

# CORRECTION/AMENDMENT AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

9623

FORM COR-C/OH

1 Filer ID (Ethics Commission Filers)		2 Total pages filed: <u>20<sup>inc</sup> 21</u>		OFFICE USE ONLY	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR <b>Ms.</b>	FIRST <b>Margaret</b>	MI	Date Received	
	NICKNAME	LAST <b>Chen Kercher</b>	SUFFIX	FILED FOR RECORD 2020 FEB 24 PM 4:20 DANA DEBAUDOUR COUNTY CLERK TRAVIS COUNTY TEXAS	
4 ORIGINAL REPORT TYPE	<input type="checkbox"/> January 15	<input type="checkbox"/> Runoff	<input type="checkbox"/> Other (specify)	Date Hand-delivered	Date Postmarked
	<input type="checkbox"/> July 15	<input type="checkbox"/> Exceeded \$500 limit		Receipt #	Amount \$
5 ORIGINAL PERIOD COVERED	<input type="checkbox"/> 30th day before election	<input type="checkbox"/> 15th day after treasurer appointment (officeholder only)	<input type="checkbox"/> Final report	Date Processed	Date Imaged
	<input checked="" type="checkbox"/> 8th day before election				
Month Day Year      Month Day Year 01 / 24 / 20      THROUGH      02 / 22 / 20					

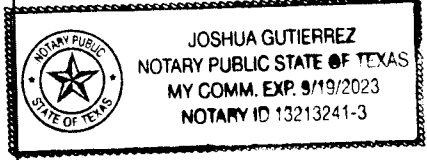
6 EXPLANATION OF CORRECTION  
 Two pages were inadvertently missing when the report was filed in person.

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

Check ONLY if applicable:

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

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



AFFIX NOTARY STAMP / SEAL ABOVE

Margaret Chen Kercher  
 Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Margaret Kercher, this the 24<sup>th</sup> day of February, 2020, to certify which, witness my hand and seal of office.

[Signature]      Joshua Gutierrez      Notary  
 Signature of officer administering oath      Printed name of officer administering oath      Title of officer administering oath

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

# JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH  
COVER SHEET PG 1

The JC/OH Instruction Guide explains how to complete this form.		1 Filer ID	2 Total pages filed:  20				
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR	FIRST Margaret	MI	<b>OFFICE USE ONLY</b>			
	NICKNAME	LAST Chen Kercher	SUFFIX				
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS  <input checked="" type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY;		ZIP CODE	Date Received			
	1307 Nueces Dr.			Date Hand-delivered or Date Postmarked			
	Austin, TX 78701			Receipt #      Amount			
				Date Processed			
				Date imaged			
5 CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST Carrie	MI				
	NICKNAME	LAST Collier-Brown	SUFFIX				
6 CAMPAIGN TREASURER ADDRESS  (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE);		APT / SUITE #;	CITY;	STATE;	ZIP CODE	
	600 Congress Ave.		Suite 600	Austin	TX	78701	
7 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION				
	512	305-4732					
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	24	2020		02	22	2020
10 ELECTION	ELECTION DATE			ELECTION TYPE			
	Month	Day	Year	<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> Runoff	<input type="checkbox"/> Other	
			<input type="checkbox"/> General	<input type="checkbox"/> Special			
11 OFFICE	OFFICE HELD (if any)			12 OFFICE SOUGHT (if known)			
				Judge of County Court at Law #4			

GO TO PAGE 2

# JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH  
COVER SHEET PG 2  
2 of 2

13 C / OH NAME Chen Kercher, Margaret 14 Filer ID

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. *These expenditures may have been made without the candidate's or officeholder's knowledge or consent.* Candidates and officeholders are required to report this information only if they receive notice of such expenditures.

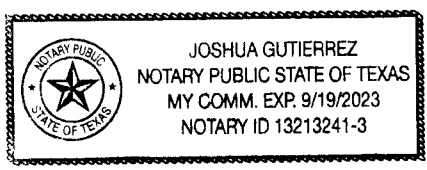
Additional Pages

COMMITTEE TYPE	COMMITTEE NAME
<input type="checkbox"/> GENERAL	
<input type="checkbox"/> SPECIFIC	
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)	\$ 2,910.67
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 42,379.12
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 18,962.81
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 10,000.00

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.



*Margaret Chen Kercher*  
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said MARGARET KERCHER, this the 24th day of February, 2020, to certify which, witness my hand and seal of office.

*[Signature]* Signature of officer administering oath  
 Joshua A. Retzke Printed name of officer administering oath  
 Notary Title of officer administering oath

**SUBTOTALS - JC/OH**

<b>18 FILER NAME</b> Chen Kercher, Margaret		<b>19 Filer ID</b>
<b>20 SCHEDULE SUBTOTALS</b> NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)	\$ 2,810.67
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 100.00
3.	<input type="checkbox"/> SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)	\$
4.	<input checked="" type="checkbox"/> SCHEDULE E(J): LOANS (JUDICIAL)	\$ 10,000.00
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 34,325.40
6.	<input checked="" type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ 8,053.72
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 A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A(J)1: Sch: 1/8 Rpt: 4/24
2 FILER NAME Chen Kercher, Margaret		3 Filer ID
4 Date 02/21/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Amelio, Jamie	7 Amount of Contribution (\$) \$105.58
6 Contributor address; City; State; Zip Code 11805 Overlook Pass  Austin, TX 78738		
8 Contributor's Principal Occupation Chief Executive Officer		9 Contributor's Job Title Chief Executive Officer
10 Contributor's employer/law firm Caring For Cambodia		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 02/08/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beinecke, Bridgette	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code 2320 Tom Miller St.  Austin, TX 78723		
Contributor's Principal Occupation Retired		Contributor's Job Title None
Contributor's employer/law firm None		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 01/25/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boykin, Leslie	Amount of Contribution (\$) \$30.00
Contributor address; City; State; Zip Code 3006 Wadsworth Way  Austin, TX 78748		
Contributor's Principal Occupation Attorney		Contributor's Job Title Owner
Contributor's employer/law firm Law Office of Leslie Boykin		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A(J)1: Sch: 2/8 Rpt: 5/2
2 FILER NAME Chen Kercher, Margaret		3 Filer ID
4 Date 02/10/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buoy, Savy	7 Amount of Contribution (\$) \$105.58
6 Contributor address; City; State; Zip Code 2208 Legend Trail  Leander, TX 78641		
8 Contributor's Principal Occupation Realtor		9 Contributor's Job Title Owner
10 Contributor's employer/law firm Savy Realty		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 02/22/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Casso, Sylvana	Amount of Contribution (\$) \$26.63
Contributor address; City; State; Zip Code 2801 Hammett Drive  Laredo, TX 78041		
Contributor's Principal Occupation Librarian		Contributor's Job Title Librarian
Contributor's employer/law firm Biblioteca		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 02/14/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chang, Elizabeth	Amount of Contribution (\$) \$105.58
Contributor address; City; State; Zip Code 10805 Broken Brook Cove  Austin, TX 79726		
Contributor's Principal Occupation AVO Realty		Contributor's Job Title Partner
Contributor's employer/law firm Master of Social Digital Marketing LLC		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 3/8 Rpt: 6/20
<b>2</b> FILER NAME Chen Kercher, Margaret		<b>3</b> Filer ID
<b>4</b> Date 02/22/2020	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cheatham, Miranda <b>6</b> Contributor address; City; State; Zip Code 2001 Vallejo Street  Austin, TX 78757	<b>7</b> Amount of Contribution (\$) \$52.95
<b>8</b> Contributor's Principal Occupation Engineer		<b>9</b> Contributor's Job Title Engineer
<b>10</b> Contributor's employer/law firm WAID Environmental		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 02/10/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Circle C Area Democrats <b>6</b> Contributor address; City; State; Zip Code 7008 Colberg Ct.  Austin, TX 78749	Amount of Contribution (\$) \$200.00
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 02/22/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flores, Fabiola <b>6</b> Contributor address; City; State; Zip Code 1407 Ridgemont Dr  Austin, TX 78723	Amount of Contribution (\$) \$105.58
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Texas Rio Grande Legal Aid		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 4/8 Rpt: 7/20
<b>2</b> FILER NAME Chen Kercher, Margaret		<b>3</b> Filer ID
<b>4</b> Date 01/25/2020	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garner, Britt	<b>7</b> Amount of Contribution (\$) \$52.95
	<b>6</b> Contributor address; City; State; Zip Code 9532 Colebrook  Austin, TX 78749	
<b>8</b> Contributor's Principal Occupation Compensation & Benefits		<b>9</b> Contributor's Job Title Director
<b>10</b> Contributor's employer/law firm Thermon Inc		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 01/24/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garrison, Candida	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code 5816 Rep of TX Blvd  Austin, TX 78736	
Contributor's Principal Occupation Retired		Contributor's Job Title None
Contributor's employer/law firm None		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 02/12/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hindera, Cheryl	Amount of Contribution (\$) \$263.47
	Contributor address; City; State; Zip Code 6524 Antigo  Austin, TX 78739	
Contributor's Principal Occupation Attorney		Contributor's Job Title Owner
Contributor's employer/law firm Law Office of Cheryl Hindera		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		



# MONETARY POLITICAL CONTRIBUTIONS

# SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 5/8 Rpt: 8/20
<b>2</b> FILER NAME Chen Kercher, Margaret		<b>3</b> Filer ID
<b>4</b> Date 01/24/2020	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hsiung, Omar <hr/> <b>6</b> Contributor address; City; State; Zip Code 2173 Shady Side Ct.  Henderson, NV 89052	<b>7</b> Amount of Contribution (\$)  \$263.47
<b>8</b> Contributor's Principal Occupation Retired		<b>9</b> Contributor's Job Title None
<b>10</b> Contributor's employer/law firm None		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 02/22/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hudson, Erin <hr/> Contributor address; City; State; Zip Code 300 Bowie Unit 3106 Austin, TX 78703	Amount of Contribution (\$)  \$105.58
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Sanders Bajwa		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 02/10/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnston, Eric <hr/> Contributor address; City; State; Zip Code 4920 Pyrenees Pass  Austin, TX 78738	Amount of Contribution (\$)  \$263.47
Contributor's Principal Occupation Attorney		Contributor's Job Title Partner
Contributor's employer/law firm McGinnis Lochridge LLP		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A(J)1: Sch: 6/8 Rpt: 9/24
2 FILER NAME Chen Kercher, Margaret		3 Filer ID
4 Date 02/12/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ko, Ramey	7 Amount of Contribution (\$) \$263.47
6 Contributor address; City; State; Zip Code 8310 N. Capital of Texas Hwy Prominent Pointe I, Suite 305 Austin, TX 78731		
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Owner
10 Contributor's employer/law firm The Ko Law Firm, PLLC		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 02/15/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lee, Jennifer	Amount of Contribution (\$) \$263.47
Contributor address; City; State; Zip Code 16802 Willow Oak Lane  Round Rock, TX 78681		
Contributor's Principal Occupation Attorney		Contributor's Job Title Owner
Contributor's employer/law firm Connor Kudlac Lee PLLC		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 02/22/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lyons, Lisa	Amount of Contribution (\$) \$26.63
Contributor address; City; State; Zip Code 10804 Redmond Cove  Austin, TX 78739		
Contributor's Principal Occupation Not Employed		Contributor's Job Title None
Contributor's employer/law firm None		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A(J)1: Sch: 7/8 Rpt: 10/20
2 FILER NAME Chen Kercher, Margaret		3 Filer ID
4 Date 01/28/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Segura, Richard	7 Amount of Contribution (\$) \$263.47
	6 Contributor address; City; State; Zip Code 3000 Shady Park Dr.  Austin, TX 78723	
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Owner
10 Contributor's employer/law firm The Law Office of Richard J. Segura, Jr.		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 02/13/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vinson, James	Amount of Contribution (\$) \$158.21
	Contributor address; City; State; Zip Code 1411 West Ave. Ste 100 Austin, TX 78701	
Contributor's Principal Occupation Attorney		Contributor's Job Title Partner
Contributor's employer/law firm Smith & Vinson Law Firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 01/24/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whitesides, Cindy	Amount of Contribution (\$) \$26.63
	Contributor address; City; State; Zip Code 8109 Via Verde Dr.  Austin, TX 78739	
Contributor's Principal Occupation Practice Administrator		Contributor's Job Title Administrator
Contributor's employer/law firm Southwest Austin Foot & Ankle Clinic		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 8/8 Rpt: 11/20
<b>2</b> FILER NAME Chen Kercher, Margaret		<b>3</b> Filer ID
<b>4</b> Date 02/15/2020	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Woolley, Matt <b>6</b> Contributor address: City; State; Zip Code 2917 Balfour Falls Ln  Austin, TX 78748	<b>7</b> Amount of Contribution (\$)  \$52.95
<b>8</b> Contributor's Principal Occupation Enrolled Agent		<b>9</b> Contributor's Job Title Accountant
<b>10</b> Contributor's employer/law firm Padgett Business Services		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		

# 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: 12/20	
<b>2</b> FILER NAME Chen Kercher, Margaret		<b>3</b> Filer ID	
<b>4</b> TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
<b>5</b> Date 01/25/2020	<b>6</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Collier-Brown, Carrie	<b>8</b> Amount of contribution (\$) \$100.00	<b>9</b> In-kind contribution description Food and Beverage for Fundraiser
	<b>7</b> Contributor address; City; State; Zip Code 9517 Bungalow Ln.  Austin, TX 78749		
<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) Attorney		<b>13</b> Contributor's job title (FOR JUDICIAL) (See instructions) Attorney	
<b>14</b> Contributor's employer/law firm (FOR JUDICIAL) Locke Lord LLP		<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)			

Check if travel outside of Texas. Complete Schedule T.

# LOANS (JUDICIAL)

# SCHEDULE E(J)

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule E(J): Sch: 1/1 Rpt: 13/24
2 FILER NAME Chen Kercher, Margaret		3 Filer ID
4 TOTAL OF UNITEMIZED LOANS		\$
5 Date of loan 02/13/2020	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) Chen Kercher, Margaret	9 Loan Amount (\$) \$10,000.00
6 Is lender a financial institution? No	8 Lender address; City; State; Zip Code 1307 Nueces St.  Austin, TX 78701	10 Interest Rate
		11 Maturity Date
12 Lender's Principal Occupation Attorney		13 Lender's Job Title Attorney
14 Lender's Employer/Law Firm The Kercher Firm, PLLC		15 Law Firm of lender's spouse (if any) Schober & Schober
16 If lender is child, law firm of parent(s) (if any)		
17 Description of Collateral <input checked="" type="checkbox"/> None		18 Check if personal funds were deposited into political account (See Instructions) <input checked="" type="checkbox"/>
19 GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	20 Name of guarantor	22 Amount Guaranteed (\$)
	21 Guarantor address; City; State; Zip Code	
23 Guarantor's Principal Occupation		24 Guarantor's Job Title
25 Guarantor's Employer/Law Firm		26 Law Firm of guarantor's spouse (if any)
27 If guarantor is child, law firm of parent(s) (if any)		

# 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: 1/5 Rpt: 14/20	<b>2</b> FILER NAME Chen Kercher, Margaret	<b>3</b> Filer ID
<b>4</b> Date 02/20/2020	<b>5</b> Payee name Austin Chronicle	
<b>6</b> Amount (\$) \$825.00	<b>7</b> Payee address; City; State; Zip Code P.O. Box 4189  Austin, TX 78765	
<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 Print Ad
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 02/13/2020	Payee name Casey Chapman Ross Photography	
Amount (\$) \$54.13	Payee address; City; State; Zip Code 9501 Argyle Dr.  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 Photo License Fee
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 02/07/2020	Payee name CheckMark Typesetting	
Amount (\$) \$110.42	Payee address; City; State; Zip Code 3217 North IH-35  Austin, TX 78722	
PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Printing 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 Sponsor Board
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule F1: Sch: 2/5 Rpt: 15/20	<b>2</b> FILER NAME Chen Kercher, Margaret	<b>3</b> Filer ID
<b>4</b> Date 02/22/2020	<b>5</b> Payee name DonateWay	
<b>6</b> Amount (\$) \$132.30	<b>7</b> Payee address; City; State; Zip Code P.O. Box 301267  Austin, TX 78703	
<b>8</b> 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 Credit Card Processing Fees
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate/Officeholder name	Office sought                      Office held
Date 02/21/2020	Payee name Estebandido Productions	
Amount (\$) \$2,000.00	Payee address; City; State; Zip Code P.O. Box 6172  Austin, TX 78762	
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 Video Production
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate/Officeholder name	Office sought                      Office held
Date 01/31/2020	Payee name Frost Bank	
Amount (\$) \$5.00	Payee address; City; State; Zip Code P.O. Box 1600  San Antonio, TX 78296	
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 Bank Fee
<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.

<b>1</b> Total pages Schedule F1: Sch: 3/5 Rpt: 16/20	<b>2</b> FILER NAME Chen Kercher, Margaret	<b>3</b> Filer ID
<b>4</b> Date 02/03/2020	<b>5</b> Payee name GNI Strategies	
<b>6</b> Amount (\$) \$3,223.29	<b>7</b> Payee address; City; State; Zip Code P.O. Box 685008  Austin, TX 78768	
<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 Campaign Consultant
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 02/03/2020	Payee name Google LLC	
Amount (\$) \$25.58	Payee address; City; State; Zip Code 1600 Amphitheatre Parkway  Mountain View, CA 94043	
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 Campaign Email
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/24/2020	Payee name Goss, Delwin	
Amount (\$) \$2,250.00	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) 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 Sign Placement
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: 4/5 Rpt: 17/20	<b>2</b> FILER NAME Chen Kercher, Margaret	<b>3</b> Filer ID
<b>4</b> Date 02/07/2020	<b>5</b> Payee name Heinrich, Allison	
<b>6</b> Amount (\$) \$2,000.00	<b>7</b> Payee address; City; State; Zip Code 2301 Ohlen Rd. #107 Austin, TX 78757	
<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 Campaign Consultant
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 01/24/2020	Payee name Heinrich, Allison	
Amount (\$) \$4,000.00	Payee address; City; State; Zip Code 2301 Ohlen Rd. #107 Austin, TX 78757	
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 Campaign Consultant
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 02/10/2020	Payee name InFocus Campaigns LLC	
Amount (\$) \$2,947.24	Payee address; City; State; Zip Code P.O. Box 10726 Fort Worth, TX 76114	
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 Campaign Calls
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: 5/5 Rpt: 18/20	<b>2</b> FILER NAME Chen Kercher, Margaret	<b>3</b> Filer ID
<b>4</b> Date 02/13/2020	<b>5</b> Payee name Kelly Graphics	
<b>6</b> Amount (\$) \$16,453.44	<b>7</b> Payee address; City; State; Zip Code 1409 Quaker Ridge  Austin, TX 78746	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Printing 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 Mail
<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate/Officeholder name	Office sought                      Office held
Date 02/03/2020	Payee name PhoneBurner LLC	
Amount (\$) \$149.00	Payee address; City; State; Zip Code 1968 S. Coast Hwy Suite 1800 Laguna Beach, CA 92651	
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 Autodialer
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate/Officeholder name	Office sought                      Office held
Date 02/06/2020	Payee name Texas Capital News	
Amount (\$) \$150.00	Payee address; City; State; Zip Code 11770 Jollyville Rd.  Austin, TX 78759	
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 Print Ad
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate/Officeholder name	Office sought                      Office held

# UNPAID INCURRED OBLIGATIONS

SCHEDULE F2

### EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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 F2: Sch: 1/1 Rpt: 19/20	<b>2</b> FILER NAME Chen Kercher, Margaret	<b>3</b> Filer ID
<b>4</b> TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS		\$
<b>5</b> Date 02/22/2020	<b>6</b> Payee name Kelly Graphics	
<b>7</b> Amount (\$) \$8,053.72	<b>8</b> Payee address; City; State; Zip Code 1409 Quaker Ridge  Austin, TX 78746	
<b>9</b> TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	
<b>10</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Printing 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 Mail
	<b>11</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	
Candidate/Officeholder name _____ Office sought _____ Office held _____		

# OUTSTANDING LOANS

SCHEDULE L

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule L: Sch: 1/1 Rpt: 20/20
<b>2</b> FILER NAME Chen Kercher, Margaret		<b>3</b> Filer ID
LENDER INFORMATION	<b>4</b> Name of lender Chen Kercher, Margaret	
	<b>5</b> Lender address; City; State; Zip Code 1307 Nueces St.  Austin, TX 78701	
GUARANTOR INFORMATION	<b>6</b> Name of guarantor	
	<input checked="" type="checkbox"/> not applicable <b>7</b> Guarantor address; City; State; Zip Code	