CANDIDATE / OFFICEHOLDER

7264

FORM C/OH

CAMPAIG	N FINANCE REPORT	7204	COVER SHEET PG 1
The C/OH Instruction C	Guide explains how to complete this form.	1 ACCOUNT# (Ethics Commission filers)	2 Total pages filed. /3
3 CANDIDATE / OFFICEHOLDER	MS/MRS/MR FIRST	MI	OFFICE USE ONLY
NAME	NICKNAME LAST	J. SUFFIX	Date Received
	Gómez		-d 5 5 3
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	Margaret J. Gómez P. U. Box 3232	ITY; STATE; ZIP CODE	Date Hand-delivered or Date Postmarked
Change of Address	The state of the state of	EXTENSION	
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER (5/2) 762-7016	EXTENSION	Receipt # Amount
6 CAMPAIGN TREASURER	ms/mrs/mr first Walter	MI	Date Imaged
NAME	NICKNAME LAST Timberlake	SUFFIX	
7 CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT/SUIT	TE#; CITY, STATE; Austia TX	ZIP COOE 7870+
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER (5/2) 442-6688	EXTENSION	
9 REPORTTYPE	January 15 30th day before election July 15 8th day before election		15th day after campaign freasurer appointment (officeholder only) Final repon (Atlach C/OH - FR)
40 050100	Month Day Year	Month Day	Year
10 PERIOD COVERED	61 / 61 / 10 THROL		
11 ELECTION	Month Day Year ELECTION TYP		General Special
12 OFFICE	OFFICE HELD (I' any) TRAVIS CO. COMM., PCT 4	13 OFFICE SOUGHT (If known TRAVIS CO. COMM.	
14 NOTICE OF DIRECT CAMPAIGN EXPENDITURE	Direct campaign expenditures are campaign a Candidates are required to disclose this information.	expenditures made by others without t	the candidate's prior consent or approval.
BY OTHER INDIVIDUALS	Name None TO MY KNOWLE	∆¢ <i>€</i>	
	Address / PO Box; Apt. / Suite #, City; State; Z	Zip Code	
additional pages			
	GO TO F	PAGE 2	

SUPPORT & TOTALS

CANDIDATE / OFFICEHOLDER REPORT:

FORM C/OH COVER SHEET PG 2

15 C/OH NAME	+ T C'	<i>C</i> 4	16 ACCOUNT # (Ethics Commission Filers)		
17 NOTICE FROM POLITICAL	candidate / officehole	olice of political contributions accepted or political expenditures made to the contributions accepted or political expenditures may have been made without the candidate's calculated are required to report this information only if they receive not	or officeholder's knowledge or consent.		
COMMITTEE(S)	COMMITTEE TYPE	COMMITTEE NAME			
	GENERAL.	Margaret Gónez Camparga COMMITTEE ADDRESS			
	<u>V</u> .] 5. 25(5	P.O. Boy 3232			
additional pages	Austin, 74 78704 COMMITTEE CAMPAIGN TREASURER NAME				
·	Welter Timberlakee				
		2006 Bouldin Avenue			
		Austra, 74 76704			
18 CONTRIBUTION TOTALS		POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN S. LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ -0-		
		POLITICAL CONTRIBUTIONS THAN PLEDGES. LOANS, OR GUARANTEES OF LOANS)	\$ 400,00		
EXPENDITURE TOTALS					
	4. TOTAL	POLITICAL EXPENDITURES	\$ 4,359.24		
CONTRIBUTION BALANCE		OLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DI	\$ 37,988.28		
OUTSTANDING LOAN TOTALS		RINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF TH Y OF THE REPORTING PERIOD	s -o-		
19 AFFIDAVIT					
			perjury, that the accompanying report information required to be reported by		
X	FELICITAS B. CHAV MY COMMISSION EXP December 8, 2010	RES Muguet Jan	date or Officeholder		
AFFIX NOTARY STAMP	/ SEAL ABOVE				
Sworn to and subscrib	ed before me, by t	ne said Margaret J. Jomes	_, this the day		
or February. 20	to cert	ify which, witness my hand and seal of office.	A 11		
_ Jelians	B CUP	Felicitas B. Charet	Public Notan		
Signature of officer adn	ninistering oath	Printed name of officer administering oath Til	tle of officer administering oath		

_	ICAL CONTRIBUTIONS R THAN PLEDGES OR LOA	NS	(512) 463	SCHEDULE A
The Instruct	ion Guide explains how to complete this form.		1 Total pages School	
2 FILER NAM	ME Garet Gómez Camparan		3 ACCOUNT # (Etil	
4 Date	5 Full name of contributor out-of-state PAC (ID#:_ Lonnie Limon 6 Contributor address; City; State; Zip Code 3501 Key Street		7 Amount of contribution (\$) # 95.50	8 In-kind contribution description (if applicable)
	Austin ty 78702		(If travel outside	of Texas, complete Schedule T)
9 Principal occ	upation / Job title (See Instructions)	10 Employer (See		_
Date	Full name of contributor [] out-of-state PAC (ID#_ Richard Merren Contributor address; City: State; Zip Code 3503 Winfreld Drine Austin, TY 18704		Amount of contribution (\$)	In-kind contribution description (if applicable)
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		(if travel outside o	i of Texas, complete Schedule T
Principal occ	upation / Job title (See Instructions)	Employer (See I		
Date	Full name of contributor out-of-state PAC (ID#:		Amount of contribution (\$)	In-kind contribution description (if applicable)
	Houston, TY 77642		(If traval outside o	of Texas, complete Schedule T)
Principal occu	upation / Job title (See Instructions)	Employer (See I		Tracks, complete scriedule 1
Date 1/10/10	Full name of contributor \[\int \omega_I \text{out-of-state-PAC(ID#} \] Cid Galindo Contributor address; City; State; Zip Code 411 Brazos Street, Juite 99		Amount of contribution (\$)	In-kind contribution description (if applicable)
	Austin, TX 78701		{ f travel outside o	of Texas, complete Schedule T)
Principal occu	pation / Job title (See Instructions)	Employer (See I	nstructions)	
Pate //ib/lo	Full name of contributorout-of-state PAC(ID#: Ray Vaush? Contributor address; City; State; Zip Code 10108 Prochurst Drive Austin, TK 78747-1361		Amount of contribution (\$)	In-kind contribution description (if applicable) of Texas, complete Schedule T)
Principal occu	pation / Job title (See Instructions)	Employer (See I		

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

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

PLEDG	SED CONTRIBUTIONS			SCHEDULE B
The Instruc	ction Guide explains how to complete this form.		1 Total pages this S	Schedule B:
2 FILER NAM	ME ret Gómez Campargn		3 ACCOUNT# (Eth	
4 TOT.	AL OF UNITEMIZED PLEDGES:	\$ \$ \$	ಭ ಭ	\$
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	e		
	NONE		(If travel outside	of Texas, complete Schedule T)
10 Principal occu	upation / Job title (See Instructions)	11 Employer (See I	nstructions)	
Date	Full name of pledgorout-of-state PAC (ID#		Amount of pledge (\$)	In-kind description (if applicable)
	Pledgor address; City; State; Zip Code	e		
			(If travel outside	 of Texas, complete Schedule T)
Principal occu tions)	pation / Job title (See Instruc-	Employer (See I	nstructions)	
Date	Full name of pledgor Out-of-state PAC (ID#		Amount of pledge (\$)	In-kind description (if applicable)
	reagon address, Sky, State, 2,p cook	-		
Principal occu	pation / Job title (See Instructions)	Employer (See I	· ·	of Texas, complete Schedule T)
Date	Full name of pledgor out-of-state PAC (ID#	· · · · · · · · · · · · · · · · · · ·	Amount of pledge (\$)	In-kind description (if applicable)
			(If travel outside c	of Texas, complete Schedule T
Principal occu	pation / Job title (See Instructions)	Employer (See I	nstructions)	· · · · · · · · · · · · · · · · · · ·
Date	Full name of pledgor out-of-state PAC (ID#		Amount of pledge (\$)	In-kind description (if applicable)
	Pledgor address; City; State; Zip Code			
			<u> </u>	of Texas, complete Schedule T)
Principal occul	pation / Job title (See Instructions)	Employer (See h	nstructions)	
If c	ATTACH ADDITIONAL COPIE: ontributor is out-of-state PAC, please see instru			requirements.

LOANS				SCHEDULE E
The Instruction	- Cuida avalaine how to complete this fi		1 Total pages Sch	edule E:
I ne instruction	Guide explains how to complete this fo	orm.	/	05/
2 FILER NAME	_		3 ACCOUNT# (E	thics Commission filers)
Margaret	Gomez Campaign			
4	AL OF UNITEMIZED LOANS:	라 라 라	⇒ ⇔	\$
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	on / Job title (See Instructions)	13 Employer (See	Instructions)	
14 Description of Collab	teral			
15 GUARANTOR INFORMATION	16 Name of guarantor			18 Amount Guaranteed (\$)
not applicable	17 Guarantor address; City; State;	Zip Code		
19 Principal Occupation		20 Employer		
Date of loan	Name of lender	Oul-of-state PAC (ID#:)	Loan Amount (\$)
Is lender a financial Institution?	Lender address; City; State;	Zip Code		Interest rate
Y N				Maturity date
Principal occupatio	n / Job title (See Instructions)	Employer (See Instru	uctions)	
Description of Collate	eral			
GUARANTOR INFORMATION	Name of guarantor			Amount Guaranteed (\$)
not applicable	Guarantor address; City; State;	Zip Code		
Principal Occupation		Employer		
If lend	ATTACH ADDITIONAL CO			quiroments.

POLITI	CAL EXPENDITURES			SCHEDULE F
The Instruc	ction Guide explains how to complete this form.		1 Total pages Sche	dule F:
2 FILER NAM Marga			3 ACCOUNT# (EII	nics Commission filers)
4 Date	ret Gómez Caupaign 5 Payee name		7	Amount (\$)
	6 Payee address; City: State: Zip Code (See 2 attached pa			
required.)	yment (See instructions regarding type of information	9 Complete if di Candidate / Officeholder i	rect expenditure to be name Office	
(If travel outside	de of Texas, complete Schedule T)			
Date	Payee name			Amount (\$)
	Payee address; City: State; Zip Code			
required.)	yment (See instructions regarding type of information a of Texas, complete Schedule T)	↔ Complete if di Candidate / Officeholder r	rect expenditure to be name Office	
Date	Payee name			Amount
	Payee address; City; State; Zip Code			(\$)
required.)	ment (See instructions regarding type of information	Complete if di Candidate / Officeholder r	rect expenditure to be name Office:	
	ide of Texas, complete Schedule T)			
Date	Payee name			Amount (\$)
	Payee address; City; State; Zip Code			
required.)	ment (See instructions regarding type of information	•• Complete if di Candidate / Officeholder n	rect expenditure to ber pame Offices	
(ii travel outside	e of Texas, complete Schedule T)			
	ATTACH ADDITIONAL COPIE	S OF THIS FORM AS N	EEDED	

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
	Alexander Finn 8600 RR Austin, TX 78726	\$78.75	Contracted Services	Margaret J. Gomez
	ALGPC P. O. Box 822 Austin, TX 78767	\$50.00	Membership Renew	Margaret J. Gomez
	Angie's Restaurant 1307 East 7 Austin, TX 78702	\$38.97	Tacos for Workers	Margaret J. Gomez
	Irene Silva 2502 E. Oltorf, #2527 Austin, TX 78741	\$76.87	Contracted Services	Margaret J. Gomez
	Gretchen Stinson 74985 Chevy Chase Drive, #204 Austin, TX 78752	\$72.00	Contracted Services	Margaret J. Gomez
	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

SCHEDULE G

The Instru	ction Guide explains how to complete this form.	1 Total pages Scho	dule G:	
Marg	AE arct Gonez Cempaign 5 Payee name	3 ACCOUNT # (Et	hics Comn	nission filers)
Date	5 Payee name		8	Amount (\$)
	6 Payee address; City; State; Zip Code			
	None			Daise server
	7 Purpose of expenditure (See instructions regarding type of information requ	uired.)		Reimbursement from political contributions intended
	(If travel outside of Texas, complete Schedule T)			
Date	Payee name			Amount (\$)
	Purpose of expenditure (See instructions regarding type of information requ	uired.)		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)	uired.)		Reimbursement from political contributions intended
Date	Payee name			Amount
	Payee address; City; State; Zip Code		ļ	(\$)
	Purpose of expenditure (See instructions regarding type of information requ	uired.)		Reimbursement from political
	(if travel outside of Texas, complete Schedule T)			contributions intended
Date	Payee name			Amount (\$)
	Payee address; City; State; Zip Code			
	Purpose of expenditure (See instructions regarding type of information requ	ired.)		Reimbursement from political contributions
	(If travel outside of Texas, complete Schedule T)			intended
	ATTACH ADDITIONAL COPIES OF THIS FORM A	S NEEDED		

Purpose of payment (See instructions regarding type of information required.) $\label{eq:purpose} % \begin{center} \begin{cen$

(If travel outside of Texas, complete Schedule T)

2

4

8

	ENT FROM POLITICAL CONT CUSINESS OF C/OH	RIBUTIONS		SCHEDULE H
The Instruc	ction Guide explains how to complete this form.	·	1 Total pages Sch	edule H:
FILER NAM	0 0		3 ACCOUNT # (E	thics Commission filers)
Date	5 Business name			7 Amount (\$)
	6 Business address; City; State: Zip Code			
Purpose of pay required.)	yment (See instructions regarding type of information	9 ··· Complete Candidate / Officeho	e if direct expenditure der name	to benefit C/OH ·· Office sought Office held
(If travel outside	e of Texas, complete Schedule T)			
Date	Business name			Amount (\$)
	Business address; City; State; Zip Code			
required.)	ment (See instructions regarding type of information of Texas, complete Schedule T)	•• Complete Candidate / Officehor	if direct expenditure der name	office sought Office held
Date	Business name	<u> </u>		Amount (\$)
	Business address; City; State; Zip Code			
equired.)	ment (See instructions regarding type of information	++ Complete Candidate / Officehol	if direct expenditure der name	to benefit C/OH ·· Office sought Office held
required.)				

Office sought

· Complete if direct expenditure to benefit C/OH ·

Candidate / Officeholder name

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

Office held

Texas Ethics Commission Austin, Texas 78711-2070 (512) 463-5800 1-800-325-8506 P.O. Box 12070 NON-POLITICAL EXPENDITURES SCHEDULE I MADE FROM POLITICAL CONTRIBUTIONS 1 Total pages Schedule I: The Instruction Guide explains how to complete this form. 1 of 1 3 ACCOUNT # (Ethics Commission filers) 2 FILER NAME Amount (\$) City; State; Zip Code 6 Payee address; None 7 Purpose of expenditure (See instructions regarding type of information required.) Date Payee name Amount (\$) City; State; Zip Code Pavee address: Purpose of expenditure (See instructions regarding type of information required.) Date Amount Payee name (\$) 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** (\$) City; State; Zip Code Payee address; Purpose of expenditure (See instructions regarding type of information required.)

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

CRED	ITS (optional)	SCHEDULE K
The instr	uction Guide explains how to complete this form.	1 Total pages Schedule K:
FILER NA	ME rgaret Gónez Campargn	3 ACCOUNT # (Ethics Commission filers)
Date	5 Payor name	8 Amount (\$)
	6 Payor address; City; State; Zıp Code	
	7 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 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 SCHEDULE T FOR TRAVEL OUTSIDE OF TEXAS 1 Total pages Schedule T: The Instruction Guide explains how to complete this form. 1 of 1 3 ACCOUNT # (Ethics Commission filers) 2 FILER NAME Margaret Gomez Campaign 4 Name of Contributor / Corporation or Labor Organization / Pledgor / Payee 5 Contribution / Expenditure reported on: Schedule A Schedule C Schedule D Schedule F Schedule B Schedule G PAC-C PAC-E Schedule H Schedule N П сон-ис П сон-т 7 Name of person(s) traveling 6 Dates of travel 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 PAC-E Schedule H Schedule N COH-UC COH-T PAC-C Name of person(s) traveling Dates of travel 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 C Schedule D Schedule F Schedule A Schedule B Schedule G Schedule H Schedule N PAC-E COH-UC СОН-Т PAC-C Name of person(s) traveling Dates of travel 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

7264

FORM C/OH

CAMPAIG	N FINANCE REPORT	, 20 .	COVER SHEET PG I
The C/OH Instruction C	Guide explains how to complete this form.	1 ACCOUNT# (Ethics Commission filers)	2 Total pages filed.
3 CANDIDATE / OFFICEHOLDER	MS/MRS/MR FIRST	MI	OFFICE USE ONLY
NAME	NICKNAME LAST	SUFFIX	· Date Received
	Gómez		-d % %
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	Margaret J. Gómez P. U. Box 3232	ITY; STATE; ZIP CODE	Date Hand-delivered or Date Postmarked
Change of Address	7 (Lain) 17 10107		
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER (5/2) 762-7016	EXTENSION	Receipt # Amount
6 CAMPAIGN TREASURER	ms/mrs/mr first Walter	MI	Date Imaged
NAME	NICKNAME LAST Timberlake	SUFFIX	· L
7 CAMPAIGN TREASURER ADDRESS (Residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUIT	TE#; CITY, STATE; Austia TX	78704
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER (5/2) 442-6688	EXTENSION	••••
9 REPORTTYPE	January 15 30th day before election		15th day after campaign treasurer appointment (officeholder only)
	July 15 8th day before election	Exceeded \$500 limit	Final repon (Atlach C/OH - FR)
10 PERIOD COVERED	Month Day Year OI / OI / 10 THROU	JGH 01 / 21	Year / 10
11 ELECTION	Month Day Year 03 / 02 / 10 ELECTION TYP		General Special
12 OFFICE	OFFICE HELD (If any)	13 OFFICE SOUGHT (if known	
	TRAVIS CO. COMM., PET 4	TRAVIS CO. COMM.	Рет. 4
14 NOTICE OF DIRECT CAMPAIGN EXPENDITURE	Direct campaign expenditures are campaign e Candidates are required to disclose this information		
BY OTHER INDIVIDUALS	None TO MY KNOWLE	∆¢€ 	
additional pages	Address / PO Box; Apt. / Suite #, City; State; Z	Zip Code	
	GO TO F	PAGE 2	

SUPPORT & TOTALS

CANDIDATE / OFFICEHOLDER REPORT:

FORM C/OH COVER SHEET PG 2

15 C/OH NAME	+ T C'	<i>C</i> 4	16 ACCOUNT # (Ethics Commission Filers)			
17 NOTICE FROM POLITICAL	candidate / officehole	olice of political contributions accepted or political expenditures made to the contributions accepted or political expenditures may have been made without the candidate's calculated are required to report this information only if they receive not	or officeholder's knowledge or consent.			
COMMITTEE(S)	COMMITTEE NAME COMMITTEE TYPE					
	GENERAL.	Margaret Gónez Camparga COMMITTEE ADDRESS				
	<u>V</u> .] 5. 25(5	P.O. Boy 3232				
additional pages		Austin, TK 78704 COMMITTEE CAMPAIGN TREASURER NAME				
·	Walter Timberlake					
		2006 Bouldin Avenue				
		Austra, 74 76704				
18 CONTRIBUTION TOTALS		POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN S. LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ -0-			
		POLITICAL CONTRIBUTIONS THAN PLEDGES. LOANS, OR GUARANTÉES OF LOANS)	\$ 400,00			
EXPENDITURE TOTALS	IRE 3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED \$ -0-					
	4. TOTAL	POLITICAL EXPENDITURES	\$ 4,359.24			
CONTRIBUTION BALANCE		OLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DI	\$ 37,988.28			
OUTSTANDING LOAN TOTALS		RINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF TH Y OF THE REPORTING PERIOD	s -o-			
19 AFFIDAVIT						
			perjury, that the accompanying report information required to be reported by			
X	FELICITAS B. CHAV MY COMMISSION EXP December 8, 2010	RES Muguet Jan	date or Officeholder			
AFFIX NOTARY STAMP	/ SEAL ABOVE					
Sworn to and subscrib	ed before me, by t	ne said Margaret J. Jomes	_, this the day			
or February. 20	to cert	ify which, witness my hand and seal of office.	A 11			
_ Jelians	B CUP	Felicitas B. Charet	Public Notan			
Signature of officer adn	ninistering oath	Printed name of officer administering oath Til	tle of officer administering oath			

_	ICAL CONTRIBUTIONS R THAN PLEDGES OR LOA	NS	(512) 463	SCHEDULE A
The Instruct	ion Guide explains how to complete this form.		1 Total pages School	
2 FILER NAM	ME Garet Gómez Camparan		3 ACCOUNT # (Etil	
4 Date	5 Full name of contributor out-of-state PAC (ID#:_ Lonnie Limon 6 Contributor address; City; State; Zip Code 3501 Key Street		7 Amount of contribution (\$) # 95.50	8 In-kind contribution description (if applicable)
	Austin ty 78702		(If travel outside	of Texas, complete Schedule T)
9 Principal occ	upation / Job title (See Instructions)	10 Employer (See		_
Date	Full name of contributor [] out-of-state PAC (ID#_ Richard Merren Contributor address; City: State; Zip Code 3503 Winfreld Drine Austin, TY 18704		Amount of contribution (\$)	In-kind contribution description (if applicable)
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		(if travel outside o	i of Texas, complete Schedule T
Principal occ	upation / Job title (See Instructions)	Employer (See I		
Date	Full name of contributor out-of-state PAC (ID#:		Amount of contribution (\$)	In-kind contribution description (if applicable)
	Houston, TY 77642		(If traval outside o	of Texas, complete Schedule T)
Principal occu	upation / Job title (See Instructions)	Employer (See I		Tracks, complete scriedule 1
Date 1/10/10	Full name of contributor \[\int \omega_I \text{out-of-state-PAC(ID#} \] Cid Galindo Contributor address; City; State; Zip Code 411 Brazos Street, Juite 99		Amount of contribution (\$)	In-kind contribution description (if applicable)
	Austin, TX 78701		{ f travel outside o	of Texas, complete Schedule T)
Principal occu	pation / Job title (See Instructions)	Employer (See I	nstructions)	
Pate //ib/lo	Full name of contributorout-of-state PAC(ID#: Ray Vaush? Contributor address; City; State; Zip Code 10108 Prochurst Drive Austin, TK 78747-1361		Amount of contribution (\$)	In-kind contribution description (if applicable) of Texas, complete Schedule T)
Principal occu	pation / Job title (See Instructions)	Employer (See I		

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

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

PLEDG	SED CONTRIBUTIONS			SCHEDULE B
The Instruc	ction Guide explains how to complete this form.		1 Total pages this S	Schedule B:
2 FILER NAM	ME ret Gómez Campargn		3 ACCOUNT# (Eth	
4 TOT.	AL OF UNITEMIZED PLEDGES:	\$ \$ \$	ಭ ಭ	\$
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	e		
	NONE		(If travel outside	of Texas, complete Schedule T)
10 Principal occu	upation / Job title (See Instructions)	11 Employer (See I	nstructions)	
Date	Full name of pledgorout-of-state PAC (ID#		Amount of pledge (\$)	In-kind description (if applicable)
	Pledgor address; City; State; Zip Code	e		
			(If travel outside	 of Texas, complete Schedule T)
Principal occu tions)	pation / Job title (See Instruc-	Employer (See I	nstructions)	
Date	Full name of pledgor Out-of-state PAC (ID#		Amount of pledge (\$)	In-kind description (if applicable)
	reagon address, Sky, State, 2,p cook	-		
Principal occu	pation / Job title (See Instructions)	Employer (See I	· ·	of Texas, complete Schedule T)
Date	Full name of pledgor out-of-state PAC (ID#	· · · · · · · · · · · · · · · · · · ·	Amount of pledge (\$)	In-kind description (if applicable)
			(If travel outside c	of Texas, complete Schedule T
Principal occu	pation / Job title (See Instructions)	Employer (See I	nstructions)	· · · · · · · · · · · · · · · · · · ·
Date	Full name of pledgor out-of-state PAC (ID#		Amount of pledge (\$)	In-kind description (if applicable)
	Pledgor address; City; State; Zip Code			
			<u> </u>	of Texas, complete Schedule T)
Principal occul	pation / Job title (See Instructions)	Employer (See h	nstructions)	
If c	ATTACH ADDITIONAL COPIE: ontributor is out-of-state PAC, please see instru			requirements.

LOANS				SCHEDULE E
The Instruction	- Cuida avalaine how to complete this fi		1 Total pages Sch	edule E:
I ne instruction	Guide explains how to complete this fo	orm.	/	05/
2 FILER NAME	_		3 ACCOUNT# (E	thics Commission filers)
Margaret	Gomez Campaign			
4	AL OF UNITEMIZED LOANS:	라 라 라	⇒ ⇔	\$
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	on / Job title (See Instructions)	13 Employer (See	Instructions)	
14 Description of Collab	teral			
15 GUARANTOR INFORMATION	16 Name of guarantor			18 Amount Guaranteed (\$)
not applicable	17 Guarantor address; City; State;	Zip Code		
19 Principal Occupation		20 Employer		
Date of loan	Name of lender	Oul-of-state PAC (ID#:)	Loan Amount (\$)
Is lender a financial Institution?	Lender address; City; State;	Zip Code		Interest rate
Y N				Maturity date
Principal occupatio	n / Job title (See Instructions)	Employer (See Instru	uctions)	
Description of Collate	eral			
GUARANTOR INFORMATION	Name of guarantor			Amount Guaranteed (\$)
not applicable	Guarantor address; City; State;	Zip Code		
Principal Occupation		Employer		
If lend	ATTACH ADDITIONAL CO			quiroments.

POLITI	CAL EXPENDITURES			SCHEDULE F
The Instruc	ction Guide explains how to complete this form.		1 Total pages Sche	dule F:
2 FILER NAM Marga			3 ACCOUNT# (EII	nics Commission filers)
4 Date	ret Gómez Caupaign 5 Payee name		7	Amount (\$)
	6 Payee address; City: State: Zip Code (See 2 attached pa			
required.)	yment (See instructions regarding type of information	9 Complete if di Candidate / Officeholder i	rect expenditure to be name Office	
(If travel outside	de of Texas, complete Schedule T)			
Date	Payee name			Amount (\$)
	Payee address; City: State; Zip Code			
required.)	yment (See instructions regarding type of information a of Texas, complete Schedule T)	↔ Complete if di Candidate / Officeholder r	rect expenditure to be name Office	
Date	Payee name			Amount
	Payee address; City; State; Zip Code			(\$)
required.)	ment (See instructions regarding type of information	Complete if di Candidate / Officeholder r	rect expenditure to be name Office:	
	ide of Texas, complete Schedule T)			
Date	Payee name			Amount (\$)
	Payee address; City; State; Zip Code			
required.)	ment (See instructions regarding type of information	•• Complete if di Candidate / Officeholder n	rect expenditure to ber pame Offices	
(ii travel outside	e of Texas, complete Schedule T)			
	ATTACH ADDITIONAL COPIE	S OF THIS FORM AS N	EEDED	

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
	ALGPC P. O. Box 822 Austin, TX 78767	\$50.00	Membership Renew	Margaret J. Gomez
	Angie's Restaurant 1307 East 7 Austin, TX 78702	\$38.97	Tacos for Workers	Margaret J. Gomez
	Irene Silva 2502 E. Oltorf, #2527 Austin, TX 78741	\$76.87	Contracted Services	Margaret J. Gomez
	Gretchen Stinson 74985 Chevy Chase Drive, #204 Austin, TX 78752	\$72.00	Contracted Services	Margaret J. Gomez
	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

SCHEDULE G

The Instru	ction Guide explains how to complete this form.	1 Total pages Scho	dule G:	
Marg	AE arct Gonez Cempaign 5 Payee name	3 ACCOUNT # (Et	hics Comn	nission filers)
Date	5 Payee name		8	Amount (\$)
	6 Payee address; City; State; Zip Code			
	None			Daise server
	7 Purpose of expenditure (See instructions regarding type of information requ	uired.)		Reimbursement from political contributions intended
	(If travel outside of Texas, complete Schedule T)			
Date	Payee name			Amount (\$)
	Purpose of expenditure (See instructions regarding type of information requ	uired.)		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)	uired.)		Reimbursement from political contributions intended
Date	Payee name			Amount
	Payee address; City; State; Zip Code		ļ	(\$)
	Purpose of expenditure (See instructions regarding type of information requ	uired.)		Reimbursement from political
	(if travel outside of Texas, complete Schedule T)			contributions intended
Date	Payee name			Amount (\$)
	Payee address; City; State; Zip Code			
	Purpose of expenditure (See instructions regarding type of information requ	ired.)		Reimbursement from political contributions
	(If travel outside of Texas, complete Schedule T)			intended
	ATTACH ADDITIONAL COPIES OF THIS FORM A	S NEEDED		

Purpose of payment (See instructions regarding type of information required.) $\label{eq:purpose} % \begin{center} \begin{cen$

(If travel outside of Texas, complete Schedule T)

2

4

8

	ENT FROM POLITICAL CONT CUSINESS OF C/OH	RIBUTIONS		SCHEDULE H
The Instruc	ction Guide explains how to complete this form.	·	1 Total pages Sch	edule H:
FILER NAM	0 0		3 ACCOUNT # (E	thics Commission filers)
Date	5 Business name			7 Amount (\$)
	6 Business address; City; State: Zip Code			
Purpose of pay required.)	yment (See instructions regarding type of information	9 ··· Complete Candidate / Officeho	e if direct expenditure der name	to benefit C/OH ·· Office sought Office held
(If travel outside	e of Texas, complete Schedule T)			
Date	Business name			Amount (\$)
	Business address; City; State; Zip Code			
required.)	ment (See instructions regarding type of information of Texas, complete Schedule T)	•• Complete Candidate / Officehor	if direct expenditure der name	office sought Office held
Date	Business name	<u> </u>		Amount (\$)
	Business address; City; State; Zip Code			
equired.)	ment (See instructions regarding type of information	++ Complete Candidate / Officehol	if direct expenditure der name	to benefit C/OH ·· Office sought Office held
required.)				

Office sought

· Complete if direct expenditure to benefit C/OH ·

Candidate / Officeholder name

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

Office held

Texas Ethics Commission Austin, Texas 78711-2070 (512) 463-5800 1-800-325-8506 P.O. Box 12070 NON-POLITICAL EXPENDITURES SCHEDULE I MADE FROM POLITICAL CONTRIBUTIONS 1 Total pages Schedule I: The Instruction Guide explains how to complete this form. 1 of 1 3 ACCOUNT # (Ethics Commission filers) 2 FILER NAME Amount (\$) City; State; Zip Code 6 Payee address; None 7 Purpose of expenditure (See instructions regarding type of information required.) Date Payee name Amount (\$) City; State; Zip Code Pavee address: Purpose of expenditure (See instructions regarding type of information required.) Date Amount Payee name (\$) 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** (\$) City; State; Zip Code Payee address; Purpose of expenditure (See instructions regarding type of information required.)

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

CRED	ITS (optional)	SCHEDULE K
The instr	uction Guide explains how to complete this form.	1 Total pages Schedule K:
FILER NA	ME rgaret Gónez Campargn	3 ACCOUNT # (Ethics Commission filers)
Date	5 Payor name	8 Amount (\$)
	6 Payor address; City; State; Zıp Code	
	7 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 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 SCHEDULE T FOR TRAVEL OUTSIDE OF TEXAS 1 Total pages Schedule T: The Instruction Guide explains how to complete this form. 1 of 1 3 ACCOUNT # (Ethics Commission filers) 2 FILER NAME Margaret Gomez Campaign 4 Name of Contributor / Corporation or Labor Organization / Pledgor / Payee 5 Contribution / Expenditure reported on: Schedule A Schedule C Schedule D Schedule F Schedule B Schedule G PAC-C PAC-E Schedule H Schedule N П сон-ис П сон-т 7 Name of person(s) traveling 6 Dates of travel 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 PAC-E Schedule H Schedule N COH-UC COH-T PAC-C Name of person(s) traveling Dates of travel 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 C Schedule D Schedule F Schedule A Schedule B Schedule G Schedule H Schedule N PAC-E COH-UC СОН-Т PAC-C Name of person(s) traveling Dates of travel 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 C	Guide explains how to complete this form,	1 ACCOUNT# (Ethics Commission filers)	2 Total pages filed:
3 CANDIDATE / OFFICEHOLDER NAME	MS/MRS/MR FIRST Margaret		OFFICE USE ONLY
	NICKNAME LAST	SUFFIX	Date Received
	Gomec]
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX. APT / SUITE #: C Margaret J. Grénez P.O. Day 3232	DITY; STATE; ZIP CODE	Date Hand-delivered or Date Postmarked
Change of Address			9 9
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER (572) 762-7016	EXTENSION	Receipt # Amount
_	702 7070		Date Processed
6 CAMPAIGN TREASURER NAME	MSIMRSIMR FIRST Walter	M)	Date Imaged
	NICKNAME LAST	SUFFIX	
	Vimberlake	<u> </u>	
7 CAMPAIGN TREASURER	STREET ADDRESS (NO PO BOX PLEASE); APT / SUI	TE#, CITY; STATE;	ZIP CODE
ADDRESS (Residence or business)	2006 Boulden Assenue	Austin 74	78704
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER (5/2) 442-6688	EXTENSION	
9 REPORTTYPE	January 15 30th day before electio	Runoff	15th day after campaign treasurer appointment (officeholder only)
	July 15 Bth day before election	Exceeded \$500 limit	Final report (Attach C/OH - FR)
10 PERIOD COVERED	Month Day Year // 22 / / O THROL	Month Day UGH 2 / 3.6	/ <i>Ì O</i>
11 ELECTION	Month Day Year 03 / 02 / 10 ELECTION TYPE Primary		General Special
12 OFFICE	Traves County Commissioner, Pd	13 OFFICE SOUGHT (If known	_
44 NOTICE	1000,000,000,000,000,000,000	.4	, , , , , , , , , , , , , , , , , , , ,
14 NOTICE OF DIRECT CAMPAIGN	 Direct campaign expenditures are campaign of Candidales are required to disclose this information 		
EXPENDITURE BY OTHER	Name		
INDIVIDUALS	None to my knowle	dge.	
	Address / PO Box; Apt. / Suite #; City; State; 2	Žip Code	
additional pages			
	GO TO I	PAGE 2	

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070

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	candidate / officehole	otice of political contributions accepted or political expenditures made b der. These expenditures may have been made without the candidate's of scholders are required to report this information only if they receive notic	r afficeholder's knowledge or consent.
COMMITTEE(S)	COMMITTEE TYPE	COMMITTEE NAME	
	GENERAL	Margaret J. Gómez	
	SPECIFIC	COMMITTEE ADDRESS P.O.Bop 3232	
		Austin, TY 78704	
additional pages		COMMITTEE CAMPAIGN TREASURER NAME	
		Walter Timberlake	
		COMMITTEE CAMPAIGN TREASURER ADDRESS	
		2006 Boolden Avenue Austin, 74 78704	
18 CONTRIBUTION TOTALS		POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN ES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ -0-
		POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 16,750.42
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED		\$ - o -
	4. TOTAL	POLITICAL EXPENDITURES	\$ 14,430.65
CONTRIBUTION BALANCE		POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DA DRTING PERIOD	\$ 30,804.62
OUTSTANDING LOAN TOTALS		PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LY OF THE REPORTING PERIOD	\$ -0-
19 AFFIDAVIT			<u> </u>
		I swear, or affirm, under penalty of pe is true and correct and includes all in me under Title 15, Election Code.	
		Marque &	Gomes .
		Signature of Candid	date or Officeholder
AFFIX NOTARY STAMP	/ SEAL ABOVE		
Sworn to and subscrib	ped before me, by I	the saíd	, this the day
of, 20	0, to cert	lify which, witness my hand and seal of office.	
Signature of officer add	ministering oath	Printed name of officer administering oath Title	e of officer administering oath

POLITICAL CONTRIBUTIONS

SCHEDULE A

	OTHER THAN PLEDGES OR LOANS						
	The Instruction Guide explains how to complete this form.			1 Total pages Schedule A:			
2	FILER NAM	JE		3 ACCOUNT# (Ett	nics Commission filers)		
4	Date	5 Full name of contributor Out-of-state PAC (ID#		7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)		
	6 Contributor address; City; State; Zip Code (See 3 a Hacked sheets)			<u> </u> 			
		(See S retained 3/10		(If travel outside o) of Texas, complete Schedule T)		
9	Principal occu	upation / Job title (See Instructions)	10 Employer (See I				
	Date	Full name of contributor out-of-state PAC (ID#)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
		Contributor address; City; State; Zip Code		}			
				(If tenual outside o	f Tayas, complete Schedule Ti		
	Principal occu	petion / Job title (See Instructions)	(If travel outside of Texas, complete Schedule T) Employer (See Instructions)				
	Date	Full name of contributor 🔲 out-of-state PAC (ID#:)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
		Contributor address; City; State; Zip Code		ĺ	l		
Principal occupation / Job title (See Instructions)			Employer (See I	. '	f Texas, complete Schedule T)		
	7 miorpar occo	parenty con the (dec mandehold)	Employer (Boo I	not delicita)			
	Date	Full name of contributor out-of-state PAC (ID#:)	Amount of contribution (\$)	In-kind contribution description (if applicable)		
		Contributor address; City; State; Zip Code		 			
				lf travel outside o	f Texas, complete Schedule T)		
Principal occupation / Job title (See Instructions)			Employer (See Instructions)				
	Date	Full name of contributor 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 In	nstructions)	1		
		ATTACH ADDITIONAL COPIES	OF THIS FORM AS	NEEDED			
	lf c	ontributor is out-of-state PAC, please see instru			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 Enfo 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, Bl	air & Samps	son	
-,,	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 Co. 2705 Bee Cave Road, S 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 1100 Guadalupe Austin, TX 78701	& Collins	\$1,500.00	
2/10/2010	Travis County Sheriff's	Officers Ass	ociation PAC	
-, - -,	400 West 14, Suite 220 Austin, TX 78701		\$1,000.00	
2/10/2010	Granger and Mueller, P 605 West 10 Austin, TX 78701-2042	. C.	\$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. Martínez 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 D Austin, TX 78749	rive	\$50.00	
2/13/2010	Teresita Rodriguez 9000 Happy Trail Austin, TX 78754-4932	2	\$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 Dri Austin, TX 78747-1310		\$50.00	
2/20/2010		Deposit	\$1,800.00	
2/20/2010	Austin/Travis County 7901 Cameron Road, Austin, TX 78754			\$3,897.92 Postcard & Postage

(512) 463-5800

PLEDG	SED CONTRIBUTIONS			SCHEDULE B
The Instruc	ction Guide explains how to complete this form.		1 Total pages this S	chedule B:
2 FILER NAM	ME		3 ACCOUNT # (Ethics Commission filers)	
11100	to the Colored Colored			
4 TOT	aret Gómez Camparga			
101	AL 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		//f traval autolds a	f Towar complete Schodule T)
10 Principal occu	upation / Job title (See Instructions)	11 Employer (See I	_	f Texes, complete Schedule T)
			,	
Date	Full name of pledgorout-of-state PAC (ID#:		Amount of	In-kind description
Date	United of preagor		pledge (\$)	(if applicable)
	Pledgor address; City; State; Zip Code	· · · · <i>, , ,</i> · · · · · ·	 	
_			-	f Texas, complete Schedule T)
Principal occu tions)	pation / Job title (See Instruc-	Employer (See I	nstructions)	
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 o	f Texas, complete Schedule T)
Principal occu	pation / Job title (See Instructions)	Employer (See li	nstructions)	
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 occu	pation / Job title (See Instructions)	Employer (See In		Texas, complete concessor ly
Deta	5-11	<u> </u>	A	
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 occu	pation / Job title (See Instructions)	Employer (See Ir	structions)	
	ATTACH ADDITIONAL COPIES		NEEDED	

(512) 463-5800

LOANS				SCHEDULE E
The Instruction	Guide explains how to complete this f	orm.	1 Total pages Scho	
2 FILER NAME Marge	et Gómez Campargn		3 ACCOUNT # (Ett	nics Commission filers)
4	L OF UNITEMIZED LOANS:	t t t t		\$
5 Date of loan	7 Name of lendar	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	n / Job title (See Instructions)	13 Employer (See In	structions)	
14 Description of Collab	eral			
15 GUARANTOR INFORMATION	16 Name of guarantor			18 Amount Guaranteed (\$)
☐ not applicable	17 Guarantor address; City; State;	Zip Code		
19 Principal Occupation		20 Employer	•	
Date of loan	Name of lender	ul-of-state PAC (ID#)	Loan Amount (\$)
Is lender a financial Institution?	Lender address; City; State;	Zip Code		Interest rate
Y N				Maturity date
Principal occupatio	л / Job title (See Instructions)	Emplayer (See Instructi	ons)	
Description of Collat	eral			
GUARANTOR INFORMATION	Name of guarantor			Amount Guaranteed (\$)
not applicable	Guarantor address; City; State;	Zip Code		
Principal Occupation		Employer		
If len	ATTACH ADDITIONAL Co			juirements.

POLITI	CAL EXPENDITURES		SCHEDULE F
The Instruc	tion Guide explains how to complete this form.	· • ·	ages Schedule F:
2 FILER NAMI	E		UNT # (Ethics Commission filers)
4 Date	5 Payee name		7 Amount (\$)
	6 Payee address; City; Stale; Zip Code See 5 a Hached She	rets)	
required.)	yment (See instruction s regarding type of information de of Texas, complete Schedule T)	9 ·· Complete if direct expendi Candidate / Officeholder name	iture to beziefit C/OH •• Office sought Office held
Date	Payee name		Amount (\$)
	Payee address; , City; State; Zip Code		
Purpose of pay required.)	yment (See instructions regarding type of information	Complete if direct expendi Candidate / Officeholder name	ture to benefit C/OH •• Office sought Office held
(If travel outsid	e of Texas, complete Schedule T)		
Dale	Payee name		Amount (\$)
	Payee address; City; State; Zip Code		
required.)	rment (See instructions regarding type of information ide of Texas, complete Schedule T)	Complete if direct expendit Cendidate / Officeholder name	ture to benefit C/OH ** Office sought Office held
Date	Payee name		Amount (\$)
	Payee address; City; State; Zip Code		
Purpose of pay required.)	yment (See instructions regarding type of information	Complete if direct expendit Candidate / Officeholder name	ture to benefit C/OH •• Office sought Office held
(If travel outsid	le of Texas, complete Schedule T)		
	ATTACH ADDITIONAL COPIES	S 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			
	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
	Stacy Suits 7805 Doncaster Austin, TX 78745	\$195.82	Sign Supplies Gas	Margaret J. Gomez
	Worley Printing 3217 N. IH 35 Austin, TX 78722	\$677.65	Flyers, Letterhead, Envelopes	Margaret J. Gomez
	Worley Printing 3217 N. IH 35 Austin, TX 78722	\$1,125.00	Printing, Postage of Mailer	Margaret J. Gomez
	Office Depot 2101 South Lamar Austin, TX 78704	\$21.60	Clipboards for Walkers	Margaret J. Gomez
	Estella French 3113 Linnet Drive Austin, TX 78745	\$900.00	Contracted Services	Margaret J. Gomez
	James Coonrod 6809 Felipe Drive Austin, TX 78741	\$425.00	Contracted Services	Margaret J. Gomez
	Gretchen Stinson 7495 Chevy Chase Drive, #204 Austin, TX 78752	\$82.00	Contracted Services	Margaret J. Gomez
	Tom Cochran 805 Purple Martin Pflugerville, TX 78660	\$48.75	Contracted Services	Margaret J. Gomez
	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
,	Café Services, Inc. P. O. Box 651959 Austin, TX 78745	\$450.32	Food at Ruta Maya	Margaret J. Gomez
	Estella French 3113 Linnet Drive Austin, TX 78745	\$900.00	Contracted Services	Margaret J. Gomez
	James Coonrod 6809 Felipe Drive Austin, TX 78741	\$425.00	Contracted Services	Margaret J. Gomez
	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. Gome	₽Z
2/17/2010 Andrew Stanford 114 Mandan Buda, TX 78610	\$67.50 Contracted Services Margaret J. Gome	? Z
2/17/2010 Richard Heine 8404 Linden Road Austin, TX 78702	\$45.00 Contracted Services Margaret J. Gome	żΖ
2/17/2010 Brett Eigler 130 Cumberland Austin, TX 78704	\$138.75 Contracted Services Margaret J. Gome	!Z
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. Gome	Z
2/17/2010 Tom Cochran 805 Purple Martin Pflugerville, TX 78660	\$112.50 Contracted Services Margaret J. Gome	Z
2/17/2010 John Abramowitz 1800 Lavaca, Apt. 315 Austin, TX 78701	\$116.25 Contracted Services Margaret J. Gome	Z
2/17/2010 Sein Leon 3221 Plantation Drive Austin, TX 78745	\$200.00 Contracted Services Margaret J. Gome.	Z
2/17/2010 Darla Thompson 508 E. Howard Street Austin, TX 78754	\$105.00 Contracted Services Margaret J. Gomes	Z
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

13306 Whitetail Trail Austin, TX 78736 \$96.00 Contracted Services Margaret J. Gomez

2/19/2010 Stacy Suits

7807 Doncaster Austin, TX 78745 \$153.30 Sign Supplies

2/20/2010

Total Expenditures \$14,430.65

POLITICAL EXPENDITURES

SCHEDULE G

WIADE	FROM PERSONAL FUNDS			
The Instruct	tion Guide explains how to complete this form.	1 Total pages Sche	edule G:	
2 FILER NAME		3 ACCOUNT# (EII	hics Commission filers	1
4 Date	net Gomez Campaign 5 Payee name		8 Amo	
	6 Payee address; City; State; Zip Code			
	7 Purpose of expenditure (See instructions regarding type of information required (If travel outside of Texas, complete Schedule T)	uired.)	Reimbu from po contribu intende	itions
			<u> </u>	
Date	Payee name		Ame (\$	
	Purpose of expenditure (See instructions regarding type of information requalified (If travel outside of Texas, complete Schedule T)	uired.)	Reimbu from po contribu intender	itions
Date	Payee name		Amo	
	Payee address; City; State; Zip Code		(\$	·)
	Purpose of expenditure (See instructions regarding type of information requ (If travel outside of Texas, complete Schedule T)	uirea.)	from pol contribu intended	tions
Date	Payee name		Amo	
	Payee address; City; State; Zip Code		(\$)
	Purpose of expenditure (See instructions regarding type of information req	uired.)	Reimbur from pol contribut intended	itical tions
	(If travel outside of Texas, complete Schedule T)			
Date	Payee name		Anto: (\$)	
	Purpose of expenditure (See instructions regarding type of information requ (If travel outside of Texas, complete Schedule T)	ired.)	Reimbur from poli contribut intended	itical tions
	ATTACH ADDITIONAL COPIES OF THIS FORM A	S NEEDED		

PAYMENT FROM POLITICAL CONTRIBUTIONS SCHEDULE H TO A BUSINESS OF C/OH 1 Total pages Schedule H: The Instruction Guide explains how to complete this form. 1 of 1 RNAME Margaret Gémez Campaign 10 5 Business name None ACCOUNT # (Ethics Commission filers) 2 FILER NAME Amount (\$) 6 Business address: City: State: Zip Code 8 Purpose of payment (See instructions regarding type of information · Complete if direct expenditure to benefit C/OH · required.) Candidate / Officeholder name Office held (If travel outside of Texas, complete Schedule T) Date Business name Amount (\$) City: State: Zip Code Business address: Purpose of payment (See instructions regarding type of information -- Complete if direct expenditure to benefit C/OH -required.) Cendidete / Officeholder name Office sought Office held (If travel outside of Texas, complete Schedule T) Date Business name Amount (\$) City; State; Zip Code Business address; Purpose of payment (See instructions regarding type of information -- Complete if direct expenditure to benefit C/OH -required.) Candidate / Officeholder name Office held (If travel outside of Texas, complete Schedule T) Date Annount (\$) City; State; Zip Code Business address; Purpose of payment (See instructions regarding type of information · Complete if direct expenditure to benefit C/OH ·· required.) 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 !

The Instruction Guide explains how to compl	lete this form.	1 Total pages Sch	
FILER NAME Margaret Gómez Campaign	^	3 ACCOUNT# (E	Ethics Commission filers)
Date 5 Payee name			8 Amount (\$)
6 Payee address; City; S	State; Zip Code		
7 Purpose of expenditure (See instr	uctions regarding type of inf	formation required.)	
Date Payee name	State; Zip Code		Aiπount (\$)
Purpose of expenditure (See instr	uctions regarding type of inf	formation required.)	_
Date Payee name	State; Zip Code		Amount (\$)
Purpose of expenditure (See instre	uctions regarding type of info	олnation required.)	
Date Payee name Payee address; City: S	State; Zip Code		Amount (\$)
Purpose of expenditure (See instru	uctions regarding type of info	ormation required.)	
Date Payee name Payee address; City; S	itate; Zip Code		Amount (\$)
Purpose of expenditure (See instru	uctions regarding type of info	ormation required.)	
ATTACH ADDITE	ONAL COPIES OF THI	S FORM AS NEEDED	

CREDI [*]	TS (optional)	SCHEDULE K
2 FILED NAM	tion Guide explains how to complete this form.	1 Total pages Schedule K: / of / 3 ACCOUNT # (Ethics Commission filers)
Ma	rgaret Gómez Campaign	
4 Date	Payor name City; State; Zip Code	8 Amount (\$)
	7 Reason for credit	
Date	Payor name	Amount (\$)
	Reason for credit	
Date	Payor name	Amount (\$)
	Reason for credit	
Date	Payor name Payor address; City; State; Zip Code	Amount (\$)
	Reason for credit	
Date	Payor name Payor address; City; State; Zip Code	Amount (\$)
	Reason for credit	

	TE / OFFICEHOLDER N FINANCE REPORT	7414	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:
3 CANDIDATE / OFFICEHOLDER	MS MRS / MR FIRST	MI	OFFICE USE ONLY
NAME	Margaret NICKNAME LAST Gómez	J.	Date Received
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address	ADDRESS POBOX; APTIBUTE #: CITY; Margaret J. Gómez P.O. BOX 3232 Austin, TY 78704	STATE; ZIP CODE	Date Hand-detergreed or Date Postmarked
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER (5/2) 350-9840	EXTENSION	Receipt # Amount III
6 CAMPAIGN TREASURER NAME	MS/MRS/MR FIRST Walter NICKNAME LAST Timberlake	Mł 	Date Imaged
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE): APT/SUITE #:	CITY: STATE; Austin, 74	ZIP CODE - 78 70 4
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER (572) 442-6698	EXTENSION	
9 REPORT TYPE	Jenuary 15 30th day before election July 15 8th day before election	Runoff Exceeded \$500 limit	15th day after campaign treasurer appointment (officeholder only) Final report (Altach C/OH - FR)
10 PERIOD COVERED	Month Day Year THROUGH	Month Day	Year
11 ELECTION	ELECTION DATE Oay Year 3 / 02 / 10 ELECTION TYPE Primary	Runoff	General Special
12 OFFICE	OFFICE HELD (Hany) Travis County Count swoner, Pod. 4	13 OFFICE SOUGHT (if know	mmissionar, Pet. 4
14 NOTICE OF DIRECT CAMPAIGN EXPENDITURE	DIRECT CAMPAIGN EXPENDITURES ARE CAMPAIGN EXPENDITU CANOIDATES ARE REQUIRED TO DISCLOSE THIS INFORMATIO	RES MADE BY OTHERS WITHOUT TH	E CANDIDATE'S PRIOR CONSENT OR APPROVAL.
BY OTHER INDIVIDUALS	None to my knowledge		
additional pages	Address / PO Box; Apt. / Suite #; City; State; Zip Coo	de	
,	GO TO PAC	GE 2	

CANDIDATE / OFFICEHOLDER REPORT:

FORM C/OH

SUPPORT	& TOTAL	S	COVER SHEET PG 2			
15 C/OH NAME Margaret	Gomez Can	1	6 ACCOUNT # (Ethics Commission Filers)			
17 NOTICE FROM POLITICAL COMMITTEE(S)	CANOIDATE / OFFICE	ICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENSITURES MAD HOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CAND ES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF 1	IDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR			
COMMITTEE(3)	COMMITTEE TYPE COMMITTEE NAME					
	GENERAL Margaret J. Gomez COMMITTEE ADDRESS					
	COMMITTEE ADDRESS P.O. B. 4 3232 Austra. 74 78704					
additional pages		COMMITTEE CAMPAIGN TREASURER NAME Walter Timberlake				
		COMMITTEE CAMPAIGN TREASURER ADDRESS 2006 Bouldin Avenue Austin, TY 78704				
18 CONTRIBUTION TOTALS		POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN ES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZE				
		POLITICAL CONTRIBUTIONS THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 2,400.00			
EXPENDITURE TOTALS	3. TOTAL F	POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZ	ZED \$			
	4. TOTAL	POLITICAL EXPENDITURES	\$ 23,777.50			
CONTRIBUTION BALANCE		OLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST D ORTING PERIOD	\$ 10, 332. 66			
OUTSTANDING LOAN TOTALS		PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF T LY OF THE REPORTING PERIOD	HE \$ -0-			
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 Cand	didate or Officeholder			
Sworn to and subscribed before me, by the said Margaret J. Gomez, this the						
15th day	of July	, 20 <u>\0</u> , to certify which, witness m				
foliates B. (CM College Courts	Felicitas B. Charet	Notan Public			

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

(512) 463-5800

	The	Instruction Guide explains how to complate this	form.	1 Total pages Sch 3 (inclu	edule A: ding this page)
2	FILER NAME	-		3 ACCOUNT # (E	(thics Commission Filers)
	Manga	ret Gomez Campaign			
4	Date	5 Full name of contributor out-of-state PAC(ID#:)	7 Amount of contribution (\$)	8 In-kind contribution description (if applicable)
		6 Contributor address; City: State; Zip Code			1
		See 2 attached pages		(If traval cutteids	of Texas, complete Schedule T)
0	Principal occur	pation / Job title (See Instructions)	40 Employer /See	· ·	or rexas, complete ochedate ry
-	- Tillicipal occup	Succession and (1986 Historicals)	10 Employer (See	instructions;	
	Date	Full name of contributor		Amount of contribution (\$)	In-kind contribution description (if applicable)
		Contributor address; City; State; Zip Code			
1					
	Delegation of the second	antiana () - b (Mar (One Instruction -)	E		of Texas, complete Schedule T)
ı	Principal occup	ation / Job title (See Instructions)	Employer (See I	instructions)	
	Dete	Full name of contributor out-of-state PAC (ID#:		Amount of contribution (\$)	In-kind contribution description (if applicable)
	1)
		Contributor address; City; State; Zip Code)
					1
				did donor of a constitute	of Tours complete Schoolule Ti
	Principal occur	ation / Job title (See Instructions)	Employer (See I		of Texas, complete Schedule T)
	1 пистры оссор	adotty sob little (See manuchons)	Employer (See 1	natiociona)	
	Date	Full name of contributor out-of-state PAC (ID#:		Amount of	In-kind contribution
				contribution (\$)	description (if applicable)
		Contributor address; City; State; Zip Code	,		1
	Principal occur	ation / Job title (See Instructions)	Employer (See I		of Texas, complete Schedule T)
			Employor (Soo 1		
	Date	Full name of contributor out-of-state PAC (ID#:)	Amount of contribution (\$)	In-kind contribution description (if applicable)
		Contributor address; City; State; Zip Code			
	ļ				
				(If travel outside	of Texas, complete Schedule T)
	Principal occup	ation / Job title (See Instructions)	Employer (See i	nstructions)	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

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

Date Recd	Name & Address	Amount	In-Kind
	Stephen M. Azia 11417 Broad Green Drive Potomac, MD 20854	\$47.75	
	Emma L. Linn 2400-B Vista Lane Austin, TX 78703	\$200.00	
2/24/2010	John Tullos Wells 117 Canterbury Hill San Antonio, TX 78209	\$95.50	
2/26/2010	Paula Marks 104 Vireo Drive Buda, TX 78610	\$25.00	
2/26/2010	Takoohy Ardash Harutunian P. O. Box W Austin, TX 78713-7448	\$250.00	
2/26/2010	Anne Hossanna Harutunian P. O. Box W Austin, TX 78713	\$250.00	
2/26/2010	Robert R. Kamm Government Affairs 1304 Guadalupe Street Austin, TX 78701	\$100.00	
		\$968.25	
3/0/2040	Total Day sale	-143.25	
3/8/2010	Total Deposit	\$825.00	
3/7/2010	Michael R. Aulick 700 S. Creekwood Drive Driftwood, TX 78619	\$50.00	
	Peter Low 4242 Westlake Drive Austin, TX 78746-1453	\$250.00	

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 P. O. Box 98 \$250.00 Austin, TX 78767

PLEDG	SED CONTRIBUTIONS			SCHEDULE B
The	nstruction Guide explains how to complete this	s form.	1 Total pages Sche	adule B:
2 FILER NAME	ent J. Gomez Campaign		3 ACCOUNT # (Et	hics Commission Filers)
	AL 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 o	of Texas, complete Schedule T)
10 Principal occu	upation / Job title (See Instructions)	11 Employer (See I	<u></u>	
Date	Full name of pledgor out-of-state PAC (ID#:		Amount of pledge (\$)	In-kind description (if applicable)
	Pledgor eddress; City; State; Zip Code		 	
			(If travel outside o	of Texas, complete Schedule T)
Principal occu	ipation / Job title (See Instructions)	Employer (See I	nstructions)	
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 o	if Texas, complete Schedule T)
Principal occu	pation / Job title (See Instructions)	Employer (See li	nstructions)	
Date	Full name of pledgor out-of-state PAC (ID#:)	Amount of pladge (\$)	In-kind description (if epplicable)
	Pledgor address; City; State; Zlp Code		<u> </u>	
				f Texas, complete Schedule T)
Principal occu	pation / Job title (See Instructions)	Employer (See I	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 trave) outside o	of Texas, complete Schedule T)
Principal occu	petion / Job title (See Instructions)	Employer (See In	<u>-</u>	
lf e	ATTACH ADDITIONAL COPIES Contributor is out-of-state PAC, please see Instr			requirements.

LOANS				SCHEDULE E		
The	Instruction Guide explains how to comp	elete this form.	1 Total pa	nges Schedule E:		
2 FILER NAME Marga	2 FILER NAME Margaret J. Gomez 3 ACCOUNT					
[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?		Zip Code		10 Interestrate		
Y N	None			11 Maturity date		
12 Principal occupati	ion / Job title (See Instructions)	13 Employer (See Instructions)	+	J		
14 Description of Col	lateral	<u> </u>				
□ none						
15 GUARANTOR INFORMATION	16 Name of guarantor			18 Amount Guaranteed (\$)		
not applicable	17 Guarantor address; City;	State; Zip Code				
19 Principal Occupat	lon (See Instructions)	20 Employer (See Instructions)				
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		
YN				Maturity date		
Principal occupati	J ion / Job title (See Instructions)	Employer (Sae Instructions)				
Description of Coll.	atera)					
none						
GUARANTOR INFORMATION	Name of guarantor			Amount Guaranteed (\$)		
not applicable	Guarantor address; City;	State; Zip Code				
Principal Occupati	ion (See Instructions)	Employer (See Instructions)				
If len	ATTACH ADDITIONAL COPIL der is out-of-state PAC, please see instr	ES OF THIS SCHEDULE AS NEI uction guide for additional rep		quirements.		

POLITICAL EXPENDITURES

SCHEDULE F

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense

Gift/Awards/Memorials Expense Legal Services

Food/Beverage Expense

Selaries/Wages/Contract Labor Solicitation/Fundraising Expense

Travel In District

Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By

(512) 463-5800

Event Expense Fees	Polling Expense Travel Out Of Di Printing Expense Office Overheads The Instruction Guide explains how to	Rental Expense OTHER (enter	Officeholder/Political Committee a category not listed above)
1 Total pages Schedule F: 7 Inchding this	2 FILER NAME Margaret J. Gomez Campaign	3 ACCO	UNT # (Ethics Commission Filers)
4 Date	5 Payee name		
6 Amount (\$)	7 Peyee address; City; State; Zip Code (See 6 attached pages)		
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/C	Candidate / Officeholder name	Office sought	Office held
Date	Payee name		
Amount (\$)	Payee address; Clty; 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 ONLY if direct expenditure to benefit C/C	Candidate / Officeholder name	Office sought	Office held
Oate	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 autside of	Texas, complete Schedule T)
Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate / Officeholder name	Office sought	Office held
Oate	Payee name		
Amount (\$)	Payee address; Clty; State; Zlp Code		
PURPOSE OF EXPENDITURE	Category (See cetegories listed at the top of this schedule)	Description (Il travel oviside of	Texas, complete Schedule T)
Complete <u>ONLY</u> if direct expenditure to benefit C/C	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	с/он
2/21/2010	Exxon Processing Center Des Moines, IA 50361-		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	,	\$200.00	Ad	Margaret J. Gomez
	Austin, TX			
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 Driv Austin, TX 78752	e, #204	Contracted Services	
2/23/2010	Laurie Rogers 1308-A Radcliff Drive Austin, TX 78753		Contracted Services	
2/23/2010	Tom Cochran 805 Purple Martin	\$67.50	Contracted Services	

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		Contacted Acrains	
2/23/2010	Irene Silva 2502 E. Oltorf, #1527 Austin, TX 78741		Contented Sumin	
2/23/2010	Brett Eigler 130 Cumberland, #303 Austin, TX 78704	\$266.25	Contracted Service	•
2/23/2010	John Pesina 130 Cumberland, #303 Austin, TX 78704	\$251.25	Contracted Surviva	v
2/23/2010	Nicole Norgrove 200 Robbie Lane, #406 San Marcos, TX 78666		Contracted Surine	
2/23/2010	Tiffany Mott-Smith 12345 Alameda Trace Ci Austin, TX 78727	ircle	Contacted Service	
2/25/2010	Lucia Barbera P. O. Box 8259 Austin, TX 78713	\$67.50	Contracted Survive	
	Ann Pierce 21 Waller, #1603 Austin, TX 78702		Contracted Suns	
•	Darla Thompson 30611 McKinney Tomball, TX 77375	\$30.00	Contracted Server	
	Darla Thompson 30611 McKinney Tomball, TX 77375		Contracted Suri	
2/4/2010	Richard Heine	ÇAZE M	Costented Juice	•••

8404 Linden Road Austin, TX 78702

2/27/2010	Worley Printing	\$3,000.00	Print jobs	Margaret J. Gomez
	3217 N. IH 35 Austin, TX 78722			
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, #209 Austin, TX 78745	5	Contracted Service	
3/4/2010	Jacob Carter 3329 East 12 Austin, TX 78721		Contracted Surin	
	Gretchen Stinson 7495 Chevy Chase #204 Austin, TX 78752	\$216.00	Contested Series	•
	James Coonrod 6809 Felipe Drive Austin, TX 78741	·	Contracted Services	Margaret J. Gomez
·	Laurie Rogers 1308-A Radcliff Drive Austin, TX 78753		Contracted Surviva	
	Melissa Rogers 1308-A Radcliff Drive Austin, TX 78753		Contracted Sui	
	Irene Silva 2502 E. Oltorf, #1527 Austin, TX 78741		Contested Suis	
	Brett Eigler 130 Cumberland, #303 Austin, TX 78704	\$345.00	Contracted Suni	مست

3/4/2010	Tiffany Mott-Smith 12345 Alameda Trace C Austin, TX 78727		Contracted Ser	enione.
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, R Austin, TX 78704	\$363.75 #303		
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 Ave Austin, TX 78722	\$116.25 nue	↓	
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	P. O. Box 300053 \$ Austin, TX 78703	51, 8 63.00	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	lgor 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		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 Ce	ell upgrade	Margaret J. Gomez
Austin, TX 78735			
4/4/2010 Sprint P. O. Box 660075 Dallas, TX 75266-0075		mpaign Calls	Margaret J. Gomez
4/9/10 Jene Warner			Margue & Gas
4/19/10 San Jui Catholic War Vots	100.00	remained for the leasury	Margue & Gins
4/23/10 Exer	150.00 9	an for Caryoniga	Thought of yours
4/24/10 Walnut	63.25 Of	fice Augglein	Thangus & going
6/3/10 Squit	92.72 Call	en for languige.	Mayor J. Pins
6/1/10 Jame Warm	113.51 2m	or Readimon	Margant & Johns
6/8/10 La Prense	300.00 /21	payad "	Thought & yours
b/shlo But Buy	725.25 Zagi	on upgrade "	Thanging of 1-15
430/10 U.S. Portracto	85.00 1-sp.	unite -remalef & Say	Thougant Lyins
Sale to separation 23	1974.50		

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees

Legal Services Food/Beverage Expanse Polling Expense Printing Expense

Gift/Awards/Memorials Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Travel In District

Travel Out Of District Office Overhead/Rental Expense

Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee

OTHER (enter a category not listed above)

(512) 463-5800

	The Instruction Guide explains now to	complete this form.
1 Total pages Schedule G:	2 FILER NAME Margaret J. Gomez Canpung	3 ACCOUNT # (Ethics Commission Filers)
4 Date	5 Payee name	
6 Amount (\$)	7 Payee address; City: State; Zip Code	
Reimbursement from political contributions intended	None	
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	
Reimbursement from political contributions intended		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If Irevel outside of Texas, comptele Schedule T)
Date	Peyee name	
Amount (\$)	Payee address; City; State; Zip Code	
Reimbursement from politicel contributions intended		
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Taxas, complete Schedule T)
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
Reimbursement from political contributions intended		
PURPOSE OF EXPENDITURE	Cetegory (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
	ATTACH ADDITIONAL COPIES OF THIS S	SCHEDULE AS NEEDED

PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH

SCHEDULE H

<u>-</u>		CATEGORIES FOR BO		
Advertising Expense Accounting/Banking	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labo		ent/Reimbursement
Consulting Expense	Legal Services Food/Beverage Expense	Solicitation/Fundraising Expen Travel In District	- · · · - -	Equipment & Related Expense Conations Made By
Evant Expense	Polling Expense	Traval Out Of District		Officeholder/Political Committee
Fees	Printing Expense	Office Overhead/Rental Expe	nse OTHER (enter	a calegory not listed above)
	The Instruction Guide	explains how to complete	this form.	
Total pages Schedule H:	2 FILER NAME	<u> </u>	3 ACCO	UNT # (Ethics Commission Filers)
	Margaret J. G.	/ 2022 -		
	5 Business name			
• Date	5 Business name			
3 Amount (\$)	7 Business address; City; St	ate; Zlp Code		
	None			
	/ / / / / /			
9 PURPOSE OF	(a) Category (See categories listed at the to	p of this schedule) (b) Desc	cription (If travel outside of	Texas, complete Schedule T)
EXPENDITURE				
N 0	Candidate / Officeholder name	Office	sought	Office held
Complete <u>ONLY</u> if direct expenditure to benefit C/C		Office	sought	Office field
		<u></u>		
Date	Business name			
Amount (\$)	Business address; City; St.	ate; Zip Code		
(-,				
				•
PURPOSE	Category (See calegories listed at the to	o of this schedule) Desc	crintion (If travel outside of	Texas, complete Schedule 7)
OF				,
EXPENDITURE				
Complete ONLY if direct	Candidate / Officeholder name	Office	sought -	Office held
expenditure to benefit C/C	и			
<u> </u>				_
Date	Busineee name			
Amount (\$)	Business address; City; St.	ate; Zip Code		
				i
				'
PURPOSE	Category (See categories listed at the top	o of this schedule) Desc	inption (If travel outside of	Texas, complete Schadule T)
OF EXPENDITURE				
				Office hold
Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate / Officeholder name	Office	sought	Office held
expenditure to benefit Ord				
Date	Business name			
Amount (\$)	Business address; City; Sta	ate; Zip Code		
Amount (9)	Business address, City, St	318, 21p C00 0		
PURPOSE	Category (See categories listed at the top	of this achedule) Desc	 cription (If travel outside of	Texas, complete Schedule †)
OF		2000		
EXPENDITURE				
Complete ONLY if direct	Candidate / Officeholder name	Office	sought	Office held
expenditure to benefit C/O		3	- 	
-	 ·			
	ATTACH ADDITIONAL C	OPIES OF THIS SCHEDUI	E AS NEEDED	

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

P.O. Box 12070

SCHEDULE)

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Cor.sulting Expense Event Expense Fees

Gift/Awards/Memorials Expense Legal Services Food/Beveraga Expense Polling Expense Printing Expense

Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Trevel In District

Travel Out Of District Office Overhead/Rental Expense Loan Repayment/Reimbursement Transportation Equipment & Related Expense Contributions/Donations Made By Candidate/Officeholder/Political Committee

OTHER (enter a calegory not listed above)

The Instruction Guide explains how to complete this form.

		<u> </u>
1 Total pages Schedule I:	2 FILER NAME Margaret J. Gomez Camp	3 ACCOUNT # (Ethics Commission Filers)
4 Date	5 Payee name	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
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)	Oescription (See instructions regarding type of information required.)
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See cetegories listed at the top of this schedule)	Description (See instructions regarding type of information required.)
Oate	Payee name	
Amount (\$)	Payae address; City; State; Zip Code	i
PURPOSE OF EXPENDITURE	Category (See cetegories listed at the top of this schedule)	Description (See instructions regarding type of information required.)
	ATTACH ADDITIONAL COPIES OF THIS S	SCHEDULE AS NEEDED

CREDIT	rs (optional)	SCHEDULE }	<
The	Instruction Guide explains how to complete this form.	1 Total pages Schedule K:	
2 FILER NAME	ret J. Gómez Campaign	3 ACCOUNT # (Ethics Commission Filers)	
4 Date	5 Payor name	8 Amount (\$)	
	6 Payor address; City; State; Zip Code		
	None		
	7 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		
Date	Payor name	Amount (\$)	_
	Payor address; City; State; Zip Code		
	Reason for credit		
	ATTACH ADDITIONAL COPIES OF THIS SCHEDULE	AS NEEDED	

P.O. Box 12070

IN-KIND CC FOR TRAVE				EXPEND	ITURE	SCHEDULE T
The instr	uction Guid	e explains how to	complete this for	ήη.	1 Total pages Schedul	е Т:
2 FILER NAME	st J. 6	Pomez Camp	acip		3 ACCOUNT # (Ethics	Commission Filers)
Margare 4 Name of Contributor	/ Corporation	or Labor Organizati	on / Pledgor / Paye)	·····	
<u></u>		λ	<i>P</i>		_	
5 Contribution / Expend		·				
<u> </u>	hedule A	Schedule B	Schedule C	Schedule		
	hedule H	Schedule N	COH-UC		PAC-C	PAC-E
6 Oates of travel	7 Name	of person(s) traveling	9			
	8 Departu	ure city or name of de	eparture location			
	9 Destina	tion city or name of	destination location			
10 Means of transportat	lion	11 Purpose of trav	vel (including name	of conference, se	minar, or other event)	
Name of Contributor /	Corporation (or Labor Organizatio	n / Pledgor / Payee			
Contribution / Expendit	ture reported	on:				
☐ Sch	nedule A	Schedule B	Schedule C	Schedule	D Schedule F	Schedule G
Scl	hedule H	Schedule N	Сон-пс	[] сон₊т	PAC-C	PAC-E
Dates of travel	Name of	person(s) traveling				
	Departure	city or name of depa	arture location			
	Destinatio	n city or name of de	stination location			
Means of transportation	<u> </u>	Purpose of travel	(including name of	conferenca, semi	nar, or other event)	
Name of Contributor /	Corporation of	or Labor Organizatlo	n / Pledgor / Payee			
Contribution / Expendi	ture reported	on:				
Sch	nedule A	Schedule B	Schedule C	Schedule	D Schedule F	Schedule G
Sch	nedule H	Schedule N	СОН-ИС	□ сон-т	PAC-C	PAC-E
Dates of travel	Name of p	person(s) traveling				
	Departure	city or name of depa	irture location			
	Destination	n city or name of des	tination location			
Means of transportation	1	Purpose of travel	(Including name of a	conference, semi	nar, or other event)	
	Α	TTACH ADDITION	AL COPIES OF TH	IIS SCHEDULE	AS NEEDED	