

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

8032

FORM C/OH COVER SHEET PG 1

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

1 ACCOUNT #
(Ethics Commission Filers)

2 Total pages filed:
35

3 CANDIDATE /
OFFICEHOLDER
NAME

MS / MRS / MR FIRST MI
Margaret J.
NICKNAME LAST SUFFIX
Gomez

OFFICE USE ONLY

Date Received
Date Hand-delivered or Postmarked
Receipt Amount
Date Processed
Date Imaged

Dana DeBeauvoir
Travis County Clerk
Travis County, Texas
13 JAN 15 PM 3:41
FILED FOR RECORD

4 CANDIDATE /
OFFICEHOLDER
MAILING
ADDRESS

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
P.O. Box 42637 Austin TX 78704
Austin, TX 78704

change of address

5 CANDIDATE/
OFFICEHOLDER
PHONE

AREA CODE PHONE NUMBER EXTENSION
(512) 762-2016

6 CAMPAIGN
TREASURER
NAME

MS / MRS / MR FIRST MI
Walter
NICKNAME LAST SUFFIX
Timberlake

7 CAMPAIGN
TREASURER
ADDRESS
(residence or business)

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE
2006 Boulder Avenue Austin TX 78704

8 CAMPAIGN
TREASURER
PHONE

AREA CODE PHONE NUMBER EXTENSION
(512) 482-6688

9 REPORT TYPE

January 15 30th day before election Runoff 15th day after campaign treasurer appointment (officeholder only)
 July 15 8th day before election Exceeded \$500 limit Final report (Attach C/OH - FR)

10 PERIOD
COVERED

Month Day Year THROUGH Month Day Year
07 / 01 / 12 THROUGH 12 / 31 / 12

11 ELECTION

ELECTION DATE Year
Month Day Year
/ NA /
ELECTION TYPE
 Primary Runoff General Special
OFFICEHOLDER'S REPORT

12 OFFICE

OFFICE HELD (if any)
TRAVIS COUNTY COMMISSIONER, Pct. 4

13 OFFICE SOUGHT (if known)

-

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

14 C/OH NAME Margaret Gomez Campaign 15 ACCOUNT # (Ethics Commission Filers)

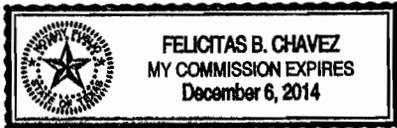
16 NOTICE FROM POLITICAL COMMITTEE(S)

THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.

<input type="checkbox"/> GENERAL <input checked="" type="checkbox"/> SPECIFIC <input type="checkbox"/> additional pages	COMMITTEE TYPE	COMMITTEE NAME
		<u>Margaret Gomez Campaign</u>
	COMMITTEE ADDRESS	<u>P.O. Box 42037 Austin, TX 78704</u>
	COMMITTEE CAMPAIGN TREASURER NAME	<u>Walter Timberlake</u>
	COMMITTEE CAMPAIGN TREASURER ADDRESS	<u>2006 Bouldin Avenue Austin, TX 78704</u>

17 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ 825.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 30,124.21
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ 901.64
	4. TOTAL POLITICAL EXPENDITURES	\$ 10,178.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$30,558.12
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$-0-

18 AFFIDAVIT



I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Margaret J. Gomez
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Margaret J. Gomez, this the 15th day of January, 20 13, to certify which, witness my hand and seal of office.

Felicitas B. Chavez
Signature of officer administering oath

Felicitas B. Chavez
Printed name of officer administering oath

Notary Public
Title of officer administering oath

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

1 of 18

2 FILER NAME

Margaret Gómez Casperon

3 ACCOUNT # (Ethics Commission Filers)

4 Date

7/30/12

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

Peter Cesaro

7 Amount of contribution (\$)

\$250.00

8 In-kind contribution description (if applicable)

—

6 Contributor address; City; State; Zip Code

P.O. Box 98 Austin, TX 78769

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

Attorney-at-Law

10 Employer (See Instructions)

Gross, Daugherty, Neeson & Massey

Date

7/30/12

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

Charlie Sette

Amount of contribution (\$)

\$100.00

In-kind contribution description (if applicable)

—

Contributor address; City; State; Zip Code

14741 Arrowhead Drive
Valente, TX 78641

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Executive Director

Employer (See Instructions)

Downtown Alliance

Date

7/30/12

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

Jerry Harris

Amount of contribution (\$)

\$2,500.00

In-kind contribution description (if applicable)

—

Contributor address; City; State; Zip Code

111 Congress Avenue, Ste 1400
Austin, TX 78701

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Attorney-at-Law

Employer (See Instructions)

Brown The Arnold PAC

Date

7/30/12

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

Rady Colmenero

Amount of contribution (\$)

\$100.00

In-kind contribution description (if applicable)

—

Contributor address; City; State; Zip Code

700 Lavaca, Ste 607
Austin, TX 78701

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Attorney-at-Law

Employer (See Instructions)

Mitchell and Colmenero, LLP

Date

7/30/12

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

Bill Mitchell

Amount of contribution (\$)

\$500.00

In-kind contribution description (if applicable)

—

Contributor address; City; State; Zip Code

3801 Capital of TX Hwy, N, Ste 1200
Austin, TX 78746

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Home Builder

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 18

2 FILER NAME

Margaret Gomez Campaign

3 ACCOUNT # (Ethics Commission Filers)

4 Date

8/8/12

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

Alex Leo

Travis County Sheriff's Law Enforcement Association PAC

6 Contributor address; City; State; Zip Code

4708 Snake Eagle Cove

Austin TX 78738

7 Amount of contribution (\$)

\$2,500.00

8 In-kind contribution description (if applicable)

—

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

TRAVIS COUNTY SHERIFF'S CORRECTIONS OFFICER

10 Employer (See Instructions)

TRAVIS COUNTY

Date

10/22/12

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

Deposit of Cash

Contributor address; City; State; Zip Code

FISH FRY SUPPORTERS PAID CASH
AT DOOR. AT THE OFFICE BAR
3526 E. 7 ; AUSTIN, TX 78202

Amount of contribution (\$)

400.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

NA

Employer (See Instructions)

NA

Date

8/17/12

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

Piryo

Contributor address; City; State; Zip Code

Unknown Contributor (Checked with ABC Bank)

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)

Unknown

Employer (See Instructions)

Unknown

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

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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 18

2 FILER NAME

Margaret Gomez Campuzano

3 ACCOUNT # (Ethics Commission Filers)

4 Date

7/30/12

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

R. Clarke Heidreich

6 Contributor address; City; State; Zip Code

3702 Eastledge Drive
Austin, TX 78731

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)

Attorney at Law

10 Employer (See Instructions)

Graves, Daugherty, Hearon & Moody

Date

7/30/12

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

Neel White

Contributor address; City; State; Zip Code

4220 River Garden Trail
Austin, TX 78746

Amount of contribution (\$)

\$1,000.00

In-kind contribution description (if applicable)

—

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Construction

Employer (See Instructions)

White Construction Company

Date

7/30/12

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

Howard D. Falkenberg

Contributor address; City; State; Zip Code

P.O. Box 123
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)

Public Relations

Employer (See Instructions)

Self-Employed

Date

8/8/12

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

FRANK Mc Intyre
TRAVIS COUNTY SHERIFFS OFFICERS ASSOCIATION PAC

Contributor address; City; State; Zip Code

400 West 14, Ste 220
Austin, TX 78701

Amount of contribution (\$)

\$1,000.00

In-kind contribution description (if applicable)

—

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Corrections OFFICERS

Employer (See Instructions)

TRAVIS COUNTY

Date

8/8/12

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

Andrew Ramirez

Contributor address; City; State; Zip Code

10301 River Plantation Drive
Austin, TX 78747

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)

Businessman

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:

4 of 18

2 FILER NAME

Margaret Gomez Campaign

3 ACCOUNT # (Ethics Commission Filers)

4 Date

8/8/12

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

Scott Daketle

7 Amount of contribution (\$)

\$500.00

8 In-kind contribution description (if applicable)

—

6 Contributor address; City; State; Zip Code

440 Twisted Tree Drive
Austin, TX 78735

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

Engineer

10 Employer (See Instructions)

Klotz & Associates

Date

8/8/12

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

Rick Walton
CALL PHOTOGRAPH, LLC

Amount of contribution (\$)

\$250.00

In-kind contribution description (if applicable)

—

Contributor address; City; State; Zip Code

905 E. 7
Austin, TX 78702

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Businessman

Employer (See Instructions)

Call Photograph, LLC

Date

8/8/12

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

Michael Moya

Amount of contribution (\$)

\$250.00

In-kind contribution description (if applicable)

—

Contributor address; City; State; Zip Code

10509 Pariva Trail
Austin, TX 78726

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Engineer

Employer (See Instructions)

Half Associates

Date

8/8/12

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

Tommy G. Warren

Amount of contribution (\$)

\$250.00

In-kind contribution description (if applicable)

—

Contributor address; City; State; Zip Code

P.O. Box 9269
The Woodlands, TX 77387

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Businessman

Employer (See Instructions)

Self-Employed

Date

8/8/12

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

Paul Cosselink

Amount of contribution (\$)

\$250.00

In-kind contribution description (if applicable)

—

Contributor address; City; State; Zip Code

P.O. Box 1725
Austin, TX 78767

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Attorney-at-Law

Employer (See Instructions)

Lloyd, Cosselink, Ricketts & Townsend, P.C.

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: 5 of 18	
2 FILER NAME <i>Margaret Gomez Campaign</i>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 8/8/12	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: NO) <i>Vera Massaro</i>	7 Amount of contribution (\$) \$250.00	8 In-kind contribution description (if applicable) —
6 Contributor address; City; State; Zip Code <i>3000 Savoy Place Austin, TX 78757</i>		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions) <i>Land Developer</i>		10 Employer (See Instructions) <i>Forest City Land Group</i>	
Date 8/8/12	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: NO) <i>Joe Pinnoli</i>	Amount of contribution (\$) \$250.00	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>Home Preservation</i>		Employer (See Instructions) <i>Self-Employed</i>	
Date 8/8/12	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: NO) <i>Henry Gilmore</i>	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable) —
Contributor address; City; State; Zip Code <i>803 N Main P.O. Box 988 Burnet, TX 78611</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Attorney at Law</i>		Employer (See Instructions) <i>Self-Employed</i>	
Date 8/8/12	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: NO) <i>Tom Granger</i>	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable) —
Contributor address; City; State; Zip Code <i>2612 Woolridge Austin, TX 78703</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Attorney at Law</i>		Employer (See Instructions) <i>Self-Employed</i>	
Date 8/8/12	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: NO) <i>Pete McRae</i>	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable) —
Contributor address; City; State; Zip Code <i>2313 Lake Austin Blvd., Ste 204 Austin, TX 78703</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Consultant</i>		Employer (See Instructions) <i>Pasor Public Affairs Consulting, LLP</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>6 of 19</i>	
2 FILER NAME <i>Margaret Gomez Campaign</i>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <i>8/8/12</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>NO</i>) <i>Karen Sulztraer</i>	7 Amount of contribution (\$) <i>\$250.00</i>	8 In-kind contribution description (if applicable) —
6 Contributor address; City; State; Zip Code <i>1712 Pasadena Drive Austin, TX 78757</i>		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions) <i>Public Employee</i>		10 Employer (See Instructions) <i>Travis County Auditor</i>	
Date <i>8/8/12</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>NO</i>) <i>Bruce Cummings</i>	Amount of contribution (\$) <i>\$200.00</i>	In-kind contribution description (if applicable) —
Contributor address; City; State; Zip Code <i>2306 Hasarwood Way Round Rock, TX 78681</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Fee Collection</i>		Employer (See Instructions) <i>MUNICIPAL SERVICES BUREAU</i>	
Date <i>8/8/12</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>NO</i>) <i>Diana Warner</i>	Amount of contribution (\$) <i>\$200.00</i>	In-kind contribution description (if applicable) —
Contributor address; City; State; Zip Code <i>6601 Winterberry Drive Austin, TX 78750</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Public Employee</i>		Employer (See Instructions) <i>Travis County Auditor</i>	
Date <i>8/8/12</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>NO</i>) <i>Howard Falkenberg</i>	Amount of contribution (\$) <i>\$100.00</i>	In-kind contribution description (if applicable) —
Contributor address; City; State; Zip Code <i>P.O. Box 123 Austin, TX 78767</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Public Relations</i>		Employer (See Instructions)	
Date <i>8/8/12</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>NO</i>) <i>Therese M. Baer</i>	Amount of contribution (\$) <i>\$100.00</i>	In-kind contribution description (if applicable) —
Contributor address; City; State; Zip Code <i>5904 Mountainclimb Drive, Apt 1 Austin, TX 78731</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Engineer</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: 7 of 19	
2 FILER NAME <i>Margaret Gomez Campaign</i>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 8/8/12	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <u>NO</u>) <i>Sarah Eckhardt Campaign</i>	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable) —
6 Contributor address; City; State; Zip Code <i>P.O. Box 301586 Austin, TX 78703</i>		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions) <i>County Commissioner Pct 2</i>		10 Employer (See Instructions) <i>TRAVIS County</i>	
Date 8/8/12	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <u>NO</u>) <i>Roberto O. Montaez</i>	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) —
Contributor address; City; State; Zip Code <i>5905 Thames Austin, TX 78723</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Engineer, Retired</i>		Employer (See Instructions) <i>Self-Employed</i>	
Date 8/8/12	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <u>NO</u>) <i>Herbert Evans</i>	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) —
Contributor address; City; State; Zip Code <i>1302 West Avenue Austin TX 78701</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>JP, Pct 5</i>		Employer (See Instructions) <i>TRAVIS County</i>	
Date 8/8/12	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <u>NO</u>) <i>Bob Kamm</i>	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) —
Contributor address; City; State; Zip Code <i>Government Affairs 1304 Guckeluge Austin, TX 78701</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 8/8/12	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <u>NO</u>) <i>Jose I. Guerra</i>	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) —
Contributor address; City; State; Zip Code <i>908 Castle Ridge Road Austin, TX 78746</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Engineer</i>		Employer (See Instructions) <i>Self-Employed - Jose Guerra Engineers</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: 8 of 18	
2 FILER NAME <i>Margaret Gomez Campaign</i>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 8/8/12	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>NO</i>) <i>Leroy Nellis</i>	7 Amount of contribution (\$) <i>\$ 50.00</i>	8 In-kind contribution description (if applicable) —
6 Contributor address; City; State; Zip Code <i>6418 Zaddock Woods Drive Austin, TX 78749</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>TRAVIS COUNTY</i>	
Date 8/8/12	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>NO</i>) <i>Craig Alter</i>	Amount of contribution (\$) <i>\$ 50.00</i>	In-kind contribution description (if applicable) —
Contributor address; City; State; Zip Code <i>11800 Emerald Falls Drive Austin, TX 78738</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Executive Director</i>		Employer (See Instructions) <i>Travis County Housing Authority</i>	
Date 8/8/12	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>NO</i>) <i>Bruno Congliano</i>	Amount of contribution (\$) <i>\$ 50.00</i>	In-kind contribution description (if applicable) —
Contributor address; City; State; Zip Code <i>901 E. Live Oak Austin, TX 78704</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Engineer</i>		Employer (See Instructions) <i>Retired</i>	
Date 8/8/12	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>NO</i>) <i>Stacy Suits</i>	Amount of contribution (\$) <i>\$ 50.00</i>	In-kind contribution description (if applicable) —
Contributor address; City; State; Zip Code <i>7807 Donoastor Drive Austin, TX 78745</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Chief Deputy Constable, Pt 3</i>		Employer (See Instructions) <i>TRAVIS COUNTY</i>	
Date 8/8/12	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>NO</i>) <i>Carmen Luevanos</i>	Amount of contribution (\$) <i>\$ 25.00</i>	In-kind contribution description (if applicable) —
Contributor address; City; State; Zip Code <i>2203 De Verne Street Austin, TX 78704</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Public Relations</i>		Employer (See Instructions) <i>Texas Gas Service</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>9 of 18</i>	
2 FILER NAME <i>Margaret Gomez Campaign</i>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <i>8/8/12</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>NO</i>) <i>Carbs Lopez</i>	7 Amount of contribution (\$) <i>\$25.00</i>	8 In-kind contribution description (if applicable) —
6 Contributor address; City; State; Zip Code <i>4330 Bull Creek Rd., Apt. 3123 Austin, TX 78731</i>		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions) <i>Chief Deputy Constable, Pct 5.</i>		10 Employer (See Instructions) <i>TPAVIS COUNTYS</i>	
Date <i>8/8/12</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>NO</i>) <i>Rev. Dr. Jayme Matthias for School Board Campaign</i>	Amount of contribution (\$) <i>\$25.00</i>	In-kind contribution description (if applicable) —
Contributor address; City; State; Zip Code <i>1511 Haskell Street Austin, TX 78702</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Pastor</i>		Employer (See Instructions) <i>American Catholic Church</i>	
Date <i>8/8/12</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>NO</i>) <i>Walter E. Timberlake</i>	Amount of contribution (\$) <i>\$25.00</i>	In-kind contribution description (if applicable) —
Contributor address; City; State; Zip Code <i>2006 Booklin Avenue Austin, TX 78704</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Electrician</i>		Employer (See Instructions) <i>Retired</i>	
Date <i>8/8/12</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>NO</i>) <i>Timy Baranoff</i>	Amount of contribution (\$) <i>\$40.00</i>	In-kind contribution description (if applicable) —
Contributor address; City; State; Zip Code <i>2307 Tower Drive Austin, TX 78703</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Teacher</i>		Employer (See Instructions) <i>Retired</i>	
Date <i>8/10/12</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>NO</i>) <i>Dawn D. Coronado</i>	Amount of contribution (\$) <i>\$25.00</i>	In-kind contribution description (if applicable) —
Contributor address; City; State; Zip Code <i>5602 Palisade Court Austin, TX 78731</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:

10 of 18

2 FILER NAME

Margaret Gomez Campaign

3 ACCOUNT # (Ethics Commission Filers)

4 Date

8/10/12

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

Santiago J. Coronado

7 Amount of contribution (\$)

\$125.00

8 In-kind contribution description (if applicable)

—

6 Contributor address; City; State; Zip Code

5602 Palisade Court
Austin, TX 78731

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

Attorney-at-Law

10 Employer (See Instructions)

TRAVIS County

Date

8/13/12

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

Renea Hicks

Amount of contribution (\$)

\$50.00

In-kind contribution description (if applicable)

—

Contributor address; City; State; Zip Code

4112 Remsey Avenue
Austin, TX 78756

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Attorney-at-Law

Employer (See Instructions)

Self-Employed

Date

8/17/12

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

Frank Cooksey

Amount of contribution (\$)

\$100.00

In-kind contribution description (if applicable)

—

Contributor address; City; State; Zip Code

2208 Matthews Drive
Austin, TX 78703

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Attorney-at-Law

Employer (See Instructions)

Retired

Date

8/16/12

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

Cecelia Burke

Amount of contribution (\$)

\$50.00

In-kind contribution description (if applicable)

—

Contributor address; City; State; Zip Code

6500 Santolina Drive
Austin, TX 78731

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Public Service

Employer (See Instructions)

Retired

Date

7/26/12

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

William C. Archer

Amount of contribution (\$)

\$500.00

In-kind contribution description (if applicable)

—

Contributor address; City; State; Zip Code

1711 Moachbrook Drive
Austin, TX 78703

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Developer

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: <i>11 of 18</i>	
2 FILER NAME <i>Margaret Gomez Campaign</i>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <i>7/26/12</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>NO</i>) <i>John P. Schneider, Jr.</i>	7 Amount of contribution (\$) <i>\$250.00</i>	8 In-kind contribution description (if applicable) —
6 Contributor address; City; State; Zip Code <i>3703 Speedway Austin TX 78705</i>		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions) <i>Developer</i>		10 Employer (See Instructions) <i>Don't know.</i>	
Date <i>8/23/12</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>NO</i>) <i>David Armbrust / Richard Settle</i>	Amount of contribution (\$) <i>\$2,500.00</i>	In-kind contribution description (if applicable) —
Contributor address; City; State; Zip Code <i>Armbrust + Brown, PLLC 100 Congress Avenue, Ste 1300 Austin, TX 78701</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Attorneys-at-Law - Developer</i>		Employer (See Instructions) <i>Armbrust + Brown, PLLC</i>	
Date <i>8/30/12</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>NO</i>) <i>Milton Ragsdale, Jr</i>	Amount of contribution (\$) <i>\$25.00</i>	In-kind contribution description (if applicable) —
Contributor address; City; State; Zip Code <i>4308 Shoalwood Austin, TX 78756</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Citizen</i>		Employer (See Instructions) <i>Don't know</i>	
Date <i>8/30/12</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>NO</i>) <i>George Cofer</i>	Amount of contribution (\$) <i>\$50.00</i>	In-kind contribution description (if applicable) —
Contributor address; City; State; Zip Code <i>3306 Gentry Drive Austin, TX 78746</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Environmentalist</i>		Employer (See Instructions) <i>Self-Employed</i>	
Date <i>8/30/12</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>NO</i>) <i>Adrian Moore</i>	Amount of contribution (\$) <i>\$50.00</i>	In-kind contribution description (if applicable) —
Contributor address; City; State; Zip Code <i>2204 Toro Canyon Austin, TX 78746</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Social Work</i>		Employer (See Instructions) <i>Council for At Risk Youth</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>12 of 18</i>	
2 FILER NAME <i>Margaret Gomez Campaign</i>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <i>8/30/12</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>NO</i>) <i>John H. Lipsecombe</i>	7 Amount of contribution (\$) <i>\$100.00</i>	8 In-kind contribution description (if applicable) —
6 Contributor address; City; State; Zip Code <i>6600 Mesa Drive Austin, TX 78731</i>		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions) <i>County Court-at-Law Judge</i>		10 Employer (See Instructions) <i>TRAVIS COUNTY</i>	
Date <i>8/30/12</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>NO</i>) <i>Rhett M. Dawson</i>	Amount of contribution (\$) <i>\$250.00</i>	In-kind contribution description (if applicable) —
Contributor address; City; State; Zip Code <i>4409 Sacred Arrow Drive Austin, TX 78735</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>	
Date <i>9/5/12</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>NO</i>) <i>Brian Rice</i>	Amount of contribution (\$) <i>\$500.00</i>	In-kind contribution description (if applicable) —
Contributor address; City; State; Zip Code <i>LAN PAC 2925 Briarpark, 4th Floor Houston, TX 77042</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions) <i>Lockwood, Andrews & Newman PAC</i>	
Date <i>9/6/12</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>NO</i>) <i>John M. Joseph ; Pamela Madere</i>	Amount of contribution (\$) <i>\$500.00</i>	In-kind contribution description (if applicable) —
Contributor address; City; State; Zip Code <i>Coats Rose Yale Ryman & Lee P.C. Burton Oaks Plaza, 901 S. MoPac, BLDG 1 Ste 500 Austin, TX 78746</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Attorneys-at-Law</i>		Employer (See Instructions) <i>Coats, Rose Yale Ryman & Lee, P.C.</i>	
Date <i>9/21/12</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>NO</i>) <i>Kurt Rechner</i>	Amount of contribution (\$) <i>\$1,500.00</i>	In-kind contribution description (if applicable) —
Contributor address; City; State; Zip Code <i>5908 Overlook Drive Austin, TX 78731</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Citizen</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>13 of 18</i>	
2 FILER NAME <i>Margaret Gomez Campaign</i>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <i>9/21/12</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>NO</i>) <i>Miguel Antonio Rivera</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>704 Patterson Avenue Austin, TX 78703</i>		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions) <i>Citizen</i>		10 Employer (See Instructions) <i>Don't know.</i>	
Date <i>9/21/12</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>NO</i>) <i>Rebecca Agosto</i>	Amount of contribution (\$) <i>\$1,000.00</i>	In-kind contribution description (if applicable) —
Contributor address; City; State; Zip Code <i>3614 De Trail Austin, TX 78746</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Citizen</i>		Employer (See Instructions) <i>Don't know</i>	
Date <i>9/21/12</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>NO</i>) <i>Robert Epstein</i>	Amount of contribution (\$) <i>\$1,000.00</i>	In-kind contribution description (if applicable) —
Contributor address; City; State; Zip Code <i>5000 Plaza On the Lake, Ste 160 Austin, TX 78746</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Developer</i>		Employer (See Instructions) <i>Self-Employed-owner-FI</i>	
Date <i>9/21/12</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>NO</i>) <i>Catherine F. Toran</i>	Amount of contribution (\$) <i>\$1,000.00</i>	In-kind contribution description (if applicable) —
Contributor address; City; State; Zip Code <i>6600 Via Correto Drive Austin, TX 78749</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Citizen</i>		Employer (See Instructions) <i>Don't know</i>	
Date <i>10/10/12</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>NO</i>) <i>Cornelius L. Hacker</i>	Amount of contribution (\$) <i>\$100.00</i>	In-kind contribution description (if applicable) —
Contributor address; City; State; Zip Code <i>7999 Ranch Road 2338 Georgetown, TX 78633</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Real Estate</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:

14 of 18

2 FILER NAME

Margaret Gomez Campaign

3 ACCOUNT # (Ethics Commission Filers)

4 Date

10/10/12

5 Full name of contributor

Steven Mobley

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

7 Amount of contribution (\$)

\$500.00

8 In-kind contribution description (if applicable)

—

6 Contributor address; City; State; Zip Code

2205 Westover Road
Austin, TX 78703

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

Developer

10 Employer (See Instructions)

DON'T KNOW

Date

10/10/12

Full name of contributor

Arthur Cardenas

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

Amount of contribution (\$)

\$100.00

In-kind contribution description (if applicable)

—

Contributor address; City; State; Zip Code

The Fit Fit Boxing Gym
P.O. Box 150665
Austin, TX 78715

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Coach

Employer (See Instructions)

Self-Employed

Date

10/19/12

Full name of contributor

Frank McIntyre

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

Amount of contribution (\$)

\$2,000.00

In-kind contribution description (if applicable)

—

Contributor address; City; State; Zip Code

Travis County Sheriff's Officers Association, PAC
400 W. 14. Street, #220
Austin, TX 78701

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Sheriff's Correction Officer

Employer (See Instructions)

Travis County

Date

10/19/12

Full name of contributor

Adam A. Mathews

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

Amount of contribution (\$)

\$250.00

In-kind contribution description (if applicable)

—

Contributor address; City; State; Zip Code

7529 Harlow Drive
Austin, TX 78739

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

District Mgr.

Employer (See Instructions)

IESI Landfill

Date

10/19/12

Full name of contributor

Ruben G. and Rosa Ros-Valdez

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

Amount of contribution (\$)

\$200.00

In-kind contribution description (if applicable)

—

Contributor address; City; State; Zip Code

6901 Hill Meadow Drive
Austin, TX 78736

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

ECONOMIC DEVELOPMENT - EXECUTIVE DIRECTOR

Employer (See Instructions)

BCL 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: <i>15 of 18</i>	
2 FILER NAME <i>Margaret Gomez Campaign</i>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <i>10/19/12</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</i>		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions) <i>Attorney-at-Law (GPS)</i>		10 Employer (See Instructions) <i>TRAVIS County</i>	
Date <i>10/19/12</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>NO</i>) <i>Susan Spataro</i>	Amount of contribution (\$) <i>\$100.00</i>	In-kind contribution description (if applicable) —
Contributor address; City; State; Zip Code <i>6628 Haswell Lane Austin, TX 78749</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Retired</i>		Employer (See Instructions) <i>TRAVIS County</i>	
Date <i>10/19/12</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>\$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-at-law</i>		Employer (See Instructions) <i>Self-Employed</i>	
Date <i>10/19/12</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>NO</i>) <i>Roy Gomez</i>	Amount of contribution (\$) <i>\$50.00</i>	In-kind contribution description (if applicable) —
Contributor address; City; State; Zip Code <i>10207 Ray Avenue Austin, TX 78758</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Manager</i>		Employer (See Instructions) <i>Ledbetter Management</i>	
Date <i>10/19/12</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>NO</i>) <i>Walter E. Timberlake</i>	Amount of contribution (\$) <i>\$50.00</i>	In-kind contribution description (if applicable) —
Contributor address; City; State; Zip Code <i>2006 Bouldin Avenue Austin, TX 78704</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Electrician</i>		Employer (See Instructions) <i>Retired</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 19</i>	
2 FILER NAME <i>Margaret Gomez Campaign</i>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <i>10/19/12</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>NO</i>) <i>Jennifer Lopez</i>	7 Amount of contribution (\$) <i>\$25.00</i>	8 In-kind contribution description (if applicable) —
6 Contributor address; City; State; Zip Code <i>4330 Bull Creek Road, Apt 3123 Austin, TX 78731</i>		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions) <i>Citizen</i>		10 Employer (See Instructions) <i>Don't know</i>	
Date <i>10/19/12</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>NO</i>) <i>Joseph L. Bruch</i>	Amount of contribution (\$) <i>\$25.00</i>	In-kind contribution description (if applicable) —
Contributor address; City; State; Zip Code <i>204 La Vista Austin, TX 78704</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Citizen</i>		Employer (See Instructions) <i>Retired</i>	
Date <i>10/19/12</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>NO</i>) <i>Stacy Surtz</i>	Amount of contribution (\$) <i>\$25.00</i>	In-kind contribution description (if applicable) —
Contributor address; City; State; Zip Code <i>Central Texas Constables PAC 7807 Doncaster Drive Austin, TX 78745</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Chief Deputy Constable, At 3</i>		Employer (See Instructions) <i>TRAVIS COUNTY</i>	
Date <i>10/19/12</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>NO</i>) <i>Raymond J. Flores</i>	Amount of contribution (\$) <i>\$10.00</i>	In-kind contribution description (if applicable) —
Contributor address; City; State; Zip Code <i>12613 Mistletoe Trail Menchaca, TX 78652</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Don't know</i>		Employer (See Instructions) <i>Texas AFL-CIO</i>	
Date <i>10/19/12</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <i>NO</i>) <i>Cecelia Crossley</i>	Amount of contribution (\$) <i>\$5.00</i>	In-kind contribution description (if applicable) —
Contributor address; City; State; Zip Code <i>3100 Catalina Drive Austin, TX 78741</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) <i>Retired Citizen</i>		Employer (See Instructions) <i>Retired</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:

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2 FILER NAME

Margaret Gómez Campaign

3 ACCOUNT # (Ethics Commission Filers)

4 Date

10/19/12

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

Pat R. Conegliano

7 Amount of contribution (\$)

\$20.00

8 In-kind contribution description (if applicable)

—

6 Contributor address; City; State; Zip Code

901 E. Live Oak
Austin, TX 78704

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

Retired Citizen

10 Employer (See Instructions)

Retired

Date

10/22/12

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

Rosanna A. Barrios

Amount of contribution (\$)

\$50.00

In-kind contribution description (if applicable)

—

Contributor address; City; State; Zip Code

7452 Pusch Ridge Loop
Austin, TX 78749

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Communications

Employer (See Instructions)

TRAVIS COUNTY

Date

10/23/12

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

Trey Salinas

Amount of contribution (\$)

\$500.00

In-kind contribution description (if applicable)

—

Contributor address; City; State; Zip Code

1221 S. MOPAC, Ste 365
Austin, TX 78746

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Public Relations

Employer (See Instructions)

3 Points Partners

Date

12/10/12

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

Lloyd Doggett for Congress

Amount of contribution (\$)

\$100.00

In-kind contribution description (if applicable)

—

Contributor address; City; State; Zip Code

P.O. Box 5843
Austin, TX 78763

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Congressman

Employer (See Instructions)

United States Government

Date

12/10/12

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

Brett Spicer

Amount of contribution (\$)

\$750.00

In-kind contribution description (if applicable)

—

Travis County Sheriff's Law Enforcement Association PAC

Contributor address; City; State; Zip Code

P.O. Box 142025
Austin, TX 78714

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Sheriff's Law Enforcement Officer

Employer (See Instructions)

TRAVIS COUNTY

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:

18 of 18

2 FILER NAME

Margaret Gomez Campaign

3 ACCOUNT # (Ethics Commission Filers)

4 Date

10/22/12

5 Full name of contributor

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

Deposit

6 Contributor address; City; State; Zip Code

Margaret J. Gomez
P.O. Box 42037
Austin, TX 78704

7 Amount of contribution (\$)

919.31

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

Balance of \$1,500 withdrawal on 10/10/12

10 Employer (See Instructions)

Fish Fry Supplies / Food Supplies

Date

10/22/12

Full name of contributor

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

Deposit

Contributor address; City; State; Zip Code

Margaret J. Gomez
P.O. Box 42037
Austin, TX 78704

Amount of contribution (\$)

329.90

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Balance of \$1,000 withdrawal of 10/10/12

Employer (See Instructions)

Fish Fry expenditures: Mosca, beverages, bread, change

Date

Full name of contributor

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

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#: NA)

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#: NA)

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.

PLEGGED CONTRIBUTIONS

SCHEDULE B

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

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

4 TOTAL OF UNITEMIZED PLEDGES: ⇨ ⇨ ⇨ ⇨ ⇨ ⇨ ⇨ \$

5 Date	6 Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID#: _____)	8 Amount of pledge (\$)	9 In-kind description (if applicable)
	7 Pledgor address; City; State; Zip Code <i>None</i>		
(If travel outside of Texas, complete Schedule T)			

10 Principal occupation / Job title (See Instructions) 11 Employer (See Instructions)

Date	Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of pledge (\$)	In-kind description (if applicable)
	Pledgor 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 pledgor <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of pledge (\$)	In-kind description (if applicable)
	Pledgor 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 pledgor <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of pledge (\$)	In-kind description (if applicable)
	Pledgor 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 pledgor <input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of pledge (\$)	In-kind description (if applicable)
	Pledgor 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.

LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.

1 Total pages Schedule E:

1 of 1

2 FILER NAME

Margaret Gomez Campaign

3 ACCOUNT # (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED LOANS: ⇨ ⇨ ⇨ ⇨ ⇨ ⇨

\$

5 Date of loan

7 Name of lender

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

9 Loan Amount (\$)

6 Is lender a financial Institution?
Y N

8 Lender address; City; State; Zip Code

None

10 Interest rate

11 Maturity date

12 Principal occupation / Job title (See Instructions)

13 Employer (See Instructions)

14 Description of Collateral

none

15 Check if personal funds were deposited into political account

16 GUARANTOR INFORMATION

17 Name of guarantor

19 Amount Guaranteed (\$)

not applicable

18 Guarantor address; City; State; Zip Code

20 Principal Occupation (See Instructions)

21 Employer (See Instructions)

Date of loan

Name of lender

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

none

Check if personal funds were deposited into political account

GUARANTOR INFORMATION

Name of guarantor

Amount Guaranteed (\$)

not applicable

Guarantor address; City; State; Zip Code

Principal Occupation (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

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 Candidate/Officeholder/Political Committee
Event Expense	Polling Expense	Travel Out Of District	OTHER (enter a category not listed above)
Fees	Printing Expense	Office Overhead/Rental Expense	

The Instruction Guide explains how to complete this form

1 Total pages Schedule F: <i>1 of 8</i>		2 FILER NAME <i>Margaret Gomez Campaign</i>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <i>6/26/12</i>		5 Payee name <i>Graa Hinojosa Campaign</i>			
6 Amount (\$) <i>\$250.00</i>		7 Payee address; City; State; Zip Code <i>P.O. Box 300718 Austin, TX 78703</i>			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) <i>Contribution by Office holder</i>		(b) Description (If travel outside of Texas, complete Schedule T) <i>Contribution to School Board Campaign</i>	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name <i>Margaret Gomez</i>		Office sought <i>County Comm Pet 4</i>	
Office held <i>Co. Comm Pet 4</i>		Date <i>6/27/12</i>		Payee name <i>Network</i>	
Amount (\$) <i>\$150.00</i>		Payee address; City; State; Zip Code <i>25 E Street, NW, Ste 200 Washington, DC 20001-1630</i>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <i>Contribution by Office holder</i>		Description (If travel outside of Texas, complete Schedule T) <i>Contribution - Membership</i>	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name <i>Margaret Gomez</i>		Office sought <i>Co. Comm Pet 4</i>	
Office held <i>Co. Comm, Pet 4</i>		Date <i>7/3/12</i>		Payee name <i>Texas Ethics Commission</i>	
Amount (\$) <i>\$300.00</i>		Payee address; City; State; Zip Code <i>P.O. Box 12070 Austin, TX 78711-2070</i>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <i>Fees</i>		Description (If travel outside of Texas, complete Schedule T) <i>Assessed Fee For OFFICEHOLDER MATTERS (FORM PROCEDURES)</i>	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name <i>Margaret J. Gomez</i>		Office sought <i>Co Comm Pet 4</i>	
Office held <i>Co Comm Pet 4</i>		Date <i>7/29/12</i>		Payee name <i>LA VOZ NEWSPAPERS</i>	
Amount (\$) <i>\$50.00</i>		Payee address; City; State; Zip Code <i>P.O. Box 19457 Austin, TX 78760</i>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <i>Advertising Expense (Ad for Graa Hinojosa)</i>		Description (If travel outside of Texas, complete Schedule T) <i>Contribution for Graa Hinojosa Ad</i>	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name <i>Margaret J. Gomez</i>		Office sought <i>Co Comm Pet 4</i>	
Office held <i>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: <i>2 of 8</i>		2 FILER NAME <i>Margaret Gomez Campaign</i>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <i>7/29/12</i>		5 Payee name <i>Gina Hinojosa Campaign</i>			
6 Amount (\$) <i>\$ 250.00</i>		7 Payee address: City: State: Zip Code <i>P.O. Box 30028 Austin, TX 78703</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</i>	
9 Complete ONLY 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>8/1/12</i>		Payee name <i>Austin AFL-CIO</i>			
Amount (\$) <i>\$ 316.00</i>		Payee address, City, State, Zip Code <i>P.O. Box 87 Austin, TX 78767</i>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <i>Advertising Expense - Program Ad</i>		Description (If travel outside of Texas, complete Schedule T) <i>Half-page ad in Program for Labor Day</i>	
Complete ONLY 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>8/4/12</i>		Payee name <i>Maria Conchala Campaign</i>			
Amount (\$) <i>\$ 100.00</i>		Payee address; City; State; Zip Code <i>1900 East Side Drive Austin, TX 78704</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 campaign</i>	
Complete ONLY 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>8/8/12</i>		Payee name <i>Susan Harry</i>			
Amount (\$) <i>\$ 2,982.53</i>		Payee address; City; State; Zip Code <i>P.O. Box 301074 Austin, TX 78703</i>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <i>Consultant Fee</i>		Description (If travel outside of Texas, complete Schedule T) <i>Consulting on Event</i>	
Complete ONLY 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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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 8</i>		2 FILER NAME <i>Margaret Gomez Campaign</i>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <i>8/8/12</i>		5 Payee name <i>Nuevo Leon</i>			
6 Amount (\$) <i>\$291.57</i>		7 Payee address: City: State: Zip Code <i>1501 E. 6 Austin, TX 78702</i>			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) <i>Event Expense</i>		(b) Description (If travel outside of Texas, complete Schedule T) <i>Food for guests & refreshments</i>	
9 Complete ONLY 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>9/3/12</i>		Payee name <i>Sprint</i>			
Amount (\$) <i>\$48.27</i>		Payee address, City, State, Zip Code <i>P.O. Box 6600 75 Dallas, TX 75266-0075</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>Cell phone campaign calls</i>	
Complete ONLY 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>9/6/12</i>		Payee name <i>Adan Ballasteros Campaign</i>			
Amount (\$) <i>\$100.00</i>		Payee address; City; State; Zip Code <i>P.O. Box 710 Pflugerville, TX 78660</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>Campaign contribution</i>	
Complete ONLY 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>9/17/12</i>		Payee name <i>Johaston High School Memorial Fund / TEJANOS IN ACTION FUND</i>			
Amount (\$) <i>\$350.00</i>		Payee address; City; State; Zip Code <i>ALONZO (AL) REYES, COMMANDER P.O. Box 19321 Austin, TX 78744</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 Golf Tournament Team</i>	
Complete ONLY 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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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 8</i>		2 FILER NAME <i>Margaret Gomez Campaign</i>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <i>9/26/12</i>		5 Payee name <i>St. Julia Church</i>			
6 Amount (\$) <i>\$100.00</i>		7 Payee address; City; State; Zip Code <i>900 Tillery 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>Contribution to Family Center</i>	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name <i>Margaret J. Gomez</i>		Office sought <i>Co Comm Pct 4</i>	
Date <i>9/26/12</i>		Payee name <i>Grea Hrojoza Campaign</i>			
Amount (\$) <i>\$250.00</i>		Payee address, City, State, Zip Code <i>P.O. Box 300718 Austin, TX 78703</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 Campaign</i>	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name <i>Margaret J. Gomez</i>		Office sought <i>Co Comm Pct 4</i>	
Date <i>10/5/12</i>		Payee name <i>Austin/Travis County Health Department</i>			
Amount (\$) <i>\$35.00</i>		Payee address; City; State; Zip Code <i>P.O. Box 142529 Austin, TX 78714</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>Food Permit - Fish Fry</i>	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name <i>Margaret J. Gomez</i>		Office sought <i>Co Comm Pct 4</i>	
Date <i>10/14/12</i>		Payee name <i>Time Warner</i>			
Amount (\$) <i>\$32.82</i>		Payee address; City; State; Zip Code <i>P.O. Box 60074 City of Industry, CA 91716-0074</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>Internet Service</i>	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name <i>Margaret J. Gomez</i>		Office sought <i>Co Comm Pct 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>5 of 8</i>		2 FILER NAME <i>Margaret Gomez Campaign</i>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <i>10/17/12</i>		5 Payee name <i>Robert Cisneros</i>			
6 Amount (\$) <i>\$150.00</i>		7 Payee address: City: State: Zip Code <i>3504 Santa Monica Austin, TX 78741</i>			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) <i>Event Expense</i>		(b) Description (If travel outside of Texas, complete Schedule T) <i>12/12 Tent for Frsh Fry</i>	
9 Complete ONLY 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>10/17/12</i>		Payee name <i>South Austin Democrats</i>			
Amount (\$) <i>\$150.00</i>		Payee address, City, State, Zip Code <i>P.O. Box 152592 Austin, TX 78715-2592</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>Sponsor, Yaller Dewey Event</i>	
Complete ONLY 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>10/24/12</i>		Payee name <i>Time Warner</i>			
Amount (\$) <i>\$32.82</i>		Payee address; City; State; Zip Code <i>P.O. Box 60074 City of Industry, CA 91716-0074</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>Internet Service</i>	
Complete ONLY 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>10/25/12</i>		Payee name <i>Harvard Business Review</i>			
Amount (\$) <i>\$189.00</i>		Payee address; City; State; Zip Code <i>P.O. Box 62180 Tempe, FL 33663-1803</i>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <i>Office Overhead / Subscriptions</i>		Description (If travel outside of Texas, complete Schedule T) <i>2-yr subscription</i>	
Complete ONLY 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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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 8		2 FILER NAME Margaret Gomez Campaign		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 10/31/12		5 Payee name Sprint			
6 Amount (\$) \$98.23		7 Payee address: City: State: Zip Code P.O. Box 54977 Los Angeles, CA 90054-0977			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Office Overhead/Phone Service		(b) Description (If travel outside of Texas, complete Schedule T) Cell phone calls re: campaign	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name Margaret J. Gomez		Office sought Co Comm Pet 4	
Date 10/31/12		Payee name Sun Dragon Seido Karate			
Amount (\$) \$150.00		Payee address, City, State, Zip Code 4534 Westgate Blvd. Austin, TX 78745			
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 Scholarship Fund	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name Margaret J. Gomez		Office sought Co Comm Pet 4	
Date 12/2/12		Payee name Dora Springs Recreation Center Advisory Board			
Amount (\$) \$100.00		Payee address; City; State; Zip Code George Morales 5801 Ainez Austin, TX 78744			
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 for Thanksgiving Dinner	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name Margaret J. Gomez		Office sought Co Comm Pet 4	
Date 12/2/12		Payee name Merry Memories - River City Foundation			
Amount (\$) \$100.00		Payee address; City; State; Zip Code George Morales 5209 Pleasant Valley Road Austin, TX 78744			
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 Christmas Toy Fund	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name Margaret J. Gomez		Office sought Co Comm Pet 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>7 of 8</i>		2 FILER NAME <i>Margaret Gomez Campaign</i>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <i>12/2/12</i>		5 Payee name <i>Texas Hoose Farm to Table Caucus</i>			
6 Amount (\$) <i>\$100.00</i>		7 Payee address; City; State; Zip Code <i>Representative Goldie Rodriguez 1108 Levee, Ste 110-292 Austin, TX 78701</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 Fund</i>	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name <i>Margaret J. Gomez</i>		Office sought <i>Co Gomez Pet 4</i>	
Date <i>12/19/12</i>		Payee name <i>Margaret J. Gomez</i>			
Amount (\$) <i>\$500.00</i>		Payee address; City; State; Zip Code <i>P.O. Box 42057 Austin TX 78704</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>Cash Withdrawal for holiday event expenses</i>	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name <i>Margaret J. Gomez</i>		Office sought <i>Co Gomez Pet 4</i>	
Date <i>10/10/12</i>		Payee name <i>Margaret J. Gomez</i>			
Amount (\$) <i>\$1,500.00</i>		Payee address; City; State; Zip Code <i>P.O. Box 42037 Austin, TX 78704</i>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <i>Cash Withdrawal for Fish Fry Expenses</i>		Description (If travel outside of Texas, complete Schedule T) <i>gas for vehicles Cash withdrawal for fish, supplies, butane gas, barrels, carpet,</i>	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name <i>Margaret Gomez</i>		Office sought <i>Co Gomez Pet 4</i>	
Date <i>10/5/12</i>		Payee name <i>Margaret J. Gomez</i>			
Amount (\$) <i>\$1,000.00</i>		Payee address; City; State; Zip Code <i>P.O. Box 42037 Austin, TX 78704</i>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <i>Cash Withdrawal for Fish Fry Expenses</i>		Description (If travel outside of Texas, complete Schedule T) <i>Cash withdrawal for music, bread, change</i>	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name <i>Margaret Gomez</i>		Office sought <i>Co Gomez Pet 4</i>	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR SCHEDULE F

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 8</i>	2 FILER NAME <i>Margaret Gomez Casquin</i>	3 ACCOUNT # (Ethics Commission Filers)
4 Date <i>8/8/12</i>	5 Payee name <i>ABC Bank</i>	
6 Amount (\$) <i>\$ 563.00</i>	7 Payee address, City, State, Zip Code <i>2201 W. Ben White Blvd. Austin, TX 78704</i>	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) <i>Charge back by ABC Bank</i>	(b) Description (If travel outside of Texas, complete Schedule T) <i>Bounced Check plus bank fee of \$3.00</i>
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	
Date <i>8/17/12</i>	Candidate / Officeholder name <i>Margaret J. Gomez</i>	Office sought <i>Co. Comm Per 4</i>
Date <i>8/17/12</i>	Payee name <i>Pixy, Inc</i>	Office held
Amount (\$) <i>\$4.50</i>	Payee address, City, State, Zip Code <i>144 2nd Street San Francisco, CA 94105</i>	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <i>Fees</i>	Description (If travel outside of Texas, complete Schedule T) <i>Fee for online contribution</i>
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	
Date	Candidate / Officeholder name	Office sought
Date	Payee name	Office held
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)
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	
Date	Candidate / Officeholder name	Office sought
Date	Payee name	Office held
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)
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	
Date	Candidate / Officeholder name	Office sought
Date	Payee name	Office held
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)
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

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 G: <i>1 of 1</i>	2 FILER NAME <i>Margaret Gomez Campaign</i>	3 ACCOUNT # (Ethics Commission Filers)
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4 Date	5 Payee name
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6 Amount (\$) <input type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code <i>None</i>
----------------------------------------------------------------------------------------------------------	------------------------------------------------------------------

8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule T)
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Date	Payee name
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Amount (\$) <input type="checkbox"/> Reimbursement from political contributions intended	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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Date	Payee name
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Amount (\$) <input type="checkbox"/> Reimbursement from political contributions intended	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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Date	Payee name
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Amount (\$) <input type="checkbox"/> Reimbursement from political contributions intended	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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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH

SCHEDULE H

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 H: <i>1 of 1</i>	2 FILER NAME <i>Margaret Gomez Campaign</i>	3 ACCOUNT # (Ethics Commission Filers)
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4 Date	5 Business name
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6 Amount (\$)	7 Business address; City; State; Zip Code <i>None</i>
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule T)
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date	Business name
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Amount (\$)	Business 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	Business name
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Amount (\$)	Business 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	Business name
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Amount (\$)	Business 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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NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

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 I: <i>1 of 1</i>	2 FILER NAME <i>Margaret Gomez Campaign</i>	3 ACCOUNT # (Ethics Commission Filers)
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4 Date	5 Payee name
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6 Amount (\$)	7 Payee address; City; State; Zip Code <i>None</i>
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule)	(b) Description (See instructions regarding type of information required.)
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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 (See instructions regarding type of information required.)
------------------------	--------------------------------------------------------------	------------------------------------------------------------------------

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 (See instructions regarding type of information required.)
------------------------	--------------------------------------------------------------	------------------------------------------------------------------------

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 (See instructions regarding type of information required.)
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INTEREST EARNED, OTHER CREDITS/GAINS/ REFUNDS, AND PURCHASE OF INVESTMENTS

SCHEDULE K

The Instruction Guide explains how to complete this form.

1 Total pages Schedule K:

1 of 1

2 FILER NAME

Margaret Gomez Campaign

3 ACCOUNT # (Ethics Commission Filers)

4 Date	5 Name of person from whom amount is received	8 Amount (\$)
	6 Address of person from whom amount is received; City; State; Zip Code	
	<i>None</i>	
	7 Purpose for which amount is received	

Date	Name of person from whom amount is received	Amount (\$)
	Address of person from whom amount is received; City; State; Zip Code	
	Purpose for which amount is received	

Date	Name of person from whom amount is received	Amount (\$)
	Address of person from whom amount is received; City; State; Zip Code	
	Purpose for which amount is received	

Date	Name of person from whom amount is received	Amount (\$)
	Address of person from whom amount is received; City; State; Zip Code	
	Purpose for which amount is received	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

IN-KIND CONTRIBUTION OR POLITICAL EXPENDITURE FOR TRAVEL OUTSIDE OF TEXAS

SCHEDULE T

The Instruction Guide explains how to complete this form.

1 Total pages Schedule T: *1 of 1*

2 FILER NAME

Margaret Gomez Campaign

3 ACCOUNT # (Ethics Commission Filers)

4 Name of Contributor / Corporation or Labor Organization / Pledgor / Payee

5 Contribution / Expenditure reported on:

None

- Schedule A Schedule B Schedule C Schedule D Schedule F Schedule G
- Schedule H Schedule N COH-UC COH-T PAC-C PAC-E

6 Dates of travel

7 Name of person(s) traveling

8 Departure city or name of departure location

9 Destination city or name of destination location

10 Means of transportation

11 Purpose of travel (including name of conference, seminar, or other event)

Name of Contributor / Corporation or Labor Organization / Pledgor / Payee

Contribution / Expenditure reported on:

- Schedule A Schedule B Schedule C Schedule D Schedule F Schedule G
- Schedule H Schedule N COH-UC COH-T PAC-C PAC-E

Dates of travel

Name of person(s) traveling

Departure city or name of departure location

Destination city or name of destination location

Means of transportation

Purpose of travel (including name of conference, seminar, or other event)

Name of Contributor / Corporation or Labor Organization / Pledgor / Payee

Contribution / Expenditure reported on:

- Schedule A Schedule B Schedule C Schedule D Schedule F Schedule G
- Schedule H Schedule N COH-UC COH-T PAC-C PAC-E

Dates of travel

Name of person(s) traveling

Departure city or name of departure location

Destination city or name of destination location

Means of transportation

Purpose of travel (including name of conference, seminar, or other event)

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