

**CANDIDATE / OFFICEHOLDER  
CAMPAIGN FINANCE REPORT**

**8931**

**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: 22	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST	MI	<b>OFFICE USE ONLY</b> Date Received
		Margaret		
	NICKNAME	LAST	SUFFIX	
		Moore		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY;		ZIP CODE	
	3300 Bee Caves Road, Suite 650-1253			
	Austin, TX 78746			
			Date Hand-delivered or Date Postmarked	
			Receipt #	Amount
			Date Processed	
			Date Imaged	
5 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST	MI	
		<i>Bruce</i>		
	NICKNAME	LAST	SUFFIX	
		<i>Todd</i>		
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE			
	<i>8008 Spicewood Ln. Austin, TX 78759</i>			
7 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION	
8 REPORT TYPE	<input type="checkbox"/> January 15 <input checked="" type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final Report (Attach C/OH-FR)			
9 PERIOD COVERED	Month	Day	Year	THROUGH
	07/01/2016			09/29/2016
10 ELECTION	ELECTION DATE			ELECTION TYPE
	Month	Day	Year	<input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input checked="" type="checkbox"/> General <input type="checkbox"/> Special
	11/08/2016			
11 OFFICE	OFFICE HELD (if any)		12 OFFICE SOUGHT (if known)	
	None		Criminal District Attorney District Travis	

**GO TO PAGE 2**

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

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

2 of 22


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

16 CONTRIBUTION TOTALS	1.	TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$	0.00
	2.	TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	22,525.00
EXPENDITURE TOTALS	3.	TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$	0.00
	4.	TOTAL POLITICAL EXPENDITURES	\$	43,477.28
CONTRIBUTION BALANCE	5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	46,065.00
OUTSTANDING LOAN TOTALS	6.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	2,154.45

17 AFFIDAVIT

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




AFFIX NOTARY STAMP / SEAL ABOVE

Margaret Moore

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Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Margaret Moore, this the 11 day of October, 20 16, to certify which, witness my hand and seal of office.



Signature of officer administering

Tynan Coleman

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Printed name of officer administering

State of Texas Notary

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Title of officer administering oath

**SUBTOTALS - C/OH**

<b>18 FILER NAME</b> Moore, Margaret		<b>19 Filer ID</b>	
<b>20 SCHEDULE SUBTOTALS</b>			<b>SUBTOTAL AMOUNT</b>
<b>NAME OF SCHEDULE</b>			
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$	21,525.00
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$	1,000.00
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$	
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$	
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	43,477.28
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: 1/7 Rpt: 4/22
2 FILER NAME Moore, Margaret		3 Filer ID
4 Date 07/20/2016	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beck Redden LLP	7 Amount of Contribution (\$)  \$1,000.00
	6 Contributor address; City; State; Zip Code 515 Congress Ave.  Austin, TX 78701	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 09/27/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blackwell, Betty	Amount of Contribution (\$)  \$100.00
	Contributor address; City; State; Zip Code 1306 Nueces St.  Austin, TX 78701	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/29/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Campbell, Earl & Reuna	Amount of Contribution (\$)  \$1,000.00
	Contributor address; City; State; Zip Code 4305 Verano Dr.  Austin, TX 78735	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/26/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Capital Area Trial Lawyer Political Action Committee	Amount of Contribution (\$)  \$2,500.00
	Contributor address; City; State; Zip Code P.O. Box 788  Austin, TX 78767	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/22/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Circle C Democrats	Amount of Contribution (\$)  \$100.00
	Contributor address; City; State; Zip Code 9517 Bungalo Lane  Austin, TX 78749	
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: 2/7 Rpt: 5/22
<b>2</b> FILER NAME Moore, Margaret		<b>3</b> Filer ID
<b>4</b> Date 09/27/2016	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Craig, Charles	<b>7</b> Amount of Contribution (\$)  \$500.00
<b>6</b> Contributor address; City; State; Zip Code 3908 Galacia DR  Austin, TX 78759		
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 09/07/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crowley, Berry	Amount of Contribution (\$)  \$150.00
Contributor address; City; State; Zip Code 5000 Mission Oaks Blvd. Unit 43  Austin, TX 78735		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/20/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dawson, Sam	Amount of Contribution (\$)  \$500.00
Contributor address; City; State; Zip Code 129 Turnberry Way  San Antonio, TX 76230		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/12/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Duggins Wren Mann & Romero, LLP	Amount of Contribution (\$)  \$1,000.00
Contributor address; City; State; Zip Code P.O. Box 1149  Austin, TX 78767		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/27/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Esparza, Thomas	Amount of Contribution (\$)  \$200.00
Contributor address; City; State; Zip Code 11507 Knipp Cove  Austin, TX 78739		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 3/7 Rpt: 6/22
<b>2</b> FILER NAME Moore, Margaret		<b>3</b> Filer ID
<b>4</b> Date 08/29/2016	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Evans, Herbert <hr/> <b>6</b> Contributor address; City; State; Zip Code 1302 West Ave.  Austin, TX 78701	<b>7</b> Amount of Contribution (\$)  \$250.00
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 09/19/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garrett, Emily <hr/> Contributor address; City; State; Zip Code 1209 Blairway  Austin, TX 78704	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/25/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guerrero, Raphael <hr/> Contributor address; City; State; Zip Code 502 West 17th apt. K  Austin, TX 78701	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/20/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holloway, Lorinda <hr/> Contributor address; City; State; Zip Code 5608 Woodview Ave  Austin, TX 78756	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/23/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hutchison, Ann <hr/> Contributor address; City; State; Zip Code 1204 Arronimink Circle  Austin, TX 78746	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>		<b>1</b> Total pages Schedule A1: Sch: 4/7 Rpt: 7/22
<b>2</b> FILER NAME Moore, Margaret		<b>3</b> Filer ID
<b>4</b> Date 08/15/2016	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hutchison, Ann	<b>7</b> Amount of Contribution (\$)  \$60.00
<b>6</b> Contributor address; City; State; Zip Code 1204 Arronimink Circle  Austin, TX 78746		
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 08/29/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ikard Wynne LLP	Amount of Contribution (\$)  \$500.00
Contributor address; City; State; Zip Code 2901 Via Fortuna, Suite 450  Austin, TX 78746		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/29/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Samuel	Amount of Contribution (\$)  \$250.00
Contributor address; City; State; Zip Code 303 Colorado St., Suite 2400  Austin, TX 78701		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/27/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Michael	Amount of Contribution (\$)  \$60.00
Contributor address; City; State; Zip Code 1474 Cedar Pass Rd.  Driftwood, TX 78619		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/27/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelly, Chari Lynn	Amount of Contribution (\$)  \$25.00
Contributor address; City; State; Zip Code 1502 Crested Butte Dr  Austin, TX 78746		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 5/7 Rpt: 8/22
<b>2</b> FILER NAME Moore, Margaret		<b>3</b> Filer ID
<b>4</b> Date 09/01/2016	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lewis, William	<b>7</b> Amount of Contribution (\$)  \$150.00
<b>6</b> Contributor address; City; State; Zip Code 6704 Vitruvius  Austin, TX 78739		
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
Date 09/27/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morgan, Kathleen	Amount of Contribution (\$)  \$50.00
Contributor address; City; State; Zip Code 603 N. Cuernavaca Condo 1004  Austin, TX 78733		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/20/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Political Action Committee of Winstead PC	Amount of Contribution (\$)  \$1,000.00
Contributor address; City; State; Zip Code 2728 North Harwood Street  Dallas, TX 75201		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/26/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reaud & Associates, PC	Amount of Contribution (\$)  \$10,000.00
Contributor address; City; State; Zip Code 801 Laurel Street  Beaumont, TX 77701		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/27/2016	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reed, Pamela	Amount of Contribution (\$)  \$300.00
Contributor address; City; State; Zip Code 1502 Harbor View Road  Austin, TX 78746		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)



# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:  
Sch: 6/7 Rpt: 9/22

2 FILER NAME

Moore, Margaret

3 Filer ID

4 Date  
08/03/2016

5 Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Reed, Pamela

7 Amount of Contribution (\$) \$500.00

6 Contributor address; City; State; Zip Code  
1502 Harbor View Road  
  
Austin, TX 78746

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date  
09/27/2016

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Rich, Deborah Ann

Amount of Contribution (\$) \$100.00

Contributor address; City; State; Zip Code  
11008 Marden Lane  
  
Austin, TX 78739

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
09/27/2016

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Schramek, Adam

Amount of Contribution (\$) \$250.00

Contributor address; City; State; Zip Code  
1502 Crested Butte Dr  
  
Austin, TX 78746

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
09/27/2016

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Tierney, Danielle

Amount of Contribution (\$) \$25.00

Contributor address; City; State; Zip Code  
805 Post Oak St  
  
Austin, TX 78704

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date  
09/14/2016

Full name of contributor  out-of-state PAC (ID#: \_\_\_\_\_)  
Williams, Nancy

Amount of Contribution (\$) \$150.00

Contributor address; City; State; Zip Code  
3809 Spicewood Springs Rd #140  
  
Austin, TX 78759

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 7/7 Rpt: 10/22
<b>2</b> FILER NAME Moore, Margaret		<b>3</b> Filer ID
<b>4</b> Date 09/27/2016	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson-Clay, Barbara	<b>7</b> Amount of Contribution (\$)  \$30.00
<b>6</b> Contributor address; City; State; Zip Code 12710 Burson Dr.  Machaca, TX 78652		
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)
<b>Date</b> 09/27/2016	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Wolfe, Jerrod	<b>Amount of Contribution (\$)</b>  \$25.00
<b>Contributor address; City; State; Zip Code</b> 2604 Century Park Blvd  Austin, TX 78727		
<b>Principal occupation / Job title (See Instructions)</b>		<b>Employer (See Instructions)</b>

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

**SCHEDULE A2**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A2: Sch: 1/1 Rpt: 11/22	
<b>2</b> FILER NAME Moore, Margaret		<b>3</b> Filer ID	
<b>4</b> TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		<b>\$</b>	
<b>5</b> Date 09/22/2016	<b>6</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Granger, Tressa	<b>8</b> Amount of contribution (\$) \$1,000.00	<b>9</b> In-kind contribution description Sponsorship table at Partnership for Children Dinner
	<b>7</b> Contributor address; City; State; Zip Code 5206 Buckman Mt Rd  Austin, TX 78741	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
<b>10</b> Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		<b>11</b> Employer (FOR NON-JUDICIAL) (See instructions)	
<b>12</b> Contributor's principal occupation (FOR JUDICIAL)		<b>13</b> Contributor's job title (FOR JUDICIAL) (See instructions)	
<b>14</b> Contributor's employer/law firm (FOR JUDICIAL)		<b>15</b> Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
<b>16</b> If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

# 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: 1/11 Rpt: 12/22	<b>2</b> FILER NAME Moore, Margaret	<b>3</b> Filer ID
<b>4</b> Date 09/08/2016	<b>5</b> Payee name Austin AFLC-10 Council	
<b>6</b> Amount (\$) \$165.00	<b>7</b> Payee address; City; State; Zip Code 1106 Lavaca  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 Ad
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held
Date 09/07/2016	Payee name Austin Tejano Democrats	
Amount (\$) \$5,000.00	Payee address; City; State; Zip Code 2544 Stoutwood Circle  Austin , TX 78745	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<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 Sponsorship
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held
Date 09/07/2016	Payee name Austin Tejano Democrats	
Amount (\$) \$50.00	Payee address; City; State; Zip Code 2544 Stoutwood Circle  Austin, TX 78745	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<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 Membership Dues
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 2/11 Rpt: 13/22	<b>2</b> FILER NAME Moore, Margaret	<b>3</b> Filer ID
<b>4</b> Date 09/20/2016	<b>5</b> Payee name Check Mark	
<b>6</b> Amount (\$) \$913.86	<b>7</b> Payee address; City; State; Zip Code 3217 N. IH 35  Austin, TX 78722	
<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 Printing
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH		
	Candidate/Officeholder name	Office sought Office held
Date 09/20/2016	Payee name Check Mark	
Amount (\$) \$487.12	Payee address; City; State; Zip Code 3217 N. IH 35  Austin, TX 78722	
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 Printing
Complete ONLY if direct expenditure to benefit C/OH		
	Candidate/Officeholder name	Office sought Office held
Date 09/12/2016	Payee name Circle C Democrats	
Amount (\$) \$50.00	Payee address; City; State; Zip Code 9517 Bungalo Lane  Austin, TX 78749	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<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 Membership dues
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: 3/11 Rpt: 14/22	<b>2</b> FILER NAME Moore, Margaret	<b>3</b> Filer ID
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<b>4</b> Date 08/22/2016	<b>5</b> Payee name David Holmes Campaign
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<b>6</b> Amount (\$) \$250.00	<b>7</b> Payee address; City; State; Zip Code 6142 West Hwy 290  Austin , TX 78735
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<b>8</b> 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 Rental Fee
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<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/12/2016	Payee name David Holmes Campaign
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Amount (\$) \$250.00	Payee address; City; State; Zip Code 6142 West Hwy 290  Austin , TX 78735
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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 Southwest Campaign Office
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 08/03/2016	Payee name Donateway
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Amount (\$) \$25.30	Payee address; City; State; Zip Code PO Box 301267  Austin, TX 78703
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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
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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# 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: 4/11 Rpt: 15/22	<b>2</b> FILER NAME Moore, Margaret	<b>3</b> Filer ID
<b>4</b> Date 08/15/2016	<b>5</b> Payee name Donateway	
<b>6</b> Amount (\$) \$3.30	<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 09/01/2016	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 09/07/2016	Payee name Donateway	
Amount (\$) \$7.80	Payee address; City; State; Zip Code PO Box 301267  Austin, TX 78703	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing Fee
Complete ONLY if direct expenditure to benefit C/OH		
	Candidate/Officeholder name	Office sought                      Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 5/11 Rpt: 16/22		2 FILER NAME Moore, Margaret		3 Filer ID	
4 Date 09/14/2016		5 Payee name Donateway			
6 Amount (\$) \$7.80		7 Payee address; City; State; Zip Code PO Box 301267  Austin, TX 78703			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Accounting/Banking		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Processing Fee	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 09/19/2016		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 ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 09/23/2016		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	



# 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: 6/11 Rpt: 17/22		<b>2</b> FILER NAME Moore, Margaret		<b>3</b> Filer ID	
<b>4</b> Date 09/25/2016		<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 ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 08/16/2016		Payee name Dove Springs Advisory Board			
Amount (\$) \$150.00		Payee address; City; State; Zip Code 5801 Ainez Dr.  Austin , TX 78744			
PURPOSE OF EXPENDITURE		<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		<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 Sponsorship for Back to School event	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office held	
Date 08/02/2016		Payee name Goss, Delwin			
Amount (\$) \$2,100.00		Payee address; City; State; Zip Code 6410 Ponca St.  Austin, TX 78741			
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 Contract Services	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		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: 7/11 Rpt: 18/22	<b>2</b> FILER NAME Moore, Margaret	<b>3</b> Filer ID
<b>4</b> Date 08/03/2016	<b>5</b> Payee name Office Depot	
<b>6</b> Amount (\$) \$195.90	<b>7</b> Payee address; City; State; Zip Code 907 W. 5th Street  Austin, TX 78703	
<b>8</b> 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 Printer Cartridges
	<b>9</b> Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 09/07/2016	Payee name South Austin Democrats	
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code P.O. Box 152592  Austin, TX 78715	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<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 Sponsorship
	<b>Complete ONLY if direct expenditure to benefit C/OH</b> Candidate/Officeholder name Office sought Office held	
Date 09/14/2016	Payee name Texas Democratic Party	
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code PO Box 116  Austin, TX 78767	
<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<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 Sponsorship
	<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: 8/11 Rpt: 19/22		2 FILER NAME Moore, Margaret		3 Filer ID	
4 Date 09/15/2016		5 Payee name Texas Democratic Party			
6 Amount (\$) \$100.00		7 Payee address; City; State; Zip Code PO Box 116  Austin, TX 78767			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Sponsorship	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 09/16/2016		Payee name Texas Democratic Party			
Amount (\$) \$500.00		Payee address; City; State; Zip Code PO Box 116  Austin, TX 78767			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Sponsorship	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 07/05/2016		Payee name The Camarillo Group			
Amount (\$) \$3,500.00		Payee address; City; State; Zip Code 904 Brookhollow Dr.  Pflugerville, TX 78660			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Consulting Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting/Mgr. Fee	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 9/11 Rpt: 20/22	<b>2</b> FILER NAME Moore, Margaret	<b>3</b> Filer ID
<b>4</b> Date 07/06/2016	<b>5</b> Payee name The Camarillo Group	
<b>6</b> Amount (\$) \$3,500.00	<b>7</b> Payee address; City; State; Zip Code 904 Brookhollow 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/Mgt. Fee
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held
Date 08/08/2016	Payee name The Camarillo Group	
Amount (\$) \$3,500.00	Payee address; City; State; Zip Code 904 Brookhollow Dr.  Pflugerville, TX 78660	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting/Mgt Fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought      Office held
Date 09/08/2016	Payee name The Camarillo Group	
Amount (\$) \$3,500.00	Payee address; City; State; Zip Code 904 Brookhollow Dr.  Pflugerville, TX 78660	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting/Mgt 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: 10/11 Rpt: 21/22	<b>2</b> FILER NAME Moore, Margaret	<b>3</b> Filer ID
<b>4</b> Date 09/13/2016	<b>5</b> Payee name Thistle Cafe	
<b>6</b> Amount (\$) \$450.00	<b>7</b> Payee address; City; State; Zip Code 221 W. 6th St  Austin, TX 78701	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event 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 Catering
	<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 07/01/2016	Payee name Travis County Democratic Party	
Amount (\$) \$10,000.00	Payee address; City; State; Zip Code 1311 E 6th St  Austin, TX 78702	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<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 Contribution
	<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	
Date 07/01/2016	Payee name Travis County Democratic Party	
Amount (\$) \$250.00	Payee address; City; State; Zip Code 1311 E 6th St  Austin, TX 78702	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	<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 contributions
	<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held	

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

## EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 11/11 Rpt: 22/22	2 FILER NAME Moore, Margaret	3 Filer ID
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4 Date 07/25/2016	5 Payee name Travis County Democratic Party
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6 Amount (\$) \$1,500.00	7 Payee address; City; State; Zip Code 1311 E 6th St  Austin, TX 78702
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Sponsorship Contribution
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/21/2016	Payee name Travis County Democratic Party
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Amount (\$) \$5,000.00	Payee address; City; State; Zip Code 1311 E 6th St  Austin, TX 78702
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense addtl field mail program
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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