

**CANDIDATE / OFFICEHOLDER
CAMPAIGN FINANCE REPORT**

9829

**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**
16

3 CANDIDATE / OFFICEHOLDER NAME
MS / MRS / MR FIRST MI
Margaret
NICKNAME LAST SUFFIX
Moore

OFFICE USE ONLY
Date Received
2021 JAN 19
FILED FOR RECORD
Date Filed
2021 JAN 19
Date Recycled or Date Picked up
Date Recycled
Date Imaged

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS
ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE
3300 Bee Caves Road, Suite 650-1253
Austin, TX 78746
 Change of Address

5 CAMPAIGN TREASURER NAME
MS / MRS / MR FIRST MI
Bruce
NICKNAME LAST SUFFIX
Todd

6 CAMPAIGN TREASURER ADDRESS
STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE
(Residence or Business)
8008 Spicewood Ln. Austin, Tx 78759

7 CAMPAIGN TREASURER PHONE
AREA CODE PHONE NUMBER EXTENSION
512 472-9599

8 REPORT TYPE
 January 15 30th day before election Runoff 15th day after campaign treasurer appointment (officeholder only)
 July 15 8th day before election Exceeded modified reporting limit Final Report (Attach C/OH-FR)

9 PERIOD COVERED
Month Day Year THROUGH Month Day Year
07/06/2020 12/31/2020

10 ELECTION
ELECTION DATE ELECTION TYPE
Month Day Year
07/14/2020
 Primary Runoff Other
 General Special

11 OFFICE OFFICE HELD (if any):
District Attorney District Travis Travis
12 OFFICE SOUGHT (if known)

GO TO PAGE 2

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

**FORM C/OH
COVER SHEET PG 2**
2 of 16

13 C / OH NAME Moore, Margaret	14 Filer ID
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15 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> Additional Pages	This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures.							
<table border="1" style="width:100%"> <tr> <td style="width:20%">COMMITTEE TYPE</td> <td>COMMITTEE NAME</td> </tr> <tr> <td><input type="checkbox"/> GENERAL</td> <td></td> </tr> <tr> <td><input type="checkbox"/> SPECIFIC</td> <td></td> </tr> </table>	COMMITTEE TYPE	COMMITTEE NAME	<input type="checkbox"/> GENERAL		<input type="checkbox"/> SPECIFIC		COMMITTEE ADDRESS	
	COMMITTEE TYPE	COMMITTEE NAME						
	<input type="checkbox"/> GENERAL							
	<input type="checkbox"/> SPECIFIC							
COMMITTEE CAMPAIGN TREASURER NAME								
COMMITTEE CAMPAIGN TREASURER ADDRESS								

16 CONTRIBUTION TOTALS	1.	TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$	0.00
	2.	TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	23,560.00
EXPENDITURE TOTALS	3.	TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$	0.00
	4.	TOTAL POLITICAL EXPENDITURES	\$	55,594.98
CONTRIBUTION BALANCE	5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	0.00
OUTSTANDING LOAN TOTALS	6.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	5,124.35

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 _____, this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office.

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

SUBTOTALS - C/OH

18 FILER NAME Moore, Margaret		19 Filer ID
20 SCHEDULE SUBTOTALS		SUBTOTAL AMOUNT
NAME OF SCHEDULE		
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 23,560.00
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	\$ 0.00
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 55,594.98
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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/6 Rpt: 4/16
2 FILER NAME Moore, Margaret		3 Filer ID
4 Date 07/10/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Almanza, Boone <hr/> 6 Contributor address; City; State; Zip Code 2301 S Capital Hwy Austin, TX 78746	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 07/07/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bury, Paul <hr/> Contributor address; City; State; Zip Code 221 W 6th St Suite 600 Austin, TX 78701	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/06/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Butts, George <hr/> Contributor address; City; State; Zip Code 4702 Valley Oak Dr. Austin, TX 78731	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/10/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DTH Strategies <hr/> Contributor address; City; State; Zip Code 405 W. 15th Street Austin, TX 78701	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/14/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Farrington, Mary <hr/> Contributor address; City; State; Zip Code 5905 Sierra Madre Austin, TX 78759	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
(Empty row for additional information)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/6 Rpt: 5/16
2 FILER NAME Moore, Margaret		3 Filer ID
4 Date 07/06/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gil, Thomas	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code Georgetown, TX 78628		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 07/08/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goss, Delwin	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code 6410 Ponca St Austin, TX 78741		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/09/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hamre, Dan	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code 6814 E. Riverside Dr Austin, TX 78741		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/09/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hance, Kent	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code P.O. Box 4226 Lubbock, TX 79409		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/13/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hillco PAC	Amount of Contribution (\$) \$5,000.00
Contributor address; City; State; Zip Code 823 Congress Ave Austin, TX 78701		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/6 Rpt: 6/16
2 FILER NAME Moore, Margaret		3 Filer ID
4 Date 07/06/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hughes, Craig <hr/> 6 Contributor address; City; State; Zip Code 901 S. Mopac Austin, TX 78746	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 07/06/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Inman, Bobby <hr/> Contributor address; City; State; Zip Code 3200 Riva Ridge Rd Austin, TX 78746	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/10/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jastrow, Corby <hr/> Contributor address; City; State; Zip Code 1515 Mohle Dr Austin, TX 78703	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/06/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jastrow II, Kenneth <hr/> Contributor address; City; State; Zip Code 1242 PT Ranch Road Austin, TX 78663	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/07/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelley, Rusty <hr/> Contributor address; City; State; Zip Code 919 Congress Ste 800 Austin, TX 78701	Amount of Contribution (\$) \$2,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
(Empty row for additional information)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/6 Rpt: 7/16
2 FILER NAME Moore, Margaret		3 Filer ID
4 Date 07/06/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lewis, Gib	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code 2300 Race Street Ft. Worth, TX 76111	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 08/07/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Naeve, N.J.	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code 1711 Lost Creek Blvd Austin, TX 78746	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/08/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pinnelli , Janis	Amount of Contribution (\$) \$1,250.00
	Contributor address; City; State; Zip Code PO Box 50038 Austin, TX 78763	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/08/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pinnelli , Joe	Amount of Contribution (\$) \$1,250.00
	Contributor address; City; State; Zip Code PO Box 50038 Austin, TX 78763	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/08/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reed, Pam	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code 1502 Harbor View Dr. West Lake, 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: 5/6 Rpt: 8/16
2 FILER NAME Moore, Margáret		3 Filer ID
4 Date 07/10/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Riojas Pedraza, Yolanda	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code 4601 Grand Cypress Dr.		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 07/07/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roach, David	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code 1600 Mt. Larson Rd. Austin, TX 78746		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/07/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roberts, Cary	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code 2301 S Mopac Expy Ste 323 Austin, TX 78746-7957		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/13/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scarborough, Terry	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code 9 Coleridge Austin, TX 78746		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/10/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schlueter, Stan	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code PO Box 2227 Austin, TX 78768		
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: 6/6 Rpt: 9/16
2 FILER NAME Moore, Margaret		3 Filer ID
4 Date 07/13/2020	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scott, John	7 Amount of Contribution (\$) \$2,500.00
6 Contributor address; City; State; Zip Code 4001 Hildring Drive Ft. Worth, TX 76109		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 07/08/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wasserburger, Hanz	Amount of Contribution (\$) \$60.00
Contributor address; City; State; Zip Code 5109 Hibiscus Valley Dr Austin, TX 78739		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/09/2020	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wimberly, Nancy	Amount of Contribution (\$) \$2,000.00
Contributor address; City; State; Zip Code 300 Baylor St. Austin, TX 78703		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

LOANS**SCHEDULE E**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E: Sch: 1/1 Rpt: 10/16
2 FILER NAME Moore, Margaret		3 Filer ID
4 TOTAL OF UNITEMIZED LOANS		\$ 0.00
5 Date of loan	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____)	9 Loan Amount (\$)
6 Is lender a financial institution?	8 Lender address; City; State; Zip Code	10 Interest Rate
		11 Maturity Date
12 Principal occupation / Job title (See Instructions)		13 Employer (See Instructions)
14 Description of Collateral <input type="checkbox"/> None		15 Check if personal funds were deposited into political account (See Instructions) <input type="checkbox"/>
16 GUARANTOR INFORMATION <input type="checkbox"/> not applicable	17 Name of guarantor	19 Amount Guaranteed (\$)
	18 Guarantor address; City; State; Zip Code	
20 Principal occupation		21 Employer (See Instructions)

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/6 Rpt: 11/16	2 FILER NAME Moore, Margaret	3 Filer ID
4 Date 07/15/2020	5 Payee name Butts, David	
6 Amount (\$) \$3,200.00	7 Payee address; City; State; Zip Code 1914 Patton Lane Austin, TX 78723	
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 Campaign Consulting
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/09/2020	Payee name Camarillo, Sylvia	
Amount (\$) \$97.41	Payee address; City; State; Zip Code 307 Cottonwood Lane Pflugerville, TX 78660	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense reimbursement
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/24/2020	Payee name City Lights Group	
Amount (\$) \$500.00	Payee address; City; State; Zip Code 1605 Kerr St Austin, TX 78704	
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 video production
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: 2/6 Rpt: 12/16	2 FILER NAME Moore, Margaret	3 Filer ID
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4 Date 07/15/2020	5 Payee name Donateway
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6 Amount (\$) \$510.80	7 Payee address; City; State; Zip Code PO Box 301267 Austin, TX 78703
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense online processing fee
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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 08/01/2020	Payee name Dreamhost
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Amount (\$) \$6.99	Payee address; City; State; Zip Code 417 Associated Road Brea, CA 92821
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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
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 07/15/2020	Payee name Eberhardt, Sarah
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Amount (\$) \$836.25	Payee address; City; State; Zip Code 507 Tom Kite Dr Round Rock, TX 78664
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense campaign work
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Complete ONLY 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 | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel in District |
| Contributions/ Donations Made By - | Gift/Awards/Memorials Expense | Printing Expense | Travel Out of District |
| Candidate/Officeholder/Political Committee | Legal Services | Salaries/Wages/Contract Labor | OTHER (enter a category not listed above) |
| Credit Card Payment | | | |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 3/6 Rpt: 13/16	2 FILER NAME Moore, Margaret	3 Filer ID
4 Date 08/04/2020	5 Payee name GNI Consulting	
6 Amount (\$) \$4,739.60	7 Payee address; City; State; Zip Code PO Box 685008 Austin, TX 78768	
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 Campaign Consultant
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/08/2020	Payee name Hardin, Rusty	
Amount (\$) \$5,000.00	Payee address; City; State; Zip Code 1401 McKinney St #2250 Houston, TX 77010	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Legal Services	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Legal Services
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/16/2020	Payee name Hustle	
Amount (\$) \$2,613.00	Payee address; City; State; Zip Code 717 Market Street 5th Floor San Francisco, CA 94103	
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 Voter Outreach
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.

1 Total pages Schedule F1: Sch: 4/6 Rpt: 14/16	2 FILER NAME Moore, Margaret	3 Filer ID
4 Date 08/10/2020	5 Payee name Hustle	
6 Amount (\$) \$4,486.16	7 Payee address; City; State; Zip Code 717 Market Street 5th Floor San Francisco, CA 94103	
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 Voter Outreach
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 07/09/2020	Candidate/Officeholder name InFocus Campaigns	
Amount (\$) \$5,208.76	Office sought Fort Worth, TX 76114	
Office held		
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 Phone banking
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 08/12/2020	Candidate/Officeholder name InFocus Campaigns	
Amount (\$) \$195.00	Office sought Fort Worth, TX 76114	
Office held		
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 Phone bank
9 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 | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel in District |
| Contributions/ Donations Made By - | Gift/Awards/Memorials Expense | Printing Expense | Travel Out of District |
| Candidate/Officeholder/Political Committee | Legal Services | Salaries/Wages/Contract Labor | OTHER (enter a category not listed above) |
| Credit Card Payment | | | |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 5/6 Rpt: 15/16	2 FILER NAME Moore, Margaret	3 Filer ID
4 Date 07/08/2020	5 Payee name Kelly Graphics	
6 Amount (\$) \$11,879.00	7 Payee address; City; State; Zip Code 1409 Quaker Ridge 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 Mailer
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/31/2020	Payee name Kelly Graphics	
Amount (\$) \$7,872.44	Payee address; City; State; Zip Code 1409 Quaker Ridge Austin, TX 78746	
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 Mailer
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/01/2020	Payee name Larson, Darci	
Amount (\$) \$1,105.00	Payee address; City; State; Zip Code TX	
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 Mail Design
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.

1 Total pages Schedule F1: Sch: 6/6 Rpt: 16/16	2 FILER NAME Moore, Margaret	3 Filer ID
4 Date 12/31/2020	5 Payee name Moore, Margaret	
6 Amount (\$) \$875.65	7 Payee address; City; State; Zip Code 3300 Bee Caves Road, Suite 650-1253 Austin, TX 78746	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense loan repayment
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/20/2020	Payee name Rindy Miller Media	
Amount (\$) \$4,968.92	Payee address; City; State; Zip Code 2401 E. 6th Street Suite 1007 Austin, TX 78702	
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 Media/Messaging Consultant
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/15/2020	Payee name The Camarillo Group	
Amount (\$) \$1,500.00	Payee address; City; State; Zip Code 307 Cottonwood Lane 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 Campaign/Fundraising
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held