

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

7264

FORM C/OH
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		1 ACCOUNT # (Ethics Commission filers)	2 Total pages filed. <div style="text-align: center; font-size: 1.2em;">/3</div>
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI <div style="text-align: center; font-size: 1.2em;">Margaret J.</div> NICKNAME LAST SUFFIX <div style="text-align: center; font-size: 1.2em;">Gómez</div>	OFFICE USE ONLY Date Received Date Hand-delivered or Date Postmarked Receipt # Amount Date Processed Date Imaged	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE <div style="text-align: center; font-size: 1.2em;">Margaret J. Gómez</div> <div style="text-align: center; font-size: 1.2em;">P.O. Box 3232</div> <div style="text-align: center; font-size: 1.2em;">Austin, TX 78704</div>		
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER EXTENSION <div style="text-align: center; font-size: 1.2em;">(512) 762-7016</div>		
6 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI <div style="text-align: center; font-size: 1.2em;">Walter</div> NICKNAME LAST SUFFIX <div style="text-align: center; font-size: 1.2em;">Timberlake</div>		
7 CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE <div style="text-align: center; font-size: 1.2em;">2006 Bouldin Avenue</div> <div style="text-align: center; font-size: 1.2em;">Austin TX 78704</div>		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION <div style="text-align: center; font-size: 1.2em;">(512) 442-6688</div>		
9 REPORT TYPE	<input type="checkbox"/> January 15 <input checked="" type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final report (Attach C/OH - FR)		
10 PERIOD COVERED	Month Day Year THROUGH Month Day Year <div style="text-align: center; font-size: 1.2em;">01 / 01 / 10 THROUGH 01 / 21 / 10</div>		
11 ELECTION	ELECTION DATE Month Day Year <div style="text-align: center; font-size: 1.2em;">03 / 02 / 10</div>	ELECTION TYPE <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> General <input type="checkbox"/> Special	
12 OFFICE	OFFICE HELD (if any) <div style="text-align: center; font-size: 1.2em;">TRAVIS CO. COMM., PCT 4</div>	13 OFFICE SOUGHT (if known) <div style="text-align: center; font-size: 1.2em;">TRAVIS CO. COMM., PCT 4</div>	
14 NOTICE OF DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS <input type="checkbox"/> additional pages	** Direct campaign expenditures are campaign expenditures made by others without the candidate's prior consent or approval. Candidates are required to disclose this information only if they receive notification of the direct campaign expenditure. ** Name <div style="text-align: center; font-size: 1.2em;">NONE TO MY KNOWLEDGE</div> Address / PO Box; Apt. / Suite #; City; State; Zip Code		

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

15 C/OH NAME *Margaret J. Gómez Campaign* 16 ACCOUNT # (Ethics Commission Filers)

17 NOTICE FROM POLITICAL COMMITTEE(S)

-- This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. These expenditures may have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this information only if they receive notice of such expenditures. **

<input type="checkbox"/> GENERAL <input checked="" type="checkbox"/> SPECIFIC <input type="checkbox"/> additional pages	COMMITTEE TYPE	COMMITTEE NAME
		<i>Margaret Gómez Campaign</i>
		COMMITTEE ADDRESS
		<i>P.O. Box 3232 Austin, TX 78704</i>
	COMMITTEE CAMPAIGN TREASURER NAME	<i>Walter Timberlake</i>
	COMMITTEE CAMPAIGN TREASURER ADDRESS	<i>2006 Bouldin Avenue Austin, TX 78704</i>

18 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ -0-
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 400.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED	\$ -0-
	4. TOTAL POLITICAL EXPENDITURES	\$ 4,359.24
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 37,988.28
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ -0-

19 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.

FELICITAS B. CHAVEZ
MY COMMISSION EXPIRES
December 8, 2010

Margaret J. Gómez
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Margaret J. Gómez, this the 1st day of February, 2010, to certify which, witness my hand and seal of office.

Felicitas B. Chavez
Signature of officer administering oath

Felicitas B. Chavez
Printed name of officer administering oath

Public Notary
Title of officer administering oath

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: <i>1 of 1</i>	
2 FILER NAME <i>Margaret Gómez Campaign</i>		3 ACCOUNT # (Ethics Commission filers)	
4 Date <i>1/10/2010</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Lonnie Limon</i>	7 Amount of contribution (\$) <i>\$ 95.50</i>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <i>3501 Key Street Austin, TX 78702</i>		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date <i>1/10/2010</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Richard Merten</i>	Amount of contribution (\$) <i>\$ 23.87</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>3503 Winfield Drive Austin, TX 78704</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>1/10/10</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>LAN-PAC</i>	Amount of contribution (\$) <i>\$ 250.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>2925 Briarpark Drive, FL4 Houston, TX 77042</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>1/10/10</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Cid Galindo</i>	Amount of contribution (\$) <i>\$ 50.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>411 Brazos Street, Suite 99 Austin, TX 78701</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>1/16/10</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Ray Vaughn</i>	Amount of contribution (\$) <i>\$ 100.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>10108 Pinehurst Drive Austin, TX 78747-1361</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

PLEGGED CONTRIBUTIONS

SCHEDULE B

The Instruction Guide explains how to complete this form.

1 Total pages this Schedule B:

1 of 1

2 FILER NAME

Margaret Gómez Campa

3 ACCOUNT # (Ethics Commission filers)

4 TOTAL OF UNITEMIZED PLEDGES:

\$

5 Date

6 Full name of pledgor out-of-state PAC (ID# _____)

8 Amount of pledge (\$)

9 In-kind description (if applicable)

7 Pledgor address; City; State; Zip Code

NONE

(If travel outside of Texas, complete Schedule T)

10 Principal occupation / Job title (See Instructions)

11 Employer (See Instructions)

Date

Full name of pledgor out-of-state PAC (ID# _____)

Amount of pledge (\$)

In-kind description (if applicable)

Pledgor address; City; State; Zip Code

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of pledgor out-of-state PAC (ID# _____)

Amount of pledge (\$)

In-kind description (if applicable)

Pledgor address; City; State; Zip Code

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of pledgor out-of-state PAC (ID# _____)

Amount of pledge (\$)

In-kind description (if applicable)

Pledgor address; City; State; Zip Code

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of pledgor out-of-state PAC (ID# _____)

Amount of pledge (\$)

In-kind description (if applicable)

Pledgor address; City; State; Zip Code

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED
 If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.

1 Total pages Schedule E:
1 of 1

2 FILER NAME
Margaret Gomez Campaign

3 ACCOUNT # (Ethics Commission filers)

4 TOTAL OF UNITEMIZED LOANS: ⇨ ⇨ ⇨ ⇨ ⇨ ⇨ ⇨ \$

5 Date of loan 7 Name of lender out-of-state PAC (ID#: _____) 9 Loan Amount (\$)

6 Is lender a financial Institution? 8 Lender address; City; State; Zip Code 10 Interest rate

Y N

None

11 Maturity date

12 Principal occupation / Job title (See Instructions) 13 Employer (See Instructions)

14 Description of Collateral
 none

15 GUARANTOR INFORMATION 16 Name of guarantor 18 Amount Guaranteed (\$)

not applicable

17 Guarantor address; City; State; Zip Code

19 Pncipal Occupation 20 Employer

Date of loan Name of lender out-of-state PAC (ID#: _____) Loan Amount (\$)

Is lender a financial Institution? Lender address; City; State; Zip Code Interest rate

Y N

Maturity date

Principal occupation / Job title (See Instructions) Employer (See Instructions)

Description of Collateral
 none

GUARANTOR INFORMATION Name of guarantor Amount Guaranteed (\$)

not applicable

Guarantor address; City; State; Zip Code

Principal Occupation Employer

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

If lender is out-of-state PAC, please see instruction guide for additional reporting requirements.

POLITICAL EXPENDITURES

SCHEDULE F

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F:
3

2 FILER NAME

Margaret Gómez Campaign

3 ACCOUNT # (Ethics Commission filers)

4 Date

5 Payee name

7 Amount (\$)

6 Payee address; City; State; Zip Code

(See 2 attached pages.)

8 Purpose of payment (See instructions regarding type of information required.)

(If travel outside of Texas, complete Schedule T)

9 **** Complete if direct expenditure to benefit C/OH ****
Candidate / Officeholder name Office sought Office held

Date

Payee name

Amount (\$)

Payee address; City; State; Zip Code

Purpose of payment (See instructions regarding type of information required.)

(If travel outside of Texas, complete Schedule T)

**** Complete if direct expenditure to benefit C/OH ****
Candidate / Officeholder name Office sought Office held

Date

Payee name

Amount (\$)

Payee address; City; State; Zip Code

Purpose of payment (See instructions regarding type of information required.)

(If travel outside of Texas, complete Schedule T)

**** Complete if direct expenditure to benefit C/OH ****
Candidate / Officeholder name Office sought Office held

Date

Payee name

Amount (\$)

Payee address; City; State; Zip Code

Purpose of payment (See instructions regarding type of information required.)

(If travel outside of Texas, complete Schedule T)

**** Complete if direct expenditure to benefit C/OH ****
Candidate / Officeholder name Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

Margaret Gomez Campaign - Schedule F, 1-Feb-10
 January 1, 2010 through January 21, 2010

Date Pd.	Name and Address	Amount	Purpose	Benefits C/OH
1/3/2010	Sprint P. O. Box 660075 Dallas, TX 75265-0075	\$130.32	Campaign Calls	Margaret J. Gomez
1/4/2010	Matt Moore 1803 E. Cesar Chavez Austin, TX 78702	\$750.00	Hdqtrs Rent	Margaret J. Gomez
1/5/2010	Time Warner P. O. Box 660097 Dallas, TX 75266-0097	\$62.21	Roadrunner Service	Margaret J. Gomez
1/11/2010	Ann Pearce 15 Waller Austin, TX 78702	\$100.00	Contracted Services	Margaret J. Gomez
1/11/2010	Alexander Finn 8600 RR Austin, TX 78726	\$78.75	Contracted Services	Margaret J. Gomez
1/8/2010	ALGPC P. O. Box 822 Austin, TX 78767	\$50.00	Membership Renew	Margaret J. Gomez
1/9/2010	Angie's Restaurant 1307 East 7 Austin, TX 78702	\$38.97	Tacos for Workers	Margaret J. Gomez
1/11/2010	Irene Silva 2502 E. Oltorf, #2527 Austin, TX 78741	\$76.87	Contracted Services	Margaret J. Gomez
1/11/2010	Gretchen Stinson 74985 Chevy Chase Drive, #204 Austin, TX 78752	\$72.00	Contracted Services	Margaret J. Gomez
1/11/2010	Laurie Rogers 1308-A Radcliff Drive Austin, TX 78753	\$82.50	Contracted Services	Margaret J. Gomez
1/10/2010	Diana's Flower Shop	\$168.87	Plants for Aguirre,	Margaret J. Gomez

	2614 East 7 Austin, TX 78702		Sonleitner & Barrientos Families	
1/15/2010	Estella French 3113 Linnet Drive Austin, TX 78745	\$900.00	Contracted Services	Margaret J. Gomez
1/15/2010	James Coonrod 6809 Felipe Drive Austin, TX 78741	\$425.00	Contracted Services	Margaret J. Gomez
1/15/2010	Blue Roots Strategies, Inc. P. O. Box 300053 Austin, TX 78703	\$1,000.00	Contracted Services	Margaret J. Gomez
1/18/2010	Laurie Rogers 1308-A Radcliff Drive Austin, TX 78753	\$93.75	Contracted Services	Margaret J. Gomez
1/18/2010	Gretchen Stinson 74985 Chevy Chase Drive, #204 Austin, TX 78752	\$80.00	Contracted Services	Margaret J. Gomez
1/18/2010	Tom Cochran 805 Purple Martin Pflugerville, TX 78660	\$112.50	Contracted Services	Margaret J. Gomez
1/18/2010	South Austin Civic Club P. O. Box 151295 Austin, TX 78715-1295	\$100.00	Sponsorship	Margaret J. Gomez
1/19/2010	Andrew Stanford 114 Mandan Buda, TX 78610	\$37.50	Contracted Services	Margaret J. Gomez
1/25/2010	Total Expenditures	\$4,359.24		

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G:

1 of 1

2 FILER NAME

Margaret Gómez Campaign

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name	8 Amount (\$)
	6 Payee address; City; State; Zip Code	
	None	
	7 Purpose of expenditure (See instructions regarding type of information required.) (If travel outside of Texas, complete Schedule T)	<input type="checkbox"/> Reimbursement from political contributions intended

Date	Payee name	Amount (\$)
	Payee address; City; State; Zip Code	
	Purpose of expenditure (See instructions regarding type of information required.) (If travel outside of Texas, complete Schedule T)	<input type="checkbox"/> Reimbursement from political contributions intended

Date	Payee name	Amount (\$)
	Payee address; City; State; Zip Code	
	Purpose of expenditure (See instructions regarding type of information required.) (If travel outside of Texas, complete Schedule T)	<input type="checkbox"/> Reimbursement from political contributions intended

Date	Payee name	Amount (\$)
	Payee address; City; State; Zip Code	
	Purpose of expenditure (See instructions regarding type of information required.) (If travel outside of Texas, complete Schedule T)	<input type="checkbox"/> Reimbursement from political contributions intended

Date	Payee name	Amount (\$)
	Payee address; City; State; Zip Code	
	Purpose of expenditure (See instructions regarding type of information required.) (If travel outside of Texas, complete Schedule T)	<input type="checkbox"/> Reimbursement from political contributions intended

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

**PAYMENT FROM POLITICAL CONTRIBUTIONS
TO A BUSINESS OF C/OH**

SCHEDULE H

The Instruction Guide explains how to complete this form.

1 Total pages Schedule H:
1 of 1

2 FILER NAME

Margaret Gómez Campaign

3 ACCOUNT # (Ethics Commission filers)

4 Date

5 Business name

7 Amount (\$)

6 Business address; City; State; Zip Code

None

8 Purpose of payment (See instructions regarding type of information required.)

9 ** Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

(If travel outside of Texas, complete Schedule T)

Date

Business name

Amount (\$)

Business address; City; State; Zip Code

Purpose of payment (See instructions regarding type of information required.)

** Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

(If travel outside of Texas, complete Schedule T)

Date

Business name

Amount (\$)

Business address; City; State; Zip Code

Purpose of payment (See instructions regarding type of information required.)

** Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

(If travel outside of Texas, complete Schedule T)

Date

Business name

Amount (\$)

Business address; City; State; Zip Code

Purpose of payment (See instructions regarding type of information required.)

** Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

(If travel outside of Texas, complete Schedule T)

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I:

1 of 1

2 FILER NAME

Margaret Gómez Campaign

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name	8 Amount (\$)
	6 Payee address; City; State; Zip Code	
	<i>None</i>	
7 Purpose of expenditure (See instructions regarding type of information required.)		

Date	Payee name	Amount (\$)
	Payee address; City; State; Zip Code	
Purpose of expenditure (See instructions regarding type of information required.)		

Date	Payee name	Amount (\$)
	Payee address; City; State; Zip Code	
Purpose of expenditure (See instructions regarding type of information required.)		

Date	Payee name	Amount (\$)
	Payee address; City; State; Zip Code	
Purpose of expenditure (See instructions regarding type of information required.)		

Date	Payee name	Amount (\$)
	Payee address; City; State; Zip Code	
Purpose of expenditure (See instructions regarding type of information required.)		

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

CREDITS (optional)

SCHEDULE K

The Instruction Guide explains how to complete this form.

1 Total pages Schedule K:

1 of 1

2 FILER NAME

Margaret Gómez Campaño

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payor name	8 Amount (\$)
	6 Payor address; City; State; Zip Code	
7 Reason for credit		
<i>None</i>		

Date	Payor name	Amount (\$)
	Payor address; City; State; Zip Code	
Reason for credit		

Date	Payor name	Amount (\$)
	Payor address; City; State; Zip Code	
Reason for credit		

Date	Payor name	Amount (\$)
	Payor address; City; State; Zip Code	
Reason for credit		

Date	Payor name	Amount (\$)
	Payor address; City; State; Zip Code	
Reason for credit		

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

**IN-KIND CONTRIBUTION OR POLITICAL EXPENDITURE
FOR TRAVEL OUTSIDE OF TEXAS**

SCHEDULE T

The Instruction Guide explains how to complete this form.	1 Total pages Schedule T: 1 of 1
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2 FILER NAME <i>Margaret Gómez Campaer</i>	3 ACCOUNT # (Ethics Commission filers)
---	--

4 Name of Contributor / Corporation or Labor Organization / Pledgor / Payee
NA

5 Contribution / Expenditure reported on:

Schedule A Schedule B Schedule C Schedule D Schedule F Schedule G
 Schedule H Schedule N COH-UC COH-T PAC-C PAC-E

6 Dates of travel	7 Name of person(s) traveling
	8 Departure city or name of departure location
	9 Destination city or name of destination location

10 Means of transportation	11 Purpose of travel (including name of conference, seminar, or other event)
----------------------------	--

Name of Contributor / Corporation or Labor Organization / Pledgor / Payee

Contribution / Expenditure reported on:

Schedule A Schedule B Schedule C Schedule D Schedule F Schedule G
 Schedule H Schedule N COH-UC COH-T PAC-C PAC-E

Dates of travel	Name of person(s) traveling
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Means of transportation	Purpose of travel (including name of conference, seminar, or other event)
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Name of Contributor / Corporation or Labor Organization / Pledgor / Payee

Contribution / Expenditure reported on:

Schedule A Schedule B Schedule C Schedule D Schedule F Schedule G
 Schedule H Schedule N COH-UC COH-T PAC-C PAC-E

Dates of travel	Name of person(s) traveling
	Departure city or name of departure location
	Destination city or name of destination location

Means of transportation	Purpose of travel (including name of conference, seminar, or other event)
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7264

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3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI <div style="text-align: center; font-size: 1.2em;">Margaret J.</div> NICKNAME LAST SUFFIX <div style="text-align: center; font-size: 1.2em;">Gómez</div>	OFFICE USE ONLY Date Received Date Hand-delivered or Date Postmarked Receipt # Amount Date Processed Date Imaged	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE <div style="text-align: center; font-size: 1.2em;">Margaret J. Gómez P.O. Box 3232 Austin, TX 78704</div>		
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER EXTENSION <div style="text-align: center; font-size: 1.2em;">(512) 762-7016</div>		
6 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI <div style="text-align: center; font-size: 1.2em;">Walter</div> NICKNAME LAST SUFFIX <div style="text-align: center; font-size: 1.2em;">Timberlake</div>		
7 CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE <div style="text-align: center; font-size: 1.2em;">2006 Bouldin Avenue Austin TX 78704</div>		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION <div style="text-align: center; font-size: 1.2em;">(512) 442-6688</div>		
9 REPORT TYPE	<input type="checkbox"/> January 15 <input checked="" type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final report (Attach C/OH - FR)		
10 PERIOD COVERED	Month Day Year THROUGH Month Day Year <div style="text-align: center; font-size: 1.2em;">01 / 01 / 10 THROUGH 01 / 21 / 10</div>		
11 ELECTION	ELECTION DATE Month Day Year <div style="text-align: center; font-size: 1.2em;">03 / 02 / 10</div>	ELECTION TYPE <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> General <input type="checkbox"/> Special	
12 OFFICE	OFFICE HELD (if any) <div style="text-align: center; font-size: 1.2em;">TRAVIS CO. COMM., PCT 4</div>	13 OFFICE SOUGHT (if known) <div style="text-align: center; font-size: 1.2em;">TRAVIS CO. COMM., PCT. 4</div>	
14 NOTICE OF DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS <input type="checkbox"/> additional pages	** Direct campaign expenditures are campaign expenditures made by others without the candidate's prior consent or approval. Candidates are required to disclose this information only if they receive notification of the direct campaign expenditure. ** Name <div style="text-align: center; font-size: 1.2em;">NONE TO MY KNOWLEDGE</div> Address / PO Box; Apt. / Suite #; City; State; Zip Code		

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CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

15 C/OH NAME *Margaret J. Gómez Campaign* 16 ACCOUNT # (Ethics Commission Filers)

17 NOTICE FROM POLITICAL COMMITTEE(S)

-- This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. These expenditures may have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this information only if they receive notice of such expenditures. **

COMMITTEE TYPE	COMMITTEE NAME
<input type="checkbox"/> GENERAL	<i>Margaret Gómez Campaign</i>
<input checked="" type="checkbox"/> SPECIFIC	COMMITTEE ADDRESS
	<i>P.O. Box 3232 Austin, TX 78704</i>
	COMMITTEE CAMPAIGN TREASURER NAME
	<i>Walter Timberlake</i>
	COMMITTEE CAMPAIGN TREASURER ADDRESS
	<i>2006 Bouldin Avenue Austin, TX 78704</i>

additional pages

18 CONTRIBUTION TOTALS

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED \$ -0-

2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS) \$ 400.00

EXPENDITURE TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED \$ -0-

4. TOTAL POLITICAL EXPENDITURES \$ 4,359.24

CONTRIBUTION BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD \$ 37,988.28

OUTSTANDING LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD \$ -0-

19 AFFIDAVIT

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



AFFIX NOTARY STAMP / SEAL ABOVE

Margaret J. Gómez
Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said *Margaret J. Gómez*, this the 1st day of February, 2010, to certify which, witness my hand and seal of office.

Felicitas B. Chavez
Signature of officer administering oath

Felicitas B. Chavez
Printed name of officer administering oath

Public Notary
Title of officer administering oath

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: <i>1 of 1</i>	
2 FILER NAME <i>Margaret Gómez Campaign</i>		3 ACCOUNT # (Ethics Commission filers)	
4 Date <i>1/10/2010</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Lonnie Limon</i>	7 Amount of contribution (\$) <i>\$ 95.50</i>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <i>3501 Key Street Austin, TX 78702</i>		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date <i>1/10/2010</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Richard Merten</i>	Amount of contribution (\$) <i>\$ 23.87</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>3503 Winfield Drive Austin, TX 78704</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>1/10/10</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>LAN-PAC</i>	Amount of contribution (\$) <i>\$ 250.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>2925 Briarpark Drive, FL4 Houston, TX 77042</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>1/10/10</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Cid Galindo</i>	Amount of contribution (\$) <i>\$ 50.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>411 Brazos Street, Suite 99 Austin, TX 78701</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <i>1/16/10</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) <i>Ray Vaughn</i>	Amount of contribution (\$) <i>\$ 100.00</i>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <i>10108 Pinehurst Drive Austin, TX 78747-1361</i>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

PLEGGED CONTRIBUTIONS

SCHEDULE B

The Instruction Guide explains how to complete this form.

1 Total pages this Schedule B:

1 of 1

2 FILER NAME

Margaret Gómez Campa

3 ACCOUNT # (Ethics Commission filers)

4 TOTAL OF UNITEMIZED PLEDGES:

\$

5 Date

6 Full name of pledgor out-of-state PAC (ID# _____)

8 Amount of pledge (\$)

9 In-kind description (if applicable)

7 Pledgor address; City; State; Zip Code

NONE

(If travel outside of Texas, complete Schedule T)

10 Principal occupation / Job title (See Instructions)

11 Employer (See Instructions)

Date

Full name of pledgor out-of-state PAC (ID# _____)

Amount of pledge (\$)

In-kind description (if applicable)

Pledgor address; City; State; Zip Code

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of pledgor out-of-state PAC (ID# _____)

Amount of pledge (\$)

In-kind description (if applicable)

Pledgor address; City; State; Zip Code

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of pledgor out-of-state PAC (ID# _____)

Amount of pledge (\$)

In-kind description (if applicable)

Pledgor address; City; State; Zip Code

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of pledgor out-of-state PAC (ID# _____)

Amount of pledge (\$)

In-kind description (if applicable)

Pledgor address; City; State; Zip Code

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.

1 Total pages Schedule E:
1 of 1

2 FILER NAME
Margaret Gomez Campaign

3 ACCOUNT # (Ethics Commission filers)

4 TOTAL OF UNITEMIZED LOANS: ⇨ ⇨ ⇨ ⇨ ⇨ ⇨ \$

5 Date of loan 7 Name of lender out-of-state PAC (ID#: _____) 9 Loan Amount (\$)

6 Is lender a financial Institution? 8 Lender address; City; State; Zip Code 10 Interest rate

Y N

None

11 Maturity date

12 Principal occupation / Job title (See Instructions) 13 Employer (See Instructions)

14 Description of Collateral
 none

15 GUARANTOR INFORMATION 16 Name of guarantor 18 Amount Guaranteed (\$)

not applicable

17 Guarantor address; City; State; Zip Code

19 Pncipal Occupation 20 Employer

Date of loan Name of lender out-of-state PAC (ID#: _____) Loan Amount (\$)

Is lender a financial Institution? Lender address; City; State; Zip Code Interest rate

Y N

Maturity date

Principal occupation / Job title (See Instructions) Employer (See Instructions)

Description of Collateral
 none

GUARANTOR INFORMATION Name of guarantor Amount Guaranteed (\$)

not applicable

Guarantor address; City; State; Zip Code

Principal Occupation Employer

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

If lender is out-of-state PAC, please see instruction guide for additional reporting requirements.

POLITICAL EXPENDITURES

SCHEDULE F

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F:
3

2 FILER NAME

Margaret Gómez Campaign

3 ACCOUNT # (Ethics Commission filers)

4 Date

5 Payee name

7 Amount (\$)

6 Payee address; City; State; Zip Code

(See 2 attached pages.)

8 Purpose of payment (See instructions regarding type of information required.)

(If travel outside of Texas, complete Schedule T)

9 **** Complete if direct expenditure to benefit C/OH ****
Candidate / Officeholder name Office sought Office held

Date

Payee name

Amount (\$)

Payee address; City; State; Zip Code

Purpose of payment (See instructions regarding type of information required.)

(If travel outside of Texas, complete Schedule T)

**** Complete if direct expenditure to benefit C/OH ****
Candidate / Officeholder name Office sought Office held

Date

Payee name

Amount (\$)

Payee address; City; State; Zip Code

Purpose of payment (See instructions regarding type of information required.)

(If travel outside of Texas, complete Schedule T)

**** Complete if direct expenditure to benefit C/OH ****
Candidate / Officeholder name Office sought Office held

Date

Payee name

Amount (\$)

Payee address; City; State; Zip Code

Purpose of payment (See instructions regarding type of information required.)

(If travel outside of Texas, complete Schedule T)

**** Complete if direct expenditure to benefit C/OH ****
Candidate / Officeholder name Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

Margaret Gomez Campaign - Schedule F, 1-Feb-10
 January 1, 2010 through January 21, 2010

Date Pd.	Name and Address	Amount	Purpose	Benefits C/OH
1/3/2010	Sprint P. O. Box 660075 Dallas, TX 75265-0075	\$130.32	Campaign Calls	Margaret J. Gomez
1/4/2010	Matt Moore 1803 E. Cesar Chavez Austin, TX 78702	\$750.00	Hdqtrs Rent	Margaret J. Gomez
1/5/2010	Time Warner P. O. Box 660097 Dallas, TX 75266-0097	\$62.21	Roadrunner Service	Margaret J. Gomez
1/11/2010	Ann Pearce 15 Waller Austin, TX 78702	\$100.00	Contracted Services	Margaret J. Gomez
1/11/2010	Alexander Finn 8600 RR Austin, TX 78726	\$78.75	Contracted Services	Margaret J. Gomez
1/8/2010	ALGPC P. O. Box 822 Austin, TX 78767	\$50.00	Membership Renew	Margaret J. Gomez
1/9/2010	Angie's Restaurant 1307 East 7 Austin, TX 78702	\$38.97	Tacos for Workers	Margaret J. Gomez
1/11/2010	Irene Silva 2502 E. Oltorf, #2527 Austin, TX 78741	\$76.87	Contracted Services	Margaret J. Gomez
1/11/2010	Gretchen Stinson 74985 Chevy Chase Drive, #204 Austin, TX 78752	\$72.00	Contracted Services	Margaret J. Gomez
1/11/2010	Laurie Rogers 1308-A Radcliff Drive Austin, TX 78753	\$82.50	Contracted Services	Margaret J. Gomez
1/10/2010	Diana's Flower Shop	\$168.87	Plants for Aguirre,	Margaret J. Gomez

	2614 East 7 Austin, TX 78702		Sonleitner & Barrientos Families	
1/15/2010	Estella French 3113 Linnet Drive Austin, TX 78745	\$900.00	Contracted Services	Margaret J. Gomez
1/15/2010	James Coonrod 6809 Felipe Drive Austin, TX 78741	\$425.00	Contracted Services	Margaret J. Gomez
1/15/2010	Blue Roots Strategies, Inc. P. O. Box 300053 Austin, TX 78703	\$1,000.00	Contracted Services	Margaret J. Gomez
1/18/2010	Laurie Rogers 1308-A Radcliff Drive Austin, TX 78753	\$93.75	Contracted Services	Margaret J. Gomez
1/18/2010	Gretchen Stinson 74985 Chevy Chase Drive, #204 Austin, TX 78752	\$80.00	Contracted Services	Margaret J. Gomez
1/18/2010	Tom Cochran 805 Purple Martin Pflugerville, TX 78660	\$112.50	Contracted Services	Margaret J. Gomez
1/18/2010	South Austin Civic Club P. O. Box 151295 Austin, TX 78715-1295	\$100.00	Sponsorship	Margaret J. Gomez
1/19/2010	Andrew Stanford 114 Mandan Buda, TX 78610	\$37.50	Contracted Services	Margaret J. Gomez
1/25/2010	Total Expenditures	\$4,359.24		

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G:

1 of 1

2 FILER NAME

Margaret Gómez Campaign

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name	8 Amount (\$)
	6 Payee address; City; State; Zip Code	
	<i>None</i>	
	7 Purpose of expenditure (See instructions regarding type of information required.) (If travel outside of Texas, complete Schedule T)	<input type="checkbox"/> Reimbursement from political contributions intended

Date	Payee name	Amount (\$)
	Payee address; City; State; Zip Code	
	Purpose of expenditure (See instructions regarding type of information required.) (If travel outside of Texas, complete Schedule T)	<input type="checkbox"/> Reimbursement from political contributions intended

Date	Payee name	Amount (\$)
	Payee address; City; State; Zip Code	
	Purpose of expenditure (See instructions regarding type of information required.) (If travel outside of Texas, complete Schedule T)	<input type="checkbox"/> Reimbursement from political contributions intended

Date	Payee name	Amount (\$)
	Payee address; City; State; Zip Code	
	Purpose of expenditure (See instructions regarding type of information required.) (If travel outside of Texas, complete Schedule T)	<input type="checkbox"/> Reimbursement from political contributions intended

Date	Payee name	Amount (\$)
	Payee address; City; State; Zip Code	
	Purpose of expenditure (See instructions regarding type of information required.) (If travel outside of Texas, complete Schedule T)	<input type="checkbox"/> Reimbursement from political contributions intended

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH

SCHEDULE H

The Instruction Guide explains how to complete this form.

1 Total pages Schedule H:

1 of 1

2 FILER NAME

Margaret Gómez Campaign

3 ACCOUNT # (Ethics Commission filers)

4 Date

5 Business name

7 Amount (\$)

6 Business address; City; State; Zip Code

None

8 Purpose of payment (See instructions regarding type of information required.)

9 ** Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name Office sought Office held

(If travel outside of Texas, complete Schedule T)

Date

Business name

Amount (\$)

Business address; City; State; Zip Code

Purpose of payment (See instructions regarding type of information required.)

** Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name Office sought Office held

(If travel outside of Texas, complete Schedule T)

Date

Business name

Amount (\$)

Business address; City; State; Zip Code

Purpose of payment (See instructions regarding type of information required.)

** Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name Office sought Office held

(If travel outside of Texas, complete Schedule T)

Date

Business name

Amount (\$)

Business address; City; State; Zip Code

Purpose of payment (See instructions regarding type of information required.)

** Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name Office sought Office held

(If travel outside of Texas, complete Schedule T)

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I:

1 of 1

2 FILER NAME

Margaret Gómez Campaign

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name	8 Amount (\$)
	6 Payee address; City; State; Zip Code	
	<i>None</i>	
7 Purpose of expenditure (See instructions regarding type of information required.)		

Date	Payee name	Amount (\$)
	Payee address; City; State; Zip Code	
Purpose of expenditure (See instructions regarding type of information required.)		

Date	Payee name	Amount (\$)
	Payee address; City; State; Zip Code	
Purpose of expenditure (See instructions regarding type of information required.)		

Date	Payee name	Amount (\$)
	Payee address; City; State; Zip Code	
Purpose of expenditure (See instructions regarding type of information required.)		

Date	Payee name	Amount (\$)
	Payee address; City; State; Zip Code	
Purpose of expenditure (See instructions regarding type of information required.)		

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

CREDITS (optional)

SCHEDULE K

The Instruction Guide explains how to complete this form.

1 Total pages Schedule K:

1 of 1

2 FILER NAME

Margaret Gómez Campaño

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payor name	8 Amount (\$)
	6 Payor address; City; State; Zip Code	
7 Reason for credit		
<i>None</i>		

Date	Payor name	Amount (\$)
	Payor address; City; State; Zip Code	
Reason for credit		

Date	Payor name	Amount (\$)
	Payor address; City; State; Zip Code	
Reason for credit		

Date	Payor name	Amount (\$)
	Payor address; City; State; Zip Code	
Reason for credit		

Date	Payor name	Amount (\$)
	Payor address; City; State; Zip Code	
Reason for credit		

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

**IN-KIND CONTRIBUTION OR POLITICAL EXPENDITURE
FOR TRAVEL OUTSIDE OF TEXAS**

SCHEDULE T

The Instruction Guide explains how to complete this form.	1 Total pages Schedule T: 1 of 1
---	-------------------------------------

2 FILER NAME <i>Margaret Gómez Campaer</i>	3 ACCOUNT # (Ethics Commission filers)
---	--

4 Name of Contributor / Corporation or Labor Organization / Pledgor / Payee
NA

5 Contribution / Expenditure reported on:

Schedule A Schedule B Schedule C Schedule D Schedule F Schedule G
 Schedule H Schedule N COH-UC COH-T PAC-C PAC-E

6 Dates of travel	7 Name of person(s) traveling
	8 Departure city or name of departure location
	9 Destination city or name of destination location

10 Means of transportation	11 Purpose of travel (including name of conference, seminar, or other event)
----------------------------	--

Name of Contributor / Corporation or Labor Organization / Pledgor / Payee

Contribution / Expenditure reported on:

Schedule A Schedule B Schedule C Schedule D Schedule F Schedule G
 Schedule H Schedule N COH-UC COH-T PAC-C PAC-E

Dates of travel	Name of person(s) traveling
	Departure city or name of departure location
	Destination city or name of destination location

Means of transportation	Purpose of travel (including name of conference, seminar, or other event)
-------------------------	---

Name of Contributor / Corporation or Labor Organization / Pledgor / Payee

Contribution / Expenditure reported on:

Schedule A Schedule B Schedule C Schedule D Schedule F Schedule G
 Schedule H Schedule N COH-UC COH-T PAC-C PAC-E

Dates of travel	Name of person(s) traveling
	Departure city or name of departure location
	Destination city or name of destination location

Means of transportation	Purpose of travel (including name of conference, seminar, or other event)
-------------------------	---

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

7311

FORM C/OH COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.	1 ACCOUNT # (Ethics Commission filers)	2 Total pages filed: 18
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3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI <i>Margaret J.</i> NICKNAME LAST SUFFIX <i>Gómez</i>	OFFICE USE ONLY Date Received Date Hand-delivered or Date Postmarked Receipt # Amount Date Processed Date Imaged
---------------------------------	--	--

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX, APT / SUITE #, CITY, STATE, ZIP CODE <i>Margaret J. Gómez P.O. Box 3232 Austin, TX 78704</i>
--	---

5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER EXTENSION <i>(512) 762-7016</i>
----------------------------------	---

6 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI <i>Walter</i> NICKNAME LAST SUFFIX <i>Timberlake</i>
---------------------------	--

7 CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #, CITY, STATE, ZIP CODE <i>2006 Boulder Avenue Austin TX 78704</i>
--	---

8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION <i>(512) 442-6688</i>
----------------------------	---

9 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input type="checkbox"/> July 15 <input checked="" type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final report (Attach C/OH - FR)
---------------	---

10 PERIOD COVERED	Month Day Year Month Day Year <i>1 / 22 / 10 THROUGH 2 / 20 / 10</i>
-------------------	---

11 ELECTION	ELECTION DATE Month Day Year <i>03 / 02 / 10</i>	ELECTION TYPE <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> General <input type="checkbox"/> Special
-------------	--	--

12 OFFICE OFFICE HELD (if any) <i>Texas County Commissioner, Pat. 4</i>	13 OFFICE SOUGHT (if known) <i>Texas County Commissioner, Pat. 4</i>
---	---

14 NOTICE OF DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS <input type="checkbox"/> additional pages	** Direct campaign expenditures are campaign expenditures made by others without the candidate's prior consent or approval. Candidates are required to disclose this information only if they receive notification of the direct campaign expenditure. ** Name <i>None to my knowledge.</i> Address / PO Box; Apt. / Suite #; City; State; Zip Code
--	--

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

15 C/OH NAME

16 ACCOUNT # (Ethics Commission Filers)

17 NOTICE FROM POLITICAL COMMITTEE(S)

- This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. These expenditures may have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this information only if they receive notice of such expenditures. **

COMMITTEE TYPE

GENERAL

SPECIFIC

COMMITTEE NAME

Margaret J. Gómez

COMMITTEE ADDRESS

P.O. Box 3232
Austin, TX 78704

COMMITTEE CAMPAIGN TREASURER NAME

Walter Timberlake

COMMITTEE CAMPAIGN TREASURER ADDRESS

2006 Bolder Avenue
Austin, TX 78704

additional pages

18 CONTRIBUTION TOTALS

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED

\$ - 0 -

2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)

\$ 16,750.42

EXPENDITURE TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED

\$ - 0 -

4. TOTAL POLITICAL EXPENDITURES

\$ 14,430.65

CONTRIBUTION BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD

\$ 30,804.62

OUTSTANDING LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD

\$ - 0 -

19 AFFIDAVIT

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

Margaret J. Gómez

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20 _____, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath

**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

SCHEDULE A

The Instruction Guide explains how to complete this form.	1 Total pages Schedule A: <i>1 of 4</i>
---	--

2 FILER NAME <i>Margaret Gómez Campaign</i>	3 ACCOUNT # (Ethics Commission filers)
--	--

4 Date	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <i>(See 3 attached sheets)</i>		(If travel outside of Texas, complete Schedule T)	

9 Principal occupation / Job title (See Instructions)	10 Employer (See Instructions)
---	--------------------------------

Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____)	Amount of contribution (\$)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code		(If travel outside of Texas, complete Schedule T)	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
---	-----------------------------

Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____)	Amount of contribution (\$)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code		(If travel outside of Texas, complete Schedule T)	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
---	-----------------------------

Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____)	Amount of contribution (\$)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code		(If travel outside of Texas, complete Schedule T)	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
---	-----------------------------

Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____)	Amount of contribution (\$)	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code		(If travel outside of Texas, complete Schedule T)	

Principal occupation / Job title (See Instructions)	Employer (See Instructions)
---	-----------------------------

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

Margaret Gomez Campaign - Schedule A - February 22, 2010
 January 22, 2010 - February 20, 2010

Date Recd	Name & Address	Amount	In-Kind
1/29/2010	Travis County Law Enforcement Officers PAC 400 West 14, Suite 220 Austin, TX 78701	\$2,387.50	
1/29/2010	Deposit	\$2,387.50	
1/25/2010	Linebarger, Goggan, Blair & Sampson P. O. Box 17428 Austin, TX 78760	\$1,500.00	
1/27/2010	Deposit	\$1,500.00	
1/27/2010	Dawn D. Coronado 5602 Palisade Court Austin, TX 78731-4508	\$150.00	
1/29/2010	White Construction Company 2705 Bee Cave Road, Suite 250 Austin, TX 78746	\$1,000.00	
2/9/2006	Deposit	\$1,150.00	
1/30/2010	Texas Democratic Party 505 West 12, Suite 202 Austin, TX 78701		\$700.00 Voter File Access
2/10/2010	Minton, Burton, Foster & Collins 1100 Guadalupe Austin, TX 78701	\$1,500.00	
2/10/2010	Travis County Sheriff's Officers Association PAC 400 West 14, Suite 220 Austin, TX 78701	\$1,000.00	
2/10/2010	Granger and Mueller, P. C. 605 West 10 Austin, TX 78701-2042	\$500.00	

2/10/2010	Adam A. Matthews 7529 Harlow Drive Austin, TX 78739	\$500.00
2/10/2010	Herbert Evans 1302 West Avenue Austin, TX 78701-1716	\$250.00
2/10/2010	T. Baranoff 2307 Tower Drive Austin, TX 78703	\$25.00
2/10/2010	Robert R. Smith 930 FM 1460 Georgetown, TX 78626	\$25.00
2/10/2010	Guadalupe Sosa P. O. Box 40205 Austin, TX 78704-0004	\$25.00
2/10/2010	Barbara Cilley 1417 Travis Heights Blvd. Austin, TX 78704	\$40.00
2/10/2010	Stacy Suits 7807 Doncaster Austin, TX 78745	\$50.00
2/10/2010	Carmen Luevanos 2203 De Verne Street Austin, TX 78704	\$50.00
2/10/2010	Roberto O. Martinez 5905 Thames Drive Austin, TX 78723	\$75.00
2/10/2010	John J. Vay 6654 Whitemarsh Valley Walk Austin, TX 78746	\$100.00
2/10/2010	Glenn W. Shankle 2105 Haas Lane Austin, TX 78728	\$100.00
2/10/2010	Brown McCarroll 111 Congress Avenue, Suite 1400 Austin, TX 78701	\$1,000.00

2/13/2010	Leroy W. Nellis 6418 Zadock Woods Drive Austin, TX 78749	\$50.00	
2/13/2010	Teresita Rodriguez 9000 Happy Trail Austin, TX 78754-4932	\$25.00	
2/17/2010	Deposit	\$5,315.00	
2/17/2010	Jay C. Evans 4002 Gaines Court Austin, TX 78735	\$250.00	
2/17/2010	Ridge Kaiser 6510 Delmonico Austin, TX 78759	\$750.00	
2/17/2010	Patrick Reilly 4103 Love Bird Lane Austin, TX 78730	\$750.00	
2/18/2010	Joan Bell 10111 Wild Dunes Drive Austin, TX 78747-1310	\$50.00	
2/20/2010	Deposit	\$1,800.00	
2/20/2010	Austin/Travis County EMS Employee Association 7901 Cameron Road, Building 3, Suite #288 Austin, TX 78754	\$3,897.92	Postcard & Postage

LOANS

SCHEDULE E

<p>The Instruction Guide explains how to complete this form.</p>	<p>1 Total pages Schedule E: <i>1 of 1</i></p>
--	--

<p>2 FILER NAME <i>Margaret Gómez Campaign</i></p>	<p>3 ACCOUNT # (Ethics Commission filers)</p>
--	---

4 TOTAL OF UNITEMIZED LOANS: ⇄ ⇄ ⇄ ⇄ ⇄ ⇄ ⇄ \$

<p>5 Date of loan</p>	<p>7 Name of lender <input type="checkbox"/> out-of-state PAC (ID# _____)</p>	<p>9 Loan Amount (\$)</p>
<p>6 is lender a financial institution? Y N</p>	<p>8 Lender address; City; State; Zip Code <i>None</i></p>	<p>10 Interest rate</p>
		<p>11 Maturity date</p>

<p>12 Principal occupation / Job title (See Instructions)</p>	<p>13 Employer (See Instructions)</p>
---	---------------------------------------

14 Description of Collateral
 none

<p>15 GUARANTOR INFORMATION <input type="checkbox"/> not applicable</p>	<p>16 Name of guarantor</p> <p>17 Guarantor address; City; State; Zip Code</p>	<p>18 Amount Guaranteed (\$)</p>
--	---	----------------------------------

<p>19 Principal Occupation</p>	<p>20 Employer</p>
--------------------------------	--------------------

<p>Date of loan</p>	<p>Name of lender <input type="checkbox"/> out-of-state PAC (ID# _____)</p>	<p>Loan Amount (\$)</p>
<p>Is lender a financial institution? Y N</p>	<p>Lender address; City; State; Zip Code</p>	<p>Interest rate</p>
		<p>Maturity date</p>

<p>Principal occupation / Job title (See Instructions)</p>	<p>Employer (See Instructions)</p>
--	------------------------------------

Description of Collateral
 none

<p>GUARANTOR INFORMATION <input type="checkbox"/> not applicable</p>	<p>Name of guarantor</p> <p>Guarantor address; City; State; Zip Code</p>	<p>Amount Guaranteed (\$)</p>
---	---	-------------------------------

<p>Principal Occupation</p>	<p>Employer</p>
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ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED
If lender is out-of-state PAC, please see instruction guide for additional reporting requirements.

POLITICAL EXPENDITURES

SCHEDULE F

<p>The Instruction Guide explains how to complete this form.</p>	<p>1 Total pages Schedule F: <i>1 of 6</i></p>
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<p>2 FILER NAME</p>	<p>3 ACCOUNT # (Ethics Commission filers)</p>
----------------------------	--

<p>4 Date</p>	<p>5 Payee name</p> <p>.....</p> <p>6 Payee address; City; State; Zip Code</p> <p style="text-align:center"><i>(See 5 attached sheets)</i></p>	<p>7 Amount (\$)</p>
----------------------	--	-----------------------------

<p>8 Purpose of payment (See instructions regarding type of information required.)</p> <p><i>(If travel outside of Texas, complete Schedule T)</i></p>	<p>9 ** Complete if direct expenditure to benefit C/OH **</p> <p>Candidate / Officeholder name Office sought Office held</p>
---	--

<p>Date</p>	<p>Payee name</p> <p>.....</p> <p>Payee address; City; State; Zip Code</p>	<p>Amount (\$)</p>
-------------	--	--------------------

<p>Purpose of payment (See instructions regarding type of information required.)</p> <p><i>(If travel outside of Texas, complete Schedule T)</i></p>	<p>** Complete if direct expenditure to benefit C/OH **</p> <p>Candidate / Officeholder name Office sought Office held</p>
--	---

<p>Date</p>	<p>Payee name</p> <p>.....</p> <p>Payee address; City; State; Zip Code</p>	<p>Amount (\$)</p>
-------------	--	--------------------

<p>Purpose of payment (See instructions regarding type of information required.)</p> <p><i>(If travel outside of Texas, complete Schedule T)</i></p>	<p>** Complete if direct expenditure to benefit C/OH **</p> <p>Candidate / Officeholder name Office sought Office held</p>
--	---

<p>Date</p>	<p>Payee name</p> <p>.....</p> <p>Payee address; City; State; Zip Code</p>	<p>Amount (\$)</p>
-------------	--	--------------------

<p>Purpose of payment (See instructions regarding type of information required.)</p> <p><i>(If travel outside of Texas, complete Schedule T)</i></p>	<p>** Complete if direct expenditure to benefit C/OH **</p> <p>Candidate / Officeholder name Office sought Office held</p>
--	---

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

Margaret Gomez Campaign - Schedule F - February 22, 2010
 January 22, 2010 - February 20, 2010

Date Pd.	Name & Address	Amount	Purpose	Benefits C/OH
1/22/2010	Office Depot 2101 South Lamar Austin, TX 78704	\$31.04	Office Supplies	Margaret J. Gomez
1/24/2010	League of Women Voters 1011 West 31 Austin, TX 78705	\$60.00	Membership Dues	Margaret J. Gomez
1/25/2010	Irene Silva 2502 E. Oltorf, #2527 Austin, TX 78741	\$106.88	Contracted Services	Margaret J. Gomez
1/25/2010	Clare Butler 2000 Whitestone Drive Austin, TX 78745	\$135.00	Contracted Services	Margaret J. Gomez
1/25/2010	Laurie Rogers 1308-A Radcliff Drive Austin, TX 78753	\$90.00	Contracted Services	Margaret J. Gomez
1/26/2010	Austin Women's Political Caucus P. O. Box 12383 Austin, TX 78711	\$65.00	Membership Dues	Margaret J. Gomez
1/26/2010	Ann Pierce 21 Waller, #1603 Austin, TX 78702	\$42.50	Contracted Services	Margaret J. Gomez
1/26/2010	John Abramowitz 1800 Lavaca, #315 Austin, TX 78701	\$35.00	Contracted Services	Margaret J. Gomez
1/26/2010	Jessica Grogan 1705 Royal Ascot Pflugerville, TX 78660	\$37.50	Contracted Services	Margaret J. Gomez
1/26/2010	Alex Finn	\$15.00	Contracted Services	Margaret J. Gomez

8600 RR
Austin, TX 78726

1/28/2010	Millinium Youth Complex 1156 Hargrave Austin, TX 78723	\$50.00	Table	Margaret J. Gomez
1/28/2010	Sein Leon 3221 Plantation Austin, TX 78745	\$132.00	Contracted Services	Margaret J. Gomez
1/27/2010	Stacy Suits 7805 Doncaster Austin, TX 78745	\$195.82	Sign Supplies Gas	Margaret J. Gomez
1/28/2010	Worley Printing 3217 N. IH 35 Austin, TX 78722	\$677.65	Flyers, Letterhead, Envelopes	Margaret J. Gomez
1/28/2010	Worley Printing 3217 N. IH 35 Austin, TX 78722	\$1,125.00	Printing, Postage of Mailer	Margaret J. Gomez
1/29/2010	Office Depot 2101 South Lamar Austin, TX 78704	\$21.60	Clipboards for Walkers	Margaret J. Gomez
1/29/2010	Estella French 3113 Linnet Drive Austin, TX 78745	\$900.00	Contracted Services	Margaret J. Gomez
1/29/2010	James Coonrod 6809 Felipe Drive Austin, TX 78741	\$425.00	Contracted Services	Margaret J. Gomez
1/29/2010	Gretchen Stinson 7495 Chevy Chase Drive, #204 Austin, TX 78752	\$82.00	Contracted Services	Margaret J. Gomez
1/29/2010	Tom Cochran 805 Purple Martin Pflugerville, TX 78660	\$48.75	Contracted Services	Margaret J. Gomez
1/30/2010	Sprint P. O. Box 660075 Dallas, TX 75266-0075	\$130.06	Campaign Calls	Margaret J. Gomez

2/1/2010	Matt Moore 1803 E. Cesar Chavez Austin, TX 78702	\$750.00	Hdqtrs. Rent	Margaret J. Gomez
1/29/2010	Piryx, Inc. 401 West 15, Suite 520 Austin, TX 78701	\$112.50	Transaction Fee	Margaret J. Gomez
2/1/2010	U. S. Postmaster West Sixth Street Austin, TX 78701	\$84.00	Postage for Mailer	Margaret J. Gomez
2/3/2010	Office Depot 2101 South Lamar Austin, TX 78704	\$36.79	Black Ink Printer Cartridge	Margaret J. Gomez
2/5/2010	Time Warner P. O. Box 660097 Dallas, TX 75266-0097	\$60.04	Roadrunner Service	Margaret J. Gomez
2/6/2010	Irene Silva 2502 E. Oltorf, #1527 Austin, TX 78741	\$67.50	Contracted Services	Margaret J. Gomez
2/6/2010	Ann Pierce 21 Waller, #1603 Austin, TX 78702	\$42.50	Contracted Services	Margaret J. Gomez
2/8/2010	Ace Printing 7807 Doncaster Austin, TX 78745	\$3,120.78	4x8s;yard signs	Margaret J. Gomez
2/10/2010	Café Services, Inc. P. O. Box 651959 Austin, TX 78745	\$450.32	Food at Ruta Maya	Margaret J. Gomez
2/16/2010	Estella French 3113 Linnet Drive Austin, TX 78745	\$900.00	Contracted Services	Margaret J. Gomez
2/16/2010	James Coonrod 6809 Felipe Drive Austin, TX 78741	\$425.00	Contracted Services	Margaret J. Gomez
2/16/2010	Laurie Rogers 1308-A Radcliff Drive Austin, TX 78753	\$93.75	Contracted Services	Margaret J. Gomez

2/16/2010	Ann Pierce 21 Waller Street, Apt. 1603 Austin, TX 78702	\$29.75	Contracted Services	Margaret J. Gomez
2/17/2010	Andrew Stanford 114 Mandan Buda, TX 78610	\$67.50	Contracted Services	Margaret J. Gomez
2/17/2010	Richard Heine 8404 Linden Road Austin, TX 78702	\$45.00	Contracted Services	Margaret J. Gomez
2/17/2010	Brett Eigler 130 Cumberland Austin, TX 78704	\$138.75	Contracted Services	Margaret J. Gomez
2/17/2010	Austin Chronicle 4000 N. IH 35 Austin, TX 78765	\$749.00	Half Page Ad	
2/17/2010	Gretchen Stinson 7495 Chevy Chase Drive, #204 Austin, TX 78752	\$136.00	Contracted Services	Margaret J. Gomez
2/17/2010	Tom Cochran 805 Purple Martin Pflugerville, TX 78660	\$112.50	Contracted Services	Margaret J. Gomez
2/17/2010	John Abramowitz 1800 Lavaca, Apt. 315 Austin, TX 78701	\$116.25	Contracted Services	Margaret J. Gomez
2/17/2010	Sein Leon 3221 Plantation Drive Austin, TX 78745	\$200.00	Contracted Services	Margaret J. Gomez
2/17/2010	Darla Thompson 508 E. Howard Street Austin, TX 78754	\$105.00	Contracted Services	Margaret J. Gomez
2/17/2010	John Pesina 130 Cumberland Austin, TX 78704	\$75.00	Contracted Services	Margaret J. Gomez
2/18/2010	Blue Roots Strategies, Inc. P. O. Box 3000053	\$1,857.62	Consultant Services	Margaret J. Gomez

Austin, TX 78703

2/18/2010 Kyle Worley \$96.00 Contracted Services Margaret J. Gomez
13306 Whitetail Trail
Austin, TX 78736

2/19/2010 Stacy Suits \$153.30 Sign Supplies
7807 Doncaster
Austin, TX 78745

2/20/2010 Total Expenditures \$14,430.65

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G:

1 of 1

2 FILER NAME

Margaret Gómez Campaign

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name	8 Amount (\$)
	6 Payee address; City; State; Zip Code	
	<i>None</i>	
	7 Purpose of expenditures (See instructions regarding type of information required.) <i>(If travel outside of Texas, complete Schedule T)</i>	<input type="checkbox"/> Reimbursement from political contributions intended

Date	Payee name	Amount (\$)
	Payee address; City; State; Zip Code	
	Purpose of expenditure (See instructions regarding type of information required.) <i>(If travel outside of Texas, complete Schedule T)</i>	<input type="checkbox"/> Reimbursement from political contributions intended

Date	Payee name	Amount (\$)
	Payee address; City; State; Zip Code	
	Purpose of expenditure (See instructions regarding type of information required.) <i>(If travel outside of Texas, complete Schedule T)</i>	<input type="checkbox"/> Reimbursement from political contributions intended

Date	Payee name	Amount (\$)
	Payee address; City; State; Zip Code	
	Purpose of expenditure (See instructions regarding type of information required.) <i>(If travel outside of Texas, complete Schedule T)</i>	<input type="checkbox"/> Reimbursement from political contributions intended

Date	Payee name	Amount (\$)
	Payee address; City; State; Zip Code	
	Purpose of expenditure (See instructions regarding type of information required.) <i>(If travel outside of Texas, complete Schedule T)</i>	<input type="checkbox"/> Reimbursement from political contributions intended

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH

SCHEDULE H

The Instruction Guide explains how to complete this form.

1 Total pages Schedule H:

1 of 1

2 FILER NAME

Margaret Gómez Campaign

3 ACCOUNT # (Ethics Commission filers)

4 Date

5 Business name

None

7

Amount
(\$)

6 Business address; City; State; Zip Code

8 Purpose of payment (See instructions regarding type of information required.)

(If travel outside of Texas, complete Schedule T)

9 ** Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name Office sought Office held

Date

Business name

Amount
(\$)

Business address; City; State; Zip Code

Purpose of payment (See instructions regarding type of information required.)

(If travel outside of Texas, complete Schedule T)

** Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name Office sought Office held

Date

Business name

Amount
(\$)

Business address; City; State; Zip Code

Purpose of payment (See instructions regarding type of information required.)

(If travel outside of Texas, complete Schedule T)

** Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name Office sought Office held

Date

Business name

Amount
(\$)

Business address; City; State; Zip Code

Purpose of payment (See instructions regarding type of information required.)

(If travel outside of Texas, complete Schedule T)

** Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I:

1 of 1

2 FILER NAME

Margaret Gómez Campaign

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name	8 Amount (\$)
	6 Payee address; City; State; Zip Code	
	None	
	7 Purpose of expenditure (See instructions regarding type of information required.)	

Date	Payee name	Amount (\$)
	Payee address; City; State; Zip Code	
	Purpose of expenditure (See instructions regarding type of information required.)	

Date	Payee name	Amount (\$)
	Payee address; City; State; Zip Code	
	Purpose of expenditure (See instructions regarding type of information required.)	

Date	Payee name	Amount (\$)
	Payee address; City; State; Zip Code	
	Purpose of expenditure (See instructions regarding type of information required.)	

Date	Payee name	Amount (\$)
	Payee address; City; State; Zip Code	
	Purpose of expenditure (See instructions regarding type of information required.)	

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

CREDITS (optional)

SCHEDULE K

The Instruction Guide explains how to complete this form.

1 Total pages Schedule K:

1 of 1

2 FILER NAME

Margaret Gómez Campaign

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payor name	8 Amount (\$)
	6 Payor address; City; State; Zip Code	
	7 Reason for credit None	
	Payor name Payor address; City; State; Zip Code	
	Reason for credit	
	Payor name Payor address; City; State; Zip Code	
	Reason for credit	
	Payor name Payor address; City; State; Zip Code	
	Reason for credit	
	Payor name Payor address; City; State; Zip Code	
	Reason for credit	

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2


15 C/OH NAME <i>Margaret Gómez Campaign</i>	16 ACCOUNT # (Ethics Commission Filers)
--	---

17 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	<i>Margaret J. Gómez</i>
	<input checked="" type="checkbox"/> SPECIFIC	COMMITTEE ADDRESS <i>P.O. Box 3232 Austin, TX 78704</i>
		COMMITTEE CAMPAIGN TREASURER NAME <i>Walter Timberlake</i>
	COMMITTEE CAMPAIGN TREASURER ADDRESS <i>2006 Bouldin Avenue Austin, TX 78704</i>	

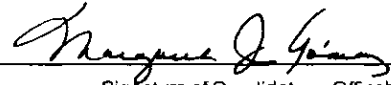
18 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 2,400.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED	\$
	4. TOTAL POLITICAL EXPENDITURES	\$ 23,777.50
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 10,332.66
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ - 0 -

19 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.



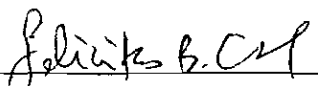
FELICITAS B. CHAVEZ
MY COMMISSION EXPIRES
December 6, 2010



 Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Margaret J. Gómez, this the 15th day of July, 20 10, to certify which, witness my hand and seal of office.



 Signature of officer administering oath

Felicitas B. Chavez

 Printed name of officer administering oath

Notary Public

 Title of officer administering oath

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: 3 (including this page)	
2 FILER NAME <i>Margaret Gómez Campaign</i>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) 6 Contributor address; City; State; Zip Code <i>See 2 attached pages</i>	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Contributor address; City; State; Zip Code	Amount of contribution (\$)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

Margaret Gomez Campaign - Schedule A-July 15, 2010
February 21, 2010 - June 30, 2010

Date Recd	Name & Address	Amount	In-Kind
2/22/2010	Stephen M. Azia	\$47.75	
3/3/2010	11417 Broad Green Drive Potomac, MD 20854		
2/23/2010	Emma L. Linn	\$200.00	
3/8/2010	2400-B Vista Lane Austin, TX 78703		
2/24/2010	John Tullos Wells	\$95.50	
	117 Canterbury Hill San Antonio, TX 78209		
2/26/2010	Paula Marks	\$25.00	
	104 Vireo Drive Buda, TX 78610		
2/26/2010	Takoohy Ardash Harutunian	\$250.00	
	P. O. Box W Austin, TX 78713-7448		
2/26/2010	Anne Hossanna Harutunian	\$250.00	
	P. O. Box W Austin, TX 78713		
2/26/2010	Robert R. Kamm	\$100.00	
	Government Affairs 1304 Guadalupe Street Austin, TX 78701		
		\$968.25	
		-143.25	
3/8/2010	Total Deposit	\$825.00	
3/7/2010	Michael R. Aulick	\$50.00	
	700 S. Creekwood Drive Driftwood, TX 78619		
3/7/2010	Peter Low	\$250.00	
	4242 Westlake Drive Austin, TX 78746-1453		

3/9/2010 Velva L. Price \$25.00
1601 Ridgemont Drive
Austin, TX 78723

3/10/2010 Deposit \$325.00

3/11/2010 AFSCME \$1,000.00
1625 L Street, NW
Washington, DC 20036

3/15/2010 Deposit \$1,000.00

4/2/2010 Graves, Dougherty, Hearon & Moody \$250.00
P. O. Box 98
Austin, TX 78767

PLEGGED CONTRIBUTIONS

SCHEDULE B

The Instruction Guide explains how to complete this form.		1 Total pages Schedule B: 1	
2 FILER NAME <i>Margaret J. Gómez Campaign</i>		3 ACCOUNT # (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED PLEDGES: ⇨ ⇨ ⇨ ⇨ ⇨ ⇨ \$			
5 Date	6 Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID#: _____) 7 Pledgor address; City; State; Zip Code <i>None</i>	8 Amount of pledge (\$)	9 In-kind description (if applicable)
10 Principal occupation / Job title (See Instructions)		11 Employer (See Instructions)	
Date	Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pledgor address; City; State; Zip Code	Amount of pledge (\$)	In-kind description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date	Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pledgor address; City; State; Zip Code	Amount of pledge (\$)	In-kind description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date	Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pledgor address; City; State; Zip Code	Amount of pledge (\$)	In-kind description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date	Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pledgor address; City; State; Zip Code	Amount of pledge (\$)	In-kind description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.

1 Total pages Schedule E:

1

2 FILER NAME

Margaret J. Gómez

3 ACCOUNT # (Ethics Commission Filers)

4 TOTAL OF UNITEMIZED LOANS: ⇒ ⇨ ⇩ ⇧ ⇨ ⇩

\$

5 Date of loan

7 Name of lender

out-of-state PAC (ID#: _____)

9 Loan Amount (\$)

6 Is lender a financial institution?
Y N

8 Lender address; City; State; Zip Code

None

10 Interest rate

11 Maturity date

12 Principal occupation / Job title (See Instructions)

13 Employer (See Instructions)

14 Description of Collateral

none

15 GUARANTOR INFORMATION

16 Name of guarantor

18 Amount Guaranteed (\$)

not applicable

17 Guarantor address; City; State; Zip Code

19 Principal Occupation (See Instructions)

20 Employer (See Instructions)

Date of loan

Name of lender

out-of-state PAC (ID#: _____)

Loan Amount (\$)

Is lender a financial institution?
Y N

Lender address; City; State; Zip Code

Interest rate

Maturity date

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Description of Collateral

none

GUARANTOR INFORMATION

Name of guarantor

Amount Guaranteed (\$)

not applicable

Guarantor address; City; State; Zip Code

Principal Occupation (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If lender is out-of-state PAC, please see instruction guide for additional reporting requirements.

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: <i>7 including this page.</i>	2 FILER NAME <i>Margaret J. Gómez Campaign</i>	3 ACCOUNT # (Ethics Commission Filers)
4 Date	5 Payee name	
6 Amount (\$)	7 Payee address; City; State; Zip Code <i>(See 6 attached pages)</i>	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule T)
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

Margaret Gomez Campaign - Schedule F, July 15, 2010
February 21, 2010 - June 30, 2010

Date	Name & Address	Amount	Purpose	C/OH
2/21/2010	Exxon Processing Center Des Moines, IA 50361-0001	\$150.00	Gas for Campaign	Margaret J. Gomez
2/21/2010	Office Depot 2101 South Lamar Austin, TX 78704	\$19.45	3 reams of paper	Margaret J. Gomez
2/22/2010	Piryx 401 West 15, Ste. 520 Austin, TX 78701	\$2.25	Transaction Fee for Stephen Azia	Margaret J. Gomez
2/24/2010	Piryx 401 West 15, Ste. 520 Austin, TX 78701	\$4.50	Transaction Fee for John Tullos Wells	Margaret J. Gomez
2/24/2010	La Prensa Austin, TX	\$200.00	Ad	Margaret J. Gomez
2/24/2010	American Printers 1606 Headway Circle Austin, TX 78754	\$4,759.27	Printing of Postcards, door hangers	Margaret J. Gomez
2/23/2010	Richard Heine 8404 Linden Road Austin, TX 78702	\$168.15	Contracted Services	Margaret J. Gomez
2/23/2010	Sein Leon 3221 Plantation Austin, TX 78745	\$316.00	Contracted Services	
2/24/2010	Gretchen Stinson 7495 Chevy Chase Drive, #204 Austin, TX 78752	\$60.00	<i>Contracted Services</i>	
2/23/2010	Laurie Rogers 1308-A Radcliff Drive Austin, TX 78753	\$63.75	<i>Contracted Services</i>	
2/23/2010	Tom Cochran 805 Purple Martin	\$67.50	<i>Contracted Services</i>	

Pflugerville, TX 78660

2/24/2010 U. S. Postmaster \$2,391.55 Postage for mailers Margaret J. Gomez

Austin, TX

2/23/2010	Kyle Worley 13306 White Tail Trail Austin, TX 78736	\$92.00	<i>Contracted Service</i>
2/23/2010	Irene Silva 2502 E. Oltorf, #1527 Austin, TX 78741	\$22.50	<i>Contracted Service</i>
2/23/2010	Brett Eigler 130 Cumberland, #303 Austin, TX 78704	\$266.25	<i>Contracted Service</i>
2/23/2010	John Pesina 130 Cumberland, #303 Austin, TX 78704	\$251.25	<i>Contracted Service</i>
2/23/2010	Nicole Norgrove 200 Robbie Lane, #406 San Marcos, TX 78666	\$131.25	<i>Contracted Service</i>
2/23/2010	Tiffany Mott-Smith 12345 Alameda Trace Circle Austin, TX 78727	\$101.25	<i>Contracted Service</i>
2/25/2010	Lucia Barbera P. O. Box 8259 Austin, TX 78713	\$67.50	<i>Contracted Service</i>
2/25/2010	Ann Pierce 21 Waller, #1603 Austin, TX 78702	\$29.75	<i>Contracted Service</i>
2/27/2010	Darla Thompson 30611 McKinney Tomball, TX 77375	\$30.00	<i>Contracted Service</i>
3/4/2010	Darla Thompson 30611 McKinney Tomball, TX 77375	\$166.88	<i>Contracted Service</i>
3/4/2010	Richard Heine	\$435.00	<i>Contracted Service</i>

8404 Linden Road
Austin, TX 78702

2/27/2010	Worley Printing 3217 N. IH 35 Austin, TX 78722	\$3,000.00	Print jobs	Margaret J. Gomez
3/1/2010	Leland Beatty 1103 Upland Drive Austin, TX 78741	\$1,750.00	Consultant Work	Margaret J. Gomez
3/4/2010	Matt Moore 1803 E. Cesar Chavez Austin, Tx 78702	\$188.08	Phone, paper	Margaret J. Gomez
3/4/2010	Robert Betancourt 409 E. Wm. Cannon, #205 Austin, TX 78745	\$75.00	<i>Contracted Services</i>	
3/4/2010	Jacob Carter 3329 East 12 Austin, TX 78721	\$116.25	<i>Contracted Services</i>	
3/4/2010	Gretchen Stinson 7495 Chevy Chase #204 Austin, TX 78752	\$216.00	<i>Contracted Services</i>	
3/4/2010	James Coonrod 6809 Felipe Drive Austin, TX 78741	\$425.00	Contracted Services	Margaret J. Gomez
3/4/2010	Laurie Rogers 1308-A Radcliff Drive Austin, TX 78753	\$148.13	<i>Contracted Services</i>	
3/4/2010	Melissa Rogers 1308-A Radcliff Drive Austin, TX 78753	\$101.25	<i>Contracted Services</i>	
3/4/2010	Irene Silva 2502 E. Oltorf, #1527 Austin, TX 78741	\$67.50	<i>Contracted Services</i>	
3/4/2010	Brett Eigler 130 Cumberland, #303 Austin, TX 78704	\$345.00	<i>Contracted Services</i>	

3/4/2010	Tiffany Mott-Smith 12345 Alameda Trace Circle Austin, TX 78727	\$298.13	<i>Contracted Services</i>	
3/4/2010	Luciana Barrera 1606 Headway Circle Austin, TX 78754	\$161.25		
3/4/2010	Patrick Mireur 800 Brazos, #1206 Austin, TX 78701	\$75.00		
3/4/2010	Tom Cochran 805 Purple Martin Pflugerville, TX 79660	\$90.00		
3/4/2010	Sein Leon 3221 Plantation Austin, TX 78745	\$381.50		
3/4/2010	John Pesina 130 Cumberland Road, #303 Austin, TX 78704	\$363.75		
3/4/2010	Nichole Norgrove 200 Robbie Lane, #406 San Marcos, TX 78666	\$112.50		
3/4/2010	Matthew Farrell 500 East 7 Austin, TX 78701	\$52.50		
3/4/2010	Kyle Worley 13306 White Tail Trail Austin, TX 78736	\$71.25		
3/4/2010	Daniel Terna 4004-A Maplewood Avenue Austin, TX 78722	\$116.25		
3/4/2010	Estella French 3113 Linnet Drive Austin, TX 78745	\$1,104.86	Contracted Services plus expenses	Margaret J. Gomez
3/5/2010	Sprint P. O. Box 660075 Dallas, TX 75266-0075	\$127.72	Campaign Calls	Margaret J. Gomez

3/5/2010	Blue Roots Strategies, Inc. P. O. Box 300053 Austin, TX 78703	\$1,863.00	Graphic designs; robo calls	Margaret J. Gomez
3/5/2010	Lauren McLaughlin 1305 Baylor San Marcos, TX 78666	\$100.00	Photos for mailers	Margaret J. Gomez
3/7/2010	Tim Warner P. O. Box 660097 Dallas, TX 75266-0097	\$60.04	Roadrunner	Margaret J. Gomez
3/10/2010	Igor Postrekhin 5604 Northdale Austin, TX 78723	\$78.75	Contracted Services	Margaret J. Gomez
3/10/2010	Ann Pierce 21 Waller, #1603 Austin, TX 78702	\$25.50	Contracted Services	Margaret J. Gomez
3/31/2010	Piryx, Inc. 401 West 15, Suite 520 Austin, TX 78701	\$37.38	Online fees	Margaret J. Gomez
3/10/2010	Estella French Austin, TX 78745	\$200.00	Cell Phone Bill	Margaret J. Gomez
3/12/2010	Austin Community College 5930 MiddleFiskville Road Austin, TX 78752-4390	\$50.00	Immigration Conf. Registration	Margaret J. Gomez
3/13/2010	Sein Leon Austin, TX	\$38.50	Contracted Services	Margaret J. Gomez
3/13/2010	U. S. Postmaster South Congress Austin, TX 78704	\$44.00	Postage	Margaret J. Gomez
3/24/2010	Erin Kelly 4712 Depew, #203 Austin, TX 78751	\$80.00	Contracted Services David Wand	Margaret J. Gomez
3/27/2010	Guadalupe Sosa Campaign P.O. Box 40205	\$100.00	Contribution	Margaret J. Gomez

Austin, TX 78704

3/27/2010 Best Buy

\$102.83 Cell upgrade

Margaret J. Gomez

Austin, TX 78735

4/4/2010 Sprint

\$124.89 Campaign Calls

Margaret J. Gomez

P. O. Box 660075

Dallas, TX 75266-0075

	ET	27077.86		
4/9/10	Jerre Warner	59.91	Roadrunner service	Margaret J. Gomez
4/19/10	San Jacinto Catholic War Vets	100.00	Memorial for Pete Casarez	Margaret J. Gomez
4/23/10	Exxon	150.00	Gas for Campaign	Margaret J. Gomez
4/24/10	Walmart	63.25	Office Supplies	Margaret J. Gomez
6/3/10	AgriNet	92.72	Call for Campaign and fund raising	Margaret J. Gomez
6/7/10	Jerre Warner	113.51	2 mos Roadrunner	Margaret J. Gomez
6/8/10	La Prensa	300.00	1/2 page ad	Margaret J. Gomez
6/26/10	Best Buy	725.25	Laptop upgrade for Campaign documents	Margaret J. Gomez
6/30/10	U.S. Postmaster	85.00	1-yr renewal of PO Box	Margaret J. Gomez

Subtotal 27077.50

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: <i>1</i>	2 FILER NAME <i>Margaret J. Gomez Campaign</i>	3 ACCOUNT # (Ethics Commission Filers)
4 Date	5 Payee name	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
<input type="checkbox"/> Reimbursement from political contributions intended	<i>None</i>	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule T)
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
<input type="checkbox"/> Reimbursement from political contributions intended		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
<input type="checkbox"/> Reimbursement from political contributions intended		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
<input type="checkbox"/> Reimbursement from political contributions intended		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH

SCHEDULE H

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule H: <i>1</i>	2 FILER NAME <i>Margaret J. Gomez</i>	3 ACCOUNT # (Ethics Commission Filers)
4 Date	5 Business name	
6 Amount (\$)	7 Business address; City; State; Zip Code <i>None</i>	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule)	(b) Description (If travel outside of Texas, complete Schedule T)
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date	Business name	
Amount (\$)	Business address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date	Business name	
Amount (\$)	Business address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date	Business name	
Amount (\$)	Business address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE 1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule 1: <i>1</i>	2 FILER NAME <i>Margaret J. Gómez Campaign</i>	3 ACCOUNT # (Ethics Commission Filers)
4 Date	5 Payee name	
6 Amount (\$)	7 Payee address; City; State; Zip Code <i>None</i>	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule)	(b) Description (See instructions regarding type of information required.)
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (See instructions regarding type of information required.)
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (See instructions regarding type of information required.)
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (See instructions regarding type of information required.)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

**IN-KIND CONTRIBUTION OR POLITICAL EXPENDITURE
FOR TRAVEL OUTSIDE OF TEXAS**

SCHEDULE T

The Instruction Guide explains how to complete this form.		1 Total pages Schedule T: <u>1</u>
2 FILER NAME <i>Margaret J. Gomez Campaign</i>		3 ACCOUNT # (Ethics Commission Filers)
4 Name of Contributor / Corporation or Labor Organization / Pledgor / Payee		
5 Contribution / Expenditure reported on: <i>None</i>		
<input type="checkbox"/> Schedule A <input type="checkbox"/> Schedule B <input type="checkbox"/> Schedule C <input type="checkbox"/> Schedule D <input type="checkbox"/> Schedule F <input type="checkbox"/> Schedule G <input type="checkbox"/> Schedule H <input type="checkbox"/> Schedule N <input type="checkbox"/> COH-UC <input type="checkbox"/> COH-T <input type="checkbox"/> PAC-C <input type="checkbox"/> PAC-E		
6 Dates of travel	7 Name of person(s) traveling	
	8 Departure city or name of departure location	
	9 Destination city or name of destination location	
10 Means of transportation	11 Purpose of travel (including name of conference, seminar, or other event)	
Name of Contributor / Corporation or Labor Organization / Pledgor / Payee		
Contribution / Expenditure reported on:		
<input type="checkbox"/> Schedule A <input type="checkbox"/> Schedule B <input type="checkbox"/> Schedule C <input type="checkbox"/> Schedule D <input type="checkbox"/> Schedule F <input type="checkbox"/> Schedule G <input type="checkbox"/> Schedule H <input type="checkbox"/> Schedule N <input type="checkbox"/> COH-UC <input type="checkbox"/> COH-T <input type="checkbox"/> PAC-C <input type="checkbox"/> PAC-E		
Dates of travel	Name of person(s) traveling	
	Departure city or name of departure location	
	Destination city or name of destination location	
Means of transportation	Purpose of travel (including name of conference, seminar, or other event)	
Name of Contributor / Corporation or Labor Organization / Pledgor / Payee		
Contribution / Expenditure reported on:		
<input type="checkbox"/> Schedule A <input type="checkbox"/> Schedule B <input type="checkbox"/> Schedule C <input type="checkbox"/> Schedule D <input type="checkbox"/> Schedule F <input type="checkbox"/> Schedule G <input type="checkbox"/> Schedule H <input type="checkbox"/> Schedule N <input type="checkbox"/> COH-UC <input type="checkbox"/> COH-T <input type="checkbox"/> PAC-C <input type="checkbox"/> PAC-E		
Dates of travel	Name of person(s) traveling	
	Departure city or name of departure location	
	Destination city or name of destination location	
Means of transportation	Purpose of travel (including name of conference, seminar, or other event)	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED		