

**CANDIDATE / OFFICEHOLDER
CAMPAIGN FINANCE REPORT**

**FORM C/OH
COVER SHEET PG 1**

The C/OH Instruction Guide explains how to complete this form. **1** Filer ID **2** Total pages filed:
38

3 CANDIDATE / OFFICEHOLDER NAME
MS / MRS / MR FIRST MI
Sandie
NICKNAME LAST SUFFIX
Mullins Moger

OFFICE USE ONLY

Date Received



Date Hand-delivered

Date Received

Date Processed

Date Imaged

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS
ADDRESS / PO BOX; APT / SUITE #: CITY; ZIP CODE
PO Box 1581
Houston, TX 77251
 Change of Address

5 CAMPAIGN TREASURER NAME
MS / MRS / MR FIRST MI
Bert
NICKNAME LAST SUFFIX
Keller

6 CAMPAIGN TREASURER ADDRESS
(Residence or Business)
STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #: CITY; STATE; ZIP CODE
12306 Broken Bough Dr
Houston, TX 77024

7 CAMPAIGN TREASURER PHONE
AREA CODE PHONE NUMBER EXTENSION
(713) 304-9312

8 REPORT TYPE
 January 15 30th day before election Runoff 15th day after campaign treasurer appointment (officeholder only)
 July 15 8th day before election Exceeded \$500 limit Final Report (Attach C/OH-FR)

9 PERIOD COVERED
Month Day Year THROUGH Month Day Year
02/04/2015 THROUGH 06/30/2015

10 ELECTION
ELECTION DATE
Month Day Year
11/03/2015
ELECTION TYPE
 Primary Runoff Other
 General Special

11 OFFICE OFFICE HELD (if any)
Houston Community College Trustee District VI
12 OFFICE SOUGHT (if known)
Houston City Council District G

GO TO PAGE 2

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

**FORM C/OH
COVER SHEET PG 2**
2 of 38

13 C / OH NAME Mullins Moger, Sandie **14 Filer ID**

15 NOTICE FROM POLITICAL COMMITTEE(S)
 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.

<input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE TYPE	COMMITTEE NAME
	COMMITTEE ADDRESS	
	COMMITTEE CAMPAIGN TREASURER NAME	
	COMMITTEE CAMPAIGN TREASURER ADDRESS	

16 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 17,470.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$ 172.89
	4. TOTAL POLITICAL EXPENDITURES	\$ 8,035.78
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 8,617.60
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

17 AFFADAVIT

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

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Sandie Mullins Moger this the 15th day of July, 2015, to certify which, witness my hand and seal of office.

Signature of officer administering

PAULA VARANO

Printed name of officer administering

NOTARY PUBLIC

Title of officer administering oath

SUBTOTALS - C/OH

18 FILER NAME Mullins Moger, Sandie		19 Filer ID
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 15,920.00
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 1,550.00
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 7,273.40
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8.	<input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$ 762.38
9.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
10.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
11.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/15 Rpt: 4/38
2 FILER NAME Mullins Moger, Sandie		3 Filer ID
4 Date 06/30/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adams, Debbie	7 Amount of Contribution (\$) \$500.00
6 Contributor address; City; State; Zip Code Houston, TX 77079		
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) McDonald's
Date 05/06/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Andrews & Kurth Texas PAC	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code Houston, TX 77002		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 05/19/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Biar, Elizabeth	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Houston, TX 77024		
Principal occupation / Job title (See Instructions) Public Affairs		Employer (See Instructions) Strategic Public Affairs
Date 05/19/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bracewell & Giuliani Committee	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code Houston, TX 77002		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bukolt, Kelly	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Houston, TX 77077		
Principal occupation / Job title (See Instructions) Non-Profit Director of Development		Employer (See Instructions) Making It Better

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/15 Rpt: 5/38
2 FILER NAME Mullins Moger, Sandie		3 Filer ID
4 Date 05/19/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CDM Smith Inc. PAC	7 Amount of Contribution (\$) \$250.00
	6 Contributor address; City; State; Zip Code Houston, TX 77056	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CenterPoint Energy, Inc. PAC	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Houston, TX 77210	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 05/19/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clifford, Cindy	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Houston, TX 77019	
Principal occupation / Job title (See Instructions) Public Relations		Employer (See Instructions) The Clifford Group
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clutterbuck, Anne	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Houston, TX 77005	
Principal occupation / Job title (See Instructions) Vice President		Employer (See Instructions) AECOM
Date 06/13/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Connelly, Michael and Ellen	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Katy, TX 77450	
Principal occupation / Job title (See Instructions) Geologist		Employer (See Instructions) ConocoPhillips

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/15 Rpt: 6/38
2 FILER NAME Mullins Moger, Sandie		3 Filer ID
4 Date 05/06/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Daughtry, Jacque	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code Houston, TX 77077		
8 Principal occupation / Job title (See Instructions) Executive Director		9 Employer (See Instructions) Making It Better
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DeAyala, E.F.	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code Houston, TX 77024		
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Buck Keenan LLP
Date 05/19/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Donaldson, Bill	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Houston, TX 77077		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 05/14/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dragsbaen, Anna	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Cypress, TX 77429		
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) The Immunization Partnership
Date 06/08/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dukes, John and Amy	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Houston, TX 77077		
Principal occupation / Job title (See Instructions) Marketing		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/15 Rpt: 7/38
2 FILER NAME Mullins Moger, Sandie		3 Filer ID
4 Date 03/11/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elder, Ramsay	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code Houston, TX 77005		
8 Principal occupation / Job title (See Instructions) Accountant		9 Employer (See Instructions) Self-Employed
Date 05/19/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellis, Judith	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Houston, TX 77063		
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) Self
Date 04/01/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellis, Judith	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Houston, TX 77063		
Principal occupation / Job title (See Instructions) Sales		Employer (See Instructions) Self
Date 06/13/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Erwin, Robert	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code Houston, TX 77042		
Principal occupation / Job title (See Instructions) CPA		Employer (See Instructions) Melton & Melton, LLP
Date 05/19/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fleming, Rajada and Dr. Mark	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Houston, TX 77027		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/15 Rpt: 8/38
2 FILER NAME Mullins Moger, Sandie		3 Filer ID
4 Date 06/30/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Forthuber, Susan 6 Contributor address; City; State; Zip Code Houston, TX 77077	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Geophysicist		9 Employer (See Instructions) ConocoPhillips
Date 06/15/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzales, Catarina Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) DNRBHZ, P.C.
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goodson, Pam Contributor address; City; State; Zip Code Houston, TX 77079	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Volunteer		Employer (See Instructions) Volunteer
Date 06/28/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gordon, Nancy Contributor address; City; State; Zip Code Houston, TX 77024	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Homemaker		Employer (See Instructions) Homemaker
Date 05/29/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guilanshah, Kirk and Lorena Contributor address; City; State; Zip Code Houston, TX 77224	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) VP of Real Estate		Employer (See Instructions) Memorial Hermann

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/15 Rpt: 9/38
2 FILER NAME Mullins Moger, Sandie		3 Filer ID
4 Date 06/10/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hammerle, Mary Ann 6 Contributor address; City; State; Zip Code Houston, TX 77077	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Registered Dietician		9 Employer (See Instructions) Texas Children's Hospital West Campus
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haney, Peter Contributor address; City; State; Zip Code Houston, TX 77024	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Physician		Employer (See Instructions) Mednax
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Heger, Wendy Contributor address; City; State; Zip Code Houston, TX 77096	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Architect		Employer (See Instructions) Page
Date 05/06/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Helmey, Richard Contributor address; City; State; Zip Code Katy, TX 77450	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Campus Document Systems
Date 05/19/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Herod, Edmund Contributor address; City; State; Zip Code Fulshear, TX 77441	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Executive		Employer (See Instructions) Houston Community College

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/15 Rpt: 10/38
2 FILER NAME Mullins Moger, Sandie		3 Filer ID
4 Date 05/19/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Holm, Pam <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77056	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keller, Albert <hr/> Contributor address; City; State; Zip Code Houston, TX 77057	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 05/19/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keller, Albert <hr/> Contributor address; City; State; Zip Code Houston, TX 77057	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 05/19/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Knox, Mike <hr/> Contributor address; City; State; Zip Code Houston, TX 77055	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Self
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lee, C.C. <hr/> Contributor address; City; State; Zip Code Houston, TX 77036	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Architect		Employer (See Instructions) STOA Architects

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/15 Rpt: 11/38
2 FILER NAME Mullins Moger, Sandie		3 Filer ID
4 Date 05/19/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Livesay, Dr. John	7 Amount of Contribution (\$) \$500.00
6 Contributor address; City; State; Zip Code Houston, TX 77019		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 06/24/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Locke Lord LLP	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code Dallas, TX 75201		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lockhart, Wilma	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Houston, TX 77077		
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 05/15/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Manske, Christopher	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Katy, TX 77450		
Principal occupation / Job title (See Instructions) Financial Advisor		Employer (See Instructions) Manske Wealth
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martinson, Clark	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Houston, TX 77055		
Principal occupation / Job title (See Instructions) General Manager		Employer (See Instructions) HCID #4

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/15 Rpt: 12/38
2 FILER NAME Mullins Moger, Sandie		3 Filer ID
4 Date 06/30/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCall, Connie	7 Amount of Contribution (\$) \$25.00
6 Contributor address; City; State; Zip Code Houston, TX 77077		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 05/19/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McSpadden, Jim	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Houston, TX 77077		
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) McSpadden Packaging
Date 06/25/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Harvin	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Houston, TX 77019		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moss, Tracey	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Houston, TX 77055		
Principal occupation / Job title (See Instructions) Category Manager		Employer (See Instructions) Occidental Petroleum
Date 05/19/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moss, Tracey	Amount of Contribution (\$) \$150.00
Contributor address; City; State; Zip Code Houston, TX 77057		
Principal occupation / Job title (See Instructions) Category Manager		Employer (See Instructions) Occidental Petroleum

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/15 Rpt: 13/38
2 FILER NAME Mullins Moger, Sandie		3 Filer ID
4 Date 06/15/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mosvold, Paul	7 Amount of Contribution (\$) \$250.00
6 Contributor address; City; State; Zip Code Houston, TX 77077		
8 Principal occupation / Job title (See Instructions) Management		9 Employer (See Instructions) Scandril, Inc.
Date 05/01/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mosvold , Torrey & Diana	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code Houston, TX 77079		
Principal occupation / Job title (See Instructions) Vice President		Employer (See Instructions) Scandril
Date 06/15/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Murray, Marsha	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Houston, TX 77024		
Principal occupation / Job title (See Instructions) President/Owner		Employer (See Instructions) Murray Resources, Ltd.
Date 05/19/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Page, Roy	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Brookshire, TX 77423		
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Noble Energy
Date 05/19/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peterson, L.T. or T.M.	Amount of Contribution (\$) \$300.00
Contributor address; City; State; Zip Code Houston, TX 77224		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 11/15 Rpt: 14/38
2 FILER NAME Mullins Moger, Sandie		3 Filer ID
4 Date 05/19/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pollan, Patrick <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77055	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) Real Estate		9 Employer (See Instructions) Pollan Hausman Real Estate Services, LLC
Date 05/13/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Prince, Carol <hr/> Contributor address; City; State; Zip Code Houston, TX 77024	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Homemaker		Employer (See Instructions) None
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) RPS Klotz Associates Inc. PAC <hr/> Contributor address; City; State; Zip Code Houston, TX 77079	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/01/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rao, CV <hr/> Contributor address; City; State; Zip Code Houston, TX 77055	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) TechOne Center
Date 06/15/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reid, Wallace <hr/> Contributor address; City; State; Zip Code Houston, TX 77077	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Real Estate		Employer (See Instructions) HFF

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 12/15 Rpt: 15/38
2 FILER NAME Mullins Moger, Sandie		3 Filer ID
4 Date 05/19/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reinbolt, Donna and Paul	7 Amount of Contribution (\$) \$250.00
6 Contributor address; City; State; Zip Code Houston, TX 77024		
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 06/01/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roberts, Beverly	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Houston, TX 77079		
Principal occupation / Job title (See Instructions) Retired teacher		Employer (See Instructions) Retired
Date 05/06/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roberts, Beverly	Amount of Contribution (\$) \$50.00
Contributor address; City; State; Zip Code Houston, TX 77079		
Principal occupation / Job title (See Instructions) Retired Teacher		Employer (See Instructions) Retired
Date 04/23/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rowell, Melissa	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Houston, TX 77065		
Principal occupation / Job title (See Instructions) Service Administrator		Employer (See Instructions) Enerflex Energy Systems
Date 05/19/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sadeghpour, Alan	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code Houston, TX 77024		
Principal occupation / Job title (See Instructions) Vice President		Employer (See Instructions) Prozign Architects

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 13/15 Rpt: 16/38
2 FILER NAME Mullins Moger, Sandie		3 Filer ID
4 Date 05/07/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sanders, Joshua <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77027	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) Policy Director		9 Employer (See Instructions) Hall Attorneys, P.C.
Date 06/16/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sherwood, Judy <hr/> Contributor address; City; State; Zip Code Houston, TX 77069	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Designer		Employer (See Instructions) Judith Sherwood Design LLC
Date 05/19/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shoae, Reza and Julie <hr/> Contributor address; City; State; Zip Code Houston, TX 77077	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Engineer, Realtor		Employer (See Instructions) Self
Date 06/18/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Singleton, Maureen <hr/> Contributor address; City; State; Zip Code Houston, TX 77082	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Thompson & Horton LLP
Date 06/12/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Springer, Larry <hr/> Contributor address; City; State; Zip Code New Braunfels, TX 78132	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Public Affairs Counselor		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 14/15 Rpt: 17/38
2 FILER NAME Mullins Moger, Sandie		3 Filer ID
4 Date 06/12/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Steffes, John and Caren <hr/> 6 Contributor address; City; State; Zip Code Katy, TX 77450	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) CPA		9 Employer (See Instructions) BKD, LLP
Date 05/26/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Strachan, Carole <hr/> Contributor address; City; State; Zip Code Houston, TX 77077	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Photography Rep		Employer (See Instructions) Fantich Studio
Date 04/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sullivan, Chris and Colleen <hr/> Contributor address; City; State; Zip Code Houston, TX 77077	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Engineer		Employer (See Instructions) Interface
Date 06/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson & Horton LLP <hr/> Contributor address; City; State; Zip Code Houston, TX 77027	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 06/08/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thornhill, Barbara <hr/> Contributor address; City; State; Zip Code Houston, TX 77006	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 15/15 Rpt: 18/38
2 FILER NAME Mullins Moger, Sandie		3 Filer ID
4 Date 05/19/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Untermeyer, Chase	7 Amount of Contribution (\$) \$250.00
	6 Contributor address; City; State; Zip Code Houston, TX 77024	
8 Principal occupation / Job title (See Instructions) Managing Partner		9 Employer (See Instructions) Qatus Advisors
Date 06/05/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waligura, Eric	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Houston, TX 77024	
Principal occupation / Job title (See Instructions) Principal/Consultant		Employer (See Instructions) Waligura Management
Date 05/21/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waligura, Eric	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Houston, TX 77024	
Principal occupation / Job title (See Instructions) Principal/Consultant		Employer (See Instructions) Waligura Management
Date 05/19/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wall, Mary	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Houston, TX 77082	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 06/16/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Welch, Matt	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Austin, TX 78735	
Principal occupation / Job title (See Instructions) Consultant		Employer (See Instructions) Self-employed

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: Sch: 1/1 Rpt: 19/38	
2 FILER NAME Mullins Moger, Sandie		3 Filer ID	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$	
5 Date 05/28/2015	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keller, Bert <hr/> 7 Contributor address; City; State; Zip Code Houston, TX 77024	8 Amount of contribution (\$) \$500.00	9 In-kind contribution description Advertising for Memorial Club <hr/> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Principal		11 Employer (FOR NON-JUDICIAL) (See instructions) ALK Interests, Inc.	
12 Contributor's principal occupation (FOR JUDICIAL)		13 Contributor's job title (FOR JUDICIAL) (See instructions)	
14 Contributor's employer/law firm (FOR JUDICIAL)		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			
Date 04/02/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moger, Charlie <hr/> Contributor address; City; State; Zip Code Houston, TX 77077	Amount of contribution (\$) \$1,050.00	In-kind contribution description Campaign Video <hr/> <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Owner		Employer (FOR NON-JUDICIAL) (See instructions) Moger Media, Inc.	
Contributor's principal occupation (FOR JUDICIAL)		Contributor's job title (FOR JUDICIAL) (See instructions)	
Contributor's employer/law firm (FOR JUDICIAL)		Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/18 Rpt: 20/38	2 FILER NAME Mullins Moger, Sandie	3 Filer ID
4 Date 06/01/2015	5 Payee name ABCcommunications	
6 Amount (\$) \$300.00	7 Payee address; City; State; Zip Code 9600 Glenfield Court Houston, TX 77096	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Field Staff
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/01/2015	Payee name Beavers Media	
Amount (\$) \$525.00	Payee address; City; State; Zip Code 8925 Briar Forest Dr. Houston, TX 77024	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Public Relations
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/30/2015	Payee name Carrabba's	
Amount (\$) \$850.00	Payee address; City; State; Zip Code 1399 S. Voss Rd. Houston, TX 77057	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Event Food and Beverage
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 2/18 Rpt: 21/38	2 FILER NAME Mullins Moger, Sandie	3 Filer ID
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4 Date 04/18/2015	5 Payee name Ciro's Italian Grill
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6 Amount (\$) \$500.00	7 Payee address; City; State; Zip Code 9755 Katy Freeway Houston, TX 77024
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Event Food and Beverage
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 05/19/2015	Payee name Ciro's Italian Grill
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Amount (\$) \$195.00	Payee address; City; State; Zip Code 9755 Katy Freeway Houston, TX 77024
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Event Food and Beverage
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 05/11/2015	Payee name Colon & Company
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Amount (\$) \$2,500.00	Payee address; City; State; Zip Code 3311 Richmond Avenue Houston, TX 77098
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Services
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 3/18 Rpt: 22/38		2 FILER NAME Mullins Moger, Sandie		3 Filer ID	
4 Date 05/19/2015		5 Payee name LTL Photography			
6 Amount (\$) \$243.56		7 Payee address; City; State; Zip Code 1707 Nance St. Houston, TX 77020			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Event Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Event Photography	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 06/24/2015		Payee name Leonetti Graphics, Inc.			
Amount (\$) \$337.74		Payee address; City; State; Zip Code 3635 Glenn Lakes Lane Missouri City, TX 77459			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Advertising Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign T-Shirts	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 06/30/2015		Payee name Piryx			
Amount (\$) \$39.80		Payee address; City; State; Zip Code 580 Howard Street #402 San Francisco, CA 94105			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Accounting/Banking		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign credit card processing fees	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 4/18 Rpt: 23/38	2 FILER NAME Mullins Moger, Sandie	3 Filer ID
4 Date 06/30/2015	5 Payee name Piryx	
6 Amount (\$) \$8.20	7 Payee address; City; State; Zip Code 580 Howard Street #402 San Francisco, CA 94105	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign credit card processing fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate/Officeholder name	Office sought Office held
Date 06/30/2015	Payee name Piryx	
Amount (\$) \$8.20	Payee address; City; State; Zip Code 580 Howard Street #402 San Francisco, CA 94105	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign credit card processing fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate/Officeholder name	Office sought Office held
Date 06/30/2015	Payee name Piryx	
Amount (\$) \$8.20	Payee address; City; State; Zip Code 580 Howard Street #402 San Francisco, CA 94105	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign credit card processing fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate/Officeholder name	Office sought Office held
Date 06/30/2015	Payee name Piryx	
Amount (\$) \$8.20	Payee address; City; State; Zip Code 580 Howard Street #402 San Francisco, CA 94105	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign credit card processing fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 5/18 Rpt: 24/38	2 FILER NAME Mullins Moger, Sandie	3 Filer ID
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4 Date 06/30/2015	5 Payee name Piryx
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6 Amount (\$) \$8.20	7 Payee address; City; State; Zip Code 580 Howard Street #402 San Francisco, CA 94105
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Credit Card Processing Fees
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 06/30/2015	Payee name Piryx
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Amount (\$) \$2.28	Payee address; City; State; Zip Code 580 Howard Street #402 San Francisco, CA 94105
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Credit Card Processing Fees
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 06/30/2015	Payee name Piryx
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Amount (\$) \$2.28	Payee address; City; State; Zip Code 580 Howard Street #402 San Francisco, CA 94105
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Credit Card Processing Fees
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 6/18 Rpt: 25/38	2 FILER NAME Mullins Moger, Sandie	3 Filer ID
4 Date 06/30/2015	5 Payee name Piryx	
6 Amount (\$) \$4.25	7 Payee address; City; State; Zip Code 580 Howard Street #402 San Francisco, CA 94105	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Credit Card Processing Fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate/Officeholder name	Office sought
		Office held
Date 06/28/2015	Payee name Piryx	
Amount (\$) \$8.20	Payee address; City; State; Zip Code 580 Howard Street #402 San Francisco, CA 94105	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Credit Card Processing Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate/Officeholder name	Office sought
		Office held
Date 06/18/2015	Payee name Piryx	
Amount (\$) \$8.20	Payee address; City; State; Zip Code 580 Howard Street #402 San Francisco, CA 94105	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Credit Card Processing Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
	Candidate/Officeholder name	Office sought
		Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 7/18 Rpt: 26/38	2 FILER NAME Mullins Moger, Sandie	3 Filer ID
4 Date 06/16/2015	5 Payee name Piryx	
6 Amount (\$) \$4.25	7 Payee address; City; State; Zip Code 580 Howard Street #402 San Francisco, CA 94105	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Credit Card Processing Fees
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
Date 06/16/2015	Payee name Piryx	
Amount (\$) \$8.20	Payee address; City; State; Zip Code 580 Howard Street #402 San Francisco, CA 94105	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Credit Card Processing Fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office held
Date 06/15/2015	Payee name Piryx	
Amount (\$) \$2.28	Payee address; City; State; Zip Code 580 Howard Street #402 San Francisco, CA 94105	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Credit Card Processing Fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 8/18 Rpt: 27/38	2 FILER NAME Mullins Moger, Sandie	3 Filer ID
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4 Date 06/15/2015	5 Payee name Piryx
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6 Amount (\$) \$20.05	7 Payee address; City; State; Zip Code 580 Howard Street #402 San Francisco, CA 94105
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas, Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Credit Card Processing Fees
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 06/15/2015	Payee name Piryx
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Amount (\$) \$20.05	Payee address; City; State; Zip Code 580 Howard Street #402 San Francisco, CA 94105
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas, Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Credit Card Processing Fees
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 06/15/2015	Payee name Piryx
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Amount (\$) \$8.20	Payee address; City; State; Zip Code 580 Howard Street #402 San Francisco, CA 94105
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas, Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Credit Card Processing Fees
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 9/18 Rpt: 28/38	2 FILER NAME Mullins Moger, Sandie	3 Filer ID
4 Date 06/13/2015	5 Payee name Piryx	
6 Amount (\$) \$20.05	7 Payee address; City; State; Zip Code 580 Howard Street #402 San Francisco, CA 94105	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Credit Card Processing Fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/12/2015	Payee name Piryx	
Amount (\$) \$8.20	Payee address; City; State; Zip Code 580 Howard Street #402 San Francisco, CA 94105	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Credit Card Processing Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/13/2015	Payee name Piryx	
Amount (\$) \$8.20	Payee address; City; State; Zip Code 580 Howard Street #402 San Francisco, CA 94105	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Credit Card Processing Fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 10/18 Rpt: 29/38	2 FILER NAME Mullins Moger, Sandie	3 Filer ID
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4 Date 06/10/2015	5 Payee name Piryx
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6 Amount (\$) \$8.20	7 Payee address; City; State; Zip Code 580 Howard Street #402 San Francisco, CA 94105
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Credit Card Processing Fees
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 06/08/2015	Payee name Piryx
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Amount (\$) \$8.20	Payee address; City; State; Zip Code 580 Howard Street #402 San Francisco, CA 94105
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Credit Card Processing Fees
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 06/08/2015	Payee name Piryx
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Amount (\$) \$8.20	Payee address; City; State; Zip Code 580 Howard Street #402 San Francisco, CA 94105
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Credit Card Processing Fees
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 11/18 Rpt: 30/38		2 FILER NAME Mullins Moger, Sandie		3 Filer ID	
4 Date 06/05/2015		5 Payee name Piryx			
6 Amount (\$) \$1.09		7 Payee address; City; State; Zip Code 580 Howard Street #402 San Francisco, CA 94105			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Accounting/Banking		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Credit Card Processing Fees	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 05/29/2015		Payee name Piryx			
Amount (\$) \$4.25		Payee address; City; State; Zip Code 580 Howard Street #402 San Francisco, CA 94105			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Accounting/Banking		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Credit Card Processing Fees	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 05/26/2015		Payee name Piryx			
Amount (\$) \$8.20		Payee address; City; State; Zip Code 580 Howard Street #402 San Francisco, CA 94105			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Accounting/Banking		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Credit Card Processing Fees	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 12/18 Rpt: 31/38		2 FILER NAME Mullins Moger, Sandie		3 Filer ID	
4 Date 05/21/2015		5 Payee name Piryx			
6 Amount (\$) \$1.09		7 Payee address; City; State; Zip Code 580 Howard Street #402 San Francisco, CA 94105			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Accounting/Banking		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Credit Card Processing Fees	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 05/14/2015		Payee name Piryx			
Amount (\$) \$4.25		Payee address; City; State; Zip Code 580 Howard Street #402 San Francisco, CA 94105			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Accounting/Banking		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Credit Card Processing Fees	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 05/15/2015		Payee name Piryx			
Amount (\$) \$2.28		Payee address; City; State; Zip Code 580 Howard Street #402 San Francisco, CA 94105			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Accounting/Banking		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Credit Card Processing Fees	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 13/18 Rpt: 32/38	2 FILER NAME Mullins Moger, Sandie	3 Filer ID
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4 Date 05/19/2015	5 Payee name Piryx
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6 Amount (\$) \$8.20	7 Payee address; City; State; Zip Code 580 Howard Street #402 San Francisco, CA 94105
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Credit Card Processing Fees
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 05/19/2015	Payee name Piryx
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Amount (\$) \$20.05	Payee address; City; State; Zip Code 580 Howard Street #402 San Francisco, CA 94105
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Credit Card Processing Fees
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 05/19/2015	Payee name Piryx
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Amount (\$) \$8.20	Payee address; City; State; Zip Code 580 Howard Street #402 San Francisco, CA 94105
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Credit Card Processing Fees
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 14/18 Rpt: 33/38		2 FILER NAME Mullins Moger, Sandie		3 Filer ID	
4 Date 06/01/2015		5 Payee name Piryx			
6 Amount (\$) \$8.20		7 Payee address; City; State; Zip Code 580 Howard Street #402 San Francisco, CA 94105			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Accounting/Banking		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Credit Card Processing Fees	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 03/11/2015		Payee name Piryx			
Amount (\$) \$8.20		Payee address; City; State; Zip Code 580 Howard Street #402 San Francisco, CA 94105			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Accounting/Banking		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Credit Card Processing Fees	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 04/01/2015		Payee name Piryx			
Amount (\$) \$8.20		Payee address; City; State; Zip Code 580 Howard Street #402 San Francisco, CA 94105			
PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Accounting/Banking		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Credit Card Processing Fees	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 15/18 Rpt: 34/38	2 FILER NAME Mullins Moger, Sandie	3 Filer ID
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4 Date 04/23/2015	5 Payee name Piryx
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6 Amount (\$) \$2.28	7 Payee address; City; State; Zip Code 580 Howard Street #402 San Francisco, CA 94105
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Credit Card Processing Fees
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 04/30/2015	Payee name Piryx
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Amount (\$) \$4.25	Payee address; City; State; Zip Code 580 Howard Street #402 San Francisco, CA 94105
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Credit Card Processing Fees
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 05/01/2015	Payee name Piryx
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Amount (\$) \$20.05	Payee address; City; State; Zip Code 580 Howard Street #402 San Francisco, CA 94105
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Credit Card Processing Fees
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 16/18 Rpt: 35/38	2 FILER NAME Mullins Moger, Sandie	3 Filer ID
4 Date 05/06/2015	5 Payee name Piryx	
6 Amount (\$) \$39.80	7 Payee address; City; State; Zip Code 580 Howard Street #402 San Francisco, CA 94105	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Credit Card Processing Fees
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/06/2015	Payee name Piryx	
Amount (\$) \$4.25	Payee address; City; State; Zip Code 580 Howard Street #402 San Francisco, CA 94105	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Credit Card Processing Fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 05/07/2015	Payee name Piryx	
Amount (\$) \$39.80	Payee address; City; State; Zip Code 580 Howard Street #402 San Francisco, CA 94105	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Credit Card Processing Fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 17/18 Rpt: 36/38	2 FILER NAME Mullins Moger, Sandie	3 Filer ID
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4 Date 05/13/2015	5 Payee name Piryx
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6 Amount (\$) \$20.05	7 Payee address; City; State; Zip Code 580 Howard Street #402 San Francisco, CA 94105
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Credit Card Processing Fees
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 06/12/2015	Payee name Piryx
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Amount (\$) \$39.80	Payee address; City; State; Zip Code 580 Howard Street #402 San Francisco, CA 94105
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Credit Card Bank Processing Fee
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 06/25/2015	Payee name Piryx
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Amount (\$) \$8.20	Payee address; City; State; Zip Code 580 Howard Street #402 San Francisco, CA 94105
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Credit Card Bank Processing Fee
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 18/18 Rpt: 37/38	2 FILER NAME Mullins Moger, Sandie	3 Filer ID
4 Date 06/01/2015	5 Payee name Piryx	
6 Amount (\$) \$4.25	7 Payee address; City; State; Zip Code 580 Howard Street #402 San Francisco, CA 94105	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Credit Card Processing Fee
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/29/2015	Payee name Raconteur Media Company	
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code 101 W. 6th Street Suite 613 Austin, TX 78701	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Web Advertising
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 03/05/2015	Payee name Vici Media	
Amount (\$) \$162.38	Payee address; City; State; Zip Code 816 Big Woods Rd. Longview, TX 75605	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign website
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: Sch: 1/1 Rpt: 38/38	2 FILER NAME Mullins Moger, Sandie	3 Filer ID
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4 Date 05/06/2015	5 Payee name ABCommunications
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6 Amount (\$) \$300.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code 9600 Glenfield Court Houston, TX 77096
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Field Staff
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 04/08/2015	Payee name ABCommunications
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Amount (\$) \$300.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 9600 Glenfield Court Houston, TX 77096
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Field Staff
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 05/03/2015	Payee name Vici Media
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Amount (\$) \$162.38 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 816 Big Woods Rd. Longview, TX 75605
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign website
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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