

**CANDIDATE / OFFICEHOLDER  
CAMPAIGN FINANCE REPORT**

8791

**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: 44
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST	MI
	NICKNAME	LAST	SUFFIX
Margaret Moore			<b>OFFICE USE ONLY</b> Date Received 2016 FEB 2 11:43 AM Travis County, Texas FILED Date Hand-delivered or Date Postmarked Receipt # Amount Date Processed Date Imaged
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY;		ZIP CODE
	501 N IH 35 209a Austin, TX 78702		
5 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST	MI
	NICKNAME	LAST	SUFFIX
Bruce Todd			
6 CAMPAIGN TREASURER ADDRESS <small>(Residence or Business)</small>	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE		
8008 Spicewood Lane Austin, Texas 78759			
7 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION
512 413-4141			
8 REPORT TYPE	<input type="checkbox"/> January 15 <input 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 checked="" 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
01/22/2016 THROUGH 02/20/2016			
10 ELECTION	ELECTION DATE		ELECTION TYPE
	Month Day Year	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	<input type="checkbox"/> Runoff <input type="checkbox"/> Special <input type="checkbox"/> Other
03/01/2016			
11 OFFICE	OFFICE HELD (if any)	12 OFFICE SOUGHT (if known)	
		District Attorney Place Austin, TX District Travis	

**GO TO PAGE 2**

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

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

2 of 34

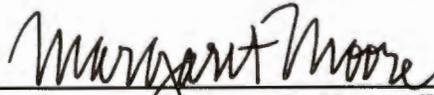
<b>13 C / OH NAME</b> Moore, Margaret	<b>14 Filer ID</b>
---------------------------------------	--------------------

<b>15 NOTICE FROM POLITICAL COMMITTEE(S)</b>  <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.									
<table border="1" style="width:100%"> <tr> <td style="width:20%"><b>COMMITTEE TYPE</b></td> <td><b>COMMITTEE NAME</b></td> </tr> <tr> <td><input type="checkbox"/> GENERAL</td> <td><b>COMMITTEE ADDRESS</b></td> </tr> <tr> <td><input type="checkbox"/> SPECIFIC</td> <td><b>COMMITTEE CAMPAIGN TREASURER NAME</b></td> </tr> <tr> <td></td> <td><b>COMMITTEE CAMPAIGN TREASURER ADDRESS</b></td> </tr> </table>	<b>COMMITTEE TYPE</b>	<b>COMMITTEE NAME</b>	<input type="checkbox"/> GENERAL	<b>COMMITTEE ADDRESS</b>	<input type="checkbox"/> SPECIFIC	<b>COMMITTEE CAMPAIGN TREASURER NAME</b>		<b>COMMITTEE CAMPAIGN TREASURER ADDRESS</b>		
	<b>COMMITTEE TYPE</b>	<b>COMMITTEE NAME</b>								
	<input type="checkbox"/> GENERAL	<b>COMMITTEE ADDRESS</b>								
	<input type="checkbox"/> SPECIFIC	<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)	\$ 23,550.00
<b>EXPENDITURE TOTALS</b>	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 11,909.95
<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.

  
 \_\_\_\_\_  
 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      Printed name of officer administering



**SUBTOTALS - C/OH**

<b>18 FILER NAME</b> Moore, Margaret		<b>19 Filer ID</b>
<b>20 SCHEDULE SUBTOTALS</b> NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 23,840.00
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input checked="" type="checkbox"/> SCHEDULE E: LOANS	\$ 285.98
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 35,997.98
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>		1 Total pages Schedule A1: Sch: 1/17 Rpt: 4/44
2 FILER NAME Moore, Margaret		3 Filer ID
4 Date 02/16/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aaker, Linda 6 Contributor address; City; State; Zip Code 6204 Shadow Mountain Cove  Austin, TX 78731	7 Amount of Contribution (\$)  \$200.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 01/25/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aleshire, Bill Contributor address; City; State; Zip Code 3605 Shady Valley  Austin, TX 78739	Amount of Contribution (\$)  \$750.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/31/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Andrews, Michelle Contributor address; City; State; Zip Code 8204 Lone Deer Run  Austin, TX 78737	Amount of Contribution (\$)  \$40.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/20/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Axe, albert Contributor address; City; State; Zip Code 401 Congress ave STE 2100 austin, TX 78701	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/31/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Banks, Richard Contributor address; City; State; Zip Code 525 S Guadalupe St  Lockhart, TX 78644	Amount of Contribution (\$)  \$100.00
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: 2/17 Rpt: 5/44
2 FILER NAME Moore, Margaret		3 Filer ID
4 Date 01/25/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barnes, Melanie 6 Contributor address; City; State; Zip Code 1210B West 13th St  Austin, TX 78703	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 01/25/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Benge, Linda Contributor address; City; State; Zip Code 301 Congress STE 320 Austin, TX 78701	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/26/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Benolken, Ann Contributor address; City; State; Zip Code 601 Bulian Lane  Austin, TX 78746	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/25/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bingham, Rebecca Contributor address; City; State; Zip Code 1805 A San Gabriel  Austin, TX 78701	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/04/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bond, Tom Contributor address; City; State; Zip Code 105 Spearpoint Cv  Georgetown, TX 78628	Amount of Contribution (\$) \$500.00
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: 3/17 Rpt: 6/44
2 FILER NAME Moore, Margaret		3 Filer ID
4 Date 01/25/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Breed, Janie 6 Contributor address; City; State; Zip Code 3006 Maywood Circle  Austin, TX 78703	7 Amount of Contribution (\$)  \$100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 01/25/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Byars, Sam Contributor address; City; State; Zip Code 2103 Schulle Avenue  Austin, TX 78703	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/25/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carrell, Elisabeth Contributor address; City; State; Zip Code 5215 Buckman Mountain Rd  Austin, TX 78746	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/20/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cartwright, Mary Contributor address; City; State; Zip Code 1715 Norris Dr  Austin, TX 78704	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/05/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Civins, Jeff Contributor address; City; State; Zip Code 600 Congress Ave STE 1300  Austin, TX 78701	Amount of Contribution (\$)  \$250.00
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: 4/17 Rpt: 7/44
2 FILER NAME Moore, Margaret		3 Filer ID
4 Date 02/11/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Corsbie, Chris 6 Contributor address; City; State; Zip Code 2200 Allred Dr  Austin, TX 78748	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/19/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Cotton, Mitzi Contributor address; City; State; Zip Code 4103 Avenue C  Austin, TX 78751	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/18/2016	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 01/25/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Denny, Stella Contributor address; City; State; Zip Code 115 Antonio Way  Lakeway, TX 78734	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/05/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Dunlap, Justin Contributor address; City; State; Zip Code 4412 Rosedale AVE  Austin, TX 78756	Amount of Contribution (\$) \$150.00
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: 5/17 Rpt: 8/44
<b>2</b> FILER NAME Moore, Margaret		<b>3</b> Filer ID
<b>4</b> Date 01/31/2016	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Einfalt, Mark <b>6</b> Contributor address; City; State; Zip Code 1203 Woodlawn DR  Pflugerville, TX 78660	<b>7</b> Amount of Contribution (\$) <span style="float: right;">\$100.00</span>
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 01/24/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Erwin, Gay Contributor address; City; State; Zip Code 3 Jeffry  Austin, TX 78746	Amount of Contribution (\$) <span style="float: right;">\$250.00</span>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/10/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Forbes, Thomas Contributor address; City; State; Zip Code 3414 Cascadera Dr  Austin, TX 78731	Amount of Contribution (\$) <span style="float: right;">\$250.00</span>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/16/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gill, Hubert L Contributor address; City; State; Zip Code 1707 Palma Plaza  Austin, TX 78703	Amount of Contribution (\$) <span style="float: right;">\$100.00</span>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/26/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goldrick, Cynthia Contributor address; City; State; Zip Code 601 Coquina Ln  Austin, TX 78746	Amount of Contribution (\$) <span style="float: right;">\$50.00</span>
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: 6/17 Rpt: 9/44
<b>2</b> FILER NAME Moore, Margaret		<b>3</b> Filer ID
<b>4</b> Date 02/04/2016	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Golemon, Jacqueline  <b>6</b> Contributor address; City; State; Zip Code 408 West 14th ST  Austin, TX 78701	<b>7</b> Amount of Contribution (\$) <span style="float: right;">\$150.00</span>
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 02/20/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gosselink, Margaret  Contributor address; City; State; Zip Code 903 W 16th St  Austin, TX 78701	Amount of Contribution (\$) <span style="float: right;">\$50.00</span>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/16/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gosselink, Margaret  Contributor address; City; State; Zip Code 903 W 16th St  Austin, TX 78701	Amount of Contribution (\$) <span style="float: right;">\$150.00</span>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/05/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greig, Brian  Contributor address; City; State; Zip Code 2415 Pemberton Place  Austin, TX 78703	Amount of Contribution (\$) <span style="float: right;">\$200.00</span>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/29/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haggerty, jean  Contributor address; City; State; Zip Code 2003 lakeshore dr  austin, TX 78746	Amount of Contribution (\$) <span style="float: right;">\$100.00</span>
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: 7/17 Rpt: 10/44
<b>2</b> FILER NAME Moore, Margaret		<b>3</b> Filer ID
<b>4</b> Date 01/23/2016	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hampton, Keith <b>6</b> Contributor address; City; State; Zip Code 3107 Whitepine Drive  Austin, TX 78757	<b>7</b> Amount of Contribution (\$) <span style="float: right;">\$200.00</span>
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 02/04/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harris, Jerry Contributor address; City; State; Zip Code 111 Congress Ave STE 1400  Austin, TX 78701	Amount of Contribution (\$) <span style="float: right;">\$250.00</span>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/16/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harris, Jerry Contributor address; City; State; Zip Code 111 Congress Ave STE 1400  Austin, TX 78701	Amount of Contribution (\$) <span style="float: right;">\$250.00</span>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/01/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hoeffner, James Contributor address; City; State; Zip Code 5501 Scout Island Circle  Austin, TX 78731	Amount of Contribution (\$) <span style="float: right;">\$100.00</span>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/27/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Icenhauer Ramirez, Robert Contributor address; City; State; Zip Code 1103 Nueces Street  Austin, TX 78701	Amount of Contribution (\$) <span style="float: right;">\$500.00</span>
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: 8/17 Rpt: 11/44
2 FILER NAME Moore, Margaret		3 Filer ID
4 Date 02/20/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Brian 6 Contributor address; City; State; Zip Code 5413 Mountain Cedar Cove  Austin, TX 78731	7 Amount of Contribution (\$)  \$100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/20/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, David Contributor address; City; State; Zip Code 137 West Bell Vourt  Lexington, KY 40508	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/03/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Melissa Contributor address; City; State; Zip Code 1203A Elm Street  Austin, TX 78703-4013	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/05/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) KEEPER, PAUL Contributor address; City; State; Zip Code 700 HARRIS AVENUE  AUSTIN, TX 78705	Amount of Contribution (\$)  \$200.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/02/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelly, Pat Contributor address; City; State; Zip Code 2710 Townes Lane  Austin, TX 78703	Amount of Contribution (\$)  \$100.00
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: 9/17 Rpt: 12/44
2 FILER NAME Moore, Margaret		3 Filer ID
4 Date 01/31/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kemp, Linda 6 Contributor address; City; State; Zip Code 3315 Meredith st  Austin, TX 78703	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/19/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Knutsen, Tom Contributor address; City; State; Zip Code 6803 Lexington Road  Austin, TX 78757	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/31/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kraj, Lynne Contributor address; City; State; Zip Code 3608 Dali Ln  Austin, TX 78703	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/20/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kugle, Cherry Contributor address; City; State; Zip Code 4613 Shoalwood Avenue  Austin, TX 78756	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/16/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kugle, Cherry Contributor address; City; State; Zip Code 4613 Shoalwood Ave  Austin, TX 78756	Amount of Contribution (\$) \$50.00
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: 10/17 Rpt: 13/44
2 FILER NAME Moore, Margaret		3 Filer ID
4 Date 01/25/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Langham, Barbara 6 Contributor address; City; State; Zip Code 603 Terrace Mountain Dr.  Austin, TX 78746	7 Amount of Contribution (\$)  \$50.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/19/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Linebarger, Dale Contributor address; City; State; Zip Code 3 Niles Rd  Austin, TX 78703	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/08/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Linebarger, Dale Contributor address; City; State; Zip Code 3 Niles Rd  Austin, TX 78703	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/11/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martin, Jack Contributor address; City; State; Zip Code PO Box 5543  Austin, TX 78763	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/31/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Millwee, Billy Contributor address; City; State; Zip Code 568 Beauchamp  Dripping Springs, TX 78620	Amount of Contribution (\$)  \$1,000.00
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: 11/17 Rpt: 14/44
<b>2</b> FILER NAME Moore, Margaret		<b>3</b> Filer ID
<b>4</b> Date 01/26/2016	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Morrison, Susan <b>6</b> Contributor address; City; State; Zip Code 919 Congress Ave STE 900  Austin, TX 78701	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 02/20/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Noble, Jerald Contributor address; City; State; Zip Code 801 Yaupon Valley Rd  Austin, TX 78746	Amount of Contribution (\$)  \$150.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/11/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Noble, Jerald Contributor address; City; State; Zip Code 801 Yaupon Valley Rd  Austin, TX 78746	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/09/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) O'Keeffe, Cynthia Contributor address; City; State; Zip Code 11511 Emerald Falls Drive  Austin, TX 78738	Amount of Contribution (\$)  \$150.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/29/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Olson, Lyndon Contributor address; City; State; Zip Code 3812 Greenleaf Dr.  Waco, TX 76710	Amount of Contribution (\$)  \$1,000.00
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: 12/17 Rpt: 15/44
<b>2</b> FILER NAME Moore, Margaret		<b>3</b> Filer ID
<b>4</b> Date 01/31/2016	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Parker, Marna <b>6</b> Contributor address; City; State; Zip Code 2407 Riverhills Rd  Austin, TX 78733	<b>7</b> Amount of Contribution (\$) <span style="float: right;">\$250.00</span>
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 02/16/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Patrick, Dan & Kristine Contributor address; City; State; Zip Code 10708 Pratt Ln  Austin, TX 78748	Amount of Contribution (\$) <span style="float: right;">\$25.00</span>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/25/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Patrick, Mary Contributor address; City; State; Zip Code P.O. Box 303370  Austin, TX 78703	Amount of Contribution (\$) <span style="float: right;">\$100.00</span>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/09/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Phillips, Travis Contributor address; City; State; Zip Code 2803 Hubbard Cir  Rollingwood, TX 78746	Amount of Contribution (\$) <span style="float: right;">\$150.00</span>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/20/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Ramsey, MariBen Contributor address; City; State; Zip Code 1707 Elton Lane  Austin, TX 78703	Amount of Contribution (\$) <span style="float: right;">\$200.00</span>
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: 13/17 Rpt: 16/44
2 FILER NAME Moore, Margaret		3 Filer ID
4 Date 02/16/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reagan, Mary 6 Contributor address; City; State; Zip Code 1712 Datura Court  Austin, TX 78733	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/20/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Runkle, Ryan Contributor address; City; State; Zip Code 1303 Redbud Trl  Austin, TX	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/20/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ryan, Joanne Contributor address; City; State; Zip Code 3108 Eanes Circle  Austin, TX 78746	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/11/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scholten, Emily Contributor address; City; State; Zip Code 3004 E 18TH ST Unit A AUSTIN, TX 78702	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/26/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schramek, Adam Contributor address; City; State; Zip Code 1502 Crested Butte Dr  Austin, TX 78746	Amount of Contribution (\$) \$250.00
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: 14/17 Rpt: 17/44
<b>2</b> FILER NAME Moore, Margaret		<b>3</b> Filer ID
<b>4</b> Date 01/31/2016	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schramek, Adam <b>6</b> Contributor address; City; State; Zip Code 98 San Jacinto Blvd STE 1100 Austin, TX 78701	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 02/05/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sharp, Michael Contributor address; City; State; Zip Code 8104 Chardonnay Cove Austin, TX 78750	Amount of Contribution (\$)  \$150.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/22/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Slade, George Contributor address; City; State; Zip Code Barton Oaks Plaza 901 S. MoPac Ste 220 Austin, TX 78746	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/28/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Small, Ed Contributor address; City; State; Zip Code 100 Congress Ave Austin, TX 78701	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/11/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Snyder, Donna L Contributor address; City; State; Zip Code 20012 Thurman Bend Rd Spicewood, TX 78669	Amount of Contribution (\$)  \$150.00
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: 15/17 Rpt: 18/44
<b>2</b> FILER NAME Moore, Margaret		<b>3</b> Filer ID
<b>4</b> Date 01/25/2016	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Steed, James <b>6</b> Contributor address; City; State; Zip Code 3201 Bridle Path 3201 Bridle Path Austin, TX 78703	<b>7</b> Amount of Contribution (\$) \$100.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 02/11/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, A. Leon Contributor address; City; State; Zip Code 1301 Capital of Texas Hwy S STE A234 Rollingwood, TX 78746	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/20/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Dwight Contributor address; City; State; Zip Code P o box 5734 Austin, TX 78746	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/25/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vasquez Bode, Amber 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 02/15/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vitanza, Chris Contributor address; City; State; Zip Code 2919 Windsor Rd Austin, TX 78703	Amount of Contribution (\$) \$250.00
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: 16/17 Rpt: 19/44
2 FILER NAME Moore, Margaret		3 Filer ID
4 Date 02/16/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) WILSON IV, THOMAS 6 Contributor address; City; State; Zip Code 1402 MAYFAIR PLACE  SOUTHLAKE, TX 76092-7008	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 02/03/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wasserburger, Hanz Contributor address; City; State; Zip Code 5109 Hibiscus Valley Dr  Austin, TX 78739	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/28/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Webberman, Jerry Contributor address; City; State; Zip Code 7805 Harvestman Cove  Austin, TX 78701	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/16/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whitehurst, Bill Contributor address; City; State; Zip Code 7500 Rialto Bldg Two Ste 250 Austin, TX 78735	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 01/22/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson IV, Thomas Contributor address; City; State; Zip Code 1402 MAYFAIR PLACE  SOUTHLAKE, TX 76092-7008	Amount of Contribution (\$) \$100.00
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: 17/17 Rpt: 20/44
<b>2</b> FILER NAME Moore, Margaret		<b>3</b> Filer ID
<b>4</b> Date 02/16/2016	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Wimberley, Nancy <b>6</b> Contributor address; City; State; Zip Code 300 Baylor  Austin, TX 78703	<b>7</b> Amount of Contribution (\$)  \$1,000.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 02/04/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Winter, Raymond Contributor address; City; State; Zip Code 1501A W 40th ST  Austin, TX 78756	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/11/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) Woods Martin, Patsy Contributor address; City; State; Zip Code PO Box 5543  Austin, TX 78763	Amount of Contribution (\$)  \$1,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 02/16/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____ ) archuleta, michael Contributor address; City; State; Zip Code 1100 lakeway drive 101  austin, TX 78734	Amount of Contribution (\$)  \$150.00
Principal occupation / Job title (See Instructions)		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.

<b>1</b> Total pages Schedule F1: Sch: 1/23 Rpt: 22/44	<b>2</b> FILER NAME Moore, Margaret	<b>3</b> Filer ID
<b>4</b> Date 01/29/2016	<b>5</b> Payee name Austin Bar Association	
<b>6</b> Amount (\$) \$400.00	<b>7</b> Payee address; City; State; Zip Code 816 Congress STE 700  Austin, TX 78701	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<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 letter re Bar Poll
	<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 02/09/2016	Payee name Austin Chronicle	
Amount (\$) \$925.00	Payee address; City; State; Zip Code PO Box 4189  Austin, TX 78746	
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 ad
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 02/15/2016	Payee name Bear Creek Media	
Amount (\$) \$1,750.00	Payee address; City; State; Zip Code PO Box 13536  Austin, TX 78711	
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
	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: 2/23 Rpt: 23/44	<b>2</b> FILER NAME Moore, Margaret	<b>3</b> Filer ID
<b>4</b> Date 01/30/2016	<b>5</b> Payee name Camarillo Group	
<b>6</b> Amount (\$) \$3,500.00	<b>7</b> Payee address; City; State; Zip Code 904 Brook Hollow Dr  Pflugerville, TX 78660	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Consulting Expense	<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 consulting
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held
Date 01/24/2016	Payee name Camarillo Group	
Amount (\$) \$21.00	Payee address; City; State; Zip Code 904 Brook Hollow Dr  Pflugerville, TX 78660	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	<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 supplies reimbursement
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held
Date 01/24/2016	Payee name CheckMark Typesetting	
Amount (\$) \$3,396.53	Payee address; City; State; Zip Code 3217 N IH35  Austin, TX 78755	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<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 signs
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: 3/23 Rpt: 24/44	<b>2</b> FILER NAME Moore, Margaret		<b>3</b> Filer ID
<b>4</b> Date 02/15/2016	<b>5</b> Payee name CheckMark Typesetting		
<b>6</b> Amount (\$) \$1,601.98	<b>7</b> Payee address; City; State; Zip Code 3217 N IH35  Austin, TX 78755		
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<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 signs	
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
Date 02/20/2016	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 02/20/2016	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  
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: 4/23 Rpt: 25/44	<b>2</b> FILER NAME Moore, Margaret	<b>3</b> Filer ID
<b>4</b> Date 02/20/2016	<b>5</b> Payee name Donateway	
<b>6</b> Amount (\$) \$1.56	<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 02/20/2016	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 02/20/2016	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  
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: 5/23 Rpt: 26/44	<b>2</b> FILER NAME Moore, Margaret	<b>3</b> Filer ID
<b>4</b> Date 02/20/2016	<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 <u>ONLY</u> if direct expenditure to benefit C/OH	
Date 02/20/2016	Candidate/Officeholder name Office sought Office held	
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	
Date 02/20/2016	Candidate/Officeholder name Office sought Office held	
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	
Date 02/20/2016	Candidate/Officeholder name Office sought Office held	
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	

# 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: 6/23 Rpt: 27/44	<b>2</b> FILER NAME Moore, Margaret	<b>3</b> Filer ID
<b>4</b> Date 02/20/2016	<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 <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 02/20/2016	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	
Date 02/19/2016	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.

<b>1</b> Total pages Schedule F1: Sch: 7/23 Rpt: 28/44	<b>2</b> FILER NAME Moore, Margaret	<b>3</b> Filer ID
<b>4</b> Date 02/19/2016	<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 fee
	<b>9</b> Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 02/19/2016	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 02/16/2016	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.

<b>1</b> Total pages Schedule F1: Sch: 8/23 Rpt: 29/44	<b>2</b> FILER NAME Moore, Margaret	<b>3</b> Filer ID
<b>4</b> Date 02/16/2016	<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 <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 02/16/2016	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 <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 02/16/2016	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 <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: 9/23 Rpt: 30/44	<b>2</b> FILER NAME Moore, Margaret	<b>3</b> Filer ID
<b>4</b> Date 02/16/2016	<b>5</b> Payee name Donateway	
<b>6</b> Amount (\$) \$1.56	<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 02/16/2016	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	
Date 02/16/2016	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	

# LOANS

# SCHEDULE E

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule E: Sch: 1/1 Rpt: 21/44
<b>2</b> FILER NAME Moore, Margaret		<b>3</b> Filer ID
<b>4</b> TOTAL OF UNITEMIZED LOANS		<b>\$</b>
<b>5</b> Date of loan 01/25/2016	<b>7</b> Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Margaret	<b>9</b> Loan Amount (\$) \$285.98
<b>6</b> Is lender a financial institution? No	<b>8</b> Lender address; City; State; Zip Code 616 Rocky Ledge  Austin, TX 78746	<b>10</b> Interest Rate
		<b>11</b> Maturity Date
<b>12</b> Principal occupation / Job title (See Instructions)		<b>13</b> Employer (See Instructions)
<b>14</b> Description of Collateral <input checked="" type="checkbox"/> None		<b>15</b> Check if personal funds were deposited into political account (See Instructions) <input type="checkbox"/>
<b>16</b> GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	<b>17</b> Name of guarantor  <b>18</b> Guarantor address; City; State; Zip Code	<b>19</b> Amount Guaranteed (\$)
<b>20</b> Principal occupation		<b>21</b> Employer (See Instructions)

# 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.

<b>1</b> Total pages Schedule F1: Sch: 10/23 Rpt: 31/44	<b>2</b> FILER NAME Moore, Margaret	<b>3</b> Filer ID
<b>4</b> Date 02/16/2016	<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 Office held
Date 02/16/2016	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 02/15/2016	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

# 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: 11/23 Rpt: 32/44	<b>2</b> FILER NAME Moore, Margaret	<b>3</b> Filer ID
<b>4</b> Date 02/11/2016	<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 02/11/2016	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 ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/11/2016	Payee name Donateway	
Amount (\$) \$75.30	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.

<b>1</b> Total pages Schedule F1: Sch: 13/23 Rpt: 34/44	<b>2</b> FILER NAME Moore, Margaret	<b>3</b> Filer ID
--	--	-------------------

<b>4</b> Date 02/09/2016	<b>5</b> Payee name Donateway
-----------------------------	----------------------------------

<b>6</b> Amount (\$)  \$7.80	<b>7</b> Payee address; City; State; Zip Code PO Box 301267  Austin, TX 78703
------------------------------------	--

<b>8</b> PURPOSE OF EXPENDITURE	<b>(a) Category</b> (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b) Description</b> <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 02/08/2016	Payee name Donateway
--------------------	-------------------------

Amount (\$)  \$50.30	Payee address; City; State; Zip Code PO Box 301267  Austin, TX 78703
----------------------------	---

PURPOSE OF EXPENDITURE	<b>(a) Category</b> (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b) Description</b> <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 02/05/2016	Payee name Donateway
--------------------	-------------------------

Amount (\$)  \$10.30	Payee address; City; State; Zip Code PO Box 301267  Austin, TX 78703
----------------------------	---

PURPOSE OF EXPENDITURE	<b>(a) Category</b> (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b) Description</b> <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: 12/23 Rpt: 33/44	<b>2</b> FILER NAME Moore, Margaret	<b>3</b> Filer ID
<b>4</b> Date 02/11/2016	<b>5</b> Payee name Donateway	
<b>6</b> Amount (\$) \$7.80	<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 02/11/2016	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	
Date 02/11/2016	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.

<b>1</b> Total pages Schedule F1: Sch: 14/23 Rpt: 35/44	<b>2</b> FILER NAME Moore, Margaret	<b>3</b> Filer ID
<b>4</b> Date 02/05/2016	<b>5</b> Payee name Donateway	
<b>6</b> Amount (\$) \$7.80	<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 02/05/2016	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 02/03/2016	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      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: 15/23 Rpt: 36/44	<b>2</b> FILER NAME Moore, Margaret	<b>3</b> Filer ID
<b>4</b> Date 02/03/2016	<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 Office held
<b>Date</b> 02/02/2016	<b>Payee name</b> Donateway	
<b>Amount (\$)</b> \$5.30	<b>Payee address; City; State; Zip Code</b> 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
<b>Date</b> 01/31/2016	<b>Payee name</b> Donateway	
<b>Amount (\$)</b> \$5.30	<b>Payee address; City; State; Zip Code</b> 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  
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: 16/23 Rpt: 37/44	<b>2</b> FILER NAME Moore, Margaret	<b>3</b> Filer ID
<b>4</b> Date 01/29/2016	<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      Office held
Date 01/28/2016	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 ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held
Date 01/27/2016	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.

<b>1</b> Total pages Schedule F1: Sch: 17/23 Rpt: 38/44		<b>2</b> FILER NAME Moore, Margaret		<b>3</b> Filer ID	
<b>4</b> Date 01/26/2016		<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					
Date 01/26/2016		Candidate/Officeholder name		Office sought	
Date 01/26/2016		Payee name Donateway		Office held	
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					
Date 01/25/2016		Candidate/Officeholder name		Office sought	
Date 01/25/2016		Payee name Donateway		Office held	
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					

# 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: 18/23 Rpt: 39/44	<b>2</b> FILER NAME Moore, Margaret	<b>3</b> Filer ID
<b>4</b> Date 01/25/2016	<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 01/25/2016	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 01/25/2016	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.

<b>1</b> Total pages Schedule F1: Sch: 19/23 Rpt: 40/44	<b>2</b> FILER NAME Moore, Margaret	<b>3</b> Filer ID
<b>4</b> Date 01/25/2016	<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
<b>Date</b> 01/23/2016	<b>Payee name</b> Donateway	
<b>Amount (\$)</b> \$10.30	<b>Payee address; City; State; Zip Code</b> 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
<b>Complete ONLY if direct expenditure to benefit C/OH</b>		
	Candidate/Officeholder name	Office sought Office held
<b>Date</b> 01/22/2016	<b>Payee name</b> Donateway	
<b>Amount (\$)</b> \$5.30	<b>Payee address; City; State; Zip Code</b> 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
<b>Complete ONLY if direct expenditure to benefit C/OH</b>		
	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: 20/23 Rpt: 41/44		2 FILER NAME Moore, Margaret		3 Filer ID
4 Date 02/15/2016		5 Payee name Fun New Media		
6 Amount (\$) \$600.00		7 Payee address; City; State; Zip Code 1703 Barn Swallow  Austin, TX 78746		
8 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 Social Media	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name	Office sought	Office held
Date 01/24/2016		Payee name Hill, Cynthia		
Amount (\$) \$29.59		Payee address; City; State; Zip Code 5108 Brookdale Ln  Austin, TX 78723		
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 supplies reimbursement	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name	Office sought	Office held
Date 02/15/2016		Payee name Jeff Crosby Direct Mail		
Amount (\$) \$4,654.00		Payee address; City; State; Zip Code 902 E 5th St STE 103  Austin, TX 78702		
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 mailer	
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: 21/23 Rpt: 42/44		<b>2</b> FILER NAME Moore, Margaret		<b>3</b> Filer ID	
<b>4</b> Date 02/15/2016		<b>5</b> Payee name Jeff Crosby Direct Mail			
<b>6</b> Amount (\$) \$13,813.00		<b>7</b> Payee address; City; State; Zip Code 902 E 5th St STE 103  Austin, TX 78702			
<b>8</b> PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense		<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 mailer	
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 01/30/2016		Payee name M&G Services			
Amount (\$) \$450.00		Payee address; City; State; Zip Code 6410 Ponca St  Austin, TX 78741			
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 signs	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 01/30/2016		Payee name Pegalo Properties			
Amount (\$) \$1,259.95		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	

# 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: 22/23 Rpt: 43/44		2 FILER NAME Moore, Margaret		3 Filer ID
4 Date 02/15/2016		5 Payee name Rudolph Malveaux		
6 Amount (\$) \$1,750.00		7 Payee address; City; State; Zip Code 1129 Gunter ST  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 video	
9 Complete ONLY if direct expenditure to benefit C/OH				
Date 01/25/2016		Candidate/Officeholder name Texas Land & Cattle		
Amount (\$) \$285.98		Office sought Office held		
Date 01/25/2016		Payee name Texas Land & Cattle		
Amount (\$) \$285.98		Payee address; City; State; Zip Code 1101 S MoPac  Austin, TX 78746		
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Event 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 fundraiser	
Complete ONLY if direct expenditure to benefit C/OH				
Date 01/31/2016		Candidate/Officeholder name Threadgill's		
Amount (\$) \$670.93		Office sought Office held		
Date 01/31/2016		Payee name Threadgill's		
Amount (\$) \$670.93		Payee address; City; State; Zip Code 301 W Riverside Dr  Austin, TX 78704		
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Event 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 fundraiser	
Complete ONLY if direct expenditure to benefit C/OH				

# 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: 23/23 Rpt: 44/44	2 FILER NAME Moore, Margaret	3 Filer ID
4 Date 02/04/2016	5 Payee name Travis County Democratic Party	
6 Amount (\$) \$250.00	7 Payee address; City; State; Zip Code 1311 E 6th St  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 ad in event program
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
Office held		