplies</i>
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought	Office held Travis Co. Comm. 4
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials 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.

1 Total pages Schedule F: 7 of 20	2 FILER NAME	3 ACCOUNT # (Ethics Commission Filers)
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4 Date 8-17-09	5 Payee name For the Children
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6 Amount (\$) \$100.00	7 Payee address; City; State; Zip Code P.O. box 29346 Austin, TX 78755
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Other Political Expenditures	(b) Description (If travel outside of Texas, complete Schedule T) Fund raiser for students' school supplies
---------------------------------	---	---

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought	Office held Travis Co. Comm. 4
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Date 8-21-09	Payee name Austin AFL-CIO
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Amount (\$) \$310.00	Payee address; City; State; Zip Code c/o Susan Harry; 2520 Longview Street Austin, TX 78703
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T) Half Page Ad in Labor Day Program
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought	Office held Travis Co. Comm. 4
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Date 8-21-09	Payee name Exxon
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Amount (\$) \$200.00	Payee address; City; State; Zip Code Processing Center Des Moines, IA 50361-0001
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other Political Expenditures	Description (If travel outside of Texas, complete Schedule T) Gas for 10 months' campaign mileage
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought	Office held Travis Co. Comm. 4
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Date 9-2-09	Payee name Leland Beatty
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Amount (\$) \$1,750.00	Payee address; City; State; Zip Code 1103 Upland Drive Austin, TX 78741
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other Political Expenditures	Description (If travel outside of Texas, complete Schedule T) Purchase of primary election phone lists
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought	Office held Travis Co. Comm. 4
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POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense	Gift/Awards/Memorials 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.

1 Total pages Schedule F: 5 of 20	2 FILER NAME	3 ACCOUNT # (Ethics Commission Filers)
4 Date 9-2-09	5 Payee name Austin Community Foundation	
6 Amount (\$) \$100.00	7 Payee address; City; State; Zip Code 501 Congress Austin, TX 78701	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Other Political Expenditures	(b) Description (If travel outside of Texas, complete Schedule T) Fund Raiser for students' school supplies
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought Office held Travis Co. Comm. 4
Date 9-4-09	Payee name Target	
Amount (\$) \$54.11	Payee address; City; State; Zip Code 2300 West Ben White Boulevard Austin, TX 78704-7525	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other political expenditures	Description (If travel outside of Texas, complete Schedule T) Anti-Virus for desktop and laptop
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought Office held Travis Co. Comm. 4
Date 9-4-09	Payee name Wal-Mart	
Amount (\$) \$36.77	Payee address; City; State; Zip Code. 9300 South IH 35 Austin, TX 78748-1733	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Overhead Expense	Description (If travel outside of Texas, complete Schedule T) Campaign Office supplies
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought Office held TravisCo.Comm. 4
Date 9-5-09	Payee name Time Warner	
Amount (\$) \$43.98	Payee address; City; State; Zip Code P. O. Box 660097 Dallas, TX 75266-0097	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other Political Expenditures	Description (If travel outside of Texas, complete Schedule T) Internet service at campaign office
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought Office held Travis Co. Comm. 4

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POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense	Gift/Awards/Memorials 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.

1 Total pages Schedule F: 6 of 20	2 FILER NAME Margaret Gomez Campaign	3 ACCOUNT # (Ethics Commission Filers)
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4 Date 9-5-09	5 Payee name Sprint
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6 Amount (\$) \$29.50	7 Payee address; City; State; Zip Code P. O. Box 660075 Dallas, TX 75266-0075
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Other Political Expenditures	(b) Description (If travel outside of Texas, complete Schedule T) Campaign Calls on Cell
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought	Office held Travis Co. Comm. 4
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Date 9-10-09	Payee name Office Depot
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Amount (\$) \$5.68	Payee address; City; State; Zip Code 2101 South Lamar Austin, TX 78704
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other political expenditures	Description (If travel outside of Texas, complete Schedule T) Clipboards for volunteer walkers
------------------------	--	---

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought	Office held Travis Co. Comm. 4
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Date 9-20-09	Payee name Diana's Flower Shop
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Amount (\$) \$51.96	Payee address; City; State; Zip Code 2614 East 7 Austin, TX 78702
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Memorial Expense	Description (If travel outside of Texas, complete Schedule T) Flowers for Yolanda Velasquez' son
------------------------	--	---

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought	Office held Travis Co. Comm. 4
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Date 9-21-09	Payee name National Resources Defense Council
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Amount (\$) \$150.00	Payee address; City; State; Zip Code P. O. box 1830 Merrifield, VA 22116-8030
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other Political Expenditures	Description (If travel outside of Texas, complete Schedule T) Renewed Membership Dues
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought	Office held Travis Co. Comm. 4
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POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense	Gift/Awards/Memorials 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.

1 Total pages Schedule F: 7 of 20	2 FILER NAME Margaret Gomez Campaign	3 ACCOUNT # (Ethics Commission Filers)
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4 Date 9-25-09	5 Payee name Center for At Risk Youth (CARY)
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6 Amount (\$) \$50.00	7 Payee address; City; State; Zip Code 3710 Cedar Street, Box 23 Austin, TX 78705
---------------------------------	--

8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Contribution by Candidate	(b) Description (If travel outside of Texas, complete Schedule T) Fund Raiser for kids at risk
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought	Office held Travis Co. Comm. 4
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Date 9-25-09	Payee name River City Youth
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Amount (\$) \$50.00	Payee address; City; State; Zip Code 5209 South Pleasant Valley Road Austin, TX 78744
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Contribution by Candidate	Description (If travel outside of Texas, complete Schedule T) Fund Raiser for neighborhood kids
------------------------	---	--

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought	Office held Travis Co. Comm. 4
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Date 10-2-09	Payee name Sprint
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Amount (\$) \$110.81	Payee address; City; State; Zip Code P. O. Box 660075 Dallas, TX 75266-0075
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other Political Expenditures	Description (If travel outside of Texas, complete Schedule T) Campaign calls on cell
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought	Office held TravisCo.Comm. 4
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Date 10-3-09	Payee name Time Warner
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Amount (\$) \$48.54	Payee address; City; State; Zip Code P. O. Box 660097 Dallas, TX 75266-0075
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other Political Expenditures	Description (If travel outside of Texas, complete Schedule T) Internet service for campaign office
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought	Office held Travis Co. Comm. 4
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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

- | | | | |
|---------------------|-------------------------------|----------------------------------|--|
| Advertising Expense | Gift/Awards/Memorials 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.

1 Total pages Schedule F: 8 of 20		2 FILER NAME Margaret Gomez Campaign		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 10-5-09		5 Payee name United East Austin Coalition			
6 Amount (\$) \$100.00		7 Payee address; City; State; Zip Code 1511 Haskell Austin, TX 78702			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Contribution by Candidate		(b) Description (If travel outside of Texas, complete Schedule T) Contribution for Dia de la Raza Celebration	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name Margaret Gomez/No travel required		Office sought Travis Co. Comm. 4	
Date 10-7-09		Payee name Dawanna Dukes Campaign			
Amount (\$) \$100.00		Payee address; City; State; Zip Code P. O. Box 14645 Austin, TX 78761			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Contribution by Candidate		Description (If travel outside of Texas, complete Schedule T) Contribution to State Representative Fund	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name Margaret Gomez/No travel required		Office held Travis Co. Comm. 4	
Date 10-9-09		Payee name Costco			
Amount (\$) \$29.96		Payee address; City; State; Zip Code 4301 West William Cannon Drive Austin, TX 78749			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Other Political Expenditures		Description (If travel outside of Texas, complete Schedule T) Case of paper for printer at campaign ofc.	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name Margaret Gomez/No travel required		Office held TravisCo.Comm. 4	
Date 10-13-09		Payee name South Austin Democrats			
Amount (\$) \$60.00		Payee address; City; State; Zip Code P. O. Box 152592 Austin, TX 78715-2592			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Other Political Expenditures		Description (If travel outside of Texas, complete Schedule T) Renewal of sustaining membership dues	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name Margaret Gomez/No travel required		Office held Travis Co. Comm. 4	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense	Gift/Awards/Memorials 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.

1 Total pages Schedule F: 9 of 20	2 FILER NAME Margaret Gomez Campaign	3 ACCOUNT # (Ethics Commission Filers)
4 Date 10-14-09	5 Payee name Environmental and Consumer Health Unit	
6 Amount (\$) \$35.00	7 Payee address; City; State; Zip Code P. O. box 1088 Austin, TX 78767	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Other Political Expenditures	(b) Description (If travel outside of Texas, complete Schedule T) Temporary Food for Fish Fry
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought Office held Travis Co. Comm.4
Date 10-16-09	Payee name U. S. Postmaster	
Amount (\$) \$22.00	Payee address; City; State; Zip Code South Austin Station Austin, TX 78704	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Printing Expense	Description (If travel outside of Texas, complete Schedule T) Postage for Sponsors Thank You Letters
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought Office held Travis Co. Comm. 4
Date 10-16-09	Payee name Robert Cisneros	
Amount (\$) \$275.00	Payee address; City; State; Zip Code 3504 Santa Monica Austin, TX 78741	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other Political Expenditures	Description (If travel outside of Texas, complete Schedule T) 20x20 rental tent for fish fry
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought Office held Travis Co. Comm 4
Date 10-16-09	Payee name Margaret Gomez	
Amount (\$) \$690.75	Payee address; City; State; Zip Code 2104 Petrified Forest Austin, TX 78747	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Political Expenditure by Candidate	Description (If travel outside of Texas, complete Schedule T) Repay loan for fish fry purchase
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought Office held Travis Co. Comm. 4

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense	Gift/Awards/Memorials 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.

1 Total pages Schedule F: <i>10 of 20</i>	2 FILER NAME Margaret Gomez Campaign	3 ACCOUNT # (Ethics Commission Filers)
4 Date 10-27-09	5 Payee name Ballet East	
6 Amount (\$) \$150.00	7 Payee address; City; State; Zip Code Rodolfo Mendez; 3111 Garwood Austin, TX 78702	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Contribution by Candidate	(b) Description (If travel outside of Texas, complete Schedule T) Contribution for program work
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought Office held Travis Co. Comm.4
Date 10-29-09	Payee name Gabrielle Burns	
Amount (\$) \$50.00	Payee address; City; State; Zip Code Jupiter Index; P. O. box 2024 Austin, TX 78768	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Contribution by Candidate	Description (If travel outside of Texas, complete Schedule T) Contribution to kids' art classes
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought Office held Travis Co. Comm. 4
Date 10-31-09	Payee name Haynie Chapel Church	
Amount (\$) \$55.00	Payee address; City; State; Zip Code 16415 Greenwood Drive Austin, TX 78617	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other Political Expenditures	Description (If travel outside of Texas, complete Schedule T) Contribution to Fund Raiser
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought Office held Travis Co. Comm 4
Date 11-1-09	Payee name Time Warner	
Amount (\$) \$59.91	Payee address; City; State; Zip Code P. O. Box 660097 Dallas, TX 75266-0097	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Political Expenditure by Candidate	Description (If travel outside of Texas, complete Schedule T) Internet service to campaign office
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought Office held Travis Co. Comm. 4

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense	Gift/Awards/Memorials 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.

1 Total pages Schedule F: 11 of 20	2 FILER NAME Margaret Gomez Campaign	3 ACCOUNT # (Ethics Commission Filers)
4 Date 11-1-09	5 Payee name Network	
6 Amount (\$) \$100.00	7 Payee address; City; State; Zip Code 25 E Street, NW. Suite 200 Washington, DC 20001-1630	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Other Political Expenditure	(b) Description (If travel outside of Texas, complete Schedule T) Renewed membership dues
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought Office held Travis Co. Comm.4
Date 11-1-09	Payee name Travis County Democratic Party	
Amount (\$) \$200.00	Payee address; City; State; Zip Code 1311 East 6 Austin, TX 78702	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other Political Expenditures	Description (If travel outside of Texas, complete Schedule T) Precinct voter files for walking precincts
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought Office held Travis Co. Comm. 4
Date 11-2-09	Payee name Blue Roots Strategies, Inc./David Mauro	
Amount (\$) \$1,800.00	Payee address; City; State; Zip Code P. O. Box 300053 Austin, TX 78703	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other Political Expenditures	Description (If travel outside of Texas, complete Schedule T) Website Consulting and Monitoring
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought Office held Travis Co. Comm 4
Date 11-2-09	Payee name Elliott Naishtat Campaign	
Amount (\$) \$100.00	Payee address; City; State; Zip Code P. O. Box 9921 Austin, TX 78766	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Contribution by Candidate	Description (If travel outside of Texas, complete Schedule T) Contribution to Re-election campaign
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought Office held Travis Co. Comm. 4

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials 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.

1 Total pages Schedule F: 12 of 20	2 FILER NAME Margaret Gomez Campaign	3 ACCOUNT # (Ethics Commission Filers)
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4 Date 11-2-09	5 Payee name Sun Dragon Karate
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6 Amount (\$) \$150.00	7 Payee address; City; State; Zip Code 4534 Westgate Boulevard Austin, TX 78745
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Contribution by Candidate	(b) Description (If travel outside of Texas, complete Schedule T) Contribution to Scholarship Fund
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought	Office held Travis Co. Comm.4
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Date 11-3-09	Payee name Central Austin Progressive Democrats
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Amount (\$) \$10.00	Payee address; City; State; Zip Code P. O. Box 801 Austin, TX 78767
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other Political Expenditures	Description (If travel outside of Texas, complete Schedule T) Annual membership dues
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought	Office held Travis Co. Comm. 4
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Date 11-5-09	Payee name Office Depot
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Amount (\$) \$124.47	Payee address; City; State; Zip Code 2101 South Lamar Austin, TX 78704
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Office Overhead	Description (If travel outside of Texas, complete Schedule T) 1 ink cartridges for printer in camp. ofc.
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought	Office held Travis Co. Comm 4
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Date 11-6-09	Payee name Office Depot
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Amount (\$) \$8.64	Payee address; City; State; Zip Code 2101 South Lamar Austin, TX 78704
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Office Overhead Expense	Description (If travel outside of Texas, complete Schedule T) Campaign office supplies
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought	Office held Travis Co. Comm. 4
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense	Gift/Awards/Memorials 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.

1 Total pages Schedule F: 13 of 20		2 FILER NAME Margaret Gomez Campaign		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 11-12-09		5 Payee name Capital Area Democratic Women			
6 Amount (\$) \$54.00		7 Payee address; City; State; Zip Code P. O. Box 12962 Austin, TX 78711			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Other Political Contributions		(b) Description (If travel outside of Texas, complete Schedule T) 1 lunch tickets and annual dues	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name Margaret Gomez/No travel required		Office sought Office held Travis Co. Comm.4	
Date 11-13-09		Payee name Florence Ponciano			
Amount (\$) \$100.00		Payee address; City; State; Zip Code 515 Kemp Street Austin, TX 78741			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Other Political Expenditures		Description (If travel outside of Texas, complete Schedule T) Donation to Comfort House for Kids	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name Margaret Gomez/No travel required		Office sought Office held Travis Co. Comm. 4	
Date 11-13-09		Payee name Dove Springs Recreation Center/George Morales			
Amount (\$) \$100.00		Payee address; City; State; Zip Code 5405 South Pleasant Valley Road Austin, TX 78744			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Contribution by Candidate		Description (If travel outside of Texas, complete Schedule T) Contrib.to community Thanksgiving Dinner	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name Margaret Gomez/No travel required		Office sought Office held Travis Co. Comm 4	
Date 11-14-09		Payee name Ace Printing			
Amount (\$) \$507.29		Payee address; City; State; Zip Code 7807 Doncaster Austin, TX 78745			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Other Political Expenditures		Description (If travel outside of Texas, complete Schedule T) Lapel and bumper stickers	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name Margaret Gomez/No travel required		Office sought Office held Travis Co. Comm. 4	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials 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.

1 Total pages Schedule F: <i>14 of 20</i>	2 FILER NAME Margaret Gomez Campaign	3 ACCOUNT # (Ethics Commission Filers)
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4 Date 11-14-09	5 Payee name Gina Cruz
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6 Amount (\$) \$100.00	7 Payee address; City; State; Zip Code 9512 Colebrook Austin, TX 78749
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Contribution by Candidate	(b) Description (If travel outside of Texas, complete Schedule T) Contribution to Scholarship Fund
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought	Office held Travis Co. Comm. 4
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Date 11-14-09	Payee name La Feria Restaurant
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Amount (\$) \$10.28	Payee address; City; State; Zip Code 2010 South Lamar Austin, TX 78704
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Food/Beverage Expense	Description (If travel outside of Texas, complete Schedule T) Food for volunteer
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought	Office held Travis Co. Comm. 4
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Date 11-16-09	Payee name Norma Guerra
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Amount (\$) \$40.00	Payee address; City; State; Zip Code 6636 William Cannon, #714 Austin, TX 78735
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Political Expenditure by Candidate	Description (If travel outside of Texas, complete Schedule T) Repay loan for luncheon attended
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought	Office held Travis Co. Comm. 4
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Date 11-18-09	Payee name Sprint
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Amount (\$) \$177.11	Payee address; City; State; Zip Code P. O. Box 660075 Austin, TX 75266-0075
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other Political Expenditures	Description (If travel outside of Texas, complete Schedule T) Campaign calls on cell
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought	Office held Travis Co. Comm. 4
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense	Gift/Awards/Memorials 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.

1 Total pages Schedule F: 15 of 20	2 FILER NAME Margaret Gomez Campaign	3 ACCOUNT # (Ethics Commission Filers)
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4 Date 11-23-09	5 Payee name NARAL - Pro Choice America
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6 Amount (\$) \$75.00	7 Payee address; City; State; Zip Code P. O. Box 1866 Merrifield, VA 22116
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Other Political Expenditures	(b) Description (If travel outside of Texas, complete Schedule T) Renewal of annual dues
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought	Office held Travis Co. Comm. 4
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Date =11-23-09	Payee name Civil Rights Project/Jim Harrington
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Amount (\$) \$100.00	Payee address; City; State; Zip Code 1406 Montopolis Drive Austin, TX 78741-3438
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Contribution by Candidate	Description (If travel outside of Texas, complete Schedule T) Contribution for program work
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought	Office held Travis Co. Comm. 4
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Date 11-30-09	Payee name Worley Printing/Neal Worley
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Amount (\$) \$335.58	Payee address; City; State; Zip Code 3217 North IH 35 Austin, TX 78722
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Printing Expense	Description (If travel outside of Texas, complete Schedule T) Flyers for Dec. 7 fundraising event
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought	Office held Travis Co. Comm. 4
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Date 11-30-09	Payee name Matthew H. Moore
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Amount (\$) \$750.00	Payee address; City; State; Zip Code 1803 E. Cesar Chavez Austin, TX 78702
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Rental Expense	Description (If travel outside of Texas, complete Schedule T) Campaign office monthly rent
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought	Office held Travis Co. Comm. 4
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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials 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.

1 Total pages Schedule F: <i>16 of 20</i>	2 FILER NAME Margaret Gomez Campaign	3 ACCOUNT # (Ethics Commission Filers)
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4 Date 11-30-09	5 Payee name Office Depot
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6 Amount (\$) \$149.61	7 Payee address; City; State; Zip Code 2101 South Lamar Austin, TX 78704
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Office Overhead	(b) Description (If travel outside of Texas, complete Schedule T) Campaign office supplies
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought	Office held Travis Co. Comm. 4
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Date 11-30-09	Payee name Sprint
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Amount (\$) \$90.04	Payee address; City; State; Zip Code P. O. Box 660075 Dallas, TX 75266-0075
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other Political Expenditures	Description (If travel outside of Texas, complete Schedule T) Campaign calls on cell
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought	Office held Travis Co. Comm. 4
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Date 12-1-09	Payee name South Austin Democrats/Capital Area Progressive Democrats
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Amount (\$) \$40.00	Payee address; City; State; Zip Code P.O. box 152592 Austin, TX 78715-2592
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Contribution by Candidate	Description (If travel outside of Texas, complete Schedule T) Contribution to Holiday Party
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought	Office held Travis Co. Comm. 4
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Date 12-2-09	Payee name University of Texas Democrats
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Amount (\$) \$75.00	Payee address; City; State; Zip Code Soc 145; 100-C West Dean Keeton Street Austin, TX 78712
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Contribution by Candidate	Description (If travel outside of Texas, complete Schedule T) Contribution for program work
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought	Office held Travis Co. Comm. 4
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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials 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.

1 Total pages Schedule F: <i>17 of 20</i>		2 FILER NAME Margaret Gomez Campaign		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 12-7-09		5 Payee name Travis County Democratic Party			
6 Amount (\$) \$1,250.00		7 Payee address; City; State; Zip Code 1311 East 6 Austin, TX 78702			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Fee		(b) Description (If travel outside of Texas, complete Schedule T) Candidate Filing Fee	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Margaret Gomez/No travel required		Office sought Office held Travis Co. Comm. 4	
Date 12-7-09		Payee name Nuevo Leon Restaurant/Mary Davila			
Amount (\$) \$462.13		Payee address; City; State; Zip Code 1501 East 6 Austin, TX 78702			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Food/Beverage Expense		Description (If travel outside of Texas, complete Schedule T) Meeting to discuss campaign issues	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Margaret Gomez/No travel required		Office sought Office held Travis Co. Comm. 4	
Date 12-8-09		Payee name Time Warner			
Amount (\$) \$59.92		Payee address; City; State; Zip Code P. O. Box 660097 Dallas, TX 75266-0097			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Other Political Expenditures		Description (If travel outside of Texas, complete Schedule T) Internet service at campaign office	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Margaret Gomez/No travel required		Office sought Office held Travis Co. Comm. 4	
Date 12-9-09		Payee name Austin Tejano Democrats			
Amount (\$) \$60.00		Payee address; City; State; Zip Code 2544 Stoutwood Circle Austin, TX 78745			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Other Political Expenditures		Description (If travel outside of Texas, complete Schedule T) Renewal of annual membership dues	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Margaret Gomez/No travel required		Office sought Office held Travis Co. Comm. 4	

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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

- | | | | |
|---------------------|-------------------------------|----------------------------------|--|
| Advertising Expense | Gift/Awards/Memorials 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.

1 Total pages Schedule F: 18 of 20	2 FILER NAME Margaret Gomez Campaign	3 ACCOUNT # (Ethics Commission Filers)
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4 Date 12-10-09	5 Payee name Valinda Bolton Campaign
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6 Amount (\$) \$100.00	7 Payee address; City; State; Zip Code P. O. Box 843 Austin, TX 78767
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Contribution by Candidate	(b) Description (If travel outside of Texas, complete Schedule T) Contribution to Re-Election Campaign
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought	Office held Travis Co. Comm. 4
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Date 12-11-09	Payee name Susan Harry Consulting
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Amount (\$) \$2,904.95	Payee address; City; State; Zip Code 2520 Longview, Suite 211 Austin, TX 78705
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Consulting Expense	Description (If travel outside of Texas, complete Schedule T) Campaign services
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought	Office held Travis Co. Comm. 4
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Date 12-14-09	Payee name Blue Roots Strategies, Inc.
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Amount (\$) \$1,000.00	Payee address; City; State; Zip Code P. O. Box 300053 Austin, TX 78703
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Consulting Expense	Description (If travel outside of Texas, complete Schedule T) Campaign strategies assistance
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought	Office held Travis Co. Comm. 4
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Date 12-14-09	Payee name Estella French
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Amount (\$) \$900.00	Payee address; City; State; Zip Code 3113 Linnet Drive Austin, TX 78745
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Contract Labor	Description (If travel outside of Texas, complete Schedule T) Contract for campaign services
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought	Office held Travis Co. Comm. 4
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense	Gift/Awards/Memorials 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.

1 Total pages Schedule F: <i>19 of 20</i>	2 FILER NAME Margaret Gomez Campaign	3 ACCOUNT # (Ethics Commission Filers)
4 Date 12-18-09	5 Payee name Travis County Democratic Party/Andy Brown	
6 Amount (\$) \$1,500.00	7 Payee address; City; State; Zip Code 1311 East 6 Austin, TX 78702	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Other Political Expenditures	(b) Description (If travel outside of Texas, complete Schedule T) Democratic Party Fund Raiser
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought Office held Travis Co. Comm. 4
Date 12-21-09	Payee name PC Mailing Services	
Amount (\$) \$196.17	Payee address; City; State; Zip Code 10711 Hillpoint, Ste. 100 San Antonio, TX 78217-2813	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Consulting Expense	Description (If travel outside of Texas, complete Schedule T) Campaign Services
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought Office held Travis Co. Comm. 4
Date 12-21-09	Payee name Exxon	
Amount (\$) \$200.00	Payee address; City; State; Zip Code Processing Center Des Moines, IA 50361-0001	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other Political Expenditures	Description (If travel outside of Texas, complete Schedule T) Campaign miles for Sept., Oct., Nov., Dec. <i>(2009)</i>
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel Required	Office sought Office held Travis Co. Comm. 4
Date 12-30-09	Payee name U. S. Postmaster	
Amount (\$) \$88.00	Payee address; City; State; Zip Code South Congress Station Austin, TX 78704	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Printing Expense	Description (If travel outside of Texas, complete Schedule T) Postage for letter to constituents
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought Office held Travis Co. Comm. 4

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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

- | | | | |
|---------------------|-------------------------------|----------------------------------|--|
| Advertising Expense | Gift/Awards/Memorials 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.

1 Total pages Schedule F: <i>20 of 20</i>	2 FILER NAME Margaret Gomez Campaign	3 ACCOUNT # (Ethics Commission Filers)
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4 Date 12-31--09	5 Payee name Estella French
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6 Amount (\$) \$900.00	7 Payee address; City; State; Zip Code 3113 Linnet Drive Austin, TX 78745
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Contract Labor	(b) Description (If travel outside of Texas, complete Schedule T) Contract for campaign services
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought	Office held Travis Co. Comm. 4
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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 (If travel outside of Texas, complete Schedule T)
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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 (If travel outside of Texas, complete Schedule T)
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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 (If travel outside of Texas, complete Schedule T)
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

February 1, 2010

POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense	Gift/Awards/Memorials 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.

1 Total pages Schedule F: 1 of 5	2 FILER NAME Margaret Gomez Campaign	3 ACCOUNT # (Ethics Commission Filers)
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4 Date 1-3-10	5 Payee name Sprint
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6 Amount (\$) \$130.32	7 Payee address; City; State; Zip Code P. O. Box 660075 Dalas, TX 75266-0075
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Other Political Expenditures	(b) Description (If travel outside of Texas, complete Schedule T) Campaign calls on cell
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought	Office held Travis Co. Comm. 4
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Date 1-4-10	Payee name Matt Moore
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Amount (\$) \$750.00	Payee address; City; State; Zip Code 1803 E. Cesar Chavez Austin, TX 78702
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Rental Expense	Description (If travel outside of Texas, complete Schedule T) Campaign office rental
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought	Office held Travis Co. Comm. 4
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Date 1-5-10	Payee name Time Warner
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Amount (\$) \$62.21	Payee address; City; State; Zip Code P. O. Box 660097 Dallas, TX 75266-0097
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other Political Expenditures	Description (If travel outside of Texas, complete Schedule T) Internet service at campaign office
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought	Office held Travis Co. Comm. 4
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Date 1-11-10	Payee name Ann Pierce
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Amount (\$) \$100.00	Payee address; City; State; Zip Code 15 Waller Austin, TX 78702
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Contract Labor	Description (If travel outside of Texas, complete Schedule T) Contract labor for campaign services
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought	Office held Travis Co. Comm. 4
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense	Gift/Awards/Memorials 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.

1 Total pages Schedule F: 2 of 5	2 FILER NAME Margaret Gomez Campaign	3 ACCOUNT # (Ethics Commission Filers)
4 Date 1-11-1-	5 Payee name Alexander Finn	
6 Amount (\$) \$78.75	7 Payee address; City; State; Zip Code 8600 Railroad Austin, TX 78726	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Contract Labor	(b) Description (If travel outside of Texas, complete Schedule T) Contract labor for campaign services
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought Office held Travis Co. Comm. 4
Date 1-8-10	Payee name Austin Women's Political Caucus	
Amount (\$) \$50.00	Payee address; City; State; Zip Code P. O. Box 822 Austin, TX 78767	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other Political Expenditures	Description (If travel outside of Texas, complete Schedule T) Renewal of annual membership dues
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought Office held Travis Co. Comm. 4
Date 1-9-10	Payee name Angie's Restaurant	
Amount (\$) \$38.97	Payee address; City; State; Zip Code 1307 East 7 Austin, TX 78702	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Food/Beverage Expense	Description (If travel outside of Texas, complete Schedule T) Food for phone bank volunteers
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought Office held Travis Co. Comm. 4
Date 1-11-10	Payee name Irene Silva	
Amount (\$) \$76.87	Payee address; City; State; Zip Code 2502 E. Oltorf, #2527 Austin, TX 78741	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Contract Labor	Description (If travel outside of Texas, complete Schedule T) Contract labor for campaign services
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought Office held Travis Co. Comm. 4

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POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense	Gift/Awards/Memorials 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.

1 Total pages Schedule F: 3 of 5	2 FILER NAME Margaret Gomez Campaign	3 ACCOUNT # (Ethics Commission Filers)
4 Date 1-11-10	5 Payee name Gretchen Stinson	
6 Amount (\$) \$72.00	7 Payee address; City; State; Zip Code 74985 Chevy Chase Drive, #204 Austin, TX 78752	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Contract Labor	(b) Description (If travel outside of Texas, complete Schedule T) Contract labor for campaign services
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought Office held Travis Co. Comm. 4
Date 1-10-10	Payee name Laurie Rogers	
Amount (\$) \$82.50	Payee address; City; State; Zip Code 1308-A Radcliff Drive Austin, TX 78753	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Contract Labor	Description (If travel outside of Texas, complete Schedule T) Contract labor for campaign services
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought Office held Travis Co. Comm. 4
Date 1-10-10	Payee name Diana's Flower Shop	
Amount (\$) \$168.87	Payee address; City; State; Zip Code 2614 East 7 Austin, TX 78702	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Memorial Expense	Description (If travel outside of Texas, complete Schedule T) Flowers for Aguirre, Sonleitner, Barrientos <i>Familia</i>
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought Office held Travis Co. Comm. 4
Date 1-15-10	Payee name Estella French	
Amount (\$) \$900.00	Payee address; City; State; Zip Code 3113 Linnet Drive Austin, TX 78745	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Contract Labor	Description (If travel outside of Texas, complete Schedule T) Contract labor for campaign services
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought Office held Travis Co. Comm. 4

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POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense	Gift/Awards/Memorials 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.

1 Total pages Schedule F: 4 of 5	2 FILER NAME Margaret Gomez Campaign	3 ACCOUNT # (Ethics Commission Filers)
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4 Date 1-15-10	5 Payee name James Coonrod
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6 Amount (\$) \$425.00	7 Payee address; City; State; Zip Code 6809 Felipe Drive Austin, TX 78741
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Contract Labor	(b) Description (If travel outside of Texas, complete Schedule T) Contract labor for campaign services
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought	Office held Travis Co. Comm. 4
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Date 1-15-10	Payee name Blue Roots Strategies, Inc./David Mauro
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Amount (\$) \$1,000.00	Payee address; City; State; Zip Code P. O Box 300053 Austin, TX 78703
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Consulting Expense	Description (If travel outside of Texas, complete Schedule T) Monitored webpage, Twitter/Facebook
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought	Office held Travis Co. Comm. 4
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Date 1-18-10	Payee name Laurie Rogers
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Amount (\$) \$93.75	Payee address; City; State; Zip Code 1308-A Radcliff Drive Austin, TX 78753
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Contract Labor	Description (If travel outside of Texas, complete Schedule T) Contract labor for campaign services
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought	Office held Travis Co. Comm. 4
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Date 1-18-10	Payee name Gretchen Stinson
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Amount (\$) \$80.00	Payee address; City; State; Zip Code 74985 Chevy Chase, #204 Austin, TX 78752
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Contract Labor	Description (If travel outside of Texas, complete Schedule T) Contract labor for campaign services
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought	Office held Travis Co. Comm. 4
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POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense	Gift/Awards/Memorials 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.

1 Total pages Schedule F: 5 of 5		2 FILER NAME Margaret Gomez Campaign		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 1-18-10		5 Payee name Tom Cochran			
6 Amount (\$) \$112.50		7 Payee address; City; State; Zip Code 805 Purple Martin Pflugerville, TX 78660			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Contract Labor		(b) Description (If travel outside of Texas, complete Schedule T) Contract labor for campaign services	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Margaret Gomez/No travel required		Office sought	Office held Travis Co. Comm. 4
Date 1-18-10		Payee name South Austin Civic Club/Richard McCain			
Amount (\$) \$100.00		Payee address; City; State; Zip Code P. O. Box 151295 Austin, TX 78715-1295			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Contribution by Candidate		Description (If travel outside of Texas, complete Schedule T) Contribution for program work	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name Margaret Gomez/No travel required		Office sought	Office held Travis Co. Comm. 4
Date 1-19-10		Payee name Andrew Stanford			
Amount (\$) \$37.50		Payee address; City; State; Zip Code 114 Mandan Buda, TX 78610			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Contract Labor		Description (If travel outside of Texas, complete Schedule T) Contract labor for campaign services	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name Margaret Gomez/No travel required		Office sought	Office held Travis Co. Comm. 4
Date		Payee name			
Amount (\$)		Payee address; City; State; Zip Code			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule)		Description (If travel outside of Texas, complete Schedule T)	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held

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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 Margaret Gomez Campaign		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 1-10-11	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: NO) Lonnie Limon 6 Contributor address; City; State; Zip Code 3501 Kay Street Austin, TX 78702	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable) NO <small>(If travel outside of Texas, complete Schedule T)</small>
9 Principal occupation / Job title (See Instructions) Financial		10 Employer (See Instructions) Don't know	
Date 1-10-10	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: NO) Richard Merren Contributor address; City; State; Zip Code 3503 Winfield Drive Austin, TX 78704	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable) No <small>(If travel outside of Texas, complete Schedule T)</small>
Principal occupation / Job title (See Instructions) Technology Consultant		Employer (See Instructions) Self-Employed	
Date 1-10-10	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: NO) Brian Rice Contributor address; City; State; Zip Code Lockwood, Andrews, Norwood PAC 2925 Briarpark Drive, FL4; Houston, TX 77042	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable) NO <small>(If travel outside of Texas, complete Schedule T)</small>
Principal occupation / Job title (See Instructions) Transportation Planner		Employer (See Instructions) Lockwood, Andrews, Norwood	
Date 1-10-10	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: NO) Cid Galindo Contributor address; City; State; Zip Code 411 Brazos Street, Suite 99 Austin, TX 78701	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable) NO <small>(If travel outside of Texas, complete Schedule T)</small>
Principal occupation / Job title (See Instructions) Urban Planner		Employer (See Instructions) Self-Employed	
Date 1-16-10	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: NO) Ray Vaughn Contributor address; City; State; Zip Code 10108 Pinehurst Drive Austin, TX 78747-1301	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) NO <small>(If travel outside of Texas, complete Schedule T)</small>
Principal occupation / Job title (See Instructions) Retired teacher		Employer (See Instructions) Don't know	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.			

February 22, 2010

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: 1 of 6	
2 FILER NAME Margaret Gomez Campaign		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 1-29-10	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# NO) Travis County Law Enforcement Officers PAC 6 Contributor address; City; State; Zip Code 98 San Jacinto, Suite 510 Austin, TX 78701	7 Amount of contribution (\$) \$2,500.00	8 In-kind contribution description (if applicable) No <small>(If travel outside of Texas, complete Schedule T)</small>
9 Principal occupation / Job title (See Instructions) Deputy Sheriff		10 Employer (See Instructions) Travis County Sheriff	
Date 1-25-10	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# NO) Ken Oden; Linebarger, Goggan, Blair & Sampson Contributor address; City; State; Zip Code P. O. box 17428 Austin, TX 78760	Amount of contribution (\$) \$1,500.00	In-kind contribution description (if applicable) NO <small>(If travel outside of Texas, complete Schedule T)</small>
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Linebarger, Goggan, Blair & Sampson	
Date 1-27-10	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# NO) Dawn D. Coronado Contributor address; City; State; Zip Code 5602 Palisade Court Austin, TX 78731-4508	Amount of contribution (\$) \$150.00	In-kind contribution description (if applicable) NO <small>(If travel outside of Texas, complete Schedule T)</small>
Principal occupation / Job title (See Instructions) Austin voter		Employer (See Instructions) Don't know	
Date 1-29-10	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# NO) Neel White; White Construction Company Contributor address; City; State; Zip Code 2705 Bee Cave Road, Suite 250 Austin, TX 78746	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if applicable) NO <small>(If travel outside of Texas, complete Schedule T)</small>
Principal occupation / Job title (See Instructions) Construction		Employer (See Instructions) White Construction Company	
Date 1-30-10	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# NO) Texas Democratic Party Contributor address; City; State; Zip Code 505 West 12, Suite 202 Austin, TX 78701	Amount of contribution (\$) \$700.00	In-kind contribution description (if applicable) \$700.00 <small>(If travel outside of Texas, complete Schedule T)</small>
Principal occupation / Job title (See Instructions) Partisan Democratic Organization		Employer (See Instructions) Members of Democratic Party	
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>			

**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

SCHEDULE A

The Instruction Guide explains how to complete this form. 1 Total pages Schedule A:
2 of 6

2 FILER NAME **Margaret Gomez Campaign** 3 ACCOUNT # (Ethics Commission Filers)

4 Date 2-10-10	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: NO) Roy Minton; Minton, Burton, Foster & Collins 6 Contributor address; City; State; Zip Code 1100 Guadalupe Austin, TX 78701	7 Amount of contribution (\$) \$1,500.00	8 In-kind contribution description (if applicable) No
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(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions) **Attorney** 10 Employer (See Instructions)
Minton, Burton, Foster & Collins

Date 2-10-10	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: NO) James Milton; Travis Co. Sheriff's Officer's Assn.PA Contributor address; City; State; Zip Code 400 West 14, Suite 220 Austin, TX 78701	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if applicable) NO
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(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions) **Deputy Sheriff** Employer (See Instructions)
Travis County Sheriff

Date 2-10-10	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: NO) Brandy Mueller; Granger and Mueller, P. C. Contributor address; City; State; Zip Code 605 West 10 Austin, TX 78701-2042	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable) NO
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(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions) **Attorney** Employer (See Instructions)
Granger and Mueller, PC

Date 2-10-10	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: NO) Neel White; White Construction Company Contributor address; City; State; Zip Code 2705 Bee Cave Road, Suite 250 Austin, TX 78746	Amount of contribution (\$) \$1,000.00	In-kind contribution description (if applicable) NO
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(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions) **Construction** Employer (See Instructions)
White Construction Company

Date 1-30-10	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: NO) Adam A. Matthews Contributor address; City; State; Zip Code 505 West 12, Suite 202 Austin, TX 78701	Amount of contribution (\$) \$500.00	In-kind contribution description (if applicable) NO
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(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions) **Don't know** Employer (See Instructions)
Don't know

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: 3 of 6	
2 FILER NAME Margaret Gomez Campaign		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 2-10-10	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: NO) Herbert Evans	7 Amount of contribution (\$) \$250.00	8 In-kind contribution description (if applicable) No
6 Contributor address; City; State; Zip Code 1302 West Avenue Austin, TX 78701-1716		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions) Justice of the Peace, Precinct 5		10 Employer (See Instructions) Travis County	
Date 2-10-10	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: NO) Timy Baranoff	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable) NO
Contributor address; City; State; Zip Code 2307 Tower Drive Austin, TX 78703		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) Retired Teacher		Employer (See Instructions) Don't know	
Date 2-10-10	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: NO) Robert R. Smith	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable) NO
Contributor address; City; State; Zip Code 930 FM 1460 Georgetown, TX 78626		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Self-Employed	
Date 2-10-10	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: NO) Guadalupe Sosa	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable) NO
Contributor address; City; State; Zip Code P. O. Box 40205 Austin, TX 78704-0004		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) Austin Voter		Employer (See Instructions) Don't know	
Date 2-10-10	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: NO) Barbara Cilley	Amount of contribution (\$) \$40.00	In-kind contribution description (if applicable) NO
Contributor address; City; State; Zip Code 1417 Travis Heights Boulevard Austin, TX 78704		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Self-Employed	
<p>ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p>If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>			

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

4 of 6

2 FILER NAME

Margaret Gomez Campaign

3 ACCOUNT # (Ethics Commission Filers)

4 Date
2-10-10

5 Full name of contributor out-of-state PAC (ID#: NO _____)

Stacy Suits

6 Contributor address; City; State; Zip Code

7807 Doncaster
Austin, TX 78745

7 Amount of
contribution (\$)

\$50.00

8 In-kind contribution
description (if applicable)

No

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

Chief Deputy Constable

10 Employer (See Instructions)

Travis County

Date
2-10-10

Full name of contributor out-of-state PAC (ID#: NO _____)

Carmen Luevanos

Contributor address; City; State; Zip Code

2203 De Verne Street
Austin, TX 78704

Amount of
contribution (\$)

\$50.00

In-kind contribution
description (if applicable)

NO

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Communications Specialist

Employer (See Instructions)

Austin Independent School District

Date
2-10-10

Full name of contributor out-of-state PAC (ID#: NO _____)

Roberto O. Martinez

Contributor address; City; State; Zip Code

5905 Thames Drive
Austin, TX 78723

Amount of
contribution (\$)

\$75.00

In-kind contribution
description (if applicable)

NO

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Engineer

Employer (See Instructions)

Self-Employed

Date
2-10-10

Full name of contributor out-of-state PAC (ID#: NO _____)

John J. Vay

Contributor address; City; State; Zip Code

6654 Whitmarsh Valley Walk
Austin, TX 78746

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

NO

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Attorney

Employer (See Instructions)

Don't know

Date
2-10-10

Full name of contributor out-of-state PAC (ID#: NO _____)

Glenn W. Shankle

Contributor address; City; State; Zip Code

2105 Haas Lane
Austin, TX 78728

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

NO

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Don't know

Employer (See Instructions)

Don't know

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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: 5 of 6	
2 FILER NAME Margaret Gomez Campaign		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 2-10-10	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# NO) Jerry Harris; Brown McCarroll PAC 6 Contributor address; City; State; Zip Code 111 Congress Avenue, Suite 1400 Austin, TX 78701	7 Amount of contribution (\$) \$1,000.00	8 In-kind contribution description (if applicable) No <small>(If travel outside of Texas, complete Schedule T)</small>
9 Principal occupation / Job title (See Instructions) Attorney		10 Employer (See Instructions) Brown McCarroll	
Date 2-13-10	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# NO) Leroy W. Nellis Contributor address; City; State; Zip Code 6418 Zadock Woods Drive Austin, TX 78749	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable) NO <small>(If travel outside of Texas, complete Schedule T)</small>
Principal occupation / Job title (See Instructions) Budget Director		Employer (See Instructions) Travis County	
Date 2-13-10	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# NO) Teresita Rodriguez Contributor address; City; State; Zip Code 9000 Happy Trail Austin, TX 78754-4932	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable) NO <small>(If travel outside of Texas, complete Schedule T)</small>
Principal occupation / Job title (See Instructions) Retired Educator		Employer (See Instructions) Don't know	
Date 2-17-10	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# NO) Jay C. Evans Contributor address; City; State; Zip Code 4002 Gaines Court Austin, TX 78735	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable) NO <small>(If travel outside of Texas, complete Schedule T)</small>
Principal occupation / Job title (See Instructions) Construction		Employer (See Instructions) Don't know	
Date 2-17-10	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# NO) Ridge Kaiser Contributor address; City; State; Zip Code 6510 Delmonico Austin, TX 78759	Amount of contribution (\$) \$750.00	In-kind contribution description (if applicable) NO <small>(If travel outside of Texas, complete Schedule T)</small>
Principal occupation / Job title (See Instructions) Construction		Employer (See Instructions) Don't know	

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:

6 of 6

2 FILER NAME

Margaret Gomez Campaign

3 ACCOUNT# (Ethics Commission Filers)

4 Date
2-17-10

5 Full name of contributor out-of-state PAC (ID# NO _____)

Patrick Reilly

6 Contributor address; City; State; Zip Code

4203 Love Bird Lane
Austin, TX 78730

7 Amount of contribution (\$)

\$750.00

8 In-kind contribution description (if applicable)

No

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)
Construction

10 Employer (See Instructions)
Don't know

Date
2-18-10

Full name of contributor out-of-state PAC (ID# NO _____)

Joan Bell

Contributor address; City; State; Zip Code

10111 Wild Dunes Drive
Austin, TX 78747-1310

Amount of contribution (\$)

\$50.00

In-kind contribution description (if applicable)

NO

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)
Retired Austin citizen

Employer (See Instructions)
Don't know

Date
2-20-10

Full name of contributor out-of-state PAC (ID# NO _____)

Steve Stewart; Austin/TCo.EMS Employee Assn.PA

Contributor address; City; State; Zip Code

7901 Cameron Road, Building 3, Suite 288
Austin, TX 78754

Amount of contribution (\$)

In-kind contribution description (if applicable)

\$3,897.92

Mailer & Postage

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)
President

Employer (See Instructions)
Austin/Travis County EMS Employees Association

Date

Full name of contributor out-of-state PAC (ID# NO _____)

Contributor address; City; State; Zip Code

Amount of contribution (\$)

In-kind contribution description (if applicable)

NO

(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# NO _____)

Contributor address; City; State; Zip Code

Amount of contribution (\$)

In-kind contribution description (if applicable)

NO

(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 EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense	Gift/Awards/Memorials 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.

1 Total pages Schedule F: 1 of 12	2 FILER NAME Margaret Gomez Campaign	3 ACCOUNT # (Ethics Commission Filers)
4 Date 1-22-10	5 Payee name Office Depot	
6 Amount (\$) \$31.04	7 Payee address; City; State; Zip Code 2101 South Lamar Austin, TX 78704	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Office Overhead Expense	(b) Description (If travel outside of Texas, complete Schedule T) Campaign office supplies
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought Office held Travis Co. Comm. 4
Date 1-24-10	Payee name League of Women Voters	
Amount (\$) \$60.00	Payee address; City; State; Zip Code 1011 West 31 Austin, TX 78705	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other Political Expenditure	Description (If travel outside of Texas, complete Schedule T) Renewal of membership dues
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought Office held Travis Co. Comm.4
Date 1-25-10	Payee name Irene Silva	
Amount (\$) \$106.88	Payee address; City; State; Zip Code 2502 East Oltorf, #2527 Austin, TX 78741	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Contract labor	Description (If travel outside of Texas, complete Schedule T) Contract labor for campaign services
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought Office held Travis Co. Comm. 4
Date 1-25-10	Payee name Clare Butler	
Amount (\$) \$135.00	Payee address; City; State; Zip Code 2000 Whitestone Drive Austin, TX 78745	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Contract Labor	Description (If travel outside of Texas, complete Schedule T) Contract labor for campaign services
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought Office held Travis Co. Comm. 4

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense	Gift/Awards/Memorials 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.

1 Total pages Schedule F: 2 of 12	2 FILER NAME Margaret Gomez Campaign	3 ACCOUNT # (Ethics Commission Filers)
4 Date 1-25-10	5 Payee name Laurie Rogers	
6 Amount (\$) \$90.00	7 Payee address; City; State; Zip Code 1308-A Radcliff Drive Austin, TX 78753	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Contract labor	(b) Description (If travel outside of Texas, complete Schedule T) Contract labor for campaign services
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought Office held Travis Co. Comm. 4
Date 1-26-10	Payee name Austin Women's Political Caucus	
Amount (\$) \$65.00	Payee address; City; State; Zip Code 1011 West 31 Austin, TX 78705	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other Political Expenditure	Description (If travel outside of Texas, complete Schedule T) Renewal of membership dues
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought Office held Travis Co. Comm.4
Date 2-16-10	Payee name Ann Pierce	
Amount (\$) \$42.50	Payee address; City; State; Zip Code 21 Waller, #1603 Austin, TX 78702	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Contract labor	Description (If travel outside of Texas, complete Schedule T) Contract labor for campaign services
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought Office held Travis Co. Comm. 4
Date 1-26-10	Payee name John Abramowitz	
Amount (\$) \$35.00	Payee address; City; State; Zip Code 1800 Lavaca, #315 Austin, TX 78701	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Contract Labor	Description (If travel outside of Texas, complete Schedule T) Contract labor for campaign services
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought Office held Travis Co. Comm. 4

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense	Gift/Awards/Memorials 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.

1 Total pages Schedule F: 3 of 12	2 FILER NAME Margaret Gomez Campaign	3 ACCOUNT # (Ethics Commission Filers)
4 Date 1-26-10	5 Payee name Jessica Grogan	
6 Amount (\$) \$37.50	7 Payee address; City; State; Zip Code 1705 Royal Ascot Pflugerville, TX 78660	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Contract labor	(b) Description (If travel outside of Texas, complete Schedule T) Contract labor for campaign services
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought Office held Travis Co. Comm. 4
Date 1-26-10	Payee name Alex Finn	
Amount (\$) \$15.00	Payee address; City; State; Zip Code 8600 Railroad Austin, TX 78726	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Contract Labor	Description (If travel outside of Texas, complete Schedule T) Contract labor for campaign services
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought Office held Travis Co. Comm.4
Date 1-28-10	Payee name Millinium Youth Complex	
Amount (\$) \$50.00	Payee address; City; State; Zip Code 1156 Hargrave Austin, TX 78723	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other Political Expenditures	Description (If travel outside of Texas, complete Schedule T) Table for campaign materials
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought Office held Travis Co. Comm. 4
Date 1-28-10	Payee name Sein Leon	
Amount (\$) \$132.00	Payee address; City; State; Zip Code 3221 Plantation Austin, TX 78745	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Contract Labor	Description (If travel outside of Texas, complete Schedule T) Contract labor for campaign services
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought Office held Travis Co. Comm. 4

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POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense	Gift/Awards/Memorials 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.

1 Total pages Schedule F: 4 of 12	2 FILER NAME Margaret Gomez Campaign	3 ACCOUNT # (Ethics Commission Filers)
4 Date 1-27-10	5 Payee name Stacy Suits	
6 Amount (\$) \$195.82	7 Payee address; City; State; Zip Code 7805 Doncaster Austin, TX 78745	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Other Political Expenditures	(b) Description (If travel outside of Texas, complete Schedule T) Campaign signs repair and replacement
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought Office held Travis Co. Comm. 4
Date 1-28-10	Payee name Worley Printing/Neal Worley	
Amount (\$) \$677.65	Payee address; City; State; Zip Code 3217 N. IH 35 Austin, TX 78722	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T) Mailer to voters
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought Office held Travis Co. Comm.4
Date 1-28-10	Payee name Worley Printing/Neal Worley	
Amount (\$) \$1,125.00	Payee address; City; State; Zip Code 3217 N. IH 35 Austin, TX 78722	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T) Maler to voters
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought Office held Travis Co. Comm. 4
Date 1-29-10	Payee name Office Depot	
Amount (\$) \$21.60	Payee address; City; State; Zip Code 2101 South Lamar Austin, TX 78704	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Office Overhead Expense	Description (If travel outside of Texas, complete Schedule T) Campaign office supplies
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought Office held Travis Co. Comm. 4

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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

- | | | | |
|---------------------|-------------------------------|----------------------------------|--|
| Advertising Expense | Gift/Awards/Memorials 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.

1 Total pages Schedule F: 5 of 12	2 FILER NAME Margaret Gomez Campaign	3 ACCOUNT # (Ethics Commission Filers)
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4 Date 1-29-10	5 Payee name Estella French
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6 Amount (\$) \$900.00	7 Payee address; City; State; Zip Code 3113 Linnet Drive Austin, TX 78745
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Contract Labor	(b) Description (If travel outside of Texas, complete Schedule T) Contract labor for campaign services
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought	Office held Travis Co. Comm. 4
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Date 1-29-10	Payee name James Coonrod
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Amount (\$) \$425.00	Payee address; City; State; Zip Code 6809 Felipe Drive Austin, TX 78741
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Contract Labor	Description (If travel outside of Texas, complete Schedule T) Contract labor for campaign services
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought	Office held Travis Co. Comm.4
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Date 1-29-10	Payee name Gretchen Stinson
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Amount (\$) \$82.00	Payee address; City; State; Zip Code 7495 Chevy Chase Drive, #204 Austin, TX 78752
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Contract Labor	Description (If travel outside of Texas, complete Schedule T) Contract labor for campaign services
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought	Office held Travis Co. Comm. 4
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Date 1-29-10	Payee name Tom Cochran
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Amount (\$) \$48.75	Payee address; City; State; Zip Code 805 Purple Martin Pflugerville, TX 78660
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Contract labor	Description (If travel outside of Texas, complete Schedule T) Contract labor for campaign services
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought	Office held Travis Co. Comm. 4
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POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense	Gift/Awards/Memorials 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.

1 Total pages Schedule F: 6 of 12	2 FILER NAME Margaret Gomez Campaign	3 ACCOUNT # (Ethics Commission Filers)
4 Date 1-30-10	5 Payee name Sprint	
6 Amount (\$) \$130.06	7 Payee address; City; State; Zip Code P. O. Box 660075 Dallas, TX 75266-0075	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Other Political Expenditures	(b) Description (If travel outside of Texas, complete Schedule T) Campaign calls on cell
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought Office held Travis Co. Comm. 4
Date 2-1-10	Payee name Matt Moore	
Amount (\$) \$750.00	Payee address; City; State; Zip Code 1803 E. Cesar Chavez Austin, TX 78702	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Office Rental Expense	Description (If travel outside of Texas, complete Schedule T) Campaign office rent
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought Office held Travis Co. Comm.4
Date 1-29-10	Payee name Piryx, Inc.	
Amount (\$) \$112.50	Payee address; City; State; Zip Code 401 West 15, Suite 520 Austin, TX 78701	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other Political Expenditures	Description (If travel outside of Texas, complete Schedule T) Transaction fee for Officers PAC contrib.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought Office held Travis Co. Comm. 4
Date 2-1-10	Payee name U. S. Postmaster	
Amount (\$) \$84.00	Payee address; City; State; Zip Code West Fifth Street Station Austin, TX 78702	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T) Postage for mailer to constituents
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought Office held Travis Co. Comm. 4

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

- | | | | |
|---------------------|-------------------------------|----------------------------------|--|
| Advertising Expense | Gift/Awards/Memorials 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.

1 Total pages Schedule F: 7412	2 FILER NAME Margaret Gomez Campaign	3 ACCOUNT # (Ethics Commission Filers)
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4 Date 2-3-10	5 Payee name Office Depot
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6 Amount (\$) \$36.79	7 Payee address; City; State; Zip Code 2101 South Lamar Austin, TX 78704
---------------------------------	---

8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Office Overhead Expense	(b) Description (If travel outside of Texas, complete Schedule T) Campaign office supplies
---------------------------------	--	--

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought	Office held Travis Co. Comm. 4
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Date 2-5-10	Payee name Time Warner
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Amount (\$) \$60.04	Payee address; City; State; Zip Code P. O. Box 660097 Dallas, TX 75266-0097
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other Political Expenditures	Description (If travel outside of Texas, complete Schedule T) Internet service for campaign office
-------------------------------	--	---

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought	Office held Travis Co. Comm.4
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Date 2-6-10	Payee name Irene Silva
----------------	---------------------------

Amount (\$) \$67.50	Payee address; City; State; Zip Code 2502 East Oltorf, #1527 Austin, TX 78741
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Contract Labor	Description (If travel outside of Texas, complete Schedule T) Contract Labor for campaign services
-------------------------------	--	---

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought	Office held Travis Co. Comm. 4
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Date 2-6-10	Payee name Ann Pierce
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Amount (\$) \$42.50	Payee address; City; State; Zip Code 21 Waller, #1603 Austin, TX 78702
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Contract Labor	Description (If travel outside of Texas, complete Schedule T) Contract labor for campaign services
-------------------------------	--	---

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought	Office held Travis Co. Comm. 4
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense	Gift/Awards/Memorials 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.

1 Total pages Schedule F: 8 of 12	2 FILER NAME Margaret Gomez Campaign	3 ACCOUNT # (Ethics Commission Filers)
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4 Date 2-8-10	5 Payee name Ace Printing
-------------------------	-------------------------------------

6 Amount (\$) \$3,120.78	7 Payee address; City; State; Zip Code 7807 Doncaster Austin, TX 78745
------------------------------------	---

8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense	(b) Description (If travel outside of Texas, complete Schedule T) 4x8 yard signs
---------------------------------	---	---

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought	Office held Travis Co. Comm. 4
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Date 2-10-10	Payee name Cafe Services, Inc./Adam Gonzales
-----------------	---

Amount (\$) \$450.32	Payee address; City; State; Zip Code P. O. Box 651959 Austin, TX 78745
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Food Expense	Description (If travel outside of Texas, complete Schedule T) Food for meeting with voters
------------------------	--	---

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought	Office held Travis Co. Comm.4
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Date 2-16-10	Payee name Estella French
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Amount (\$) \$900.00	Payee address; City; State; Zip Code 3113 Linnet Drive Austin, TX 78745
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Contract Labor	Description (If travel outside of Texas, complete Schedule T) Contract Labor for campaign services
------------------------	--	---

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought	Office held Travis Co. Comm. 4
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Date 2-16-10	Payee name James Coonrod
-----------------	-----------------------------

Amount (\$) \$425.00	Payee address; City; State; Zip Code 6809 Felipe Drive Austin, TX 78741
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Contract Labor	Description (If travel outside of Texas, complete Schedule T) Contract labor for campaign services
------------------------	--	---

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought	Office held Travis Co. Comm. 4
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

- | | | | |
|---------------------|-------------------------------|----------------------------------|--|
| Advertising Expense | Gift/Awards/Memorials 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.

1 Total pages Schedule F: 9 of 12	2 FILER NAME Margaret Gomez Campaign	3 ACCOUNT # (Ethics Commission Filers)
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4 Date 2-16-10	5 Payee name Laurie Rogers
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6 Amount (\$) \$93.75	7 Payee address; City; State; Zip Code 1308-A Radcliff Drive Astin, TX 78753
---------------------------------	---

8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Contract labor	(b) Description (If travel outside of Texas, complete Schedule T) Contract labor for campaign services
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought	Office held Travis Co. Comm. 4
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Date 2-16-10	Payee name Ann Pierce
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Amount (\$) \$29.75	Payee address; City; State; Zip Code 21 Waller Street, #1603 Austin, TX 787802
------------------------	--

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Contract Labor	Description (If travel outside of Texas, complete Schedule T) Contract labor for campaign services
------------------------	--	---

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought	Office held Travis Co. Comm.4
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Date 2-17-10	Payee name Andrew Stanford
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Amount (\$) \$67.50	Payee address; City; State; Zip Code 114 Mandan Buda, TX 78610
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Contract Labor	Description (If travel outside of Texas, complete Schedule T) Contract Labor for campaign services
------------------------	--	---

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought	Office held Travis Co. Comm. 4
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Date 2-17-10	Payee name Richard Heine
-----------------	-----------------------------

Amount (\$) \$45.00	Payee address; City; State; Zip Code 8404 Linden Road Austin, TX 78702
------------------------	--

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Contract Labor	Description (If travel outside of Texas, complete Schedule T) Contract labor for campaign services
------------------------	--	---

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought	Office held Travis Co. Comm. 4
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POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense	Gift/Awards/Memorials 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.

1 Total pages Schedule F: 10 of 12	2 FILER NAME Margaret Gomez Campaign	3 ACCOUNT # (Ethics Commission Filers)
4 Date 2-17-10	5 Payee name Brett Eigler	
6 Amount (\$) \$138.75	7 Payee address; City; State; Zip Code 130 Cumberland Austin, TX 78704	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Contract labor	(b) Description (If travel outside of Texas, complete Schedule T) Contract labor for campaign services
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought Office held Travis Co. Comm. 4
Date 2-17-10	Payee name The Austin Chronicle	
Amount (\$) \$749.00	Payee address; City; State; Zip Code 4000 N. IH 35 Austin, TX 78765	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T) Newspaper Ad
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought Office held Travis Co. Comm.4
Date 2-17-10	Payee name Gretchen Stinson	
Amount (\$) \$136.00	Payee address; City; State; Zip Code 7495 Chevy Chase Drive, #204 Austin, TX 78752	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Contract Labor	Description (If travel outside of Texas, complete Schedule T) Contract Labor for campaign services
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought Office held Travis Co. Comm. 4
Date 2-17-10	Payee name Tom Cochran	
Amount (\$) \$112.50	Payee address; City; State; Zip Code 805 Purple Martin Pflugerville, TX 78660	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Contract Labor	Description (If travel outside of Texas, complete Schedule T) Contract labor for campaign services
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought Office held Travis Co. Comm. 4

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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

- | | | | |
|---------------------|-------------------------------|----------------------------------|--|
| Advertising Expense | Gift/Awards/Memorials 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.

1 Total pages Schedule F: 11/12	2 FILER NAME Margaret Gomez Campaign		3 ACCOUNT # (Ethics Commission Filers)
4 Date 2-17-10	5 Payee name John Abramowitz		
6 Amount (\$) \$116.25	7 Payee address; City; State; Zip Code 1800 Lavaca, #315 Austin, TX 78701		
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Contract labor	(b) Description (If travel outside of Texas, complete Schedule T) Contract labor for campaign services	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought	Office held Travis Co. Comm. 4
Date 2-17-10	Payee name Sein Leon		
Amount (\$) \$200.00	Payee address; City; State; Zip Code 3221 Plantation Drive Austin, TX 78745		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Contract Labor	Description (If travel outside of Texas, complete Schedule T) Contract labor for campaign services	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought	Office held Travis Co. Comm.4
Date 2-17-10	Payee name Darla Thompson		
Amount (\$) \$105.00	Payee address; City; State; Zip Code 508 E. Howard Drive Austin, TX 78754		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Contract Labor	Description (If travel outside of Texas, complete Schedule T) Contract Labor for campaign services	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought	Office held Travis Co. Comm. 4
Date 2-17-10	Payee name John Pesina		
Amount (\$) \$75.00	Payee address; City; State; Zip Code 130 Cumberland Austin, TX 78704		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Contract Labor	Description (If travel outside of Texas, complete Schedule T) Contract labor for campaign services	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought	Office held Travis Co. Comm. 4

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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

- | | | | |
|---------------------|-------------------------------|----------------------------------|--|
| Advertising Expense | Gift/Awards/Memorials 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.

1 Total pages Schedule F: 12 of 12	2 FILER NAME Margaret Gomez Campaign	3 ACCOUNT # (Ethics Commission Filers)
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4 Date 2-18-10	5 Payee name David Mauro/Blue Roots Strategies, Inc.
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6 Amount (\$) \$1.857.62	7 Payee address; City; State; Zip Code P. O. Box 3000053 Austin, TX 78703
------------------------------------	--

8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Consulting Expense	(b) Description (If travel outside of Texas, complete Schedule T) Consulting Expense for campaign services
---------------------------------	--	---

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought	Office held Travis Co. Comm. 4
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Date 2-18-10	Payee name Kyle Worley
-----------------	---------------------------

Amount (\$) \$96.00	Payee address; City; State; Zip Code 13306 Whitetail Trail Austin, TX 78736
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Contract Labor	Description (If travel outside of Texas, complete Schedule T) Contract labor for campaign services
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought	Office held Travis Co. Comm.4
---	--	---------------	----------------------------------

Date 2-19-10	Payee name Stacy Suits
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Amount (\$) \$153.30	Payee address; City; State; Zip Code 7807 Doncaster Austin, TX 78745
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T) Campaign Signs repair and replacement
------------------------	---	--

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought	Office held Travis Co. Comm. 4
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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 (If travel outside of Texas, complete Schedule T)
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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July 15, 2010

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

1 of 3

2 FILER NAME

Margaret Gomez Campaign

3 ACCOUNT # (Ethics Commission Filers)

4 Date
2-22-10

5 Full name of contributor out-of-state PAC (ID#: no)

Stephen M. Azia

6 Contributor address; City; State; Zip Code

11417 Broad Green Drive
Potomac, MD 20854

7 Amount of
contribution (\$)

\$50.00

8 In-kind contribution
description (if applicable)

no

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)
Don't know

10 Employer (See Instructions)
Don't know

Date
2-23-10

Full name of contributor out-of-state PAC (ID#: NO)

Emma Lou Linn

Contributor address; City; State; Zip Code

2400-B Vista Lane
Austin, TX 78703

Amount of
contribution (\$)

\$200.00

In-kind contribution
description (if applicable)

NO

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)
Psychology Professor

Employer (See Instructions)
St. Edward's University

Date
2-24-10

Full name of contributor out-of-state PAC (ID#: NO)

John Tullos Wells

Contributor address; City; State; Zip Code

117 Canterbury Hill
San Antonio, TX 78209

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

NO

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)
Don't know

Employer (See Instructions)
Don't know

Date
2-26-10

Full name of contributor out-of-state PAC (ID#: no)

Paula Marks

Contributor address; City; State; Zip Code

104 Vireo Drive
Buda, TX 78610

Amount of
contribution (\$)

\$25.00

In-kind contribution
description (if applicable)

NO

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)
Univerisy Professor

Employer (See Instructions)
St. Edward's University

Date
2-27-10

Full name of contributor out-of-state PAC (ID#: no)

Takoohy Ardash Harutunian

Contributor address; City; State; Zip Code

P. O. Box W
Austin, TX 78713-7448

Amount of
contribution (\$)

\$250.00

In-kind contribution
description (if applicable)

NO

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)
Engineer

Employer (See Instructions)
Self-Employed

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 of 3

2 FILER NAME

Margaret Gomez Campaign

3 ACCOUNT # (Ethics Commission Filers)

4 Date
2-26-10

5 Full name of contributor out-of-state PAC (ID#: NO _____)

Anne Hossarina Harutunian

6 Contributor address; City; State; Zip Code

P. O. Box W
Austin, TX 78713

7 Amount of
contribution (\$)

\$250.00

8 In-kind contribution
description (if applicable)

no

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)
Engineer

10 Employer (See Instructions)
Self-Employed

Date
2-26-10

Full name of contributor out-of-state PAC (ID#: NO _____)

Robert R. Kamm/Government Affairs

Contributor address; City; State; Zip Code

1304 Guadalupe Street
Austin, TX 78701

Amount of
contribution (\$)

\$100.00

In-kind contribution
description (if applicable)

NO

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)
Attorney

Employer (See Instructions)
Self-Employed

Date
3-7-10

Full name of contributor out-of-state PAC (ID#: NO _____)

Michael R. Aulick

Contributor address; City; State; Zip Code

700 S. Creekwood Drive
Driftwood, TX 78619

Amount of
contribution (\$)

\$50.00

In-kind contribution
description (if applicable)

NO

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)
Transportation Planner

Employer (See Instructions)
Huitt-Zollars

Date
3-7-10

Full name of contributor out-of-state PAC (ID#: NO _____)

Peter Low

Contributor address; City; State; Zip Code

4242 Westlake Drive
Austin, TX 78746-1453

Amount of
contribution (\$)

\$250.00

In-kind contribution
description (if applicable)

NO

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)
Attorney

Employer (See Instructions)
Self-Employed

Date
3-9-10

Full name of contributor out-of-state PAC (ID#: NO _____)

Velva L. Price

Contributor address; City; State; Zip Code

P. O. Box W
Austin, TX 78713-7448

Amount of
contribution (\$)

\$25.00

In-kind contribution
description (if applicable)

NO

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)
Attorney

Employer (See Instructions)
Self-Employed

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: **3 of 3**

2 FILER NAME
Margaret Gomez Campaign

3 ACCOUNT # (Ethics Commission Filers)

4 Date 3-11-10	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# Yes _____) AFSCMEde Simpson	7 Amount of contribution (\$) \$1,000.00	8 In-kind contribution description (if applicable) no
6 Contributor address; City; State; Zip Code 1625 L Street, NW Washington, DC 20036		(If travel outside of Texas, complete Schedule T)	

9 Principal occupation / Job title (See Instructions)
Union Director

10 Employer (See Instructions)
AFSCME

Date 4-2-10	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# NO _____) Michael Whelan/Graves Dougherty Hearon & Moody	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable) NO
Contributor address; City; State; Zip Code P. O. Box 98 Austin, TX 78767		(If travel outside of Texas, complete Schedule T)	

Principal occupation / Job title (See Instructions)
Attorney

Employer (See Instructions)
Graves Dougherty Hearon & Moody

Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____)	Amount of contribution (\$)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code		(If travel outside of Texas, complete Schedule T)	

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____)	Amount of contribution (\$)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code		(If travel outside of Texas, complete Schedule T)	

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____)	Amount of contribution (\$)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code		(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 EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense	Gift/Awards/Memorials 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.

1 Total pages Schedule F: 1 of 18	2 FILER NAME Margaret Gomez Campaign	3 ACCOUNT # (Ethics Commission Filers)
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4 Date 2-21-10	5 Payee name Exxon
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6 Amount (\$) \$150.00	7 Payee address; City; State; Zip Code Processing Center Del Moines, IA 50361-0001
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Other Political Expenditures	(b) Description (If travel outside of Texas, complete Schedule T) Campaign miles
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel Required	Office sought	Office held Travis Co. Comm. 4
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Date 2-21-10	Payee name Office Depot
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Amount (\$) \$19.45	Payee address; City; State; Zip Code 2101 South Lamar Austin, TX 78704
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Office Overhead Expense	Description (If travel outside of Texas, complete Schedule T) Campaign Office Supplies
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel Required	Office sought	Office held Travis Co. Comm. 4
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Date 2-22-10	Payee name Piryx
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Amount (\$) \$2.25	Payee address; City; State; Zip Code 401 West 15, Suite 520 Austin, TX 78701
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other Political Expenditures	Description (If travel outside of Texas, complete Schedule T) Transaction fee for online contribution
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought	Office held Travis Co. Comm.4
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Date 2-24-10	Payee name Piryx
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Amount (\$) \$4.50	Payee address; City; State; Zip Code 401 West 15, Suite 520 Austin, TX 78701
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other Political Expenditures	Description (If travel outside of Texas, complete Schedule T) Transaction fee for online contribution
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought	Office held Travis Co. Comm. 4
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense	Gift/Awards/Memorials 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.

1 Total pages Schedule F:	2 FILER NAME Margaret Gomez Campaign	3 ACCOUNT # (Ethics Commission Filers)
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4 Date 2-24-10	5 Payee name La Prensa Newspaper
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6 Amount (\$) \$200.00	7 Payee address; City; State; Zip Code 1704 East 5 Austin, TX 78702
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense	(b) Description (If travel outside of Texas, complete Schedule T) Half Ad about campaign issues
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel Required	Office sought	Office held Travis Co. Comm. 4
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Date 2-24-10	Payee name American Printers
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Amount (\$) \$4,759.27	Payee address; City; State; Zip Code 1606 Headway Circle Austin, TX 78754
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T) Campaign mailer for constituents
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel Required	Office sought	Office held Travis Co. Comm. 4
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Date 2-23-10	Payee name Richard Heine
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Amount (\$) \$168.15	Payee address; City; State; Zip Code 8404 Linden Road Austin, TX 78702
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Contract Labor	Description (If travel outside of Texas, complete Schedule T) Contract labor for campaign services
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought	Office held Travis Co. Comm.4
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Date 2=23-10	Payee name Sein Leon
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Amount (\$) \$316.00	Payee address; City; State; Zip Code 3221 Plantation Austin, TX 78745
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Contract Labor	Description (If travel outside of Texas, complete Schedule T) Contract labor for campaign services
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought	Office held Travis Co. Comm. 4
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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials 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.

1 Total pages Schedule F:		2 FILER NAME Margaret Gomez Campaign		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 2-24-10		5 Payee name Gretchen Stinson			
6 Amount (\$) \$60.00		7 Payee address; City; State; Zip Code 7495 Chevy Chase Drive, #204 Austin, TX 78752			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Contract Labor		(b) Description (If travel outside of Texas, complete Schedule T) Contract labor for campaign services	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Margaret Gomez/No travel Required		Office sought Office held Travis Co. Comm. 4	
Date 2-23-10		Payee name Laurie Rogers			
Amount (\$) \$63.75		Payee address; City; State; Zip Code 1308-A Radcliff Drive Austin, TX 78753			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Contract labor		Description (If travel outside of Texas, complete Schedule T) Contract labor for campaign services	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Margaret Gomez/No travel Required		Office sought Office held Travis Co. Comm. 4	
Date 2-23-10		Payee name Tom Cochran			
Amount (\$) \$67.50		Payee address; City; State; Zip Code 805 Purple Martin Pflugerville, TX 78660			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Contract Labor		Description (If travel outside of Texas, complete Schedule T) Contract labor for campaign services	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Margaret Gomez/No travel required		Office sought Office held Travis Co. Comm.4	
Date 2-24-10		Payee name U. S. Postmaster			
Amount (\$) \$2,391.55		Payee address; City; State; Zip Code Sixth Street Station Austin, TX 78701			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Office Overhead Expense		Description (If travel outside of Texas, complete Schedule T) Postage for election day mailer to voters	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Margaret Gomez/No travel required		Office sought Office held Travis Co. Comm. 4	

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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials 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.

1 Total pages Schedule F:		2 FILER NAME Margaret Gomez Campaign		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 2-23-10		5 Payee name Kyle Worley			
6 Amount (\$) \$92.00		7 Payee address; City; State; Zip Code 13306 White Tail Drive Austin, TX 78736			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Contract Labor		(b) Description (If travel outside of Texas, complete Schedule T) Contract labor for campaign services	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name Margaret Gomez/No travel Required		Office sought Office held Travis Co. Comm. 4	
Date 2-23-10		Payee name Irene Silva			
Amount (\$) \$22.50		Payee address; City; State; Zip Code 2502 East Oltorf, #1527 Austin, TX 78741			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Contract labor		Description (If travel outside of Texas, complete Schedule T) Contract labor for campaign services	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name Margaret Gomez/No travel Required		Office sought Office held Travis Co. Comm. 4	
Date 2-23-10		Payee name Brett Eigler			
Amount (\$) \$266.25		Payee address; City; State; Zip Code 130 Cumberland, #303 Austin, TX 78704			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Contract Labor		Description (If travel outside of Texas, complete Schedule T) Contract labor for campaign services	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name Margaret Gomez/No travel required		Office sought Office held Travis Co. Comm.4	
Date 2-23-10		Payee name John Pesina			
Amount (\$) \$251.25		Payee address; City; State; Zip Code 130 Cumberland, #303 Austin, TX 78704			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Contract Labor		Description (If travel outside of Texas, complete Schedule T) Contract labor for campaign services	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name Margaret Gomez/No travel required		Office sought Office held Travis Co. Comm. 4	

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POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense	Gift/Awards/Memorials 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.

1 Total pages Schedule F:	2 FILER NAME Margaret Gomez Campaign	3 ACCOUNT # (Ethics Commission Filers)
4 Date 2-23-10	5 Payee name Nicole Norgrove	
6 Amount (\$) \$131.25	7 Payee address; City; State; Zip Code 200 Robbie Lane, #406 San Marcos, TX 78666	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Contract Labor	(b) Description (If travel outside of Texas, complete Schedule T) Contract labor for campaign services
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel Required	Office sought Office held Travis Co. Comm. 4
Date 2-23-10	Payee name Tiffany Mott-Smith	
Amount (\$) \$101.25	Payee address; City; State; Zip Code 12345 Alameda Trace Circle Austin, TX 78727	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Contract labor	Description (If travel outside of Texas, complete Schedule T) Contract labor for campaign services
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel Required	Office sought Office held Travis Co. Comm. 4
Date 2-25-10	Payee name Lucia Barbera	
Amount (\$) \$67.50	Payee address; City; State; Zip Code P. O. Box 8259 Austin, TX 78713	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Contract Labor	Description (If travel outside of Texas, complete Schedule T) Contract labor for campaign services
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought Office held Travis Co. Comm.4
Date 2-25-10	Payee name Ann Pierce	
Amount (\$) \$29.75	Payee address; City; State; Zip Code 21 Waller, #1603 Austin, TX 78702	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Contract Labor	Description (If travel outside of Texas, complete Schedule T) Contract labor for campaign services
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought Office held Travis Co. Comm. 4

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POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense	Gift/Awards/Memorials 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.

1 Total pages Schedule F:	2 FILER NAME Margaret Gomez Campaign	3 ACCOUNT # (Ethics Commission Filers)
4 Date 2-27-10	5 Payee name Darla Thompson	
6 Amount (\$) \$30.00	7 Payee address; City; State; Zip Code 30611 McKinney Tomball, TX 77375	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Contract Labor	(b) Description (If travel outside of Texas, complete Schedule T) Contract labor for campaign services
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel Required	Office sought Office held Travis Co. Comm. 4
Date 3-4-10	Payee name Darla Thompson	
Amount (\$) \$166.88	Payee address; City; State; Zip Code 30611 McKinney Tomball, TX 77375	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Contract labor	Description (If travel outside of Texas, complete Schedule T) Contract labor for campaign services
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel Required	Office sought Office held Travis Co. Comm. 4
Date 3-4-10	Payee name Richard Heine	
Amount (\$) \$435.00	Payee address; City; State; Zip Code 8404 Linden Road Austin, TX 78702	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Contract Labor	Description (If travel outside of Texas, complete Schedule T) Contract labor for campaign services
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought Office held Travis Co. Comm.4
Date 2-27-10	Payee name Worley Printing/Neal Worley	
Amount (\$) \$3,000.00	Payee address; City; State; Zip Code 3217 N. IH 35 Austin, TX 78722	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Contract Labor	Description (If travel outside of Texas, complete Schedule T) Contract labor for campaign services
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought Office held Travis Co. Comm. 4

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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials 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.

1 Total pages Schedule F:	2 FILER NAME Margaret Gomez Campaign	3 ACCOUNT # (Ethics Commission Filers)
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4 Date 3-1-10	5 Payee name Leland Beatty
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6 Amount (\$) \$1,750.00	7 Payee address; City; State; Zip Code 1103 Upland Drive Austin, TX 78741
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Consulting Expense	(b) Description (If travel outside of Texas, complete Schedule T) Phone list for Precinct 4 campaign
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel Required	Office sought	Office held Travis Co. Comm. 4
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Date 3-4-10	Payee name Matt Moore
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Amount (\$) \$188.08	Payee address; City; State; Zip Code 1803 E. Cesar Chavez Austin, TX 78702
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Office Overhead Expense	Description (If travel outside of Texas, complete Schedule T) Phone bill, copy paper at campaign ofc.
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel Required	Office sought	Office held Travis Co. Comm. 4
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Date 3-4-10	Payee name Robert Betancourt
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Amount (\$) \$75.00	Payee address; City; State; Zip Code 409 E. William Cannon Drive, #205 Austin, TX 78745
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Contract Labor	Description (If travel outside of Texas, complete Schedule T) Contract labor for campaign services
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought	Office held Travis Co. Comm.4
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Date 3-4-10	Payee name Jacob Carter
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Amount (\$) \$116.25	Payee address; City; State; Zip Code 3329 East 12 Austin, TX 78721
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Contract Labor	Description (If travel outside of Texas, complete Schedule T) Contract labor for campaign services
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought	Office held Travis Co. Comm. 4
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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials 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.

1 Total pages Schedule F:	2 FILER NAME Margaret Gomez Campaign	3 ACCOUNT # (Ethics Commission Filers)
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4 Date 3-4-10	5 Payee name Gretchen Stinson
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6 Amount (\$) \$216.00	7 Payee address; City; State; Zip Code 7495 Chevy Chase, #204 Austin, TX 78752
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Contract Labor	(b) Description (If travel outside of Texas, complete Schedule T) Contract labor for campaign services
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel Required	Office sought	Office held Travis Co. Comm. 4
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Date 3-4-10	Payee name James Coonrod
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Amount (\$) \$425.00	Payee address; City; State; Zip Code 6809 Felipe Drive Austin, TX 78741
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Contract Labor	Description (If travel outside of Texas, complete Schedule T) Contract labor for campaign services
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel Required	Office sought	Office held Travis Co. Comm. 4
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Date 3-4-10	Payee name Laurie Rogers
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Amount (\$) \$148.13	Payee address; City; State; Zip Code 1308-A Radcliff Drive Austin, TX 78753
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Contract Labor	Description (If travel outside of Texas, complete Schedule T) Contract labor for campaign services
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought	Office held Travis Co. Comm.4
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Date 3-4-10	Payee name Melissa Rogers
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Amount (\$) \$101.25	Payee address; City; State; Zip Code 1308-A Radcliff Drive Austin, TX 78753
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Contract Labor	Description (If travel outside of Texas, complete Schedule T) Contract labor for campaign services
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought	Office held Travis Co. Comm. 4
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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

- | | | | |
|---------------------|-------------------------------|----------------------------------|--|
| Advertising Expense | Gift/Awards/Memorials 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.

1 Total pages Schedule F:	2 FILER NAME Margaret Gomez Campaign	3 ACCOUNT # (Ethics Commission Filers)
4 Date 3-4-10	5 Payee name Irene Silva	
6 Amount (\$) \$67.50	7 Payee address; City; State; Zip Code 2502 E. Oltorf, #1527 Austin, TX 78741	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Contract Labor	(b) Description (If travel outside of Texas, complete Schedule T) Contract labor for campaign services
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel Required	Office sought Office held Travis Co. Comm. 4
Date 3-4-10	Payee name Brett Eigler	
Amount (\$) \$345.00	Payee address; City; State; Zip Code 130 Cumberland, #303 Austin, TX 78704	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Contract Labor	Description (If travel outside of Texas, complete Schedule T) Contract labor for campaign services
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel Required	Office sought Office held Travis Co. Comm. 4
Date 3-4-10	Payee name Tiffany Mott-Smith	
Amount (\$) \$298.13	Payee address; City; State; Zip Code 12345 Alameda Trace Circle Austin, TX 78727	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Contract Labor	Description (If travel outside of Texas, complete Schedule T) Contract labor for campaign services
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought Office held Travis Co. Comm.4
Date 3-4-10	Payee name Luciana Barrera	
Amount (\$) \$161.25	Payee address; City; State; Zip Code 1606 Headway Circle Austin, TX 78754	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Contract Labor	Description (If travel outside of Texas, complete Schedule T) Contract labor for campaign services
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought Office held Travis Co. Comm. 4

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense	Gift/Awards/Memorials 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.

1 Total pages Schedule F:	2 FILER NAME Margaret Gomez Campaign	3 ACCOUNT # (Ethics Commission Filers)
4 Date 3-4-10	5 Payee name Patrick Mireur	
6 Amount (\$) \$75.00	7 Payee address; City; State; Zip Code 800 Brazos, #1206 Austin, TX 78701	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Contract Labor	(b) Description (If travel outside of Texas, complete Schedule T) Contract labor for campaign services
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel Required	Office sought Office held Travis Co. Comm. 4
Date 3-4-10	Payee name Tom Cochran	
Amount (\$) \$90.00	Payee address; City; State; Zip Code 805 Purple martin Pflugerville, TX 79660	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Contract Labor	Description (If travel outside of Texas, complete Schedule T) Contract labor for campaign services
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel Required	Office sought Office held Travis Co. Comm. 4
Date 3-4-10	Payee name Sein Leon	
Amount (\$) \$381.50	Payee address; City; State; Zip Code 3221 Plantation Austin, TX 78745	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Contract Labor	Description (If travel outside of Texas, complete Schedule T) Contract labor for campaign services
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought Office held Travis Co. Comm.4
Date 3-4-10	Payee name John Pesina	
Amount (\$) \$363.75	Payee address; City; State; Zip Code 130 Cumberland Road, #303 Austin, TX 78704	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Contract Labor	Description (If travel outside of Texas, complete Schedule T) Contract labor for campaign services
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought Office held Travis Co. Comm. 4

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POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense	Gift/Awards/Memorials 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.

1 Total pages Schedule F:	2 FILER NAME Margaret Gomez Campaign	3 ACCOUNT # (Ethics Commission Filers)
4 Date 3-4-10	5 Payee name Nicole Norgrove	
6 Amount (\$) \$112.50	7 Payee address; City; State; Zip Code 200 Robbie Lane, #406 San Marcos, TX 78666	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Contract Labor	(b) Description (If travel outside of Texas, complete Schedule T) Contract labor for campaign services
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel Required	Office sought Office held Travis Co. Comm. 4
Date 3-4-10	Payee name Matthew Farrell	
Amount (\$) \$52.50	Payee address; City; State; Zip Code 500 East 7 Austin, TX 78701	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Contract Labor	Description (If travel outside of Texas, complete Schedule T) Contract labor for campaign services
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel Required	Office sought Office held Travis Co. Comm. 4
Date 3-4-10	Payee name Kyle Worley	
Amount (\$) \$71.25	Payee address; City; State; Zip Code 13306 White Tail Trail Austin, TX 78736	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Contract Labor	Description (If travel outside of Texas, complete Schedule T) Contract labor for campaign services
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought Office held Travis Co. Comm.4
Date 3-4-10	Payee name Daniel Terna	
Amount (\$) \$116.25	Payee address; City; State; Zip Code 4004-A Maplewood Avenue Austin, TX 78722	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Contract Labor	Description (If travel outside of Texas, complete Schedule T) Contract labor for campaign services
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought Office held Travis Co. Comm. 4

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

- | | | | |
|---------------------|-------------------------------|----------------------------------|--|
| Advertising Expense | Gift/Awards/Memorials 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.

1 Total pages Schedule F:		2 FILER NAME Margaret Gomez Campaign		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 3-4-10		5 Payee name Estella French			
6 Amount (\$) \$1,104.86		7 Payee address; City; State; Zip Code 3113 Linnet Drive Austin, TX 78745			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Contract Labor		(b) Description (If travel outside of Texas, complete Schedule T) Contract labor for campaign services	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name Margaret Gomez/No travel Required		Office sought Office held Travis Co. Comm. 4	
Date 3-5-10		Payee name Sprint			
Amount (\$) \$127.72		Payee address; City; State; Zip Code P. O. Box 660075 Dallas, TX 75266-0075			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Other Political Expenditures		Description (If travel outside of Texas, complete Schedule T) Campaign calls on cell	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name Margaret Gomez/No travel Required		Office sought Office held Travis Co. Comm. 4	
Date 3-5-10		Payee name David Mauro/Blue Roots Strategies, Inc.			
Amount (\$) \$1,863.00		Payee address; City; State; Zip Code P. O. Box 300053 Austin, TX 78703			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Consulting Expense		Description (If travel outside of Texas, complete Schedule T) Design of mailer to voters	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name Margaret Gomez/No travel required		Office sought Office held Travis Co. Comm.4	
Date 3-5-10		Payee name Lauren McLaughlin			
Amount (\$) \$100.00		Payee address; City; State; Zip Code 1305 Baylor San Marcos, TX 78666			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Advertising Expense		Description (If travel outside of Texas, complete Schedule T) Campaign pictures for mailers to voters	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name Margaret Gomez/No travel required		Office sought Office held Travis Co. Comm. 4	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED					

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials 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.

1 Total pages Schedule F:	2 FILER NAME Margaret Gomez Campaign	3 ACCOUNT # (Ethics Commission Filers)
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4 Date 3-7-10	5 Payee name Time Warner
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6 Amount (\$) \$60.04	7 Payee address; City; State; Zip Code P.O. Box 660097 Dallas, TX 75266-0097
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Other Political Expenditures	(b) Description (If travel outside of Texas, complete Schedule T) Internet services for campaign office
---------------------------------	---	---

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel Required	Office sought	Office held Travis Co. Comm. 4
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Date 3-10-10	Payee name Ignor Postrekhin
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Amount (\$) \$78.75	Payee address; City; State; Zip Code 5604 Northdale Austin, TX 78723
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Contract Labor	Description (If travel outside of Texas, complete Schedule T) Contract labor for campaign services
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel Required	Office sought	Office held Travis Co. Comm. 4
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Date 3-10-10	Payee name Ann Pierce
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Amount (\$) \$25.50	Payee address; City; State; Zip Code 21 Waller, #1603 Austin, TX 78702
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Contract Labor	Description (If travel outside of Texas, complete Schedule T) Contract labor for campaign services
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought	Office held Travis Co. Comm.4
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Date 3-31-10	Payee name Piryx, Inc.
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Amount (\$) \$37.38	Payee address; City; State; Zip Code 401 West 15, Suite 520 Austin, TX 78701
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other Political Expenditures	Description (If travel outside of Texas, complete Schedule T) Transaction fee for online contribution
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought	Office held Travis Co. Comm. 4
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense	Gift/Awards/Memorials 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.

1 Total pages Schedule F:	2 FILER NAME Margaret Gomez Campaign	3 ACCOUNT # (Ethics Commission Filers)
4 Date 3-10-10	5 Payee name Estella French	
6 Amount (\$) \$200.00	7 Payee address; City; State; Zip Code 3113 Linnet Drive Austin, TX 78745	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Contract Labor	(b) Description (If travel outside of Texas, complete Schedule T) Contract labor for campaign services
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel Required	Office sought Office held Travis Co. Comm. 4
Date 3-12-10	Payee name Austin Community College	
Amount (\$) \$50.00	Payee address; City; State; Zip Code 5930 Middle Fiskville Road Austin, TX 78752-4390	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Contract Labor	Description (If travel outside of Texas, complete Schedule T) Contract labor for campaign services
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel Required	Office sought Office held Travis Co. Comm. 4
Date 3-13-10	Payee name Sein Leon	
Amount (\$) \$38.50	Payee address; City; State; Zip Code 3221 Plantation Austin, TX 78745	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Contract Labor	Description (If travel outside of Texas, complete Schedule T) Contract labor for campaign services
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought Office held Travis Co. Comm.4
Date 3-13-10	Payee name U. S. Postmaster	
Amount (\$) \$44.00	Payee address; City; State; Zip Code South Congress Station Austin, TX 78704	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T) Postage for mailer to voters
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought Office held Travis Co. Comm. 4

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense	Gift/Awards/Memorials 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.

1 Total pages Schedule F:		2 FILER NAME Margaret Gomez Campaign		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 3-24-10		5 Payee name Erin Kelly			
6 Amount (\$) \$80.00		7 Payee address; City; State; Zip Code 4712 Depew, #203 Austin, TX 78751			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Contract Labor		(b) Description (If travel outside of Texas, complete Schedule T) Contract labor for campaign services	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Margaret Gomez/No travel Required		Office sought Office held Travis Co. Comm. 4	
Date 3-27-10		Payee name Guadalupe Sosa			
Amount (\$) \$100.00		Payee address; City; State; Zip Code P. O Box 40205 Austin, TX 78704			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Contribution by Candidate		Description (If travel outside of Texas, complete Schedule T) Contribution to election campaign fund	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Margaret Gomez/No travel Required		Office sought Office held Travis Co. Comm. 4	
Date 3-27-10		Payee name Best Buy			
Amount (\$) \$102.83		Payee address; City; State; Zip Code 4970 U. S. 290W Austin, TX 78735			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Other Political Expenditures		Description (If travel outside of Texas, complete Schedule T) Cell phone upgrade to accept/make calls	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Margaret Gomez/No travel required		Office sought Office held Travis Co. Comm.4	
Date 4-4-10		Payee name Sprint			
Amount (\$) \$124.89		Payee address; City; State; Zip Code P. O. Box 660075 Dallas, TX 75266-0075			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Other Political Expenditures		Description (If travel outside of Texas, complete Schedule T) Campaign calls on cell	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Margaret Gomez/No travel required		Office sought Office held Travis Co. Comm. 4	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense	Gift/Awards/Memorials 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.

1 Total pages Schedule F:	2 FILER NAME Margaret Gomez Campaign	3 ACCOUNT # (Ethics Commission Filers)
4 Date 4-9-10	5 Payee name Time Warner	
6 Amount (\$) \$59.91	7 Payee address; City; State; Zip Code P. O. Box 660097 Dallas, TX 75266-0097	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Other Political Expenditures	(b) Description (If travel outside of Texas, complete Schedule T) Internet services at campaign office
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel Required	Office sought Travis Co. Comm. 4
4 Date 4-19-10	5 Payee name San Jose Catholic War Veterans, Post 1805	
6 Amount (\$) \$100.00	7 Payee address; City; State; Zip Code 4913 South Congress Austin, TX 78704	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Memorial Expense	(b) Description (If travel outside of Texas, complete Schedule T) Contribution for Pete Casarez' funeral
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel Required	Office sought Travis Co. Comm. 4
4 Date 4-23-10	5 Payee name Exxon	
6 Amount (\$) \$150.00	7 Payee address; City; State; Zip Code Processing Center Des Moines, IA 50361-0001	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Other Political Expenditures	(b) Description (If travel outside of Texas, complete Schedule T) Campaign miles on vehicle
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought Travis Co. Comm.4
4 Date 4-24-10	5 Payee name Walmart	
6 Amount (\$) \$63.25	7 Payee address; City; State; Zip Code 710 East Ben White Austin, TX 78704	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Office Overhead Expense	(b) Description (If travel outside of Texas, complete Schedule T) Campaign office supplies
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought Travis Co. Comm. 4

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials 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.

1 Total pages Schedule F:	2 FILER NAME Margaret Gomez Campaign	3 ACCOUNT # (Ethics Commission Filers)
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4 Date 6-3-10	5 Payee name Sprint
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6 Amount (\$) \$92.72	7 Payee address; City; State; Zip Code P. O. Box 660075 Dallas, TX 75266-0075
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Other Political Expenditures	(b) Description (If travel outside of Texas, complete Schedule T) Campaign calls on cell
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel Required	Office sought	Office held Travis Co. Comm. 4
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Date 6-7-10	Payee name Time Warner
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Amount (\$) \$113.51	Payee address; City; State; Zip Code P. O. Box 660075 Dallas, TX 75266-0075
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other Political Expenditures	Description (If travel outside of Texas, complete Schedule T) 2 months' internet service in camp. office
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel Required	Office sought	Office held Travis Co. Comm. 4
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Date 6-8-10	Payee name La Prensa Newspaper
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Amount (\$) \$300.00	Payee address; City; State; Zip Code 1704 East 5 Austin, TX 78702
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T) Campaign ad in newspaper about election
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought	Office held Travis Co. Comm.4
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Date 6-21-10	Payee name Best Buy
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Amount (\$) \$725.25	Payee address; City; State; Zip Code 4970 W. Highway 290 Austin, TX 78735
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other Political Expenditures	Description (If travel outside of Texas, complete Schedule T) Upgrade of laptop for campaign services
-------------------------------	--	--

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought	Office held Travis Co. Comm. 4
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials 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.

1 Total pages Schedule F:	2 FILER NAME Margaret Gomez Campaign	3 ACCOUNT # (Ethics Commission Filers)
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4 Date 6-30-10	5 Payee name U. S. Postmaster
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6 Amount (\$) \$85.00	7 Payee address; City; State; Zip Code South Congress Station Austin, TX 78704
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Other Political Expenditures	(b) Description (If travel outside of Texas, complete Schedule T) Renewal of Campaign P. O. Box
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel Required	Office sought	Office held Travis Co. Comm. 4
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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 (If travel outside of Texas, complete Schedule T)
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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 (If travel outside of Texas, complete Schedule T)
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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 (If travel outside of Texas, complete Schedule T)
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

FEC FORM 1

STATEMENT OF ORGANIZATION

(See instructions)

Office use only

1. NAME OF COMMITTEE (in full)

(Check if name is changed)

Example: If typing, type over the lines

12FE4M5

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES PEOPLE

ADDRESS (number and street)

1625 L STREET NW

(Check if address is changed)

WASHINGTON

DC

20036

CITY ▲

STATE ▲

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address)

(Check if address is changed)

ltaggart@afscme.org

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address is changed)

NONE

2. DATE

MM / DD / YYYY
07 / 06 / 2010

3. FEC IDENTIFICATION NUMBER

C C00011114

4. IS THIS STATEMENT

NEW (N)

OR

AMENDED (A)

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete

Type or Print Name of Treasurer

LEE A. SAUNDERS

Signature of Treasurer

Electronically Filed by LEE A. SAUNDERS

Date

MM / DD / YYYY
07 / 06 / 2010

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g.

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS

Office Use Only

For further information contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-694-1100

FEC FORM 1
(Revised 02/2009)

Write or Type Committee Name

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES P E O P L E

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES, AFL-CIO

Mailing Address

1625 L STREET NW

WASHINGTON

DC

20036

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship:

Connected Organization

Affiliated Committee

Joint Fundraising Representative

Leadership PAC Sponsor

7. Custodian of Records: Identify by name, address, (phone number -- optional), and position of the person in possession of Committee books and records.

Full Name

CHARLES JURGONIS

Mailing Address

1625 L Street NW

Washington

DC

20036

Title or Position ▼

CITY ▲

STATE ▲

ZIP CODE ▲

DIRECTOR

Telephone number

202

429

1007

8. Treasurer: List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name of Treasurer

LEE A. SAUNDERS

Mailing Address

1625 L Street NW

Washington

DC

20036

Title or Position ▼

CITY ▲

STATE ▲

ZIP CODE ▲

SECRETARY-TREASURER

Telephone number

202

429

1200

Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

[ADDITIONAL]

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

[ADDITIONAL]

Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

DISTRICT COUNCIL 37-AFSCME PUBLIC EMPLOYEES ORGANIZED FOR POL & LEG EQUALITY (DC37PEOPLE

Mailing Address

125 Barclay Street

New York

NY

10007

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship:

Connected Organization

Affiliated Committee

Joint Fundraising Representative

Leadership PAC Sponsor

[ADDITIONAL]

Designated Agent

Full Name

Mailing Address

Title or Position ▼

CITY ▲

STATE ▲

ZIP CODE ▲

Telephone number

Joint Fundraiser Participant

[ADDITIONAL]

FEC ID number

C

October 2, 2010

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

Margaret Gomez Campaign

3 ACCOUNT # (Ethics Commission Filers)

4 Date
7-7-10

5 Full name of contributor out-of-state PAC (ID#: NO)

Janice Cartwright/Real Estate Council of Austin

6 Contributor address; City; State; Zip Code

98 San Jacinto, Suite 510
Austin, TX 78701

7 Amount of contribution (\$)

\$750.00

8 In-kind contribution description (if applicable)

No

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)
Executive Director

10 Employer (See Instructions)
Real Estate Council of Austin

Date
9-17-10

Full name of contributor out-of-state PAC (ID#: NO)

Richard Hoffman

Contributor address; City; State; Zip Code

5621 Hartson
Kyle, TX 78640

Amount of contribution (\$)

\$50.00

In-kind contribution description (if applicable)

NO

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)
Don't know

Employer (See Instructions)
Don't know

Date

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

Contributor address; City; State; Zip Code

Amount of contribution (\$)

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 (\$)

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 (\$)

In-kind contribution description (if applicable)

(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 EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense	Gift/Awards/Memorials 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.

1 Total pages Schedule F: 1 of 2	2 FILER NAME Margaret Gomez Campaign	3 ACCOUNT # (Ethics Commission Filers)
4 Date 7-1-10	5 Payee name Sprint	
6 Amount (\$) \$117.89	7 Payee address; City; State; Zip Code P. O. Box 660075 Dallas, TX 75266-0075	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Other Political Expenditures	(b) Description (If travel outside of Texas, complete Schedule T) Campaign calls on cell
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought Travis Co. Comm. 4
Date 7-1-10	Payee name Worley Printing/Neal Worley	
Amount (\$) \$2,000.00	Payee address; City; State; Zip Code 3217 N. IH 35 Austin, TX 78722	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T) Mailer to voters
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office held Travis Co. Comm. 4
Date 7-30-10	Payee name Sprint	
Amount (\$) \$44.58	Payee address; City; State; Zip Code P. O. Box 660075 Dallas, TX 75266-0075	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other Political Expenditures	Description (If travel outside of Texas, complete Schedule T) Campaign calls on cell
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office held Travis Co. Comm. 4
Date 8-6-10	Payee name Austin AFL-CIO Council/Susan Harry	
Amount (\$) \$310.00	Payee address; City; State; Zip Code P. O. Box 301075 Austin, TX 78703	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising Expense	Description (If travel outside of Texas, complete Schedule T) Half page ad in Labor Day program
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office held Travis Co. Comm. 4

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POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense	Gift/Awards/Memorials 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.

1 Total pages Schedule F: 2 of 2	2 FILER NAME Margaret Gomez Campaign	3 ACCOUNT # (Ethics Commission Filers)
4 Date 8-27-10	5 Payee name Worley Printing/ Neal Worley	
6 Amount (\$) \$700.53	7 Payee address; City; State; Zip Code 3217 N. IH 35 Austin, TX 78722	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising Expense	(b) Description (If travel outside of Texas, complete Schedule T) Mailer to voters
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought Office held Travis Co. Comm. 4
Date 9-1-10	Payee name South Austin Democrats/Alicia Del Rio	
Amount (\$) \$125.00	Payee address; City; State; Zip Code P. O. Box 152592 Austin, TX 78715	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Contribution by Candidate	Description (If travel outside of Texas, complete Schedule T) Sponsor for fund raiser
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought Office held Travis Co. Comm. 4
Date 9-2-10	Payee name Sprint	
Amount (\$) \$53.50	Payee address; City; State; Zip Code P. O. Box 660075 Dallas, TX 75266-0075	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other Political Expenditures	Description (If travel outside of Texas, complete Schedule T) Campaign calls on cell
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought Office held Travis Co. Comm. 4
Date 9-17-10	Payee name Piryx, Inc.	
Amount (\$) \$2.25	Payee address; City; State; Zip Code 400 West 15, Suite 510 Austin, TX 78701	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Other Political Expenditures	Description (If travel outside of Texas, complete Schedule T) Transaction fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name Margaret Gomez/No travel required	Office sought Office held Travis Co. Comm. 4

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October 25, 2010

**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: 1	
2 FILER NAME <i>Margaret Gómez Campaign</i>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <i>10/22/10</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>HSA Home Pac (Robert Kleeson)</i>	7 Amount of contribution (\$) <i>\$ 250.00</i>	8 In-kind contribution description (if applicable) <input checked="" type="checkbox"/>
6 Contributor address; City; State; Zip Code <i>8140 Exchange Drive Austin, TX 78754</i>		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 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 (\$)	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 <input type="checkbox"/> out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)	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 <input type="checkbox"/> out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)	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 <input type="checkbox"/> out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

- | | | | |
|---------------------|-------------------------------|----------------------------------|--|
| Advertising Expense | Gift/Awards/Memorials 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.

1 Total pages Schedule F: <i>1</i>		2 FILER NAME <i>Margaret Gomez Campaign</i>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <i>10/4/10</i>		5 Payee name <i>Network, Social Justice Lobby</i>			
6 Amount (\$) <i>\$100.00</i>		7 Payee address; City; State; Zip Code <i>25 E Street, NW, Ste 200 Washington, DC 20001</i>			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) <i>Membership</i>		(b) Description (If travel outside of Texas, complete Schedule T)	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name <i>Margaret J. Gomez</i>		Office sought <i>Co. Comm, Pet 4</i>	
Date <i>10/4/10</i>		Payee name <i>United East Austin Coalition</i>			
Amount (\$) <i>\$50.00</i>		Payee address; City; State; Zip Code <i>1511 Haskell Austin, TX 78702</i>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <i>Sponsorship</i>		Description (If travel outside of Texas, complete Schedule T) <i>Columbus Day/Dia de la Raza</i>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name <i>Margaret J. Gomez</i>		Office sought <i>Co. Comm, Pet 4</i>	
Date <i>10/4/10</i>		Payee name <i>Greater East Austin Youth Association</i>			
Amount (\$) <i>\$50.00</i>		Payee address; City; State; Zip Code <i>40 Jason Nassour 508 W. 14 Austin, TX 78701</i>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <i>Sponsorship</i>		Description (If travel outside of Texas, complete Schedule T) <i>Fund Raiser for youth group.</i>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name <i>Margaret J. Gomez</i>		Office sought <i>Co. Comm Pet 4</i>	
Date <i>10/6/10</i>		Payee name <i>Sprint</i>			
Amount (\$) <i>75.00</i>		Payee address; City; State; Zip Code <i>P.O. Box 660075 Dallas, TX 75266-0075</i>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <i>Political Calls</i>		Description (If travel outside of Texas, complete Schedule T) <i>For Demo Party candidates</i>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name <i>Margaret J. Gomez</i>		Office sought <i>Co. Comm, Pet 4</i>	

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