

CORRECTION/AMENDMENT AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

8790

FORM COR-C/OH

1 Filer ID (Ethics Commission Filers)		2 Total pages filed:		OFFICE USE ONLY			
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST	MI			Date Received	
	NICKNAME	LAST	SUFFIX			Date Hand-delivered or Date Postmarked	
4 ORIGINAL REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> Runoff <input type="checkbox"/> Other (specify) _____ <input type="checkbox"/> July 15 <input type="checkbox"/> Exceeded \$500 limit <input checked="" type="checkbox"/> 30th day before election <input type="checkbox"/> 15th day after treasurer appointment (officeholder only) <input type="checkbox"/> 8th day before election <input type="checkbox"/> Final report			Receipt #			
5 ORIGINAL PERIOD COVERED	Month	Day	Year	Month	Day	Year	

FILED FOR REPORT
2016 FEB 22 PM 3:32
Data Department
County Clerk
Travis County, Texas

6 EXPLANATION OF CORRECTION
 1) Omitted expenditures
 2) Correct duplication of two (2) contributions.

7 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that this corrected report is true and correct.

Check ONLY if applicable:

Semiannual reports: I swear, or affirm, that the original report was made in good faith and without an intent to mislead or to misrepresent the information contained in the report.

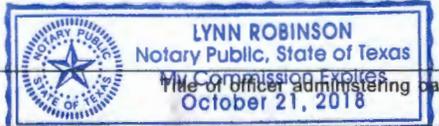
Other reports: I swear, or affirm, that I am filing this corrected report not later than the 14th business day after the date I learned that the report as originally filed is inaccurate or incomplete. I swear, or affirm, that any error or omission in the report as originally filed was made in good faith.

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 22 day of FEBRUARY, 2016, to certify which, witness my hand and seal of office.

Lynn Robinson LYNN ROBINSON
 Signature of officer administering oath Printed name of officer administering oath



Remember To Attach Any Part Of The Campaign Finance Report Form Needed To Report And Explain Corrections

**CANDIDATE / OFFICEHOLDER
CAMPAIGN FINANCE REPORT**

Corrected 2-22-2016 **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: 34				
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST Margaret	MI	OFFICE USE ONLY			
	NICKNAME	LAST Moore	SUFFIX				
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 <i>Bruce</i>	MI <i>M</i>				
	NICKNAME	LAST <i>Todd</i>	SUFFIX				
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE);		APT / SUITE #;	CITY;	STATE;	ZIP CODE	
	<i>8008 Spicewood Ln.</i>			<i>Austin</i>	<i>Tx</i>	<i>78759</i>	
7 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION				
	<i>512</i>	<i>413 - 4141</i>					
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 44

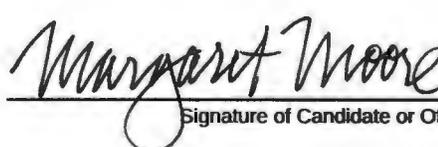
13 C / OH NAME Moore, Margaret	14 Filer ID
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15 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> Additional Pages	This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures.	
<input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE TYPE	COMMITTEE NAME
		COMMITTEE ADDRESS
		COMMITTEE CAMPAIGN TREASURER NAME
		COMMITTEE CAMPAIGN TREASURER ADDRESS

16 CONTRIBUTION TOTALS	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)	\$ 23,840.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 35,997.98
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 13,748.18
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 2,285.98

17 AFFADAVIT

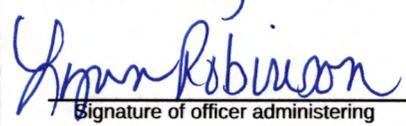
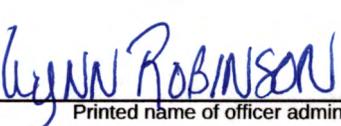
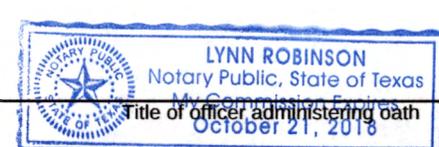
I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.



 Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said MARGARET MOORE, this the 22 day of FEBRUARY, 2016, to certify which, witness my hand and seal of office.

 Signature of officer administering Printed name of officer administering Title of officer administering oath

SUBTOTALS - C/OH

18 FILER NAME Moore, Margaret		19 Filer ID
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 23,550.00
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	\$ 11,909.95
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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/13 Rpt: 4/34
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#: _____) Andrews, Kay 6 Contributor address; City; State; Zip Code 1808 Intervail Dr Austin, TX 78746	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 01/09/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anthony, Linda Contributor address; City; State; Zip Code 1500 Old Wagon Rd. Austin, TX 78746	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/10/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Armburst, Cheryl David Contributor address; City; State; Zip Code 100 Congress Ave suite 1300 Austin, TX 78701	Amount of Contribution (\$) \$250.00
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#: _____) Bailey, Kellie Contributor address; City; State; Zip Code 2102 Woodmont Ave Austin, TX 78703	Amount of Contribution (\$) \$250.00
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#: _____) Bishop, Brian Contributor address; City; State; Zip Code 900 West Ave Austin, TX 78701	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/13 Rpt: 5/34
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 6 Contributor address; City; State; Zip Code 2103 Woodmont Ave Austin, TX 78703	7 Amount of Contribution (\$) \$200.00
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 Contributor address; City; State; Zip Code 106 Wood Trail West Lake Hills, TX 78746	Amount of Contribution (\$) \$250.00
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 Contributor address; City; State; Zip Code 3001 Gilbert St Austin, TX 78703	Amount of Contribution (\$) \$125.00
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 Contributor address; City; State; Zip Code 3009 Gilbert St Austin, TX 78703	Amount of Contribution (\$) \$250.00
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 Contributor address; City; State; Zip Code 4231 Westlake Dr #A3 Austin, TX 78746	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/13 Rpt: 6/34
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#: _____) Carden, Amber 6 Contributor address; City; State; Zip Code 10807 Sans Souci Pl Austin, TX 78759-5151	7 Amount of Contribution (\$)
		\$100.00
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#: _____) Clayton, Brenda Contributor address; City; State; Zip Code 2003 Pequeno St. Austin, TX 78757	Amount of Contribution (\$)
		\$250.00
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 Contributor address; City; State; Zip Code 3908 Galacia Dr Austin, TX 78759	Amount of Contribution (\$)
		\$500.00
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 Contributor address; City; State; Zip Code 5000 Mission Oaks #43 Austin, TX 78735	Amount of Contribution (\$)
		\$100.00
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, Timothy Contributor address; City; State; Zip Code 5902 Lonesome Valley Trl Austin, TX 78731	Amount of Contribution (\$)
		\$200.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/13 Rpt: 7/34
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#: _____) Crozier, Mark 6 Contributor address; City; State; Zip Code 2707 Berensen Ln Austin, TX 78746	7 Amount of Contribution (\$) \$500.00
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, Mary Contributor address; City; State; Zip Code 2707 Berensen Ln Austin, TX 78746	Amount of Contribution (\$) \$500.00
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 Contributor address; City; State; Zip Code 602 W. 9th Austin, TX 78701	Amount of Contribution (\$) \$250.00
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 Contributor address; City; State; Zip Code 2810 Pickwick Ln Austin, TX 78746	Amount of Contribution (\$) \$500.00
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#: _____) Dworin, Dan Contributor address; City; State; Zip Code 1304 Neuces Austin, TX 78701	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/13 Rpt: 8/34
2 FILER NAME Moore, Margaret		3 Filer ID
4 Date 01/11/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gammon, William 6 Contributor address; City; State; Zip Code 1615 Guadalupe St Austin, TX 78701	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 01/19/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Geistman, Jan Contributor address; City; State; Zip Code 6309 Gato Path Austin, TX 78731	Amount of Contribution (\$) \$300.00
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 Contributor address; City; State; Zip Code 9301 johnny morris rd Austin, TX 78724	Amount of Contribution (\$) \$250.00
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 Contributor address; City; State; Zip Code 3201B Hillview Road Austin, TX 78703	Amount of Contribution (\$) \$100.00
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#: _____) Goode Casseb Jones Contributor address; City; State; Zip Code P.O. Box 120480 San Antonio, TX 78212	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/13 Rpt: 9/34
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#: _____) Gosselink, Margaret 6 Contributor address; City; State; Zip Code 903 W 16th St Austin, TX 78701	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 01/06/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grossenbacher, Gary Contributor address; City; State; Zip Code 402 Vale St Rollingwood, TX 78746	Amount of Contribution (\$) \$100.00
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 Contributor address; City; State; Zip Code 5501 a Balcones Dr. Austin, TX 78731	Amount of Contribution (\$) \$300.00
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#: _____) Herring, Chuck Contributor address; City; State; Zip Code 1204 Castle Hill St Austin, TX 78703	Amount of Contribution (\$) \$250.00
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#: _____) Hill, Cynthia Contributor address; City; State; Zip Code 5108 Brookdale Ln Austin, TX 78723-4019	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/13 Rpt: 10/34
2 FILER NAME Moore, Margaret		3 Filer ID
4 Date 01/07/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holloway, Lorinda 6 Contributor address; City; State; Zip Code 111 Congress Ave Suite 1400 Austin, TX 78701	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 01/08/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ivester, Jo Contributor address; City; State; Zip Code 4611 Travis St 1409B Dallas, TX 75205	Amount of Contribution (\$) \$50.00
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 Contributor address; City; State; Zip Code 1515 Mohle Dr Austin, TX 78703	Amount of Contribution (\$) \$250.00
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#: _____) Johnson, Brian Contributor address; City; State; Zip Code 5413 Mountain Cedar Cove Austin, TX 78731	Amount of Contribution (\$) \$250.00
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#: _____) Jones, John D Contributor address; City; State; Zip Code 137 West Bell Court Lexington, KY 40508	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/13 Rpt: 11/34
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#: _____) Kever, Andrew 6 Contributor address; City; State; Zip Code 6105 Highland Hills Dr. Austin, TX 78701	7 Amount of Contribution (\$) \$500.00
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#: _____) Little, Emily Contributor address; City; State; Zip Code 1001 E 8th St Austin, TX 78702	Amount of Contribution (\$) \$250.00
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 Contributor address; City; State; Zip Code 204 Westhaven Dr West Lake Hills, TX 78746-4443	Amount of Contribution (\$) \$500.00
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#: _____) Matthews, Steve Contributor address; City; State; Zip Code 3003 A West 35th St Austin, TX 78703	Amount of Contribution (\$) \$150.00
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#: _____) McLellan, Bill Contributor address; City; State; Zip Code 613 W 33rd St Austin, TX 78705-2223	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/13 Rpt: 12/34
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#: _____) Miller, Catherine 6 Contributor address; City; State; Zip Code 2905 Gilbert St Austin, TX 78703-2217	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 01/15/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miller, Susan Contributor address; City; State; Zip Code 57088 Jim Hogg Austin, TX 78756	Amount of Contribution (\$) \$150.00
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 Contributor address; City; State; Zip Code 603 N Cuernavaca Austin, TX 78733	Amount of Contribution (\$) \$50.00
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#: _____) Myers, Cis Contributor address; City; State; Zip Code 809 Canyon Creek Dr Austin, TX 78746	Amount of Contribution (\$) \$25.00
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#: _____) Nugent, Pat Contributor address; City; State; Zip Code 6 Sundown Pkwy Austin, TX 78746-5202	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/13 Rpt: 13/34
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#: _____) Oles Jr., Charles Patrick 6 Contributor address; City; State; Zip Code 2202 Townbridge Circle Austin, TX 78723	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 01/02/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parker, Marna Kay Contributor address; City; State; Zip Code 2407 River Hills Road Austin, TX 78733	Amount of Contribution (\$) \$1,000.00
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 Contributor address; City; State; Zip Code 800 San Antonio St #5 Austin, TX 78701	Amount of Contribution (\$) \$100.00
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#: _____) Purnell, Neva Contributor address; City; State; Zip Code 3014 Windsor Rd Austin, TX 78703	Amount of Contribution (\$) \$500.00
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#: _____) Reagan, Mary Contributor address; City; State; Zip Code 1712 Datura Court Austin, TX 78733	Amount of Contribution (\$) \$750.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 11/13 Rpt: 14/34
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#: _____) Riklin, Rand 6 Contributor address; City; State; Zip Code 13 Granburg Pl San Antonio, TX 78218	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 01/06/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shivers Jr., Allan Contributor address; City; State; Zip Code 2905 San Gabriel St Suite 213 Austin, TX 78705-3541	Amount of Contribution (\$) \$500.00
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 Contributor address; City; State; Zip Code 6304 Cat Mountain CV Austin, TX 78731	Amount of Contribution (\$) \$250.00
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#: _____) Snyder, Donna Contributor address; City; State; Zip Code 2012 Thurman Bend Rd Spicewood, TX 78669	Amount of Contribution (\$) \$150.00
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#: _____) Spence, Roy Contributor address; City; State; Zip Code 828 W 6th St Austin, TX 78703	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 12/13 Rpt: 15/34
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#: _____) Sykes, Melissa 6 Contributor address; City; State; Zip Code 5802 Timber Trl Austin, TX 78731	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 01/13/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Cathy Contributor address; City; State; Zip Code 900 Redbud Trl West Lake Hills, TX 78746	Amount of Contribution (\$) \$250.00
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 Contributor address; City; State; Zip Code 8008 Spicewood Lane Austin, TX 78759	Amount of Contribution (\$) \$250.00
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#: _____) Todd, Elizabeth Contributor address; City; State; Zip Code 8610 Millway Dr Austin, TX 78757-6830	Amount of Contribution (\$) \$150.00
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#: _____) Townsend, Nancy Contributor address; City; State; Zip Code 1408 Hartford Rd Austin, TX 78703	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 13/13 Rpt: 16/34
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#: _____) Travis County Sheriff's Law Enforcement Association PAC 6 Contributor address; City; State; Zip Code 9400 Guerrero LN Austin, TX 78747	7 Amount of Contribution (\$) \$750.00
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#: _____) Vasquez Law Firm Law Account Contributor address; City; State; Zip Code 1004 West Ave Austin, TX 78701	Amount of Contribution (\$) \$200.00
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 Contributor address; City; State; Zip Code 4017 Avenue H Austin, TX 78751	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/10/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Winter, Raymond Contributor address; City; State; Zip Code 1501 A West 40th Austin, TX 78756	Amount of Contribution (\$) \$100.00
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#: _____) Woelk, Cynthia Contributor address; City; State; Zip Code 2405 Indian Trail Austin, TX 78703	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

PLEGGED CONTRIBUTIONS

SCHEDULE B

The Instruction Guide explains how to complete this form.		1 Total pages Schedule B: Sch: 1/1 Rpt: 17/34
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 Erwin, Gay <input type="checkbox"/> out-of-state PAC (ID#: _____) 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) <input type="checkbox"/> 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 | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel in District |
| Contributions/ Donations Made By - | Gift/Awards/Memorials Expense | Printing Expense | Travel Out of District |
| Candidate/Officeholder/Political Committee | Legal Services | Salaries/Wages/Contract Labor | OTHER (enter a category not listed above) |
| Credit Card Payment | | | |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/17 Rpt: 18/34	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 <u>ONLY</u> 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 <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate/Officeholder name	Office sought Office held
Date 01/11/2016	Payee name Camarillo, Sylvia	
Amount (\$) \$24.00	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) office supplies	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense offices supplies
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.

1 Total pages Schedule F1: Sch: 2/17 Rpt: 19/34	2 FILER NAME Moore, Margaret	3 Filer ID
4 Date 01/06/2016	5 Payee name Camarillo, Sylvia	
6 Amount (\$) \$108.24	7 Payee address; City; State; Zip Code 904 Brook Hollow Pflugerville, TX 78660	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 reimbursement for supplies
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/04/2016	Payee name Cruze, Zaq	
Amount (\$) \$1,650.00	Payee address; City; State; Zip Code 3100 Scarborough Lane West Colleyville, TX 76034	
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 Staff
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/11/2016	Payee name Cruze, Zaq	
Amount (\$) \$44.76	Payee address; City; State; Zip Code 3100 Scarborough Lane West Colleyville, TX 76034	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) office supplies	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office supplies
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.

1 Total pages Schedule F1: Sch: 3/17 Rpt: 20/34	2 FILER NAME Moore, Margaret	3 Filer ID
4 Date 01/12/2016	5 Payee name Cruze, Zaq	
6 Amount (\$) \$21.64	7 Payee address; City; State; Zip Code 3100 Scarborough Lane West Colleyville, TX 76034	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) office supplies	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office supplies
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/18/2016	Payee name Cruze, Zaq	
Amount (\$) \$825.00	Payee address; City; State; Zip Code 3100 Scarborough Lane West Colleyville, TX 76034	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting 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 consulting
Complete <u>ONLY</u> 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 <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.

1 Total pages Schedule F1: Sch: 4/17 Rpt: 21/34	2 FILER NAME Moore, Margaret	3 Filer ID
4 Date 01/21/2016	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 <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 01/21/2016	Candidate/Officeholder name Donateway	
Amount (\$) \$12.80	Office sought Austin, TX 78703	
Office held		
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 <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 01/21/2016	Candidate/Officeholder name Donateway	
Amount (\$) \$15.30	Office sought Austin, TX 78703	
Office held		
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 <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 01/21/2016	Candidate/Officeholder name Donateway	
Amount (\$) \$15.30	Office sought Austin, TX 78703	
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: 5/17 Rpt: 22/34	2 FILER NAME Moore, Margaret	3 Filer ID
4 Date 01/21/2016	5 Payee name Donateway	
6 Amount (\$) \$25.30	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 <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
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	(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 <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
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	(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 <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.

1 Total pages Schedule F1: Sch: 6/17 Rpt: 23/34		2 FILER NAME Moore, Margaret		3 Filer ID	
4 Date 01/02/2016		5 Payee name Donateway			
6 Amount (\$) \$50.30		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 Fees	
9 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: 7/17 Rpt: 24/34	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 <u>ONLY</u> 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 <u>ONLY</u> 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 <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.

1 Total pages Schedule F1: Sch: 8/17 Rpt: 25/34		2 FILER NAME Moore, Margaret		3 Filer ID	
4 Date 01/07/2016		5 Payee name Donateway			
6 Amount (\$) \$25.30		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	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
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 <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
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 <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
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: 9/17 Rpt: 26/34	2 FILER NAME Moore, Margaret	3 Filer ID
4 Date 01/10/2016	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 <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	(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 <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	(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 <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.

1 Total pages Schedule F1: Sch: 10/17 Rpt: 27/34	2 FILER NAME Moore, Margaret	3 Filer ID
4 Date 01/12/2016	5 Payee name Donateway	
6 Amount (\$) \$5.30	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 <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
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	(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 <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
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	(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 <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.

1 Total pages Schedule F1: Sch: 11/17 Rpt: 28/34		2 FILER NAME Moore, Margaret		3 Filer ID	
4 Date 01/13/2016		5 Payee name Donateway			
6 Amount (\$) \$5.30		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 01/13/2016		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 01/13/2016		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: 12/17 Rpt: 29/34		2 FILER NAME Moore, Margaret		3 Filer ID
4 Date 01/14/2016		5 Payee name Donateway		
6 Amount (\$) \$10.30		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 (\$) \$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 01/14/2016		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
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: 13/17 Rpt: 30/34		2 FILER NAME Moore, Margaret		3 Filer ID	
4 Date 01/14/2016		5 Payee name Donateway			
6 Amount (\$) \$2.80		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 <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
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		(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 <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
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		(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 <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 0(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: 14/17 Rpt: 31/34	2 FILER NAME Moore, Margaret	3 Filer ID
4 Date 01/17/2016	5 Payee name Donateway	
6 Amount (\$) \$6.56	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 <u>ONLY</u> 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 <u>ONLY</u> 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 <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.

1 Total pages Schedule F1: Sch: 15/17 Rpt: 32/34		2 FILER NAME Moore, Margaret		3 Filer ID
4 Date 01/19/2016		5 Payee name Donateway		
6 Amount (\$) \$25.30		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 01/20/2016		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
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: 16/17 Rpt: 33/34	2 FILER NAME Moore, Margaret	3 Filer ID
4 Date 01/20/2016	5 Payee name Donateway	
6 Amount (\$) \$2.80	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 <u>ONLY</u> 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 <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 (\$) \$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 <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.

1 Total pages Schedule F1: Sch: 17/17 Rpt: 34/34	2 FILER NAME Moore, Margaret	3 Filer ID
4 Date 01/09/2016	5 Payee name Jeff Crosby Direct Mail	
6 Amount (\$) \$2,053.00	7 Payee address; City; State; Zip Code 902 E 5th St STE 103 Austin, TX 78702	
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 consulting
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/04/2016	Payee name Pegalo Properties	
Amount (\$) \$1,311.05	Payee address; City; State; Zip Code 501 N IH35 Austin, TX 78702	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 rent
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/06/2016	Payee name Travis County Tax Assessor	
Amount (\$) \$24.00	Payee address; City; State; Zip Code 5501 Airport Boulevard Austin, TX 78751	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Map	(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
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held