

**CANDIDATE / OFFICEHOLDER  
CAMPAIGN FINANCE REPORT**

8752

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

The C/OH Instruction Guide explains how to complete this form.		1 Filer ID	2 Total pages filed: 33				
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST	MI	<b>OFFICE USE ONLY</b>			
		Margaret					
	NICKNAME	LAST	SUFFIX	Date Received			
		Moore		2016 FEB - 11 PM 4:51			
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY;		ZIP CODE	Date Hand-delivered or Date Postmarked			
	501 N IH 35			Receipt #			
	209a			Amount			
	Austin, TX 78702			Date Processed			
				Date Imaged			
5 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST	MI				
		Bruce	M				
	NICKNAME	LAST	SUFFIX				
		Todd					
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE);	APT / SUITE #;	CITY;	STATE;	ZIP CODE		
	8008 Spicewood Ln		Austin		78759		
7 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION				
	512	413 - 4141					
8 REPORT TYPE	<input type="checkbox"/> January 15 <input checked="" type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final Report (Attach C/OH-FR)						
9 PERIOD COVERED	Month	Day	Year	THROUGH	Month	Day	Year
	01	01	2016		01	21	2016
10 ELECTION	ELECTION DATE		ELECTION TYPE				
	Month	Day	Year	<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> Runoff	<input type="checkbox"/> Other	
	03	01	2016	<input type="checkbox"/> General	<input type="checkbox"/> Special		
11 OFFICE	OFFICE HELD (if any)			12 OFFICE SOUGHT (if known)			
				District Attorney District Travis			

**GO TO PAGE 2**

**CANDIDATE / OFFICEHOLDER REPORT:  
SUPPORT & TOTALS**

**FORM C/OH  
COVER SHEET PG 2**

2 of 33

**13 C / OH NAME** Moore, Margaret **14 Filer ID**

**15 NOTICE FROM POLITICAL COMMITTEE(S)**  
 Additional Pages

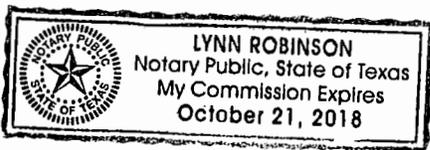
This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. *These expenditures may have been made without the candidate's or officeholder's knowledge or consent.* Candidates and officeholders are required to report this information only if they receive notice of such expenditures.

<b>COMMITTEE TYPE</b>	<b>COMMITTEE NAME</b>
<input type="checkbox"/> GENERAL	
<input type="checkbox"/> SPECIFIC	
	<b>COMMITTEE ADDRESS</b>
	<b>COMMITTEE CAMPAIGN TREASURER NAME</b>
	<b>COMMITTEE CAMPAIGN TREASURER ADDRESS</b>

<b>16 CONTRIBUTION TOTALS</b>	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 24,100.00
<b>EXPENDITURE TOTALS</b>	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 5,872.26
<b>CONTRIBUTION BALANCE</b>	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 20,850.22
<b>OUTSTANDING LOAN TOTALS</b>	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 2,000.00

**17 AFFADAVIT**

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 Moore*  
 \_\_\_\_\_  
 Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said MARGARET MOORE, this the 1st day of FEBRUARY, 2016, to certify which, witness my hand and seal of office.

*Lynn Robinson*  
 \_\_\_\_\_  
 Signature of officer administering

LYNN ROBINSON  
 \_\_\_\_\_  
 Printed name of officer administering

NOTARY  
 \_\_\_\_\_  
 Title of officer administering oath

**SUBTOTALS - C/OH**

<b>18 FILER NAME</b> Moore, Margaret	<b>19 Filer ID</b>
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20	SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$	24,100.00
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$	
3.	<input checked="" type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$	250.00
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$	
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	5,872.26
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$	
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$	
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$	
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$	
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$	
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$	

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 1/14 Rpt: 4/33
<b>2</b> FILER NAME Moore, Margaret		<b>3</b> Filer ID
<b>4</b> Date 01/12/2016	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Andrews, Kay	<b>7</b> Amount of Contribution (\$) \$250.00
	<b>6</b> Contributor address; City; State; Zip Code 1808 Intervail Dr  Austin, TX 78746	
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
<b>Date</b> 01/09/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Anthony, Linda	<b>Amount of Contribution (\$)</b> \$1,000.00
	<b>Contributor address; City; State; Zip Code</b> 1500 Old Wagon Rd.  Austin, TX 78746	
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>
<b>Date</b> 01/10/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Armburst, Cheryl David	<b>Amount of Contribution (\$)</b> \$250.00
	<b>Contributor address; City; State; Zip Code</b> 100 Congress Ave suite 1300 Austin, TX 78701	
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>
<b>Date</b> 01/21/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Bailey, Kellie	<b>Amount of Contribution (\$)</b> \$250.00
	<b>Contributor address; City; State; Zip Code</b> 2102 Woodmont Ave  Austin, TX 78703	
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>
<b>Date</b> 01/16/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Bishop, Brian	<b>Amount of Contribution (\$)</b> \$2,500.00
	<b>Contributor address; City; State; Zip Code</b> 900 West Ave  Austin, TX 78701	
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A1: Sch: 2/14 Rpt: 5/33
2 FILER NAME Moore, Margaret		3 Filer ID:
4 Date 01/14/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Box, Jerry	7 Amount of Contribution (\$) \$200.00
6 Contributor address; City; State; Zip Code 2103 Woodmont Ave  Austin, TX 78703		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 01/17/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Dick	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code 106 Wood Trail  West Lake Hills, TX 78746		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/17/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bullock, Jan	Amount of Contribution (\$) \$125.00
Contributor address; City; State; Zip Code 3001 Gilbert St  Austin, TX 78703		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/18/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burdette, Milo	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code 3009 Gilbert St  Austin, TX 78703		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/18/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Caperton, Kent	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code 4231 Westlake Dr #A3 Austin, TX 78746		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 3/14 Rpt: 6/33
<b>2</b> FILER NAME Moore, Margaret		<b>3</b> Filer ID
<b>4</b> Date 01/12/2016	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carden, Amber	<b>7</b> Amount of Contribution (\$) \$100.00
<b>6</b> Contributor address; City; State; Zip Code 10807 Sans Souci Pl  Austin, TX 78759-5151		
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 01/20/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clayton, Brenda	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code 2003 Pequeno St.  Austin, TX 78757		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/21/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Craig, Charles	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code 3908 Galacia Dr  Austin, TX 78759		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/21/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Craig, Charles	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code 3908 Galacia Dr  Austin, TX 78759		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/12/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crowley, Beryl	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 5000 Mission Oaks #43 Austin, TX 78735		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A1: Sch: 4/14 Rpt: 7/33
2 FILER NAME Moore, Margaret		3 Filer ID
4 Date 01/12/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crowley, Timothy	7 Amount of Contribution (\$) \$200.00
	6 Contributor address; City; State; Zip Code 5902 Lonesome Valley Trl  Austin, TX 78731	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 01/12/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crozier, Mark	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code 2707 Berensen Ln  Austin, TX 78746	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/12/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crozier, Mary	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code 2707 Berensen Ln  Austin, TX 78746	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/21/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DiQuinzio, Joe	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code 602 W. 9th  Austin, TX 78701	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/12/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dillard, DK	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code 2810 Pickwick Ln  Austin, TX 78746	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 5/14 Rpt: 8/33
<b>2</b> FILER NAME Moore, Margaret		<b>3</b> Filer ID
<b>4</b> Date 01/20/2016	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dworin, Dan	<b>7</b> Amount of Contribution (\$) \$500.00
<b>6</b> Contributor address; City; State; Zip Code 1304 Neuces  Austin, TX 78701		
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 01/11/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gammon, William	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code 1615 Guadalupe St  Austin, TX 78701		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/19/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Geistman, Jan	Amount of Contribution (\$) \$300.00
Contributor address; City; State; Zip Code 6309 Gato Path  Austin, TX 78731		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/21/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Getter, Kerry	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code 9301 johunny morris rd  Austin, TX 78724		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/11/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gillen, Gay	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 3201B Hillview Road  Austin, TX 78703		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A1: Sch: 6/14 Rpt: 9/33
2 FILER NAME Moore, Margaret		3 Filer ID
4 Date 01/21/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goode Casseb Jones	7 Amount of Contribution (\$) \$500.00
6 Contributor address; City; State; Zip Code P.O. Box 120480  San Antonio, TX 78212		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 01/20/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gosselink, Margaret	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code 903 W 16th St  Austin, TX 78701		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/20/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gosselink, Margaret	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code 903 W 16th St  Austin, TX 78701		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/06/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grossenbacher, Gary	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 402 Vale St  Rollingwood, TX 78746		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/21/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guslander, Nan	Amount of Contribution (\$) \$300.00
Contributor address; City; State; Zip Code 5501 a Balcones Dr.  Austin, TX 78731		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A1: Sch: 7/14 Rpt: 10/33
2 FILER NAME Moore, Margaret		3 Filer ID
4 Date 01/19/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Herring, Chuck	7 Amount of Contribution (\$) \$250.00
6 Contributor address; City; State; Zip Code 1204 Castle Hill St  Austin, TX 78703		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 01/07/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hill, Cynthia	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code 5108 Brookdale Ln  Austin, TX 78723-4019		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/07/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holloway, Lorinda	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code 111 Congress Ave Suite 1400 Austin, TX 78701		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/08/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ivester, Jo	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code 4611 Travis St 1409B Dallas, TX 75205		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/05/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jastrow, Corby	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code 1515 Mohle Dr  Austin, TX 78703		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A1: Sch: 8/14 Rpt: 11/33
2 FILER NAME Moore, Margaret		3 Filer ID
4 Date 01/20/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Brian	7 Amount of Contribution (\$) \$250.00
6 Contributor address; City; State; Zip Code 5413 Mountain Cedar Cove  Austin, TX 78731		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 01/21/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, John D	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code 137 West Bell Court  Lexington, KY 40508		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/21/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kever, Andrew	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code 6105 Highland Hills Dr.  Austin, TX 78701		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/05/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Little, Emily	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code 1001 E 8th St  Austin, TX 78702		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/12/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Littlefield, Sue	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code 204 Westhaven Dr  West Lake Hills, TX 78746-4443		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A1: Sch: 9/14 Rpt: 12/33
2 FILER NAME Moore, Margaret		3 Filer ID
4 Date 01/12/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mathews, Steve	7 Amount of Contribution (\$) \$150.00
	6 Contributor address; City; State; Zip Code 3003 A West 35th St  Austin, TX 78703	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 01/12/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McLellan, Bill	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code 613 W 33rd St  Austin, TX 78705-2223	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/12/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Catherine	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code 2905 Gilbert St  Austin, TX 78703-2217	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/15/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Susan	Amount of Contribution (\$) \$150.00
	Contributor address; City; State; Zip Code 57088 Jim Hogg  Austin, TX 78756	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/16/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morgan, Kathleen	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code 603 N Cuernavaca  Austin, TX 78733	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A1: Sch: 10/14 Rpt: 13/33
2 FILER NAME Moore, Margaret		3 Filer ID
4 Date 01/12/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Myers, Cis	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code 809 Canyon Creek Dr  Austin, TX 78746		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 01/05/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nugent, Pat	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code 6 Sundown Pkwy  Austin, TX 78746-5202		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/21/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oles Jr., Charles Patrick	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code 2202 Townbridge Circle  Austin, TX 78723		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/02/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parker, Marna Kay	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code 2407 River Hills Road  Austin, TX 78733		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/02/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pryor, Peggy Davis	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 800 San Antonio St #5 Austin, TX 78701		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A1: Sch: 11/14 Rpt: 14/33
2 FILER NAME Moore, Margaret		3 Filer ID
4 Date 01/14/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Purnell, Neva	7 Amount of Contribution (\$) \$500.00
	6 Contributor address; City; State; Zip Code 3014 Windsor Rd  Austin, TX 78703	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 01/05/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reagan, Mary	Amount of Contribution (\$) \$750.00
	Contributor address; City; State; Zip Code 1712 Datura Court  Austin, TX 78733	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/19/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rikliin, Rand	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code 13 Granburg Pl  San Antonio, TX 78218	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/06/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shivers Jr., Allan	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code 2905 San Gabriel St Suite 213 Austin, TX 78705-3541	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/12/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Terral	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code 6304 Cat Mountain CV  Austin, TX 78731	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 12/14 Rpt: 15/33
<b>2</b> FILER NAME Moore, Margaret		<b>3</b> Filer ID
<b>4</b> Date 01/08/2016	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Snyder, Donna	<b>7</b> Amount of Contribution (\$)  \$150.00
<b>6</b> Contributor address; City; State; Zip Code 2012 Thurman Bend Rd  Spicewood, TX 78669		
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 01/13/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Spence, Roy	Amount of Contribution (\$)  \$100.00
Contributor address; City; State; Zip Code 828 W 6th St  Austin, TX 78703		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/14/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Sykes, Melissa	Amount of Contribution (\$)  \$50.00
Contributor address; City; State; Zip Code 5802 Timber Trl  Austin, TX 78731		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/13/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Thompson, Cathy	Amount of Contribution (\$)  \$250.00
Contributor address; City; State; Zip Code 900 Redbud Trl  West Lake Hills, TX 78746		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/04/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Todd, Bruce	Amount of Contribution (\$)  \$250.00
Contributor address; City; State; Zip Code 8008 Spicewood Lane  Austin, TX 78759		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 13/14 Rpt: 16/33
<b>2</b> FILER NAME Moore, Margaret		<b>3</b> Filer ID
<b>4</b> Date 01/12/2016	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Todd, Elizabeth	<b>7</b> Amount of Contribution (\$) \$150.00
<b>6</b> Contributor address; City; State; Zip Code 8610 Millway Dr  Austin, TX 78757-6830		
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 01/13/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Townsend, Nancy	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code 1408 Hartford Rd  Austin, TX 78703		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/20/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Travis County Sheriff's Law Enforcement Association PAC	Amount of Contribution (\$) \$750.00
Contributor address; City; State; Zip Code 9400 Guerrero LN  Austin, TX 78747		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/12/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vasquez Law Firm Law Account	Amount of Contribution (\$) \$200.00
Contributor address; City; State; Zip Code 1004 West Ave  Austin, TX 78701		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/12/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Watson, Liz	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code 4017 Avenue H  Austin, TX 78751		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 14/14 Rpt: 17/33
<b>2</b> FILER NAME Moore, Margaret		<b>3</b> Filer ID
<b>4</b> Date 01/10/2016	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Winter, Raymond	<b>7</b> Amount of Contribution (\$) \$100.00
	<b>6</b> Contributor address; City; State; Zip Code 1501 A West 40th  Austin, TX 78756	
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
<b>Date</b> 01/16/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Woelk, Cynthia	<b>Amount of Contribution (\$)</b> \$200.00
	<b>Contributor address; City; State; Zip Code</b> 2405 Indian Trail  Austin, TX 78703	
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>

**PLEGGED CONTRIBUTIONS**

**SCHEDULE B**

**The Instruction Guide explains how to complete this form.**

**1** Total pages Schedule B:  
Sch: 1/1 Rpt: 18/33

**2** FILER NAME  
Moore, Margaret

**3** Filer ID

**4** TOTAL OF UNITEMIZED PLEDGES

\$ 0.00

**5** Date  
  
01/21/2016

**6** Full name of pledgor  out-of-state PAC (ID#: \_\_\_\_\_)  
Erwin, Gay

**7** Pledgor Address; City; State; Zip Code  
3 Jeffery CV  
  
Austin, TX 78746

**8** Amount of  
pledge (\$)  
  
\$250.00

**9** In-kind description  
(If applicable)

Check if travel outside of Texas. Complete Schedule T.

**10** Principal occupation / Job title (See Instructions)

**11** Employer (See Instructions)

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/15 Rpt: 19/33	2 FILER NAME Moore, Margaret		3 Filer ID
4 Date 01/04/2016	5 Payee name Bear Creek Media		
6 Amount (\$) \$1,750.00	7 Payee address; City; State; Zip Code P.O. Box 13536  Austin, TX 78711		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense website maintenance	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 01/04/2016	Payee name Camarillo, Sylvia		
Amount (\$) \$3,500.00	Payee address; City; State; Zip Code 904 Brook Hollow  Pflugerville, TX 78660		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense consulting services	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 01/21/2016	Payee name Donateway		
Amount (\$) \$12.80	Payee address; City; State; Zip Code PO Box 301267  Austin, TX 78703		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense processing fee	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 2/15 Rpt: 20/33		<b>2</b> FILER NAME Moore, Margaret		<b>3</b> Filer ID	
<b>4</b> Date 01/21/2016		<b>5</b> Payee name Donateway			
<b>6</b> Amount (\$) \$12.80		<b>7</b> Payee address; City; State; Zip Code PO Box 301267  Austin, TX 78703			
<b>8</b> PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking		<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense processing fee	
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 01/21/2016		Payee name Donateway			
Amount (\$) \$12.80		Payee address; City; State; Zip Code PO Box 301267  Austin, TX 78703			
PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking		<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense processing fee	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 01/21/2016		Payee name Donateway			
Amount (\$) \$15.30		Payee address; City; State; Zip Code PO Box 301267  Austin, TX 78703			
PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking		<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense processing fee	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 3/15 Rpt: 21/33		<b>2</b> FILER NAME Moore, Margaret		<b>3</b> Filer ID	
<b>4</b> Date 01/21/2016		<b>5</b> Payee name Donateway			
<b>6</b> Amount (\$) \$25.30		<b>7</b> Payee address; City; State; Zip Code PO Box 301267  Austin, TX 78703			
<b>8</b> PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking		<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense processing fee	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 01/21/2016		Payee name Donateway			
Amount (\$) \$25.30		Payee address; City; State; Zip Code PO Box 301267  Austin, TX 78703			
PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking		<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense processing fee	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 01/21/2016		Payee name Donateway			
Amount (\$) \$50.30		Payee address; City; State; Zip Code PO Box 301267  Austin, TX 78703			
PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking		<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense processing fee	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 4/15 Rpt: 22/33	<b>2</b> FILER NAME Moore, Margaret	<b>3</b> Filer ID
<b>4</b> Date 01/02/2016	<b>5</b> Payee name Donateway	
<b>6</b> Amount (\$) \$50.30	<b>7</b> Payee address; City; State; Zip Code PO Box 301267  Austin, TX 78703	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing Fees
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held
Date 01/02/2016	Payee name Donateway	
Amount (\$) \$5.30	Payee address; City; State; Zip Code PO Box 301267  Austin, TX 78703	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing Fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held
Date 01/04/2016	Payee name Donateway	
Amount (\$) \$12.80	Payee address; City; State; Zip Code PO Box 301267  Austin, TX 78703	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense processing fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 5/15 Rpt: 23/33	2 FILER NAME Moore, Margaret		3 Filer ID
4 Date 01/05/2016	5 Payee name Donateway		
6 Amount (\$) \$12.80	7 Payee address; City; State; Zip Code PO Box 301267  Austin, TX 78703		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense processing fee	
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 01/05/2016	Payee name Donateway		
Amount (\$) \$37.80	Payee address; City; State; Zip Code PO Box 301267  Austin, TX 78703		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense processing fee	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 01/06/2016	Payee name Donateway		
Amount (\$) \$5.30	Payee address; City; State; Zip Code PO Box 301267  Austin, TX 78703		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense processing fee	
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 6/15 Rpt: 24/33	<b>2</b> FILER NAME Moore, Margaret	<b>3</b> Filer ID
<b>4</b> Date 01/07/2016	<b>5</b> Payee name Donateway	
<b>6</b> Amount (\$) \$25.30	<b>7</b> Payee address; City; State; Zip Code PO Box 301267  Austin, TX 78703	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense processing fee
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held
Date 01/08/2016	Payee name Donateway	
Amount (\$) \$2.80	Payee address; City; State; Zip Code PO Box 301267  Austin, TX 78703	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense processing fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held
Date 01/08/2016	Payee name Donateway	
Amount (\$) \$7.80	Payee address; City; State; Zip Code PO Box 301267  Austin, TX 78703	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense processing fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 7/15 Rpt: 25/33	<b>2</b> FILER NAME Moore, Margaret	<b>3</b> Filer ID
<b>4</b> Date 01/10/2016	<b>5</b> Payee name Donateway	
<b>6</b> Amount (\$) \$12.80	<b>7</b> Payee address; City; State; Zip Code PO Box 301267  Austin, TX 78703	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense processing fee
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held
Date 01/10/2016	Payee name Donateway	
Amount (\$) \$5.30	Payee address; City; State; Zip Code PO Box 301267  Austin, TX 78703	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense processing fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held
Date 01/11/2016	Payee name Donateway	
Amount (\$) \$25.30	Payee address; City; State; Zip Code PO Box 301267  Austin, TX 78703	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense processing fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 8/15 Rpt: 26/33		<b>2</b> FILER NAME Moore, Margaret		<b>3</b> Filer ID	
<b>4</b> Date 01/12/2016		<b>5</b> Payee name Donateway			
<b>6</b> Amount (\$) \$5.30		<b>7</b> Payee address; City; State; Zip Code PO Box 301267  Austin, TX 78703			
<b>8</b> PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking		<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense processing fee	
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 01/12/2016		Payee name Donateway			
Amount (\$) \$10.30		Payee address; City; State; Zip Code PO Box 301267  Austin, TX 78703			
PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking		<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense processing fee	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 01/12/2016		Payee name Donateway			
Amount (\$) \$7.80		Payee address; City; State; Zip Code PO Box 301267  Austin, TX 78703			
PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking		<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense processing fee	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 9/15 Rpt: 27/33	<b>2</b> FILER NAME Moore, Margaret	<b>3</b> Filer ID
<b>4</b> Date 01/13/2016	<b>5</b> Payee name Donateway	
<b>6</b> Amount (\$) \$5.30	<b>7</b> Payee address; City; State; Zip Code PO Box 301267  Austin, TX 78703	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense processing fee
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 01/13/2016	Payee name Donateway	
Amount (\$) \$12.80	Payee address; City; State; Zip Code PO Box 301267  Austin, TX 78703	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense processing fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 01/13/2016	Payee name Donateway	
Amount (\$) \$12.80	Payee address; City; State; Zip Code PO Box 301267  Austin, TX 78703	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense processing fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 10/15 Rpt: 28/33	<b>2</b> FILER NAME Moore, Margaret	<b>3</b> Filer ID
<b>4</b> Date 01/14/2016	<b>5</b> Payee name Donateway	
<b>6</b> Amount (\$) \$10.30	<b>7</b> Payee address; City; State; Zip Code PO Box 301267  Austin, TX 78703	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense processing fee
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held
Date 01/05/2016	Payee name Donateway	
Amount (\$) \$12.80	Payee address; City; State; Zip Code PO Box 301267  Austin, TX 78703	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense processing fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held
Date 01/14/2016	Payee name Donateway	
Amount (\$) \$25.30	Payee address; City; State; Zip Code PO Box 301267  Austin, TX 78703	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense processing fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel in District  
Travel Out of District  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 11/15 Rpt: 29/33	<b>2</b> FILER NAME Moore, Margaret	<b>3</b> Filer ID
<b>4</b> Date 01/14/2016	<b>5</b> Payee name Donateway	
<b>6</b> Amount (\$) \$2.80	<b>7</b> Payee address; City; State; Zip Code PO Box 301267  Austin, TX 78703	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense processing fee
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held
Date 01/15/2016	Payee name Donateway	
Amount (\$) \$7.80	Payee address; City; State; Zip Code PO Box 301267  Austin, TX 78703	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense processing fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held
Date 01/16/2016	Payee name Donateway	
Amount (\$) \$10.30	Payee address; City; State; Zip Code PO Box 301267  Austin, TX 78703	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense processing fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 12/15 Rpt: 30/33	<b>2</b> FILER NAME Moore, Margaret	<b>3</b> Filer ID
<b>4</b> Date 01/17/2016	<b>5</b> Payee name Donateway	
<b>6</b> Amount (\$) \$6.56	<b>7</b> Payee address; City; State; Zip Code PO Box 301267  Austin, TX 78703	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense processing fee
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held
Date 01/18/2016	Payee name Donateway	
Amount (\$) \$12.80	Payee address; City; State; Zip Code PO Box 301267  Austin, TX 78703	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense processing fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held
Date 01/18/2016	Payee name Donateway	
Amount (\$) \$12.80	Payee address; City; State; Zip Code PO Box 301267  Austin, TX 78703	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense processing fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 13/15 Rpt: 31/33	<b>2</b> FILER NAME Moore, Margaret	<b>3</b> Filer ID
<b>4</b> Date 01/19/2016	<b>5</b> Payee name Donateway	
<b>6</b> Amount (\$) \$25.30	<b>7</b> Payee address; City; State; Zip Code PO Box 301267  Austin, TX 78703	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense processing fee
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held
Date 01/20/2016	Payee name Donateway	
Amount (\$) \$12.80	Payee address; City; State; Zip Code PO Box 301267  Austin, TX 78703	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense processing fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held
Date 01/20/2016	Payee name Donateway	
Amount (\$) \$25.30	Payee address; City; State; Zip Code PO Box 301267  Austin, TX 78703	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense processing fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 14/15 Rpt: 32/33	<b>2</b> FILER NAME Moore, Margaret	<b>3</b> Filer ID
<b>4</b> Date 01/20/2016	<b>5</b> Payee name Donateway	
<b>6</b> Amount (\$) \$2.80	<b>7</b> Payee address; City; State; Zip Code PO Box 301267  Austin, TX 78703	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense processing fee
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held
Date 01/20/2016	Payee name Donateway	
Amount (\$) \$12.80	Payee address; City; State; Zip Code PO Box 301267  Austin, TX 78703	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense processing fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held
Date 01/11/2016	Payee name Donateway	
Amount (\$) \$5.30	Payee address; City; State; Zip Code PO Box 301267  Austin, TX 78703	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense processing fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 15/15 Rpt: 33/33	<b>2</b> FILER NAME Moore, Margaret	<b>3</b> Filer ID
<b>4</b> Date 01/06/2016	<b>5</b> Payee name Travis County Tax Assessor	
<b>6</b> Amount (\$) \$24.00	<b>7</b> Payee address; City; State; Zip Code 5501 Airport Boulevard  Austin, TX 78751	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Map	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense map
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held