



Official Public Records of
Harris County
Chris Hollins
County Clerk

Campaign Finance Report

FileNo: 2020358
Received By Clerk: 7/7/2020
File Date: July 06, 2020
Office: Commissioner Pct. 3
Candidate: Moore, Michael
Treasurer: Fontaine, Terence H.
Category: Contributions And Expenditures
Delivered By: Electronically Filed
Type: COR




COUNTY CLERK
HARRIS COUNTY, TEXAS

Harris County No Fee

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

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: 76 | | |
| 3 CANDIDATE / OFFICEHOLDER NAME | MS / MRS / MR | | FIRST Michael | MI | OFFICE USE ONLY Date Received | |
| | NICKNAME | | LAST Moore | SUFFIX | | |
| 4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address | ADDRESS / PO BOX; APT / SUITE #; CITY; PO Box 37388 Houston, TX 77237 | | | ZIP CODE | Date Hand-delivered or Date Postmarked | |
| | | | | | Receipt # | Amount |
| | | | | | Date Processed | |
| | | | | | Date Imaged | |
| 5 CAMPAIGN TREASURER NAME | MS / MRS / MR | | FIRST Terence | MI H | | |
| | NICKNAME | | LAST Fontaine | SUFFIX | | |
| 6 CAMPAIGN TREASURER ADDRESS (Residence or Business) | STREET ADDRESS (NO PO BOX PLEASE); 3903 Southmore Circle | | APT / SUITE #; 200 | CITY; Houston | STATE; TX | ZIP CODE 77004 |
| 7 CAMPAIGN TREASURER PHONE | AREA CODE | PHONE NUMBER EXTENSION 832 524-8284 | | | | |
| 8 REPORT TYPE | <input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input checked="" 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 02/23/2020 | | THROUGH Month Day Year 07/04/2020 | | | |
| 10 ELECTION | ELECTION DATE Month Day Year 07/14/2020 | | ELECTION TYPE <input type="checkbox"/> Primary <input checked="" type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special | | | |
| 11 OFFICE | OFFICE HELD (if any) None | | 12 OFFICE SOUGHT (if known) Harris County Commissioner, Precinct 3 | | | |

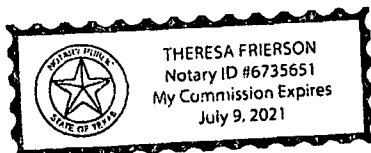
GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2
2 of 76

| | | | |
|--|---|--|---------------|
| 13 C / OH NAME Moore, Michael | | 14 Filer ID | |
| 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. 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. | | |
| | 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) | \$ 156,790.00 |
| EXPENDITURE TOTALS | 3. | TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED | \$ 0.00 |
| | 4. | TOTAL POLITICAL EXPENDITURES | \$ 245,110.25 |
| CONTRIBUTION BALANCE | 5. | TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD | \$ 96,832.62 |
| OUTSTANDING LOAN TOTALS | 6. | TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD | \$ 0.00 |

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.

[Signature]
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Michael J. Moore, this the 6th day of July, 2020, to certify which, witness my hand and seal of office.

[Signature] Theresa Frierson Notary Public
Signature of officer administering Printed name of officer administering Title of officer administering oath

SUBTOTALS - C/OH

FORM C/OH
COVER SHEET PG 3
3 of 76

| | | |
|---|---|-----------------|
| 18 FILER NAME Moore, Michael | | 19 Filer ID |
| 20 SCHEDULE SUBTOTALS NAME OF SCHEDULE | | SUBTOTAL AMOUNT |
| 1. | <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS | \$ 156,410.00 |
| 2. | <input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS | \$ 380.00 |
| 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 | \$ 215,081.22 |
| 6. | <input checked="" type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS | \$ 29,424.67 |
| 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 checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS | \$ 604.36 |
| 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: 1/39 Rpt: 4/76 |
| 2 FILER NAME Moore, Michael | | 3 Filer ID |
| 4 Date 06/12/2020 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adrian Garcia For Harris County Commissioner Precinct 2 Campaign 6 Contributor address; City; State; Zip Code PO Box 56386 Houston, TX 77256 | 7 Amount of Contribution (\$) \$5,000.00 |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| Date 07/02/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adrian Garcia For Harris County Commissioner Precinct 2 Campaign Contributor address; City; State; Zip Code PO Box 56386 Houston, TX 77256 | Amount of Contribution (\$) \$5,000.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 03/04/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aitsebaomo, A. Philip Contributor address; City; State; Zip Code 12110 Cedar Form Ln Meadows Place, TX 77477 | Amount of Contribution (\$) \$250.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 05/11/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alpert, Dennis Contributor address; City; State; Zip Code 10 Gaston Park Dr Apt 207 Lebanon, TN 37087 | Amount of Contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 03/03/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Andrews, Ann Contributor address; City; State; Zip Code 5122 Morningside Dr Apt. 1017 Houston, TX 77005 | Amount of Contribution (\$) \$500.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|---|--|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 2/39 Rpt: 5/76 |
| 2 FILER NAME Moore, Michael | | 3 Filer ID |
| 4 Date 06/10/2020 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Andrews, Ann 6 Contributor address; City; State; Zip Code 5122 Morningside Dr Apt. 1017 Houston, TX 77005 | 7 Amount of Contribution (\$) \$500.00 |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| Date 06/23/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Andrews, Greg Contributor address; City; State; Zip Code 1150 Connecticut Ave NW Washington, DC 20036 | Amount of Contribution (\$) \$250.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 06/30/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aron, Don Contributor address; City; State; Zip Code 109 N Post Oak Ln Ste 215 Houston, TX 77024 | Amount of Contribution (\$) \$250.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 06/13/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ashy, Steven Contributor address; City; State; Zip Code 14114 Woodnook Dr Houston, TX 77077 | Amount of Contribution (\$) \$75.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 05/11/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Atlas, Scott Contributor address; City; State; Zip Code 3262 Westheimer Rd # 629 Houston, TX 77098 | Amount of Contribution (\$) \$500.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|---|---|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 3/39 Rpt: 6/76 |
| 2 FILER NAME Moore, Michael | | 3 Filer ID |
| 4 Date 04/01/2020 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bailey, Stephen 6 Contributor address; City; State; Zip Code 3606 Albans Rd Houston, TX 77005 | 7 Amount of Contribution (\$) \$1,000.00 |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| Date 05/19/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bailey, Stephen Contributor address; City; State; Zip Code 3606 Albans Rd Houston, TX 77005 | Amount of Contribution (\$) \$500.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 06/11/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bailey, Stephen Contributor address; City; State; Zip Code 3606 Albans Rd Houston, TX 77005 | Amount of Contribution (\$) \$500.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 06/28/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bailey, Stephen Contributor address; City; State; Zip Code 3606 Albans Rd Houston, TX 77005 | Amount of Contribution (\$) \$500.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 06/25/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baillie, John Contributor address; City; State; Zip Code 7803 Brykerwoods Dr. Houston, TX 77055 | Amount of Contribution (\$) \$5,000.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|---|---|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 4/39 Rpt: 7/76 |
| 2 FILER NAME Moore, Michael | | 3 Filer ID |
| 4 Date 06/18/2020 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barnett, Barry 6 Contributor address; City; State; Zip Code 5030 Park Ln Dallas, TX 75220 | 7 Amount of Contribution (\$) \$500.00 |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| Date 06/11/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barragy, Carol Contributor address; City; State; Zip Code 607 Miramar Pl Corpus Christi, TX 78411 | Amount of Contribution (\$) \$50.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 06/01/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barragy, Susan Contributor address; City; State; Zip Code 1521 Welch St Houston, TX 77006 | Amount of Contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 06/16/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Becker, Margie Contributor address; City; State; Zip Code 1205 Kinney Ave Apt A Austin, TX 78704 | Amount of Contribution (\$) \$300.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 02/28/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bell, J. Michael Contributor address; City; State; Zip Code 2110 Albans Rd Houston, TX 77005 | Amount of Contribution (\$) \$250.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|---|---|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 5/39 Rpt: 8/76 |
| 2 FILER NAME Moore, Michael | | 3 Filer ID |
| 4 Date 04/22/2020 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Benninghoven, Ellen 6 Contributor address; City; State; Zip Code 5203 Stamper Way Houston, TX 77056 | 7 Amount of Contribution (\$) \$100.00 |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| Date 02/26/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bloss, Linda Contributor address; City; State; Zip Code 2705 Essex Ter Houston, TX 77027 | Amount of Contribution (\$) \$250.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 02/27/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boesel, Minnette Contributor address; City; State; Zip Code 2504 Stanmore Dr Houston, TX 77019 | Amount of Contribution (\$) \$250.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 06/30/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bono, Susan Contributor address; City; State; Zip Code 6320 Wakeforest Ave Houston, TX 77005 | Amount of Contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 06/28/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) BracewellPAC Contributor address; City; State; Zip Code 711 Louisiana St. Suite 2300 Houston, TX 77002 | Amount of Contribution (\$) \$500.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|---|--|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 6/39 Rpt: 9/76 |
| 2 FILER NAME Moore, Michael | | 3 Filer ID |
| 4 Date 06/10/2020 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Britt, Kyle 6 Contributor address; City; State; Zip Code 7907 Meadow Lake Ln Houston, TX 77063 | 7 Amount of Contribution (\$) \$25.00 |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| Date 06/11/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Broesche, Travis Contributor address; City; State; Zip Code 2104 Albans Rd Houston, TX 77005 | Amount of Contribution (\$) \$300.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 06/29/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burwell, Donald Contributor address; City; State; Zip Code 15815 Knoll Lake Dr. Houston, TX 77095 | Amount of Contribution (\$) \$3,000.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 07/02/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Calhoun, John Contributor address; City; State; Zip Code 126 E. Amite St. Jackson, MS 39201 | Amount of Contribution (\$) \$2,500.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 06/04/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cardenas Jr, Alberto Contributor address; City; State; Zip Code 2644 University Blvd West University Place, TX 77005 | Amount of Contribution (\$) \$250.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|---|--|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 7/39 Rpt: 10/76 |
| 2 FILER NAME Moore, Michael | | 3 Filer ID |
| 4 Date 06/29/2020 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carter, Darryl 6 Contributor address; City; State; Zip Code 4828 Loop Central Dr Ste 600 Houston, TX 77081 | 7 Amount of Contribution (\$) \$1,000.00 |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| Date 05/20/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Casey, Katy Contributor address; City; State; Zip Code 2932 Chevy Chase Dr Houston, TX 77019 | Amount of Contribution (\$) \$250.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 06/18/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Castaneda, Rolando Contributor address; City; State; Zip Code 7070 W 43rd St Ste 203 Houston, TX 77092 | Amount of Contribution (\$) \$1,000.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 06/19/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Caudill, Claire Contributor address; City; State; Zip Code 518 Westminster Dr Houston, TX 77024 | Amount of Contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 06/30/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Christian, Susan Contributor address; City; State; Zip Code 1914 Wroxton Rd Houston, TX 77005 | Amount of Contribution (\$) \$250.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|---|--|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 8/39 Rpt: 11/76 |
| 2 FILER NAME Moore, Michael | | 3 Filer ID |
| 4 Date 06/12/2020 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clarke, Linda 6 Contributor address; City; State; Zip Code 5502 Island Breeze Dr Houston, TX 77041 | 7 Amount of Contribution (\$) \$1,000.00 |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| Date 06/03/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cole, Donna Contributor address; City; State; Zip Code 13611 Ashley Run Houston, TX 77077 | Amount of Contribution (\$) \$250.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 07/01/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Colvin, Margaret Contributor address; City; State; Zip Code 5814 Westmont Dr Austin, TX 78731 | Amount of Contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 06/11/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cross, Iris Contributor address; City; State; Zip Code 5602 Brennan Ridge Ln Katy, TX 77450 | Amount of Contribution (\$) \$200.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 02/24/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Curlet, Nigel Contributor address; City; State; Zip Code 6043 Park Circle Dr Houston, TX 77057 | Amount of Contribution (\$) \$250.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|---|--|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 9/39 Rpt: 12/76 |
| 2 FILER NAME Moore, Michael | | 3 Filer ID |
| 4 Date 06/29/2020 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Curlet, Nigel 6 Contributor address; City; State; Zip Code 6043 Park Circle Dr Houston, TX 77057 | 7 Amount of Contribution (\$) \$250.00 |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| Date 02/28/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Platt Contributor address; City; State; Zip Code 627 Hedwig Rd Houston, TX 77024 | Amount of Contribution (\$) \$1,000.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 05/07/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Platt Contributor address; City; State; Zip Code 627 Hedwig Rd Houston, TX 77024 | Amount of Contribution (\$) \$1,000.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 06/30/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Platt Contributor address; City; State; Zip Code 627 Hedwig Rd Houston, TX 77024 | Amount of Contribution (\$) \$500.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 03/08/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Scott Contributor address; City; State; Zip Code 1201 Sea Hunt Dr Vero Beach, FL 32963 | Amount of Contribution (\$) \$300.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|--|---|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 10/39 Rpt: 13/76 |
| 2 FILER NAME Moore, Michael | | 3 Filer ID |
| 4 Date 05/20/2020 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Scott | 7 Amount of Contribution (\$) \$200.00 |
| 6 Contributor address; City; State; Zip Code 1201 Sea Hunt Dr Vero Beach, FL 32963 | | |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| Date 05/20/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Scott | Amount of Contribution (\$) \$200.00 |
| Contributor address; City; State; Zip Code 1201 Sea Hunt Dr Vero Beach, FL 32963 | | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 05/20/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Scott | Amount of Contribution (\$) \$200.00 |
| Contributor address; City; State; Zip Code 1201 Sea Hunt Dr Vero Beach, FL 32963 | | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 05/07/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Tom | Amount of Contribution (\$) \$500.00 |
| Contributor address; City; State; Zip Code 110 San Antonio St Austin, TX 78701 | | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 06/12/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Deadrick, June | Amount of Contribution (\$) \$250.00 |
| Contributor address; City; State; Zip Code 914 Main St Unit 1106 Houston, TX 77002 | | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|---|--|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 11/39 Rpt: 14/76 |
| 2 FILER NAME Moore, Michael | | 3 Filer ID |
| 4 Date 06/20/2020 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Deboben Jr., John 6 Contributor address; City; State; Zip Code 5005 Riverway Dr, Suite 150 Houston, TX 77056 | 7 Amount of Contribution (\$) \$250.00 |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| Date 06/06/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Debra Kerner Campaign Contributor address; City; State; Zip Code P.O. Box 766 Bellaire, TX 77402 | Amount of Contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 06/26/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DeMontrond, George Contributor address; City; State; Zip Code 14101 North Fwy Houston, TX 77090 | Amount of Contribution (\$) \$500.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 05/26/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Denbo, Mark Contributor address; City; State; Zip Code 3915 Woodbine St Chevy Chase, MD 20815 | Amount of Contribution (\$) \$250.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 02/25/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Donnelly, Frank Contributor address; City; State; Zip Code 1809 Kipling St Houston, TX 77098 | Amount of Contribution (\$) \$500.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|---|--|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 12/39 Rpt: 15/76 |
| 2 FILER NAME Moore, Michael | | 3 Filer ID |
| 4 Date 05/26/2020 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Drake, Jack 6 Contributor address; City; State; Zip Code 1 Blalock Woods St Houston, TX 77024 | 7 Amount of Contribution (\$) \$1,000.00 |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| Date 06/10/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Drake, Jack Contributor address; City; State; Zip Code 1 Blalock Woods St Houston, TX 77024 | Amount of Contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 02/28/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Draksharam, Sujeeth Contributor address; City; State; Zip Code 3100 Timmons Ln Ste 500 Houston, TX 77027 | Amount of Contribution (\$) \$5,000.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 06/29/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eggleton, James Contributor address; City; State; Zip Code 17126 Sandestine Dr. Houston, TX 77095 | Amount of Contribution (\$) \$5,000.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 06/26/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellen Cohen Campaign Contributor address; City; State; Zip Code PO Box 22734 Houston, TX 77227 | Amount of Contribution (\$) \$500.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|---|---|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 13/39 Rpt: 16/76 |
| 2 FILER NAME Moore, Michael | | 3 Filer ID |
| 4 Date 03/04/2020 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Emerson, Ed 6 Contributor address; City; State; Zip Code 3748 Miller Way Sacramento, CA 95817 | 7 Amount of Contribution (\$) \$50.00 |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| Date 06/04/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Everitt, Shay Contributor address; City; State; Zip Code 3815 Costa Rica Rd Houston, TX 77092 | Amount of Contribution (\$) \$50.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 02/25/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fenoglio Interior Design Contributor address; City; State; Zip Code 551 N Shepherd Dr Ste 270 Houston, TX 77007 | Amount of Contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 04/20/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fontaine, Terence Contributor address; City; State; Zip Code 3903 Southmore Cir Ste 200 Houston, TX 77004 | Amount of Contribution (\$) \$1,000.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 05/20/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fontaine, Terence Contributor address; City; State; Zip Code 3903 Southmore Cir Ste 200 Houston, TX 77004 | Amount of Contribution (\$) \$500.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|---|--|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 14/39 Rpt: 17/76 |
| 2 FILER NAME Moore, Michael | | 3 Filer ID |
| 4 Date 02/29/2020 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ford, Nancy 6 Contributor address; City; State; Zip Code 4551 Magnolia St Bellaire, TX 77401 | 7 Amount of Contribution (\$) \$100.00 |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| Date 06/22/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Foster, Charles Contributor address; City; State; Zip Code 17 Courtlandt Pl Houston, TX 77006 | Amount of Contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 06/29/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fowler, Michael M Contributor address; City; State; Zip Code 1411 North Blvd Houston, TX 77006 | Amount of Contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 05/19/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Roland Contributor address; City; State; Zip Code 46 E Rivercrest Dr Houston, TX 77042 | Amount of Contribution (\$) \$500.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 06/23/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Giesen, Clare Contributor address; City; State; Zip Code 1730 Gentilly Blvd Ste OR New Orleans, LA 70119 | Amount of Contribution (\$) \$75.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|---|--|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 15/39 Rpt: 18/76 |
| 2 FILER NAME Moore, Michael | | 3 Filer ID |
| 4 Date 06/29/2020 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gillespie, Don 6 Contributor address; City; State; Zip Code 4903 Woodview Ave Austin, TX 78756 | 7 Amount of Contribution (\$) \$50.00 |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| Date 06/12/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzalez, George Contributor address; City; State; Zip Code 1502 Hatchmere Place Ct. Spring, TX 77379 | Amount of Contribution (\$) \$150.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 06/12/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gorman, Christine Contributor address; City; State; Zip Code 1054 Lehman St Houston, TX 77018 | Amount of Contribution (\$) \$250.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 06/05/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grace & McEwan Consulting LLC Political Fund Contributor address; City; State; Zip Code 1001 Congress Ave. Suite 200 Austin, TX 78701 | Amount of Contribution (\$) \$500.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 06/30/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Graham, Lavern Contributor address; City; State; Zip Code 4706 Shadowdale St. Houston, TX 77041 | Amount of Contribution (\$) \$3,000.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|---|---|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 16/39 Rpt: 19/76 |
| 2 FILER NAME Moore, Michael | | 3 Filer ID |
| 4 Date 06/18/2020 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gribble, Mark 6 Contributor address; City; State; Zip Code 7215 New Territory Blvd Ste 100 Sugar Land, TX 77479 | 7 Amount of Contribution (\$) \$500.00 |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| Date 06/02/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guerrero, Margaret Contributor address; City; State; Zip Code 1253 Green St San Francisco, CA 94109 | Amount of Contribution (\$) \$50.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 04/13/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hardin, Rusty Contributor address; City; State; Zip Code 2740 Barbara Ln Houston, TX 77005 | Amount of Contribution (\$) \$2,000.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 06/23/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hellyar, Nick Contributor address; City; State; Zip Code 3131 Southwest Fwy Apt 36 Houston, TX 77098 | Amount of Contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 06/17/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hernandez, James Contributor address; City; State; Zip Code 1236 W 18th St Houston, TX 77008 | Amount of Contribution (\$) \$500.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|---|--|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 17/39 Rpt: 20/76 |
| 2 FILER NAME Moore, Michael | | 3 Filer ID |
| 4 Date 03/18/2020 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hobby, Paul 6 Contributor address; City; State; Zip Code 3980 Del Monte Dr Houston, TX 77019 | 7 Amount of Contribution (\$) \$500.00 |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| Date 06/12/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hobby, Paul Contributor address; City; State; Zip Code 3980 Del Monte Dr Houston, TX 77019 | Amount of Contribution (\$) \$250.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 03/06/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hochberg, Scott Contributor address; City; State; Zip Code 1712 Morrow St Austin, TX 78757 | Amount of Contribution (\$) \$250.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 06/11/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hochberg, Scott Contributor address; City; State; Zip Code 1712 Morrow St Austin, TX 78757 | Amount of Contribution (\$) \$250.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 06/30/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hoff, Robin Contributor address; City; State; Zip Code 35062 Stepan Rd. Waller, TX 77484 | Amount of Contribution (\$) \$2,000.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|---|--|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 18/39 Rpt: 21/76 |
| 2 FILER NAME Moore, Michael | | 3 Filer ID |
| 4 Date 06/10/2020 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Horridge, Patty 6 Contributor address; City; State; Zip Code 13426 La Vista Dr San Antonio, TX 78216 | 7 Amount of Contribution (\$) \$100.00 |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| Date 05/15/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hunsaker, Linda Contributor address; City; State; Zip Code 3730 Wickersham Ln Houston, TX 77027 | Amount of Contribution (\$) \$500.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 07/03/2020 | Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00027342) IBEW PAC Voluntary Fund Contributor address; City; State; Zip Code 100 Seventh Street N.W. Washington, DC 20001 | Amount of Contribution (\$) \$1,000.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 06/26/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Iyer, Vidya Contributor address; City; State; Zip Code 13718 Bayou Parkway Ct. Houston, TX 77077 | Amount of Contribution (\$) \$5,000.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 06/08/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jackson, Guy Contributor address; City; State; Zip Code PO Box 1099 Anahuac, TX 77514 | Amount of Contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|---|--|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 19/39 Rpt: 22/76 |
| 2 FILER NAME Moore, Michael | | 3 Filer ID |
| 4 Date 06/12/2020 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jacobson, Rochelle 6 Contributor address; City; State; Zip Code 38 Crestwood Dr Houston, TX 77007 | 7 Amount of Contribution (\$) \$100.00 |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| Date 06/12/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jenkins, Gale Contributor address; City; State; Zip Code 1446 Forest Home Dr Houston, TX 77077 | Amount of Contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 05/20/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jewett, Jill Contributor address; City; State; Zip Code 2133 Pine Valley Dr Houston, TX 77019 | Amount of Contribution (\$) \$2,500.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 03/18/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keefe, Susan Contributor address; City; State; Zip Code 3433 Westheimer Rd Apt 605 Houston, TX 77027 | Amount of Contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 06/11/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Khan, Shapnik Contributor address; City; State; Zip Code 20506 Autumn Shore Dr. Katy, TX 77450 | Amount of Contribution (\$) \$500.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|---|--|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 20/39 Rpt: 23/76 |
| 2 FILER NAME Moore, Michael | | 3 Filer ID |
| 4 Date 06/05/2020 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kristi Thibaut Campaign 6 Contributor address; City; State; Zip Code 1415 S. Voss Rd. Suite 322 Houston, TX 77057 | 7 Amount of Contribution (\$) \$1,000.00 |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| Date 03/18/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lapin, Richard Contributor address; City; State; Zip Code 539 Harvard St Houston, TX 77007 | Amount of Contribution (\$) \$2,500.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 06/24/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lease, Hilda Contributor address; City; State; Zip Code 25710 Eagle Chase Ln Spring, TX 77389 | Amount of Contribution (\$) \$2,500.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 03/04/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lents, Ann Contributor address; City; State; Zip Code 3260 Chevy Chase Dr Houston, TX 77019 | Amount of Contribution (\$) \$500.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 05/11/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lents, Ann Contributor address; City; State; Zip Code 3260 Chevy Chase Dr Houston, TX 77019 | Amount of Contribution (\$) \$1,000.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|---|---|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 21/39 Rpt: 24/76 |
| 2 FILER NAME Moore, Michael | | 3 Filer ID |
| 4 Date 06/29/2020 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lents, Ann 6 Contributor address; City; State; Zip Code 3260 Chevy Chase Dr Houston, TX 77019 | 7 Amount of Contribution (\$) \$500.00 |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| Date 06/09/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Levine, Jake Contributor address; City; State; Zip Code 1664 W Division St Chicago, IL 60622 | Amount of Contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 03/06/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lewis, Derek Contributor address; City; State; Zip Code 201 W 5th St Ste 1200 Austin, TX 78701 | Amount of Contribution (\$) \$1,000.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 06/18/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Li, Kenneth Contributor address; City; State; Zip Code 6918 Corporate Dr Ste A5 Houston, TX 77036 | Amount of Contribution (\$) \$250.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 06/03/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Littwitz, David Contributor address; City; State; Zip Code 10847 Britoak Ln Houston, TX 77079 | Amount of Contribution (\$) \$50.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|---|---|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 22/39 Rpt: 25/76 |
| 2 FILER NAME Moore, Michael | | 3 Filer ID |
| 4 Date 06/29/2020 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lovegren, Philip | 7 Amount of Contribution (\$) \$25.00 |
| | 6 Contributor address; City; State; Zip Code 147 W Lafayette Ave Baltimore, MD 21217 | |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| Date 06/29/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mallett, Sally | Amount of Contribution (\$) \$500.00 |
| | Contributor address; City; State; Zip Code 1014 W 15Th 1/2 St Houston, TX 77008 | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 03/04/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Matthiesen, Dave | Amount of Contribution (\$) \$1,000.00 |
| | Contributor address; City; State; Zip Code 511 Lovett Blvd. Houston, TX 77006 | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 06/15/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Matthiesen, David | Amount of Contribution (\$) \$1,000.00 |
| | Contributor address; City; State; Zip Code 3751 Ingold St Houston, TX 77005 | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 04/27/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mayo, Coleton | Amount of Contribution (\$) \$50.00 |
| | Contributor address; City; State; Zip Code 4510 Park Grove Dr Baytown, TX 77521 | |
| 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: 23/39 Rpt: 26/76 |
| 2 FILER NAME Moore, Michael | | 3 Filer ID |
| 4 Date 05/20/2020 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCarter, Janet 6 Contributor address; City; State; Zip Code 5931 Riverview Way Houston, TX 77057 | 7 Amount of Contribution (\$) \$500.00 |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| Date 06/01/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCarter, Janet Contributor address; City; State; Zip Code 5931 Riverview Way Houston, TX 77057 | Amount of Contribution (\$) \$250.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 06/21/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCarter, Janet Contributor address; City; State; Zip Code 5931 Riverview Way Houston, TX 77057 | Amount of Contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 06/02/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCarter, Louis Contributor address; City; State; Zip Code 5931 Riverview Way Houston, TX 77057 | Amount of Contribution (\$) \$250.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 02/23/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCreary, Frank Contributor address; City; State; Zip Code 2020 Rice Blvd Houston, TX 77005 | Amount of Contribution (\$) \$500.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:
Sch: 24/39 Rpt: 27/76

2 FILER NAME
Moore, Michael

3 Filer ID

4 Date
06/26/2020

5 Full name of contributor ☐ out-of-state PAC (ID#: _____)
McCreary, Frank

7 Amount of Contribution (\$)
\$100.00

6 Contributor address; City; State; Zip Code
2020 Rice Blvd
Houston, TX 77005

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date
03/10/2020

Full name of contributor ☐ out-of-state PAC (ID#: _____)
McGreevy, Gerry

Amount of Contribution (\$)
\$100.00

Contributor address; City; State; Zip Code
4608 Oleander St
Bellaire, TX 77401

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
06/02/2020

Full name of contributor ☐ out-of-state PAC (ID#: _____)
McLarney, Martina

Amount of Contribution (\$)
\$100.00

Contributor address; City; State; Zip Code
433 Ward Pkwy Unit 3E
Kansas City, MO 64112

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
02/25/2020

Full name of contributor ☐ out-of-state PAC (ID#: _____)
Medina, Nicolas

Amount of Contribution (\$)
\$500.00

Contributor address; City; State; Zip Code
10926 Long Shadow Ln
Houston, TX 77024

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date
06/11/2020

Full name of contributor ☐ out-of-state PAC (ID#: _____)
Metcalf, Sharyn

Amount of Contribution (\$)
\$100.00

Contributor address; City; State; Zip Code
6122 Holly Springs
Houston, TX 77057

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: 25/39 Rpt: 28/76 |
| 2 FILER NAME Moore, Michael | | 3 Filer ID |
| 4 Date 06/01/2020 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Michel, Frank 6 Contributor address; City; State; Zip Code 15618 Beechnut St Houston, TX 77083 | 7 Amount of Contribution (\$) \$100.00 |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| Date 06/30/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Michel, Renee Contributor address; City; State; Zip Code 718 Bayland Ave Houston, TX 77009 | Amount of Contribution (\$) \$500.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 03/04/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, James Contributor address; City; State; Zip Code 15615 Oyster Cove Dr Sugar Land, TX 77478 | Amount of Contribution (\$) \$5,000.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 03/01/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Kathryn Contributor address; City; State; Zip Code 5742 Tangle Circle Ln Houston, TX 77057 | Amount of Contribution (\$) \$10.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 06/15/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore Hefley, Marian Contributor address; City; State; Zip Code 310 Drew St. Houston, TX 77006 | Amount of Contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|--|---|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 26/39 Rpt: 29/76 |
| 2 FILER NAME Moore, Michael | | 3 Filer ID |
| 4 Date 06/21/2020 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moran, Alfred | 7 Amount of Contribution (\$) \$250.00 |
| 6 Contributor address; City; State; Zip Code 21 N Wynden Dr Unit 3 Houston, TX 77056 | | |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| Date 06/29/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moran, Alfred | Amount of Contribution (\$) \$250.00 |
| Contributor address; City; State; Zip Code 21 N Wynden Dr Unit 3 Houston, TX 77056 | | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 06/11/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Murchison, Christy | Amount of Contribution (\$) \$250.00 |
| Contributor address; City; State; Zip Code 5206 Briar Dr. Houston, TX 77056 | | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 06/22/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Murray, James | Amount of Contribution (\$) \$200.00 |
| Contributor address; City; State; Zip Code 3911 Amherst St Houston, TX 77005 | | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 05/14/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Neely, Franci | Amount of Contribution (\$) \$500.00 |
| Contributor address; City; State; Zip Code 1314 South Blvd Houston, TX 77006 | | |
| 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: 27/39 Rpt: 30/76 |
| 2 FILER NAME Moore, Michael | | 3 Filer ID |
| 4 Date 06/30/2020 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Newport, Christopher 6 Contributor address; City; State; Zip Code 1113 W 22nd St Houston, TX 77008 | 7 Amount of Contribution (\$) \$250.00 |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| Date 06/23/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nichols, Mike Contributor address; City; State; Zip Code 2122 Dunstan Rd Houston, TX 77005 | Amount of Contribution (\$) \$500.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 06/29/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Noebels, Abigail Contributor address; City; State; Zip Code 1412 Marshall St Houston, TX 77006 | Amount of Contribution (\$) \$250.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 06/25/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Noriega, Richard Contributor address; City; State; Zip Code 8203 Misty Vale Ln Houston, TX 77075 | Amount of Contribution (\$) \$250.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 05/15/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Noriega, Rick Contributor address; City; State; Zip Code 8203 Misty Vale Ln Houston, TX 77075 | Amount of Contribution (\$) \$500.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|---|--|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 28/39 Rpt: 31/76 |
| 2 FILER NAME Moore, Michael | | 3 Filer ID |
| 4 Date 02/24/2020 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Northington, John 6 Contributor address; City; State; Zip Code 1001 4th St SW Apt 817 Washington, DC 20024 | 7 Amount of Contribution (\$) \$150.00 |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| Date 05/04/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Olive, Ken Contributor address; City; State; Zip Code 10 S Briar Hollow Ln Houston, TX 77027 | Amount of Contribution (\$) \$250.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 03/05/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Palacios, Rosanne Contributor address; City; State; Zip Code 29 Quadrangle Cir Laredo, TX 78041 | Amount of Contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 05/07/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Palacios, Rosanne Contributor address; City; State; Zip Code 29 Quadrangle Cir Laredo, TX 78041 | Amount of Contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 03/07/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Paven, Andrew Contributor address; City; State; Zip Code 9 Brewster Rd Hingham, MA 02043 | Amount of Contribution (\$) \$50.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|---|--|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 29/39 Rpt: 32/76 |
| 2 FILER NAME Moore, Michael | | 3 Filer ID |
| 4 Date 05/30/2020 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Piacentini, Mary Anne 6 Contributor address; City; State; Zip Code 2222 Swift Blvd Houston, TX 77030 | 7 Amount of Contribution (\$) \$150.00 |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| Date 03/18/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Plank, Roger Contributor address; City; State; Zip Code 1002 River Glynn Dr Houston, TX 77063 | Amount of Contribution (\$) \$200.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 04/22/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Plumbers Local Union No.68 PAC Fund Contributor address; City; State; Zip Code PO Box 8746 Houston, TX 77249 | Amount of Contribution (\$) \$5,000.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 06/20/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Quan, Gordon Contributor address; City; State; Zip Code 2 W Terrace Dr Houston, TX 77007 | Amount of Contribution (\$) \$250.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 06/19/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rea, Ronald Contributor address; City; State; Zip Code 7610 Windswept Ln Houston, TX 77063 | Amount of Contribution (\$) \$25.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|--|--|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 30/39 Rpt: 33/76 |
| 2 FILER NAME Moore, Michael | | 3 Filer ID |
| 4 Date 06/19/2020 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Redford, David <hr/> 6 Contributor address; City; State; Zip Code 4838 Post Oak Timber Dr. Houston, TX 77056 | 7 Amount of Contribution (\$) \$100.00 |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| Date 07/03/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Refi, Tito <hr/> Contributor address; City; State; Zip Code 1238 Misty Lake Ct Sugar Land, TX 77498 | Amount of Contribution (\$) \$50.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 06/26/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roland Chavez Caampaign Fund <hr/> Contributor address; City; State; Zip Code 313 Byrne St Houston, TX 77009 | Amount of Contribution (\$) \$1,000.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 06/11/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rosenauer, Pam <hr/> Contributor address; City; State; Zip Code 2555 Bering Dr Apt 4 Houston, TX 77057 | Amount of Contribution (\$) \$25.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 06/05/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rosenbaum, Glen <hr/> Contributor address; City; State; Zip Code 2500 First City Tower 1001 Fannin St. Houston, TX 77002 | Amount of Contribution (\$) \$1,000.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|---|--|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 31/39 Rpt: 34/76 |
| 2 FILER NAME Moore, Michael | | 3 Filer ID |
| 4 Date 05/20/2020 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rosenthal, Dan 6 Contributor address; City; State; Zip Code 5813 Surrey St Chevy Chase, MD 20815 | 7 Amount of Contribution (\$) \$100.00 |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| Date 06/17/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ross, Jonathan Contributor address; City; State; Zip Code 1402 Harvard St Houston, TX 77008 | Amount of Contribution (\$) \$500.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 06/03/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ryerkerk, Lori Contributor address; City; State; Zip Code 26985 Interstate 10 Winnie, TX 77665-8243 | Amount of Contribution (\$) \$1,000.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 06/16/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sadeghpour, David Contributor address; City; State; Zip Code 701 Shepherd Dr Ste 200 Houston, TX 77007 | Amount of Contribution (\$) \$500.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 06/12/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Salgado, Oliver Contributor address; City; State; Zip Code 3011 Lakes Of Katy Ln Katy, TX 77493 | Amount of Contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|---|---|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 32/39 Rpt: 35/76 |
| 2 FILER NAME Moore, Michael | | 3 Filer ID |
| 4 Date 06/26/2020 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Salgado, Oliver 6 Contributor address; City; State; Zip Code 3011 Lakes Of Katy Ln Katy, TX 77493 | 7 Amount of Contribution (\$) \$2,500.00 |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| Date 04/09/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schevalier, Laurent Contributor address; City; State; Zip Code 4 Cornwall Hollow Rd West Cornwall, CT 06796 | Amount of Contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 02/24/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schreiber, Elizabeth Contributor address; City; State; Zip Code 505 S 3rd St Bellaire, TX 77401 | Amount of Contribution (\$) \$150.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 06/11/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schultz, Robert Contributor address; City; State; Zip Code 1 Spring Hollow St Houston, TX 77024 | Amount of Contribution (\$) \$500.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 05/07/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schwartz, Mitchell Contributor address; City; State; Zip Code 129 N Van Ness Ave Los Angeles, CA 90004 | Amount of Contribution (\$) \$500.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|--|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 33/39 Rpt: 36/76 |
| 2 FILER NAME Moore, Michael | | 3 Filer ID |
| 4 Date 06/30/2020 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Seaback, Brad 6 Contributor address; City; State; Zip Code 10219 Grape Creek Grove Lane Cypress, TX 77433 | 7 Amount of Contribution (\$) \$2,000.00 |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| Date 06/02/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shafto, Sandra Contributor address; City; State; Zip Code 3885 Newport Ln Boulder, CO 80304 | Amount of Contribution (\$) \$500.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 03/09/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sherborne, Katie Contributor address; City; State; Zip Code 1908 Brun St Houston, TX 77019 | Amount of Contribution (\$) \$1,000.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 06/19/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Simpson, Charles Kyle Contributor address; City; State; Zip Code 555 13th St. NW Washington, DC 20004 | Amount of Contribution (\$) \$250.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 06/24/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Singh, Jasmeeta Contributor address; City; State; Zip Code 12511 Still Harbour Dr. Houston, TX 77041 | Amount of Contribution (\$) \$2,500.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|---|---|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 34/39 Rpt: 37/76 |
| 2 FILER NAME Moore, Michael | | 3 Filer ID |
| 4 Date 03/04/2020 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Skelly, Michael 6 Contributor address; City; State; Zip Code 317 Sampson St Houston, TX 77003 | 7 Amount of Contribution (\$) \$500.00 |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| Date 05/13/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Skloss, Stewart And Kaitlyn Contributor address; City; State; Zip Code 1331 Lamar St Ste 1076 Houston, TX 77010 | Amount of Contribution (\$) \$500.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 06/03/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sorola-Pohlman, Lenora Contributor address; City; State; Zip Code 2314 Tannehill Dr Houston, TX 77008 | Amount of Contribution (\$) \$25.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 06/26/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Soto, Joseph Contributor address; City; State; Zip Code 20019 Country Lake Dr. Magnolia, TX 77355 | Amount of Contribution (\$) \$5,000.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 06/24/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spiller, Reginal Contributor address; City; State; Zip Code 1014 Bayou Island Dr Houston, TX 77063 | Amount of Contribution (\$) \$25.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|---|--|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 35/39 Rpt: 38/76 |
| 2 FILER NAME Moore, Michael | | 3 Filer ID |
| 4 Date 06/11/2020 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spinks, Melvin 6 Contributor address; City; State; Zip Code 13619 Oak Lake Bnd Cypress, TX 77429 | 7 Amount of Contribution (\$) \$1,000.00 |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| Date 06/24/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Srivastava, Dharendra Contributor address; City; State; Zip Code 2601 Hewn Rock Way Pearland, TX 77584 | Amount of Contribution (\$) \$2,500.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 06/18/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stein, Martha Contributor address; City; State; Zip Code 2115 Rutland St Houston, TX 77008 | Amount of Contribution (\$) \$1,000.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 06/12/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stogner, Virginia Contributor address; City; State; Zip Code 1337 W 43rd St Houston, TX 77018 | Amount of Contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 06/12/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stroud, Delia Contributor address; City; State; Zip Code 5010 Tangle Ln Houston, TX 77056 | Amount of Contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|---|---|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 36/39 Rpt: 39/76 |
| 2 FILER NAME Moore, Michael | | 3 Filer ID |
| 4 Date 06/22/2020 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tameez, Mustafa 6 Contributor address; City; State; Zip Code 2727 Allen Pkwy Ste 1300 Houston, TX 77019 | 7 Amount of Contribution (\$) \$2,000.00 |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| Date 06/10/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor, Scott Contributor address; City; State; Zip Code 824 Pecore St Houston, TX 77009 | Amount of Contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 06/04/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Teamsters Local Union #988 Drive Political Fund Contributor address; City; State; Zip Code 4303 N. Sam Houston Parkway E. Houston, TX 77032 | Amount of Contribution (\$) \$10,000.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 06/20/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Todd, Emily Contributor address; City; State; Zip Code 9 Shadow Lawn Street Houston, TX 77005 | Amount of Contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 06/03/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Travis, Ann Contributor address; City; State; Zip Code 2146 Briarglen Dr Houston, TX 77027 | Amount of Contribution (\$) \$250.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|--|---|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 37/39 Rpt: 40/76 |
| 2 FILER NAME Moore, Michael | | 3 Filer ID |
| 4 Date 06/26/2020 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Van Kerrebroek, Mary | 7 Amount of Contribution (\$) \$1,000.00 |
| 6 Contributor address; City; State; Zip Code 1400 McKinney St Unit 808 Houston, TX 77010 | | |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| Date 06/26/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Veselka, Larry | Amount of Contribution (\$) \$1,000.00 |
| Contributor address; City; State; Zip Code 3305 Robinhood St Houston, TX 77005 | | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 05/13/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Warner, Freddy | Amount of Contribution (\$) \$500.00 |
| Contributor address; City; State; Zip Code 2803 Ferndale St Houston, TX 77098 | | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 05/28/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Warner, Freddy | Amount of Contribution (\$) \$100.00 |
| Contributor address; City; State; Zip Code 2803 Ferndale St Houston, TX 77098 | | |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 06/18/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Warner, Freddy | Amount of Contribution (\$) \$150.00 |
| Contributor address; City; State; Zip Code 2803 Ferndale St Houston, TX 77098 | | |
| 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: 38/39 Rpt: 41/76 |
| 2 FILER NAME Moore, Michael | | 3 Filer ID |
| 4 Date 03/04/2020 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) White, William H. 6 Contributor address; City; State; Zip Code 101 Stablewood Ct Houston, TX 77024 | 7 Amount of Contribution (\$) \$10,000.00 |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| Date 06/29/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whouley, Michael Contributor address; City; State; Zip Code 208 Centre St Danvers, MA 01923 | Amount of Contribution (\$) \$500.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 06/05/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Birnberg & Anderson, LLP Contributor address; City; State; Zip Code 2000 Bering Drive Suite 850 Houston, TX 77057 | Amount of Contribution (\$) \$250.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 05/25/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Sidney Contributor address; City; State; Zip Code 11310 Green Vale Dr Houston, TX 77024 | Amount of Contribution (\$) \$500.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 06/29/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wong, Wilson Contributor address; City; State; Zip Code 1225 North Loop W Ste 320 Houston, TX 77008 | Amount of Contribution (\$) \$1,000.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

| | | |
|---|--|---|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A1: Sch: 39/39 Rpt: 42/76 |
| 2 FILER NAME Moore, Michael | | 3 Filer ID |
| 4 Date 05/20/2020 | 5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wright, Robert P. 6 Contributor address; City; State; Zip Code 1920 Milford St Houston, TX 77098 | 7 Amount of Contribution (\$) \$500.00 |
| 8 Principal occupation / Job title (See Instructions) | | 9 Employer (See Instructions) |
| Date 06/02/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wulfe, Lorraine Contributor address; City; State; Zip Code 2207 Bancroft St Apt 1704 Houston, TX 77027 | Amount of Contribution (\$) \$250.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |
| Date 05/28/2020 | Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yzaguirre, Mark Contributor address; City; State; Zip Code 8852 Merlin Ct Houston, TX 77055 | Amount of Contribution (\$) \$100.00 |
| Principal occupation / Job title (See Instructions) | | Employer (See Instructions) |

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

| | | | |
|---|--|---|--|
| The Instruction Guide explains how to complete this form. | | 1 Total pages Schedule A2: Sch: 1/1 Rpt: 43/76 | |
| 2 FILER NAME Moore, Michael | | 3 Filer ID | |
| 4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS | | \$ | |
| 5 Date 07/01/2020 | 6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tameez, Mustafa | 8 Amount of contribution (\$) \$380.00 | 9 In-kind contribution description Postage for mailer |
| 7 Contributor address, City, State, Zip Code 2727 Allen Parkway Suite 1300 Houston, TX 77019 | | <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. | |
| 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) | | 11 Employer (FOR NON-JUDICIAL) (See instructions) | |
| 12 Contributor's principal occupation (FOR JUDICIAL) | | 13 Contributor's job title (FOR JUDICIAL) (See instructions) | |
| 14 Contributor's employer/law firm (FOR JUDICIAL) | | 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL) | |
| 16 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.

| | | | | | |
|---|--|---|--|---|--|
| 1 Total pages Schedule F1: Sch: 1/29 Rpt: 44/76 | | 2 FILER NAME Moore, Michael | | 3 Filer ID | |
| 4 Date 07/01/2020 | | 5 Payee name ActBlue | | | |
| 6 Amount (\$) \$104.68 | | 7 Payee address; City; State; Zip Code PO Box 441146 Somerville, MA 02144 | | | |
| 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 donation fees | |
| 9 Complete ONLY if direct expenditure to benefit C/OH | | Candidate/Officeholder name | | Office sought Office held | |
| Date 06/07/2020 | | Payee name ActBlue | | | |
| Amount (\$) \$1,060.72 | | Payee address; City; State; Zip Code PO Box 441146 Somerville, MA 02144 | | | |
| 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 donation fees | |
| Complete ONLY if direct expenditure to benefit C/OH | | Candidate/Officeholder name | | Office sought Office held | |
| Date 05/03/2020 | | Payee name ActBlue | | | |
| Amount (\$) \$687.33 | | Payee address; City; State; Zip Code PO Box 441146 Somerville, MA 02144 | | | |
| 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 donation fees | |
| 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: 2/29 Rpt: 45/76 | 2 FILER NAME Moore, Michael | 3 Filer ID |
| 4 Date 04/05/2020 | 5 Payee name ActBlue | |
| 6 Amount (\$) \$161.95 | 7 Payee address; City; State; Zip Code PO Box 441146 Somerville, MA 02144 | |
| 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 donation fees |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 03/01/2020 | Payee name ActBlue | |
| Amount (\$) \$612.69 | Payee address; City; State; Zip Code PO Box 441146 Somerville, MA 02144 | |
| 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 donation fees |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 02/23/2020 | Payee name ActBlue | |
| Amount (\$) \$19.75 | Payee address; City; State; Zip Code PO Box 441146 Somerville, MA 02144 | |
| 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 donation fees |
| 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: 3/29 Rpt: 46/76 | 2 FILER NAME Moore, Michael | 3 Filer ID |
| 4 Date 06/18/2020 | 5 Payee name Angle Mastagni Mathews Political Strategies | |
| 6 Amount (\$) \$2,676.84 | 7 Payee address; City; State; Zip Code 507 N. Sylvania Ave. Fort Worth, TX 76111 | |
| 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 contact services |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 03/19/2020 | Payee name Angle Mastagni Mathews Political Strategies | |
| Amount (\$) \$19,155.77 | Payee address; City; State; Zip Code 507 N. Sylvania Ave. Fort Worth, TX 76111 | |
| 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 contact services |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 06/23/2020 | Payee name Apple.com | |
| Amount (\$) \$123.41 | Payee address; City; State; Zip Code 1 Infinite Loop Cupertino, CA 95014 | |
| 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 Computer equipment |
| 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: 4/29 Rpt: 47/76 | | 2 FILER NAME Moore, Michael | | 3 Filer ID | |
| 4 Date 06/23/2020 | | 5 Payee name Ardenwood Group | | | |
| 6 Amount (\$) \$3,000.00 | | 7 Payee address; City; State; Zip Code 6060 Richmond Ave. Houston, TX 77057 | | | |
| 8 PURPOSE OF EXPENDITURE | | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense HQ rental | |
| 9 Complete ONLY if direct expenditure to benefit C/OH | | Candidate/Officeholder name | | Office sought Office held | |
| Date 05/12/2020 | | Payee name Ardenwood Group | | | |
| Amount (\$) \$1,500.00 | | Payee address; City; State; Zip Code 6060 Richmond Ave. Houston, TX 77057 | | | |
| 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 HQ rental | |
| Complete ONLY if direct expenditure to benefit C/OH | | Candidate/Officeholder name | | Office sought Office held | |
| Date 04/01/2020 | | Payee name Ardenwood Group | | | |
| Amount (\$) \$1,500.00 | | Payee address; City; State; Zip Code 6060 Richmond Ave. Houston, TX 77057 | | | |
| 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 HQ rental | |
| 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: 5/29 Rpt: 48/76 | 2 FILER NAME Moore, Michael | 3 Filer ID |
| 4 Date 03/11/2020 | 5 Payee name Ardenwood Group | |
| 6 Amount (\$) \$1,500.00 | 7 Payee address; City; State; Zip Code 6060 Richmond Ave. Houston, TX 77057 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense HQ rental |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 05/22/2020 | Payee name Ashy, Steve | |
| Amount (\$) \$1,000.00 | Payee address; City; State; Zip Code 14114 Woodnook Dr. Houston, TX 77077 | |
| 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 Voter outreach services |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 04/27/2020 | Payee name Ashy, Steve | |
| Amount (\$) \$1,000.00 | Payee address; City; State; Zip Code 14004 Woodnook Drive Houston, TX 77077 | |
| 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 Voter outreach services |
| 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: 6/29 Rpt: 49/76 | | 2 FILER NAME Moore, Michael | | 3 Filer ID | |
| 4 Date 04/04/2020 | | 5 Payee name Ashy, Steve | | | |
| 6 Amount (\$) \$1,000.00 | | 7 Payee address; City; State; Zip Code 14114 Woodnook Drive Houston, TX 77077 | | | |
| 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 Voter outreach services | |
| 9 Complete ONLY if direct expenditure to benefit C/OH | | Candidate/Officeholder name | | Office sought Office held | |
| Date 02/28/2020 | | Payee name Ashy, Steve | | | |
| Amount (\$) \$1,000.00 | | Payee address; City; State; Zip Code 14114 Woodnook Drive Houston, TX 77077 | | | |
| 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 Voter outreach services | |
| Complete ONLY if direct expenditure to benefit C/OH | | Candidate/Officeholder name | | Office sought Office held | |
| Date 07/02/2020 | | Payee name Ashy, Steve | | | |
| Amount (\$) \$1,000.00 | | Payee address; City; State; Zip Code 14114 Woodnook Drive Houston, TX 77077 | | | |
| 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 Voter outreach services | |
| Complete ONLY if direct expenditure to benefit C/OH | | Candidate/Officeholder name | | Office sought Office held | |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|--|--|
| 1 Total pages Schedule F1: Sch: 7/29 Rpt: 50/76 | 2 FILER NAME Moore, Michael | 3 Filer ID |
| 4 Date 03/06/2020 | 5 Payee name Bluebonnet Data | |
| 6 Amount (\$) \$318.75 | 7 Payee address; City; State; Zip Code 8801B Piney Point Drive Austin, TX 78729 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense Data analysis services |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 07/02/2020 | Payee name Busby, Chris | |
| Amount (\$) \$600.00 | Payee address; City; State; Zip Code 4400 Memorial Drive Apt. 1043 Houston, TX 77007 | |
| 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 Voter contact |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 03/05/2020 | Payee name Cricket Wireless | |
| Amount (\$) \$100.00 | Payee address; City; State; Zip Code 5702 Bellaire Blvd. Houston, TX 77081 | |
| 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 Campaign cell phone |
| 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: 8/29 Rpt: 51/76 | 2 FILER NAME Moore, Michael | 3 Filer ID |
| 4 Date 03/05/2020 | 5 Payee name Cricket Wireless | |
| 6 Amount (\$) \$100.00 | 7 Payee address; City; State; Zip Code 5702 Bellaire Blvd. Houston, TX 77081 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign cell phone |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 06/19/2020 | Payee name Grant Martin Campaigns | |
| Amount (\$) \$16,104.15 | Payee address; City; State; Zip Code 1708 Broderick St San Francisco, CA 94115 | |
| 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 Direct mail, signs and advertising expenses |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 06/10/2020 | Payee name Grant Martin Campaigns | |
| Amount (\$) \$20,451.70 | Payee address; City; State; Zip Code 1708 Broderick St San Francisco, CA 94115 | |
| 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 Direct mail, collateral printing, fees and expenses |
| 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: 9/29 Rpt: 52/76 | | 2 FILER NAME Moore, Michael | | 3 Filer ID | |
| 4 Date 03/11/2020 | | 5 Payee name Grant Martin Campaigns | | | |
| 6 Amount (\$) \$32,770.87 | | 7 Payee address; City; State; Zip Code 1708 Broderick St San Francisco, CA 94115 | | | |
| 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 Direct mail, collateral printing, print advertising | |
| 9 Complete ONLY if direct expenditure to benefit C/OH | | Candidate/Officeholder name | | Office sought Office held | |
| Date 03/09/2020 | | Payee name Grant Martin Campaigns | | | |
| Amount (\$) \$1,049.94 | | Payee address; City; State; Zip Code 1708 Broderick St San Francisco, CA 94115 | | | |
| 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 Campaign t-shirts | |
| Complete ONLY if direct expenditure to benefit C/OH | | Candidate/Officeholder name | | Office sought Office held | |
| Date 06/30/2020 | | Payee name Grant Martin Campaigns | | | |
| Amount (\$) \$13,775.00 | | Payee address; City; State; Zip Code 1708 Broderick St San Francisco, CA 94115 | | | |
| 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 Direct mail, print advertisements and collateral printing | |
| 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: 10/29 Rpt: 53/76 | | 2 FILER NAME Moore, Michael | | 3 Filer ID | |
| 4 Date 03/09/2020 | | 5 Payee name Harris County Democratic Party | | | |
| 6 Amount (\$) \$750.00 | | 7 Payee address; City; State; Zip Code 4619 Lyons Ave Houston, TX 77020 | | | |
| 8 PURPOSE OF EXPENDITURE | | (a) Category (See Categories listed at the top of this schedule) Advertising Expense | | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ad in convention program | |
| 9 Complete ONLY if direct expenditure to benefit C/OH | | Candidate/Officeholder name | | Office sought Office held | |
| Date 03/09/2020 | | Payee name Harris County Democratic Party | | | |
| Amount (\$) \$100.00 | | Payee address; City; State; Zip Code 4619 Lyons Ave Houston, TX 77020 | | | |
| 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 Booth at convention | |
| Complete ONLY if direct expenditure to benefit C/OH | | Candidate/Officeholder name | | Office sought Office held | |
| Date 05/18/2020 | | Payee name Help Me Bookkeeper | | | |
| Amount (\$) \$100.00 | | Payee address; City; State; Zip Code 11920 Westheimer Rd. Suite D-190 Houston, TX 77077 | | | |
| 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 Payroll processing services | |
| 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: 11/29 Rpt: 54/76 | | 2 FILER NAME Moore, Michael | | 3 Filer ID | |
| 4 Date 03/13/2020 | | 5 Payee name Help Me Bookkeeper | | | |
| 6 Amount (\$) \$100.00 | | 7 Payee address; City; State; Zip Code 11920 Westheimer Rd. Suite D-190 Houston, TX 77077 | | | |
| 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 checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense Payroll processing services | |
| 9 Complete ONLY if direct expenditure to benefit C/OH | | Candidate/Officeholder name | | Office sought Office held | |
| Date 06/29/2020 | | Payee name Home Depot | | | |
| Amount (\$) \$109.32 | | Payee address; City; State; Zip Code 5445 West Loop South Houston, TX 77081 | | | |
| 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 Sign installation supplies | |
| Complete ONLY if direct expenditure to benefit C/OH | | Candidate/Officeholder name | | Office sought Office held | |
| Date 07/01/2020 | | Payee name Lewis, Jacorian | | | |
| Amount (\$) \$600.00 | | Payee address; City; State; Zip Code 3862 St. Simon Manor Houston, TX 77047 | | | |
| 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 Poll worker | |
| Complete ONLY if direct expenditure to benefit C/OH | | Candidate/Officeholder name | | Office sought Office held | |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|---|--|---|
| 1 Total pages Schedule F1: Sch: 12/29 Rpt: 55/76 | 2 FILER NAME Moore, Michael | 3 Filer ID |
| 4 Date 03/03/2020 | 5 Payee name Micro Center | |
| 6 Amount (\$) \$75.75 | 7 Payee address; City; State; Zip Code 5305 S. Rice Ave. Houston, TX 77081 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Computer equipment |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 06/29/2020 | Payee name Moore, Deondre | |
| Amount (\$) \$1,287.74 | Payee address; City; State; Zip Code 10225 Bissonnet Apt. 1180 Houston, TX 77036 | |
| 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 Payroll |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 06/12/2020 | Payee name Moore, Deondre | |
| Amount (\$) \$1,287.74 | Payee address; City; State; Zip Code 10225 Bissonnet Apt. 1180 Houston, TX 77036 | |
| 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 Payroll |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | |
|--|---|--|
| 1 Total pages Schedule F1: Sch: 13/29 Rpt: 56/76 | 2 FILER NAME Moore, Michael | 3 Filer ID |
| 4 Date 05/28/2020 | 5 Payee name Moore, Deondre | |
| 6 Amount (\$) \$1,287.73 | 7 Payee address; City; State; Zip Code 10225 Bissonnet Apt. 1180 Houston, TX 77036 | |
| 8 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 Payroll |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 04/29/2020 | Candidate/Officeholder name Moore, Deondre | |
| Amount (\$) \$1,287.74 | Office sought Office held | |
| 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 Payroll |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |
| Date 05/14/2020 | Candidate/Officeholder name Moore, Deondre | |
| Amount (\$) \$517.22 | Office sought Office held | |
| 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 Payroll |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services
Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

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

The Instruction Guide explains how to complete this form.

| | | |
|---|--|--|
| 1 Total pages Schedule F1: Sch: 14/29 Rpt: 57/76 | 2 FILER NAME Moore, Michael | 3 Filer ID |
| 4 Date 07/01/2020 | 5 Payee name NGPVAN | |
| 6 Amount (\$) \$60.00 | 7 Payee address; City; State; Zip Code 1445 New York Ave. NW, Suite 200 Washington, DC 20005 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Additional user fee |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 05/04/2020 | Payee name NGPVAN | |
| Amount (\$) \$750.00 | Payee address; City; State; Zip Code 1445 New York Ave. NW, Suite 200 Washington, DC 20005 | |
| 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 Campaign software |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 03/05/2020 | Payee name Nguyen, Anna | |
| Amount (\$) \$90.00 | Payee address; City; State; Zip Code 25219 Melody Oaks Lane Katy, TX 77494 | |
| 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 Poll worker |
| 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: 15/29 Rpt: 58/76 | 2 FILER NAME Moore, Michael | 3 Filer ID |
| 4 Date 06/22/2020 | 5 Payee name Office Depot | |
| 6 Amount (\$) \$64.93 | 7 Payee address; City; State; Zip Code 7519 Westheimer Rd Houston, TX 77063 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office supplies |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 03/05/2020 | Payee name Ospina, Katherine | |
| Amount (\$) \$180.00 | Payee address; City; State; Zip Code 22907 Elm Wing Lane Katy, TX 77450 | |
| 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 Poll worker |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 03/09/2020 | Payee name Outreach Strategists, LLC | |
| Amount (\$) \$25,166.30 | Payee address; City; State; Zip Code 2727 Allen Parkway Suite 1300 Houston, TX 77019 | |
| 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 Digital ads |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | | | | |
|---|--|---|--|---|--|
| 1 Total pages Schedule F1: Sch: 16/29 Rpt: 59/76 | | 2 FILER NAME Moore, Michael | | 3 Filer ID | |
| 4 Date 03/09/2020 | | 5 Payee name Outreach Strategists, LLC | | | |
| 6 Amount (\$) \$10,303.98 | | 7 Payee address; City; State; Zip Code 2727 Allen Parkway Suite 1300 Houston, TX 77019 | | | |
| 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 Digital ads | |
| 9 Complete ONLY if direct expenditure to benefit C/OH | | Candidate/Officeholder name | | Office sought Office held | |
| Date 03/09/2020 | | Payee name Palazzo's | | | |
| Amount (\$) \$538.88 | | Payee address; City; State; Zip Code 2620 Briar Ridge Houston, TX 77057 | | | |
| PURPOSE OF EXPENDITURE | | (a) Category (See Categories listed at the top of this schedule) Food/Beverage 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 Event refreshments | |
| Complete ONLY if direct expenditure to benefit C/OH | | Candidate/Officeholder name | | Office sought Office held | |
| Date 03/05/2020 | | Payee name Perez, Jocelyn | | | |
| Amount (\$) \$150.00 | | Payee address; City; State; Zip Code 3703 Fall Branch Katy, TX 77450 | | | |
| 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 Poll worker | |
| 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: 17/29 Rpt: 60/76 | | 2 FILER NAME Moore, Michael | | 3 Filer ID | |
| 4 Date 07/02/2020 | | 5 Payee name Smith, Shea | | | |
| 6 Amount (\$) \$600.00 | | 7 Payee address; City; State; Zip Code 3926 N. Sandy Ct. Missouri City, TX 77459 | | | |
| 8 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 Voter contact | |
| 9 Complete ONLY if direct expenditure to benefit C/OH | | Candidate/Officeholder name | | Office sought Office held | |
| Date 07/01/2020 | | Payee name Sprint Wireless | | | |
| Amount (\$) \$76.18 | | Payee address; City; State; Zip Code 3315 Westpark Dr. Houston, TX 77005 | | | |
| 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 Campaign cell phone | |
| Complete ONLY if direct expenditure to benefit C/OH | | Candidate/Officeholder name | | Office sought Office held | |
| Date 06/01/2020 | | Payee name Sprint Wireless | | | |
| Amount (\$) \$76.18 | | Payee address; City; State; Zip Code 3315 Westpark Dr. Houston, TX 77005 | | | |
| 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 Campaign cell phone | |
| 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: 18/29 Rpt: 61/76 | | 2 FILER NAME Moore, Michael | | 3 Filer ID | |
| 4 Date 05/04/2020 | | 5 Payee name Sprint Wireless | | | |
| 6 Amount (\$) \$76.18 | | 7 Payee address; City; State; Zip Code 3315 Westpark Dr. Houston, TX 77005 | | | |
| 8 PURPOSE OF EXPENDITURE | | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign cell phone | |
| 9 Complete ONLY if direct expenditure to benefit C/OH | | Candidate/Officeholder name | | Office sought Office held | |
| Date 04/01/2020 | | Payee name Sprint Wireless | | | |
| Amount (\$) \$83.16 | | Payee address; City; State; Zip Code 3315 Westpark Dr. Houston, TX 77005 | | | |
| 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 Campaign cell phone | |
| Complete ONLY if direct expenditure to benefit C/OH | | Candidate/Officeholder name | | Office sought Office held | |
| Date 03/03/2020 | | Payee name Sprint Wireless | | | |
| Amount (\$) \$70.61 | | Payee address; City; State; Zip Code 3315 Westpark Dr. Houston, TX 77005 | | | |
| 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 Campaign cell phone | |
| 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: 19/29 Rpt: 62/76 | 2 FILER NAME Moore, Michael | 3 Filer ID |
| 4 Date 04/27/2020 | 5 Payee name Strong Strategies, LLC | |
| 6 Amount (\$) \$5,189.44 | 7 Payee address; City; State; Zip Code 325 W. 18th St. Houston, TX 77008 | |
| 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 Fundraising & compliance services |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 02/28/2020 | Payee name Strong Strategies, LLC | |
| Amount (\$) \$10,606.82 | Payee address; City; State; Zip Code 325 W. 18th St. Houston, TX 77008 | |
| 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 Fundraising & compliance services |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 06/06/2020 | Payee name Strong Strategies, LLC | |
| Amount (\$) \$5,000.00 | Payee address; City; State; Zip Code 325 W. 18th St. Houston, TX 77008 | |
| 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 Fundraising & compliance services |
| 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: 20/29 Rpt: 63/76 | | 2 FILER NAME Moore, Michael | | 3 Filer ID |
| 4 Date 06/24/2020 | | 5 Payee name Strong Strategies, LLC | | |
| 6 Amount (\$) \$2,500.00 | | 7 Payee address; City; State; Zip Code 325 W. 18th St. Houston, TX 77008 | | |
| 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 Fundraising & compliance services |
| 9 Complete ONLY if direct expenditure to benefit C/OH | | Candidate/Officeholder name Office sought Office held | | |
| Date 07/03/2020 | | Payee name Suncom Mobile | | |
| Amount (\$) \$250.66 | | Payee address; City; State; Zip Code 13135 Dairy Ashford Rd. Sugar Land, TX 77478 | | |
| 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 Campaign cell phones |
| Complete ONLY if direct expenditure to benefit C/OH | | Candidate/Officeholder name Office sought Office held | | |
| Date 05/18/2020 | | Payee name Texas Workforce Commission | | |
| Amount (\$) \$243.00 | | Payee address; City; State; Zip Code 3549 Palmer Highway Texas City, TX 77590 | | |
| 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 Payroll taxes |
| 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: 21/29 Rpt: 64/76 | 2 FILER NAME Moore, Michael | 3 Filer ID |
| 4 Date 06/04/2020 | 5 Payee name U.S. Treasury | |
| 6 Amount (\$) \$1,610.07 | 7 Payee address; City; State; Zip Code P.O. Box 932100 Louisville, KY 40293-2100 | |
| 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 Payroll taxes |
| 9 Complete ONLY if direct expenditure to benefit C/OH | | |
| Date 05/15/2020 | Candidate/Officeholder name U.S. Treasury | |
| Amount (\$) \$1,991.26 | Office sought P.O. Box 932100 Louisville, KY 40293-2100 | |
| 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 Payroll taxes |
| Complete ONLY if direct expenditure to benefit C/OH | | |
| Date 04/15/2020 | Candidate/Officeholder name U.S. Treasury | |
| Amount (\$) \$509.89 | Office sought P.O. Box 932100 Louisville, KY 40293-2100 | |
| 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 Payroll taxes |
| 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: 22/29 Rpt: 65/76 | 2 FILER NAME Moore, Michael | 3 Filer ID |
| 4 Date 04/13/2020 | 5 Payee name U.S. Treasury | |
| 6 Amount (\$) \$1,019.78 | 7 Payee address; City; State; Zip Code P.O. Box 932100 Louisville, KY 40293-2100 | |
| 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 Payroll taxes |
| 9 Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 07/01/2020 | Payee name United States Postal Service | |
| Amount (\$) \$410.00 | Payee address; City; State; Zip Code 5430 Wesleyan Suite 1040 Houston, TX 77005 | |
| 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 Postage |
| Complete ONLY if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |
| Date 06/25/2020 | Payee name United States Postal Service | |
| Amount (\$) \$190.00 | Payee address; City; State; Zip Code 5430 Wesleyan Suite 1040 Houston, TX 77005 | |
| 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 Postage |
| 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: 23/29 Rpt: 66/76 | | 2 FILER NAME Moore, Michael | | 3 Filer ID |
| 4 Date 06/25/2020 | 5 Payee name United States Postal Service | | | |
| 6 Amount (\$) \$160.00 | 7 Payee address; City; State; Zip Code 5430 Weslayan Suite 1040 Houston, TX 77005 | | | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Postage | |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | | | |
| Candidate/Officeholder name Office sought Office held | | | | |
| Date 06/24/2020 | Payee name United States Postal Service | | | |
| Amount (\$) \$30.00 | Payee address; City; State; Zip Code 5430 Weslayan Suite 1040 Houston, TX 77005 | | | |
| 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 Postage | |
| Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | | | |
| Candidate/Officeholder name Office sought Office held | | | | |
| Date 06/24/2020 | Payee name United States Postal Service | | | |
| Amount (\$) \$20.00 | Payee address; City; State; Zip Code 5430 Weslayan Suite 1040 Houston, TX 77005 | | | |
| 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 Postage | |
| 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: 24/29 Rpt: 67/76 | | 2 FILER NAME Moore, Michael | | 3 Filer ID | |
| 4 Date 06/19/2020 | | 5 Payee name United States Postal Service | | | |
| 6 Amount (\$) \$133.00 | | 7 Payee address; City; State; Zip Code 5430 Weslayan Suite 1040 Houston, TX 77005 | | | |
| 8 PURPOSE OF EXPENDITURE | | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Postage | |
| 9 Complete ONLY if direct expenditure to benefit C/OH | | Candidate/Officeholder name | | Office sought Office held | |
| Date 06/15/2020 | | Payee name United States Postal Service | | | |
| Amount (\$) \$350.00 | | Payee address; City; State; Zip Code 5430 Weslayan Suite 1040 Houston, TX 77005 | | | |
| 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 Postage | |
| Complete ONLY if direct expenditure to benefit C/OH | | Candidate/Officeholder name | | Office sought Office held | |
| Date 06/09/2020 | | Payee name United States Postal Service | | | |
| Amount (\$) \$138.00 | | Payee address; City; State; Zip Code 5430 Weslayan Suite 1040 Houston, TX 77005 | | | |
| 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 Postage | |
| 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: 25/29 Rpt: 68/76 | | 2 FILER NAME Moore, Michael | | 3 Filer ID |
| 4 Date 07/03/2020 | | 5 Payee name United States Postal Service | | |
| 6 Amount (\$) \$315.00 | | 7 Payee address; City; State; Zip Code 5430 Wesleyan Suite 1040 Houston, TX 77005 | | |
| 8 PURPOSE OF EXPENDITURE | | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Postage |
| 9 Complete ONLY if direct expenditure to benefit C/OH | | Candidate/Officeholder name Office sought Office held | | |
| Date 06/18/2020 | | Payee name Verizon Wireless | | |
| Amount (\$) \$154.69 | | Payee address; City; State; Zip Code P.O. Box 15124 Albany, NY 12212-5124 | | |
| 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 Campaign cell phone |
| Complete ONLY if direct expenditure to benefit C/OH | | Candidate/Officeholder name Office sought Office held | | |
| Date 05/18/2020 | | Payee name Verizon Wireless | | |
| Amount (\$) \$50.00 | | Payee address; City; State; Zip Code P.O. Box 15124 Albany, NY 12212-5124 | | |
| 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 Campaign cell phone |
| 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: 26/29 Rpt: 69/76 | 2 FILER NAME Moore, Michael | 3 Filer ID |
| 4 Date 06/19/2020 | 5 Payee name Walgreen's | |
| 6 Amount (\$) \$15.32 | 7 Payee address; City; State; Zip Code 6320 Westheimer Rd. Houston, TX 77057 | |
| 8 PURPOSE OF EXPENDITURE | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office supplies |
| 9 Complete ONLY if direct expenditure to benefit C/OH | | |
| Date 06/24/2020 | Candidate/Officeholder name Payee name Walmart | |
| Amount (\$) \$21.39 | City; State; Zip Code 5405 S. Rice Ave. Houston, TX 77081 | |
| 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 Office supplies |
| Complete ONLY if direct expenditure to benefit C/OH | | |
| Date 06/24/2020 | Candidate/Officeholder name Payee name Walmart | |
| Amount (\$) \$10.70 | City; State; Zip Code 5405 S. Rice Ave. Houston, TX 77081 | |
| 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 Office supplies |
| Complete ONLY if direct expenditure to benefit C/OH | | |
| Date 06/24/2020 | Candidate/Officeholder name Payee name Walmart | |
| Amount (\$) \$10.70 | City; State; Zip Code 5405 S. Rice Ave. Houston, TX 77081 | |
| 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 Office supplies |
| Complete ONLY if direct expenditure to benefit C/OH | | |

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

| | | | | | |
|---|--|---|--|--|--|
| 1 Total pages Schedule F1: Sch: 27/29 Rpt: 70/76 | | 2 FILER NAME Moore, Michael | | 3 Filer ID | |
| 4 Date 06/29/2020 | | 5 Payee name Wilson, Chloe | | | |
| 6 Amount (\$) \$1,777.67 | | 7 Payee address; City; State; Zip Code 2905 Bissonnet St. Houston, TX 77005 | | | |
| 8 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 Payroll | |
| 9 Complete ONLY if direct expenditure to benefit C/OH | | Candidate/Officeholder name | | Office sought Office held | |
| Date 06/12/2020 | | Payee name Wilson, Chloe | | | |
| Amount (\$) \$1,777.67 | | Payee address; City; State; Zip Code 2905 Bissonnet St. Houston, TX 77005 | | | |
| 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 Payroll | |
| Complete ONLY if direct expenditure to benefit C/OH | | Candidate/Officeholder name | | Office sought Office held | |
| Date 05/28/2020 | | Payee name Wilson, Chloe | | | |
| Amount (\$) \$1,777.66 | | Payee address; City; State; Zip Code 2905 Bissonnet St. Houston, TX 77005 | | | |
| 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 Payroll | |
| 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: 28/29 Rpt: 71/76 | | 2 FILER NAME Moore, Michael | | 3 Filer ID | |
| 4 Date 05/14/2020 | | 5 Payee name Wilson, Chloe | | | |
| 6 Amount (\$) \$1,777.67 | | 7 Payee address; City; State; Zip Code 2905 Bissonnet St. Houston, TX 77005 | | | |
| 8 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 Payroll | |
| 9 Complete ONLY if direct expenditure to benefit C/OH | | Candidate/Officeholder name | | Office sought Office held | |
| Date 04/29/2020 | | Payee name Wilson, Chloe | | | |
| Amount (\$) \$1,777.67 | | Payee address; City; State; Zip Code 2905 Bissonnet St. Houston, TX 77005 | | | |
| 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 Payroll | |
| Complete ONLY if direct expenditure to benefit C/OH | | Candidate/Officeholder name | | Office sought Office held | |
| Date 04/14/2020 | | Payee name Wilson, Chloe | | | |
| Amount (\$) \$1,777.67 | | Payee address; City; State; Zip Code 2905 Bissonnet St. Houston, TX 77005 | | | |
| 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 Payroll | |
| 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: 29/29 Rpt: 72/76 | | 2 FILER NAME Moore, Michael | | 3 Filer ID | |
| 4 Date 03/31/2020 | | 5 Payee name Wilson, Chloe | | | |
| 6 Amount (\$) \$1,777.66 | | 7 Payee address; City; State; Zip Code 2905 Bissonnet St. Houston, TX 77005 | | | |
| 8 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 Payroll | |
| 9 Complete ONLY if direct expenditure to benefit C/OH | | Candidate/Officeholder name | | Office sought Office held | |
| Date 03/12/2020 | | Payee name Wilson, Chloe | | | |
| Amount (\$) \$1,777.67 | | Payee address; City; State; Zip Code 2905 Bissonnet St. Houston, TX 77005 | | | |
| 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 Payroll | |
| Complete ONLY if direct expenditure to benefit C/OH | | Candidate/Officeholder name | | Office sought Office held | |
| Date 02/27/2020 | | Payee name Wilson, Chloe | | | |
| Amount (\$) \$1,777.67 | | Payee address; City; State; Zip Code 2905 Bissonnet St. Houston, TX 77005 | | | |
| 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 Payroll | |
| Complete ONLY 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.

| | | |
|---|--|------------------------------|
| 1 Total pages Schedule F2: Sch: 1/1 Rpt: 73/76 | 2 FILER NAME Moore, Michael | 3 Filer ID |
| 4 TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS | | \$ |
| 5 Date 07/02/2020 | 6 Payee name Grant Martin Campaigns | |
| 7 Amount (\$) \$29,424.67 | 8 Payee address; City; State; Zip Code 1708 Broderick St San Francisco, CA 94115 | |
| 9 TYPE OF EXPENDITURE | <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political | |
| 10 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 Direct mail design and production and fees | |
| 11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | Candidate/Officeholder name | Office sought Office held |

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

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 G: Sch: 1/3 Rpt: 74/76 | | 2 FILER NAME Moore, Michael | | 3 Filer ID | |
| 4 Date 06/28/2020 | | 5 Payee name Adobe | | | |
| 6 Amount (\$) \$25.46 <input checked="" type="checkbox"/> Reimbursement from political contributions intended | | 7 Payee address; City; State; Zip Code 345 Park Ave. San Jose, CA 95110 | | | |
| 8 PURPOSE OF EXPENDITURE | | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Export software | |
| 9 Complete ONLY if direct expenditure to benefit C/OH | | Candidate/Officeholder name | | Office sought Office held | |
| Date 03/12/2020 | | Payee name Micro Center | | | |
| Amount (\$) \$425.40 <input checked="" type="checkbox"/> Reimbursement from political contributions intended | | Payee address; City; State; Zip Code 5305 S. Rice Ave. Houston, TX 77081 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Computer equipment | |
| Complete ONLY if direct expenditure to benefit C/OH | | Candidate/Officeholder name | | Office sought Office held | |
| Date 06/27/2020 | | Payee name Office Depot | | | |
| Amount (\$) \$89.58 <input checked="" type="checkbox"/> Reimbursement from political contributions intended | | Payee address; City; State; Zip Code 3443 Kirby Dr. Houston, TX 77098 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office supplies | |
| Complete ONLY if direct expenditure to benefit C/OH | | Candidate/Officeholder name | | Office sought Office held | |

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

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 G: Sch: 2/3 Rpt: 75/76 | | 2 FILER NAME Moore, Michael | | 3 Filer ID | |
| 4 Date 03/06/2020 | | 5 Payee name Zoom.US | | | |
| 6 Amount (\$) \$15.98 <input checked="" type="checkbox"/> Reimbursement from political contributions intended | | 7 Payee address; City; State; Zip Code 55 Almaden Blvd. San Jose, CA 95113 | | | |
| 8 PURPOSE OF EXPENDITURE | | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Zoom conferencing services | |
| 9 Complete ONLY if direct expenditure to benefit C/OH | | Candidate/Officeholder name | | Office sought Office held | |
| Date 04/05/2020 | | Payee name Zoom.US | | | |
| Amount (\$) \$15.98 <input checked="" type="checkbox"/> Reimbursement from political contributions intended | | Payee address; City; State; Zip Code 55 Almaden Blvd. San Jose, CA 95113 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Zoom conferencing services | |
| Complete ONLY if direct expenditure to benefit C/OH | | Candidate/Officeholder name | | Office sought Office held | |
| Date 05/05/2020 | | Payee name Zoom.US | | | |
| Amount (\$) \$15.98 <input checked="" type="checkbox"/> Reimbursement from political contributions intended | | Payee address; City; State; Zip Code 55 Almaden Blvd. San Jose, CA 95113 | | | |
| PURPOSE OF EXPENDITURE | | Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | | Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Zoom conferencing services | |
| Complete ONLY if direct expenditure to benefit C/OH | | Candidate/Officeholder name | | Office sought Office held | |

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

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 G: Sch: 3/3 Rpt: 76/76 | | 2 FILER NAME Moore, Michael | | 3 Filer ID | |
| 4 Date 06/05/2020 | | 5 Payee name Zoom.US | | | |
| 6 Amount (\$) \$15.98 <input checked="" type="checkbox"/> Reimbursement from political contributions intended | | 7 Payee address; City; State; Zip Code 55 Almaden Blvd. San Jose, CA 95113 | | | |
| 8 PURPOSE OF EXPENDITURE | | (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense | | (b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Zoom conferencing services | |
| 9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH | | Candidate/Officeholder name | | Office sought | Office held |

2020358 - 77