

CORRECTION/AMENDMENT AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

FORM JCOR-C/OH

1 Filer ID (Ethics Commission Filers) 00020591		2 Total pages filed: 107		OFFICE USE ONLY	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR The Honorable	FIRST Eric V.	MI MI	ELECTRONICALLY FILED 01/23/2016	
	NICKNAME	LAST Moye	SUFFIX		
4 ORIGINAL REPORT TYPE	<input checked="" type="checkbox"/> January 15	<input type="checkbox"/> Runoff	<input type="checkbox"/> Other (specify)		
	<input type="checkbox"/> July 15	<input type="checkbox"/> Exceeded modified reporting limit _____			
	<input type="checkbox"/> 30th day before election	<input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)			
	<input type="checkbox"/> 8th day before election	<input type="checkbox"/> Final Report (Attach C/OH-FR)			
	Date Hand-delivered or Date Postmarked				
Receipt #			Amount		
Date Processed					
Date Imaged					
5 ORIGINAL PERIOD COVERED		Month Day Year 07/01/2015	THROUGH	Month Day Year 12/31/2015	

6 EXPLANATION OF CORRECTION

This correction is for the sole purpose of reporting on Form F4 the individual credit card charges that were made using an American Express credit card after September 1, 2015.

When the Semiannual Report was filed on January 15, 2016, only the lump sum payments to American Express were included in the Report (not the individual credit card charges). After the original filing was submitted, it came to our attention that, starting on September 1, 2015, all credit card charges needed to be itemized on Form F4. Therefore, we are simply making this correction so that the individual charges are reported.

7 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that this corrected report is true and correct.

Check the box next to any and all applicable statements:

Semiannual reports: I swear, or affirm that the original report was made in good faith and without an intent to mislead or to misrepresent the information contained in the report.

Other reports: I swear, or affirm, that I am filing this corrected report not later than the 14th business day after the date I learned that the report as originally filed is inaccurate or incomplete. I swear, or affirm, that any error or omission in the report as originally filed was made in good faith.

The Honorable Eric V. Moye

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

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

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

**Remember To Attach Any Part Of The Campaign Finance Report Form
Needed To Report And Explain Corrections**

JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

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

The JC/OH Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00020591	2 Total pages filed: 107	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR The Honorable	FIRST Eric V.	MI	OFFICE USE ONLY Date Received ELECTRONICALLY FILED 01/23/2016
	NICKNAME 	LAST Moye	SUFFIX	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY;		ZIP CODE	Date Hand-delivered or Date Postmarked
	REDACTED PER 254.0313, GOV'T CODE			Receipt #
				Amount
				Date Processed
			Date Imaged	
5 CAMPAIGN TREASURER NAME	MS / MRS / MR Mr.	FIRST Thomas	MI	
	NICKNAME Tom	LAST Melsheimer	SUFFIX	
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE);		APT / SUITE #;	CITY; STATE; ZIP CODE
	REDACTED PER 254.0313, GOV'T CODE			
7 CAMPAIGN TREASURER PHONE	AREA CODE (214)	PHONE NUMBER 292-4077	EXTENSION	
8 REPORT TYPE	<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)			
	<input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded modified reporting limit <input type="checkbox"/> Final Report (Attach C/OH-FR)			
9 PERIOD COVERED	Month Day Year 07/01/2015	THROUGH	Month Day Year 12/31/2015	
10 ELECTION	ELECTION DATE Month Day Year 11/08/2016		ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input checked="" type="checkbox"/> General <input type="checkbox"/> Special	
11 OFFICE	OFFICE HELD (if any) District Judge District 14 Dallas		12 OFFICE SOUGHT (if known) District Judge	

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JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH
COVER SHEET PG 2

3 of 107

13 C / OH NAME Moye, Eric V. (The Honorable) **14** Filer ID (Ethics Commission Filers)
00020591

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

Additional Pages

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

16 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$	0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	66,260.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICAL EXPENDITURES	\$	84,240.25
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	114,147.01
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	0.00

17 AFFIDAVIT

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

The Honorable Eric V. Moye

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

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

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

SUBTOTALS - JC/OH

18 FILER NAME Moye, Eric V. (The Honorable)	19 Filer ID (Ethics Commission Filers) 00020591
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20 SCHEDULE SUBTOTALS		SUBTOTAL AMOUNT
NAME OF SCHEDULE		
1.	<input checked="" type="checkbox"/> SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)	\$ 66,260.00
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)	\$
4.	<input type="checkbox"/> SCHEDULE E(J): LOANS (JUDICIAL)	\$
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 72,154.97
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 F4: EXPENDITURES MADE BY CREDIT CARD	\$ 12,085.28
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
12.	<input checked="" type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$ 491.48

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 1/51 Rpt: 5/107
2 FILER NAME Moye, Eric V. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020591
4 Date 09/02/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adler, Jim S. (Mr.)	7 Amount of Contribution (\$) \$1,000.00
	6 Contributor address; City; State; Zip Code Houston, TX 77027	
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm Jim S. Adler PC		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 10/31/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Albert, Craig (Mr.)	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Dallas, TX 75229	
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Cherry Petersen Landry Albert LLP		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 08/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Albert, Craig (Mr.)	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Dallas, TX 75229	
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Cherry Petersen Landry Albert LLP		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 2/51 Rpt: 6/107
2 FILER NAME Moye, Eric V. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020591
4 Date 07/01/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Albert, Craig (Mr.)	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code Dallas, TX 75229	
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm Cherry Petersen Landry Albert LLP		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 09/24/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aldous, Steven (Mr.)	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Dallas, TX 75201	
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Forshey & Prostok		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 09/23/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Anderson Tobin, PLLC	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Dallas, TX 75240	
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 3/51 Rpt: 7/107
2 FILER NAME Moye, Eric V. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020591
4 Date 09/20/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arnett II, James R. (Mr.)	7 Amount of Contribution (\$) \$500.00
	6 Contributor address; City; State; Zip Code Dallas, TX 75218	
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm Carter Scholer Arnett Hamada & Mockler		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 09/23/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ashby, Anne (Ms.)	Amount of Contribution (\$) \$200.00
	Contributor address; City; State; Zip Code Dallas, TX 75230	
Contributor's Principal Occupation Lawyer		Contributor's Job Title Lawyer
Contributor's employer/law firm Self		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 07/01/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Banno, Tamara L. (Ms.)	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Dallas, TX 75219	
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Freese & Goss		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 4/51 Rpt: 8/107
2 FILER NAME Moye, Eric V. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020591
4 Date 09/23/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baron, Lisa (Ms.)	7 Amount of Contribution (\$) \$1,000.00
	6 Contributor address; City; State; Zip Code Dallas, TX 75225	
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm Baron and Blue		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 09/23/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barron, Thomas C. (Mr.)	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Dallas, TX 75214	
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm The Law Offices of Thomas C. Barron		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 09/23/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bishop & Hummert	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Dallas, TX 75206	
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 5/51 Rpt: 9/107
2 FILER NAME Moye, Eric V. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020591
4 Date 11/10/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Black, Tre' (Mr.)	7 Amount of Contribution (\$) \$250.00
	6 Contributor address; City; State; Zip Code Dallas, TX 75211	
8 Contributor's Principal Occupation Investment		9 Contributor's Job Title President
10 Contributor's employer/law firm On-Target Supplies & Logistics		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 09/23/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blackwell, Tom (Mr.)	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Dallas, TX 75225	
Contributor's Principal Occupation Self		Contributor's Job Title Precinct Chair
Contributor's employer/law firm Self		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 09/21/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blankenship, Bill (Mr.)	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Dallas, TX 75225	
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Self		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 6/51 Rpt: 10/107
2 FILER NAME Moye, Eric V. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020591
4 Date 09/17/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blenden Law Firm <hr/> 6 Contributor address; City; State; Zip Code Bedford, TX 76021	7 Amount of Contribution (\$) \$100.00
8 Contributor's Principal Occupation		9 Contributor's Job Title
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 11/16/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bonesio, W. Michael (Mr.) <hr/> Contributor address; City; State; Zip Code Rockwall, TX 75087	Amount of Contribution (\$) \$250.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Self		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 11/11/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bradley, Susan (Ms.) <hr/> Contributor address; City; State; Zip Code Irving, TX 75062	Amount of Contribution (\$) \$250.00
Contributor's Principal Occupation Accounting		Contributor's Job Title Accounting
Contributor's employer/law firm The Dallas Morning News		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 7/51 Rpt: 11/107
2 FILER NAME Moye, Eric V. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020591
4 Date 08/27/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bradley, Susan (Ms.)	7 Amount of Contribution (\$) \$1,000.00
	6 Contributor address; City; State; Zip Code Irving, TX 75062	
8 Contributor's Principal Occupation Accounting		9 Contributor's Job Title Accounting
10 Contributor's employer/law firm The Dallas Morning News		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 08/20/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Branson P.C., Frank (Mr.)	Amount of Contribution (\$) \$2,500.00
	Contributor address; City; State; Zip Code Dallas, TX 75205	
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm The Law Offices of Frank L. Branson		Law firm of contributor's spouse (if any) Law Offices of Frank L. Branson
If contributor is a child, law firm of parent(s) (if any)		
Date 11/19/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brender, Art (Mr.)	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Ft. Worth, TX 76103	
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Self		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 8/51 Rpt: 12/107
2 FILER NAME Moye, Eric V. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020591
4 Date 09/02/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brogdon, Quentin D. (Mr.)	7 Amount of Contribution (\$) \$500.00
	6 Contributor address; City; State; Zip Code Dallas, TX 75225	
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm Crane Lewis Brogdon, LLP		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 09/23/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bunn, Nichol (Ms.)	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Dallas, TX 75223	
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Lewis Brisbois		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 09/23/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cannon, Cathlynn H. (Ms.)	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Plano, TX 75093	
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Wilson Elser		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 9/51 Rpt: 13/107
2 FILER NAME Moye, Eric V. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020591
4 Date 11/05/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Childers, Jonathan (Mr.)	7 Amount of Contribution (\$) \$250.00
	6 Contributor address; City; State; Zip Code Dallas, TX 75209	
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm Gruber Hurst Elrod Johansen		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 09/16/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Childers, Jonathan (Mr.)	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Dallas, TX 75209	
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm gruber Hurst Elrod Johansen Hail Shank LLP		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 10/27/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ckark, Collen (Mr.)	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Dallas, TX 75219	
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm The Clark Firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 10/51 Rpt: 14/107
2 FILER NAME Moye, Eric V. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020591
4 Date 10/30/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clayton, Taj (Mr.)	7 Amount of Contribution (\$) \$75.00
	6 Contributor address; City; State; Zip Code DeSoto, TX 75115	
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm Fish & Richardson PC		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 09/08/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coleman, Robert W. (Mr.)	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Dallas, TX 75214	
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Wilson Elser		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 09/03/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Collins, John E. (Mr.)	Amount of Contribution (\$) \$150.00
	Contributor address; City; State; Zip Code Dallas, TX 75204	
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Attorney		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 11/51 Rpt: 15/107
2 FILER NAME Moye, Eric V. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020591
4 Date 09/09/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Conlon, Mary Elizabeth (Ms.)	7 Amount of Contribution (\$) \$250.00
	6 Contributor address; City; State; Zip Code Dallas, TX 75205	
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm The Conlon Law Firm, P.C.		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 11/05/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cox, Trey (Mr.)	Amount of Contribution (\$) \$3,500.00
	Contributor address; City; State; Zip Code Dallas, TX 75225	
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Lynn Tillotson Pinker & Cox		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 09/23/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crain Lewis LLP	Amount of Contribution (\$) \$1,500.00
	Contributor address; City; State; Zip Code Dallas, TX 75204	
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 12/51 Rpt: 16/107
2 FILER NAME Moye, Eric V. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020591
4 Date 09/23/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Creuzot, John (Mr.)	7 Amount of Contribution (\$) \$250.00
	6 Contributor address; City; State; Zip Code Dallas, TX 75218	
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm The Creuzot Law Firm PLLC		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 07/01/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Creuzot, John (Mr.)	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Dallas, TX 75218	
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Self		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 07/01/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Davis, Amy E. (Ms.)	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Austin, TX 78703	
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Christiansen Davis LLC		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 13/51 Rpt: 17/107
2 FILER NAME Moye, Eric V. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020591
4 Date 08/31/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DeLorme, John Thomas (Mr.)	7 Amount of Contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code Irving, TX 75039	
8 Contributor's Principal Occupation Information requested		9 Contributor's Job Title Information requested
10 Contributor's employer/law firm TWC		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 11/18/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Donovan, Carol (Ms.)	Amount of Contribution (\$) \$150.00
	Contributor address; City; State; Zip Code Dallas, TX 75214	
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Carol Crabtree Donovan, PC		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 07/01/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Donovan, Carol (Ms.)	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Dallas, TX 75214	
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Carol Crabtree Donovan, PC		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 14/51 Rpt: 18/107
2 FILER NAME Moye, Eric V. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020591
4 Date 09/17/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eberstein & Witherite, L.L.P. <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75205	7 Amount of Contribution (\$) \$1,000.00
8 Contributor's Principal Occupation		9 Contributor's Job Title
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 11/25/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellis, Al (Mr.) <hr/> Contributor address; City; State; Zip Code Dallas, TX 75219	Amount of Contribution (\$) \$100.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Sommerman & Quesada, L.L.P.		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 09/23/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellis, Al (Mr.) <hr/> Contributor address; City; State; Zip Code Dallas, TX 75219	Amount of Contribution (\$) \$200.00
Contributor's Principal Occupation Attorney		Contributor's Job Title
Contributor's employer/law firm Sommerman & Quesada, LLP		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 15/51 Rpt: 19/107
2 FILER NAME Moye, Eric V. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020591
4 Date 07/23/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellis, Al (Mr.)	7 Amount of Contribution (\$) \$250.00
	6 Contributor address; City; State; Zip Code Dallas, TX 75219	
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm Sommerman & Quesada, LLP		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 11/10/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) English, Jay C. (Mr.)	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Dallas, TX 75251	
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm English Law Group, PLLC		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 11/04/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ewing, J. Darlene (Ms.)	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Sunnyvale, TX 75182	
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Self		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 16/51 Rpt: 20/107
2 FILER NAME Moye, Eric V. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020591
4 Date 10/08/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ferrer, Jesse (Mr.)	7 Amount of Contribution (\$) \$500.00
	6 Contributor address; City; State; Zip Code Dallas, TX 75219	
8 Contributor's Principal Occupation Lawyer		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm Ferrer Poirot Wansbrough		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 10/28/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fisk Firm, P.C.	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Dallas, TX 75207	
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 10/08/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fisk Firm, P.C.	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Dallas, TX 75207	
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 17/51 Rpt: 21/107
2 FILER NAME Moye, Eric V. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020591
4 Date 07/01/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fitzgerald, Karen (Ms.)	7 Amount of Contribution (\$) \$250.00
	6 Contributor address; City; State; Zip Code Dallas, TX 75226	
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm Kleiman Lawrence Baskind Fitzgerald		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 11/18/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Flint, Bruce (Mr.)	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Texarkana, TX 75503	
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Flint & Soyars		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 09/08/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Floyd, Deborah M. (Mr.)	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Richardson, TX 75080	
Contributor's Principal Occupation Retired		Contributor's Job Title Retired
Contributor's employer/law firm Retired		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 18/51 Rpt: 22/107
2 FILER NAME Moye, Eric V. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020591
4 Date 09/16/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Domingo (Mr.)	7 Amount of Contribution (\$) \$1,000.00
	6 Contributor address; City; State; Zip Code Dallas, TX 75208	
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm Self		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 09/17/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gilbert Mediation, P.C.	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Dallas, TX 75243	
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 11/06/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Godwin Lewis	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Dallas, TX 75270	
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 19/51 Rpt: 23/107
2 FILER NAME Moye, Eric V. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020591
4 Date 12/07/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goggin, Kay (Ms.)	7 Amount of Contribution (\$) \$250.00
	6 Contributor address; City; State; Zip Code Dallas, TX 75230	
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm Goggin Law Firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 11/16/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gray Reed & McGraw PC	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Dallas, TX 75201	
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 10/28/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Guerrero, Roxane M. (Ms.)	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Dallas, TX 75218	
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Guerrero Law Office		Law firm of contributor's spouse (if any) Rolle, Breeland Law Firm
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 20/51 Rpt: 24/107
2 FILER NAME Moye, Eric V. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020591
4 Date 09/17/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hall, Craig (Mr.)	7 Amount of Contribution (\$) \$1,000.00
6 Contributor address; City; State; Zip Code Frisco, TX 75034		
8 Contributor's Principal Occupation Real Estate Developer		9 Contributor's Job Title Developer
10 Contributor's employer/law firm Self		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 09/17/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hallett & Perrin PC	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code Dallas, TX 75201		
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 07/01/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hallett & Perrin, PC	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code Dallas, TX 75205		
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 21/51 Rpt: 25/107
2 FILER NAME Moye, Eric V. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020591
4 Date 10/24/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hansen, J. Mark (Mr.)	7 Amount of Contribution (\$) \$250.00
	6 Contributor address; City; State; Zip Code Fairview, TX 75069	
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm State Farm Ins.		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 09/21/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haynes and Boone	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Dallas, TX 75219	
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 09/21/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hemphill, Robert D. (Mr.)	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Dallas, TX 75206	
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Palmer & Manuel, L.L.P.		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 22/51 Rpt: 26/107
2 FILER NAME Moye, Eric V. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020591
4 Date 12/08/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Herz, Jill (Ms.)	7 Amount of Contribution (\$) \$1,000.00
6 Contributor address; City; State; Zip Code Dallas, TX 75202		
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm Self		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 11/03/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hill, Glenwood (Mr.)	Amount of Contribution (\$) \$75.00
Contributor address; City; State; Zip Code Dallas, TX 75229		
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Bracewell & giuliani LLP		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 09/17/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hindman, Michael (Mr.)	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code Dallas, TX 75248		
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Dallas		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 23/51 Rpt: 27/107
2 FILER NAME Moye, Eric V. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020591
4 Date 09/17/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hindman, Michael (Mr.)	7 Amount of Contribution (\$) \$250.00
	6 Contributor address; City; State; Zip Code Dallas, TX 75248	
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm Rolle Breeland Law Firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 09/23/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hoyt, Karen (Ms.)	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Dallas, TX 75214	
Contributor's Principal Occupation Retired		Contributor's Job Title Retired
Contributor's employer/law firm Retired		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 09/04/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hurt, Marilyn (Ms.)	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Dallas, TX 75081	
Contributor's Principal Occupation N/A		Contributor's Job Title N/A
Contributor's employer/law firm Retired		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 24/51 Rpt: 28/107
2 FILER NAME Moye, Eric V. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020591
4 Date 10/30/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jaramillo P.C., Richard (Mr.)	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code Dallas, TX 75202	
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm Self		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 09/17/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jeang, Wei Wei (Ms.)	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Plano, TX 75094	
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Grable Martin Fulton PLLC		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 09/23/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Ralph (Mr.)	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Dallas, TX 75205	
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Self		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 25/51 Rpt: 29/107
2 FILER NAME Moye, Eric V. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020591
4 Date 11/11/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) K&L Gates LLP	7 Amount of Contribution (\$) \$1,000.00
	6 Contributor address; City; State; Zip Code Dallas, TX 75201	
8 Contributor's Principal Occupation		9 Contributor's Job Title
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 09/16/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kane Russell Coleman Logan	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Dallas, TX 75201	
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 11/05/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kastl, Kristina (Ms.)	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Dallas, TX 75204	
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Kastle Law PC		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 26/51 Rpt: 30/107
2 FILER NAME Moye, Eric V. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020591
4 Date 08/31/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kent, David C. (Mr.)	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code Dallas, TX 75243	
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm Sedgewick		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 07/01/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kleiman, David (Mr.)	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Dallas, TX 75230	
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Kleiman Lawrence Baskind Fitzgerald LLP		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 11/03/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Knight Jr., Richard (Mr.)	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Dallas, TX 75232	
Contributor's Principal Occupation Contractor		Contributor's Job Title Contractor
Contributor's employer/law firm Pegasus Texas Construction LP		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 27/51 Rpt: 31/107
2 FILER NAME Moye, Eric V. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020591
4 Date 09/23/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Law Office of Don T. O'Bannon <hr/> 6 Contributor address; City; State; Zip Code Cedar Hill, TX 75104	7 Amount of Contribution (\$) \$100.00
8 Contributor's Principal Occupation		9 Contributor's Job Title
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 09/23/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Law Office of Scott Chase <hr/> Contributor address; City; State; Zip Code Dallas, TX 75201	Amount of Contribution (\$) \$50.00
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 11/09/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Law Offices of John C. Sherwood <hr/> Contributor address; City; State; Zip Code Dallas, TX 75201	Amount of Contribution (\$) \$100.00
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 28/51 Rpt: 32/107
2 FILER NAME Moye, Eric V. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020591
4 Date 09/23/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Law Offices of Sean R. Cox 6 Contributor address; City; State; Zip Code Dallas, TX 75313	7 Amount of Contribution (\$) \$50.00
8 Contributor's Principal Occupation		9 Contributor's Job Title
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 07/01/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leatherbury, Thomas (Mr.) Contributor address; City; State; Zip Code Dallas, TX 75220	Amount of Contribution (\$) \$300.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Vinson & Elkins LLP		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 11/10/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lenahan, Marc (Mr.) Contributor address; City; State; Zip Code Dallas, TX 75234	Amount of Contribution (\$) \$1,000.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Lenahan Law, PLLC		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 29/51 Rpt: 33/107
2 FILER NAME Moye, Eric V. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020591
4 Date 07/20/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lenahan, Marc C. (Mr.)	7 Amount of Contribution (\$) \$1,000.00
	6 Contributor address; City; State; Zip Code Dallas, TX 75019	
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm Lenahan Law, P.L.L.C.		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 11/10/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lidji, Scott (Mr.)	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Dallas, TX 75248	
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm The Lidji Firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 09/21/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lidji, Scott (Mr.)	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Dallas, TX 75248	
Contributor's Principal Occupation Attorney		Contributor's Job Title President
Contributor's employer/law firm The LIDJI Firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 30/51 Rpt: 34/107
2 FILER NAME Moye, Eric V. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020591
4 Date 10/25/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lowy, Martin (Mr.)	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code Dallas, TX 75218	
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm Burdin Mediations		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 07/01/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Luna, Christopher (Mr.)	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Dallas, TX 75313	
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm MetroPCS		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 07/02/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lyon, Gorsky, Haring, Gilbert & Livingston, LLP	Amount of Contribution (\$) \$200.00
	Contributor address; City; State; Zip Code Dallas, TX 75204	
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 31/51 Rpt: 35/107
2 FILER NAME Moye, Eric V. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020591
4 Date 09/24/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Madrid, Jay (Mr.)	7 Amount of Contribution (\$) \$500.00
	6 Contributor address; City; State; Zip Code Dallas, TX 75231	
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm Winstead PC		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 08/28/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mandel, Roger L. (Mr.)	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Dallas, TX 75219	
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Lackey Hershman, L.L.P.		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 09/17/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maricela Moore Law PLLC	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Dallas, TX 75204	
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

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SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 32/51 Rpt: 36/107
2 FILER NAME Moye, Eric V. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020591
4 Date 07/02/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martin, Ben C. (Mr.)	7 Amount of Contribution (\$) \$1,000.00
	6 Contributor address; City; State; Zip Code Dallas, TX 75209	
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm Law Offices of Ben C. Martin		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 09/23/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCathern, PLLC	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Dallas, TX 75219	
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 11/04/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McClinton, Marguerite (Ms.)	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Dallas, TX 75201	
Contributor's Principal Occupation Consultant		Contributor's Job Title CEO
Contributor's employer/law firm Self		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 33/51 Rpt: 37/107
2 FILER NAME Moye, Eric V. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020591
4 Date 11/17/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCown, Jim (Mr.)	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code Dallas, TX 75205	
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm Nesbitt, Vassar & McCown, L.L.P.		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 09/23/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McLarty Pope LLP	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Dallas, TX 75204	
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 09/16/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mitchell Goff & Mitchell L.L.P.	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Dallas, TX 75231	
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

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SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 34/51 Rpt: 38/107
2 FILER NAME Moye, Eric V. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020591
4 Date 11/18/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Modjarrad & Associates PC	7 Amount of Contribution (\$) \$1,000.00
6 Contributor address; City; State; Zip Code Dallas, TX 75080		
8 Contributor's Principal Occupation		9 Contributor's Job Title
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 12/07/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Modjarrad & Associates PC	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code Dallas, TX 75080		
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 10/01/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Modjarrad & Associates PC	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code Dallas, TX 75080		
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

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SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 35/51 Rpt: 39/107
2 FILER NAME Moye, Eric V. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020591
4 Date 08/06/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Modjarrad & Associates PC	7 Amount of Contribution (\$) \$500.00
6 Contributor address; City; State; Zip Code Richardson, TX 75080		
8 Contributor's Principal Occupation		9 Contributor's Job Title
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 11/25/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Alison (Ms.)	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Dallas, TX 75214		
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Thompson Coe		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 10/30/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moorehead, Audrey (Ms.)	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Dallas, TX 75232		
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm MoLaw		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

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2 FILER NAME Moye, Eric V. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020591
4 Date 11/30/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Norton Rose Fulbright US LLP Texas Committee <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 77010	7 Amount of Contribution (\$) \$500.00
8 Contributor's Principal Occupation		9 Contributor's Job Title
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 11/02/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nowell, Erin (Ms.) <hr/> Contributor address; City; State; Zip Code Dallas, TX 75249	Amount of Contribution (\$) \$150.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Simon Greenstone Panatier Bartlett		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 09/23/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nowell, Erin (Ms.) <hr/> Contributor address; City; State; Zip Code Dallas, TX 75249	Amount of Contribution (\$) \$150.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Simon Greenstone Panatier Bartlett		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 37/51 Rpt: 41/107
2 FILER NAME Moye, Eric V. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020591
4 Date 10/24/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Orenstein, Rosa (Ms.)	7 Amount of Contribution (\$) \$250.00
	6 Contributor address; City; State; Zip Code Duncanville, TX 75137	
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm Orenstein Law Group		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 09/17/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parker, W. Bradley (Mr.)	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Bedford, TX 76021	
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Parker Law Firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 07/01/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pearl, Stacey (Ms.)	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Arlington, TX 76017	
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Queenan Law Firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

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SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 38/51 Rpt: 42/107
2 FILER NAME Moye, Eric V. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020591
4 Date 09/23/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Potasznik, Joel (Mr.)	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code Dallas, TX 75214	
8 Contributor's Principal Occupation Retired		9 Contributor's Job Title Retired
10 Contributor's employer/law firm Retired		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 09/23/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Raggio, Grier (Mr.)	Amount of Contribution (\$) \$200.00
	Contributor address; City; State; Zip Code Dallas, TX 75205	
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Raggio & Raggio		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 09/01/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rasansky, Jeffrey (Mr.)	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Dallas, TX 75201	
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Rasansky Law Firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

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SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 39/51 Rpt: 43/107
2 FILER NAME Moye, Eric V. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020591
4 Date 09/23/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Renneker, Robert H. (Mr.)	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code Dallas, TX 75214		
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm Self		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 10/26/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Richard, Scott (Mr.)	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code Bedford, TX 76021		
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Self		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 08/31/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Richard, Scott (Mr.)	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code Bedford, TX 76021		
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Self		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

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SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 40/51 Rpt: 44/107
2 FILER NAME Moye, Eric V. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020591
4 Date 09/21/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rubarts, Bobby Mark (Mr.)	7 Amount of Contribution (\$) \$1,000.00
6 Contributor address; City; State; Zip Code Dallas, TX 75229		
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm Koning Rubarts LLP		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 11/17/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sanford, Brian P. (Mr.)	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code Dallas, TX 75201		
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm The Sanford Firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 09/02/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schenkel, Pete (Mr.)	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code Dallas, TX 75204		
Contributor's Principal Occupation Executive		Contributor's Job Title Retired
Contributor's employer/law firm Retired		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

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SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 41/51 Rpt: 45/107
2 FILER NAME Moye, Eric V. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020591
4 Date 09/26/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schorr Law Firm PC <hr/> 6 Contributor address; City; State; Zip Code Garland, TX 75043	7 Amount of Contribution (\$) \$250.00
8 Contributor's Principal Occupation		9 Contributor's Job Title
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 09/21/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Settlepou <hr/> Contributor address; City; State; Zip Code Dallas, TX 75219	Amount of Contribution (\$) \$500.00
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 09/23/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shipp, John B. (Mr.) <hr/> Contributor address; City; State; Zip Code Dallas, TX 75231	Amount of Contribution (\$) \$250.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Attorney		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

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SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 42/51 Rpt: 46/107
2 FILER NAME Moye, Eric V. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020591
4 Date 07/01/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shor, Frank (Mr.)	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code Farmers Branch, TX 75234	
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm Law Office of Frank Shor		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 09/16/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Simon Greenstone Panatier Bartlett, PC	Amount of Contribution (\$) \$2,500.00
	Contributor address; City; State; Zip Code Dallas, TX 75204	
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 07/02/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sims, Amber (Ms.)	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Dallas, TX 75204	
Contributor's Principal Occupation Community Engagement		Contributor's Job Title Consultant
Contributor's employer/law firm LIFT		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

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SCHEDULE A(J)1

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2 FILER NAME Moye, Eric V. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020591
4 Date 09/08/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Slim, Jules (Mr.)	7 Amount of Contribution (\$) \$500.00
	6 Contributor address; City; State; Zip Code Irving, TX 75014	
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm Self		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 11/16/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Solis, Charisse (Ms.)	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Richardson, TX 75081	
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm MAS Law Firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 07/07/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sorrels, Barry (Mr.)	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Dallas, TX 75201	
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Sorrels, Udashen & Anton		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

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SCHEDULE A(J)1

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2 FILER NAME Moye, Eric V. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020591
4 Date 09/07/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stephenson, Thomas Lee (Mr.)	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code Dallas, TX 75206	
8 Contributor's Principal Occupation Writer		9 Contributor's Job Title Writer
10 Contributor's employer/law firm Self		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 09/23/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stilwell, John (Mr.)	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Plano, TX 75093	
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Self		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 09/09/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stodghill, Steve (Mr.)	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Dallas, TX 75229	
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Fish & Richardson PC		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

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2 FILER NAME Moye, Eric V. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020591
4 Date 11/17/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stradley, Mark (Mr.)	7 Amount of Contribution (\$) \$50.00
6 Contributor address; City; State; Zip Code Dallas, TX 75243		
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm The Stradley Law Firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 09/04/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) The Ashmore Law Firm, PC	Amount of Contribution (\$) \$300.00
Contributor address; City; State; Zip Code Dallas, TX 75219		
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 09/23/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) The Cochran Firm-Dallas, PLLC	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code Dallas, TX 75204		
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 46/51 Rpt: 50/107
2 FILER NAME Moye, Eric V. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020591
4 Date 07/22/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson & Knight PAC <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75201	7 Amount of Contribution (\$) \$500.00
8 Contributor's Principal Occupation		9 Contributor's Job Title
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 11/03/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Toles, William (Mr.) <hr/> Contributor address; City; State; Zip Code Dallas, TX 75254	Amount of Contribution (\$) \$500.00
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Fee, Smith, Sharp & Vitullo		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 09/23/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Travis Law Group <hr/> Contributor address; City; State; Zip Code Dallas, TX 75240	Amount of Contribution (\$) \$200.00
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 47/51 Rpt: 51/107
2 FILER NAME Moye, Eric V. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020591
4 Date 09/23/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vaught, Allen (Mr.)	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code Dallas, TX 75214		
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm Baron & Budd, P.C.		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 08/12/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walker, James W. (Mr.)	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Coppell, TX 75019		
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Cole Schotz PC		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 09/21/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wall Jr., John E. (Mr.)	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code Dallas, TX 75206		
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Self		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 48/51 Rpt: 52/107
2 FILER NAME Moye, Eric V. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020591
4 Date 07/01/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wall Jr., John E. (Mr.)	7 Amount of Contribution (\$) \$500.00
6 Contributor address; City; State; Zip Code Dallas, TX 75206		
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm Self		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 09/24/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walton, Victoria (Ms.)	Amount of Contribution (\$) \$25.00
Contributor address; City; State; Zip Code Dallas, TX 75376		
Contributor's Principal Occupation Local Land Courier		Contributor's Job Title President
Contributor's employer/law firm K B Services		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 07/01/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weaver, Joshua (Mr.)	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code Dallas, TX 75231		
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Weaver & Weaver, PLLC		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 49/51 Rpt: 53/107
2 FILER NAME Moye, Eric V. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020591
4 Date 09/16/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weitzman, Herbert D. (Mr.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Dallas, TX 75201	
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm Kessler Collins		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 09/22/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) White & Wiggins	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Dallas, TX 75202	
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 07/01/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Tamra (Ms.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Dallas, TX 75088	
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Law Office of Tamra Williams, P.C.		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 50/51 Rpt: 54/107
2 FILER NAME Moye, Eric V. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020591
4 Date 09/23/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Elisabeth A. (Ms.)	7 Amount of Contribution (\$) \$250.00
	6 Contributor address; City; State; Zip Code Dallas, TX 75206	
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm Winstead PC		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 11/03/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilson, Russell (Mr.)	Amount of Contribution (\$) \$150.00
	Contributor address; City; State; Zip Code Dallas, TX 75201	
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Self		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 10/14/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zambrano, Angela (Ms.)	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Dallas, TX 75205	
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Sidley Austin LLP		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 51/51 Rpt: 55/107
2 FILER NAME Moye, Eric V. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020591
4 Date 09/23/2015	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zamorano, Wanda (Ms.)	7 Amount of Contribution (\$) \$20.00
	6 Contributor address; City; State; Zip Code Irving, TX 75063	
8 Contributor's Principal Occupation Retired		9 Contributor's Job Title Retired
10 Contributor's employer/law firm Retired		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 09/02/2015	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zopolsky, Joseph (Mr.)	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Dallas, TX 75218	
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Glast, Phillips & Murray, P.C.		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/20 Rpt: 56/107	2 FILER NAME Moye, Eric V. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020591
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4 Date 10/22/2015	5 Payee name Alpha Merit Committee Group
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6 Amount (\$) \$125.00	7 Payee address; City; State; Zip Code P.O. Box 153123 Dallas, TX 75315
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Alpha Phi Alpha Scholarship Program ad
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
---------------------------------------------------------------------	-----------------------------	---------------	-------------

Date 10/22/2015	Payee name Alpha Merit Committee Group
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Amount (\$) \$75.00	Payee address; City; State; Zip Code P.O. Box 153123 Dallas, TX 75315
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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 Admission Ticket to Scholarship Gala
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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 07/06/2015	Payee name AmVets Post Riders #23
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Amount (\$) \$100.00	Payee address; City; State; Zip Code 5002 Billindsay Road Seagoville, TX 75159
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution
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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	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By -	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 2/20 Rpt: 57/107	2 FILER NAME Moye, Eric V. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020591
4 Date 12/04/2015	5 Payee name American Express	
6 Amount (\$) \$2,065.11	7 Payee address; City; State; Zip Code P.O. Box 650448 Dallas, TX 75265	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Payment	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Meals with supporters & colleagues, office supplies, subscriptions, travel for Texas Center Judiciar
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/07/2015	Payee name American Express	
Amount (\$) \$2,642.00	Payee address; City; State; Zip Code P.O. Box 650448 Dallas, TX 75265	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Payment	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Meals & entertainment with supporters & colleagues, subscriptions, office supplies
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/09/2015	Payee name American Express	
Amount (\$) \$3,181.70	Payee address; City; State; Zip Code P.O. Box 650448 Dallas, TX 75265	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Payment	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Meals & entertainment with supporters & colleagues, supplies
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 3/20 Rpt: 58/107	2 FILER NAME Moye, Eric V. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020591
4 Date 09/09/2015	5 Payee name American Express	
6 Amount (\$) \$4,548.06	7 Payee address; City; State; Zip Code P.O. Box 650448 Dallas, TX 75265	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Payment	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Meals & entertainment with supporters and colleagues, office supplies, travel for judicial
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/10/2015	Payee name American Express	
Amount (\$) \$5,399.98	Payee address; City; State; Zip Code P.O. Box 650448 Dallas, TX 75265	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Payment	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Meals & entertainment with supporters & colleagues, office supplies, judicial travel for meetings
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/15/2015	Payee name American Express	
Amount (\$) \$3,169.14	Payee address; City; State; Zip Code P.O. Box 650448 Dallas, TX 75265	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Payment	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Meals & entertainment with supporters & colleagues, office supplies, travel for judicial meetings
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 4/20 Rpt: 59/107	2 FILER NAME Moye, Eric V. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020591
4 Date 07/07/2015	5 Payee name American Institute for Justice	
6 Amount (\$) \$1,300.00	7 Payee address; City; State; Zip Code P.O. Box 5 University, MS 38677-0005	
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 Attend Judicial Conference
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/23/2015	Payee name Cole, Erica (Ms.)	
Amount (\$) \$150.00	Payee address; City; State; Zip Code 9246 Forest Hills Blvd. Dallas, TX 75218	
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 Assistance at fundraiser
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/22/2015	Payee name Dallas County Democratic Party	
Amount (\$) \$2,500.00	Payee address; City; State; Zip Code 4209 Parry Ave. Dallas, TX 75223	
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 Sponsorship of Jefferson Jackson Dinner
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 5/20 Rpt: 60/107	2 FILER NAME Moye, Eric V. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020591
4 Date 08/21/2015	5 Payee name Dallas County Democratic Party	
6 Amount (\$) \$20.00	7 Payee address; City; State; Zip Code 4209 Parry Ave. Dallas, TX 75223	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Labor Day Slide advertising
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/13/2015	Payee name Dallas County Democratic Party	
Amount (\$) \$2,500.00	Payee address; City; State; Zip Code 4209 Parry Ave. Dallas, TX 75223	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Filing fee for candidacy
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/18/2015	Payee name Dallas Hispanic Bar Association	
Amount (\$) \$250.00	Payee address; City; State; Zip Code 2101 Ross Ave. Dallas, TX 75201	
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 Sponsorship of 2015 Amanecer Luncheon
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 6/20 Rpt: 61/107	2 FILER NAME Moye, Eric V. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020591
4 Date 09/16/2015	5 Payee name Democracy Toolbox	
6 Amount (\$) \$10,300.00	7 Payee address; City; State; Zip Code 405 Rice Street McKinney, TX 75069	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/22/2015	Payee name Democracy Toolbox	
Amount (\$) \$830.00	Payee address; City; State; Zip Code 405 Rice Street McKinney, TX 75069	
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 Consulting
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/22/2015	Payee name Democracy Toolbox	
Amount (\$) \$60.00	Payee address; City; State; Zip Code 405 Rice Street McKinney, TX 75069	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Loan Repayment/Reimbursement	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Reimbursement for 2 tickets to 2015 AFL-CIO Dallas Labor Day Breakfast, 1408 N. Washington, Dallas
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 7/20 Rpt: 62/107	2 FILER NAME Moye, Eric V. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020591
4 Date 11/17/2015	5 Payee name Democracy Toolbox	
6 Amount (\$) \$1,600.00	7 Payee address; City; State; Zip Code 405 Rice Street McKinney, TX 75069	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense yard sign distribution; social media advertising; KwanzaaFest 2015 booth; supplies for 2 events
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/08/2015	Payee name Democracy Toolbox	
Amount (\$) \$500.00	Payee address; City; State; Zip Code 405 Rice Street McKinney, TX 75069	
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 Round two of yardsign program
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/17/2015	Payee name Democracy Toolbox	
Amount (\$) \$9,000.00	Payee address; City; State; Zip Code 405 Rice Street McKinney, TX 75069	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign consulting
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 8/20 Rpt: 63/107	2 FILER NAME Moye, Eric V. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020591
4 Date 12/04/2015	5 Payee name Fisher, Phil (Mr.)	
6 Amount (\$) \$500.00	7 Payee address; City; State; Zip Code Address Requested Dallas, TX 75202	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Consulting
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/22/2015	Payee name Good Street Baptist Church	
Amount (\$) \$150.00	Payee address; City; State; Zip Code 3110 Bonnie View Rd. Dallas, TX 75216	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Ad in program
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/15/2015	Payee name Graham, Rebekah (Ms.)	
Amount (\$) \$500.00	Payee address; City; State; Zip Code 1717 Main Street, Suite 5000 Dallas, TX 75201	
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 Assistance with TEC reporting
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 9/20 Rpt: 64/107	2 FILER NAME Moye, Eric V. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020591
4 Date 08/26/2015	5 Payee name Graham, Rebekah (Ms.)	
6 Amount (\$) \$500.00	7 Payee address; City; State; Zip Code 1717 Main Street, Suite 5000 Dallas, TX 75201	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense For lists and labels
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/23/2015	Payee name Graham, Rebekah (Ms.)	
Amount (\$) \$75.00	Payee address; City; State; Zip Code 1717 Main Street, Suite 5000 Dallas, TX 75201	
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 Fundraiser assistance
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/17/2015	Payee name Graham, Rebekah (Ms.)	
Amount (\$) \$75.00	Payee address; City; State; Zip Code 1717 Main Street, Suite 5000 Dallas, TX 75201	
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 Assistance at event
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 10/20 Rpt:	2 FILER NAME Moye, Eric V. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020591
4 Date 11/22/2015	5 Payee name Graham, Rebekah (Ms.)	
6 Amount (\$) \$500.00	7 Payee address; City; State; Zip Code 1717 Main Street, Suite 5000 Dallas, TX 75201	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Prepare spreadsheets and listings
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/31/2015	Payee name J.L. Turner Legal Assoc. Foundation	
Amount (\$) \$250.00	Payee address; City; State; Zip Code P.O. Box 134002 Dallas, TX 75313	
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 Sponsor table at annual Scholarship Luncheon
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/22/2015	Payee name J.L. Turner Legal Assoc. Foundation	
Amount (\$) \$3,000.00	Payee address; City; State; Zip Code P.O. Box 134002 Dallas, TX 75313	
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 Judicial Sponsor of the Foundation Scholarship Banquet
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 11/20 Rpt:	2 FILER NAME Moye, Eric V. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020591
4 Date 10/22/2015	5 Payee name J.L. Turner Legal Assoc. Foundation	
6 Amount (\$) \$250.00	7 Payee address; City; State; Zip Code P.O. Box 134002 Dallas, TX 75313	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contribution to Judicial Scholarship
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/31/2015	Payee name Moye, Eric	
Amount (\$) \$735.00	Payee address; City; State; Zip Code 1717 Main St., Suite 5001, LB 17 Dallas, TX 75201	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Reimbursement for food/beverage with supporters
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/10/2015	Payee name Moye, Eric	
Amount (\$) \$200.00	Payee address; City; State; Zip Code 1717 Main St., Suite 5001, LB 17 Dallas, TX 75201	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Reimbursement for out of pocket cash contribution to Operation Community Care for school supplies
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 12/20 Rpt:	2 FILER NAME Moye, Eric V. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020591
4 Date 08/21/2015	5 Payee name NAACP Garland	
6 Amount (\$) \$125.00	7 Payee address; City; State; Zip Code 713 Austin St. Garland, TX 75040	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Advertising in program
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/15/2015	Payee name NAACP Irving	
Amount (\$) \$125.00	Payee address; City; State; Zip Code P.O. Box 166253 Irving, TX 75016	
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 Advertising
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/22/2015	Payee name North Texas Asian Democrats	
Amount (\$) \$500.00	Payee address; City; State; Zip Code 7511 Bradford Pear Drive Irving, TX 75063	
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 Sponsorship
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 13/20 Rpt:	2 FILER NAME Moye, Eric V. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020591
4 Date 12/31/2015	5 Payee name Plasso	
6 Amount (\$) \$1,363.00	7 Payee address; City; State; Zip Code 3180 18th Street San Francisco, CA 94110	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card fees for online contributions from 7/01/15 - 12-31-15
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/02/2015	Payee name Preston Hollow Democrats	
Amount (\$) \$300.00	Payee address; City; State; Zip Code P.O. Box 59062 Dallas, TX 75229	
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 Holiday event sponsor
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/11/2015	Payee name Reilly Echols Printing, Inc.	
Amount (\$) \$1,244.88	Payee address; City; State; Zip Code P.O. Box 152358 Dallas, TX 75315	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing 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 Printing campaign materials
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 14/20 Rpt:	2 FILER NAME Moye, Eric V. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020591
4 Date 08/28/2015	5 Payee name Reilly Echols Printing, Inc.	
6 Amount (\$) \$1,212.40	7 Payee address; City; State; Zip Code P.O. Box 152358 Dallas, TX 75315	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing 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 For printing campaign materials
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/09/2015	Payee name Reilly Echols Printing, Inc.	
Amount (\$) \$1,136.63	Payee address; City; State; Zip Code P.O. Box 152358 Dallas, TX 75315	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing 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 Printing expense for campaign materials
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/06/2015	Payee name Smith, Craig (Judge)	
Amount (\$) \$50.00	Payee address; City; State; Zip Code 1717 Main Street, Suite 5001, LB 17 Dallas, TX 75201	
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 Reimburse for judicial photo
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1	Total pages Schedule F1: Sch: 15/20 Rpt:	2	FILER NAME Moye, Eric V. (The Honorable)	3	Filer ID (Ethics Commission Filers) 00020591
4	Date 12/04/2015	5	Payee name Steele, Barbara (Ms.)		
6	Amount (\$) \$500.00	7	Payee address; City; State; Zip Code 1924 Lanark Ave. Dallas, TX 75203		
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign consulting		
9		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 12/18/2015		Payee name Steele, Barbara (Ms.)		
	Amount (\$) \$1,000.00		Payee address; City; State; Zip Code 1924 Lanark Ave. Dallas, TX 75203		
	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 outreach and consulting services		
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
	Date 12/18/2015		Payee name Steele, Barbara (Ms.)		
	Amount (\$) \$100.00		Payee address; City; State; Zip Code 1924 Lanark Ave. Dallas, TX 75203		
	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 Full page ad in C.A.W. Clark Legal Clinic 26th Anniversary Program		
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 16/20 Rpt:	2 FILER NAME Moye, Eric V. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020591
4 Date 08/27/2015	5 Payee name Stonewall Democrats of Dallas	
6 Amount (\$) \$1,000.00	7 Payee address; City; State; Zip Code P.O. Box 192305 Dallas, TX 75219	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Event advertising
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/11/2015	Payee name The Order Desk	
Amount (\$) \$1,386.00	Payee address; City; State; Zip Code 2910 Canton St. Dallas, TX 75226	
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 Mailing of campaign materials
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/28/2015	Payee name The Order Desk	
Amount (\$) \$757.96	Payee address; City; State; Zip Code 2910 Canton St. Dallas, TX 75226	
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 Mailing of campaign materials
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 17/20 Rpt:	2 FILER NAME Moye, Eric V. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020591
4 Date 10/22/2015	5 Payee name The Order Desk	
6 Amount (\$) \$773.61	7 Payee address; City; State; Zip Code 2910 Canton St. Dallas, TX 75226	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing 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 Mailing campaign materials
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/09/2015	Payee name The Order Desk	
Amount (\$) \$1,717.50	Payee address; City; State; Zip Code 2910 Canton St. Dallas, TX 75226	
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 Postage and event mailing
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/22/2015	Payee name The Potter's House	
Amount (\$) \$1,250.00	Payee address; City; State; Zip Code 6777 West Kiest Blvd. Dallas, TX 75236	
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 MegaFest advertising
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 18/20 Rpt:	2 FILER NAME Moye, Eric V. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020591
4 Date 08/28/2015	5 Payee name Tony Grimes Photography	
6 Amount (\$) \$250.00	7 Payee address; City; State; Zip Code P.O. Box 166176 Irving, TX 75016	
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 Photoshoot for event
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/10/2015	Payee name TransFirst	
Amount (\$) \$52.00	Payee address; City; State; Zip Code 3131 S. Vaughn Way, Suite 350 Aurora, CO 80014	
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 service fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/10/2015	Payee name TransFirst	
Amount (\$) \$52.00	Payee address; City; State; Zip Code 3131 S. Vaughn Way, Suite 350 Aurora, CO 80014	
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 service fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 19/20 Rpt:	2 FILER NAME Moye, Eric V. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020591
4 Date 09/10/2015	5 Payee name TransFirst	
6 Amount (\$) \$52.00	7 Payee address; City; State; Zip Code 3131 S. Vaughn Way, Suite 350 Aurora, CO 80014	
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 service fees
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/13/2015	Payee name TransFirst	
Amount (\$) \$52.00	Payee address; City; State; Zip Code 3131 S. Vaughn Way, Suite 350 Aurora, CO 80014	
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 service fees
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/10/2015	Payee name TransFirst	
Amount (\$) \$52.00	Payee address; City; State; Zip Code 3131 S. Vaughn Way, Suite 350 Aurora, CO 80014	
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 service 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 | 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 |
| Credit Card Payment | 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: 20/20 Rpt:	2 FILER NAME Moye, Eric V. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020591
4 Date 12/10/2015	5 Payee name TransFirst	
6 Amount (\$) \$52.00	7 Payee address; City; State; Zip Code 3131 S. Vaughn Way, Suite 350 Aurora, CO 80014	
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 service fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
		Office held

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1	Total pages Schedule F4: Sch: 1/31 Rpt: 76/107	2	FILER NAME Moye, Eric V. (The Honorable)	3	Filer ID (Ethics Commission Filers) 00020591
4	CREDIT CARD ISSUER	Name of financial institution		5	TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6	PAYMENT	(a) Amount Charged \$250.00	(b) Date of Charge 09/02/2015	(c) Date(s) Credit Card Issuer Paid	
7	PAYEE	(a) Payee name Dallas Democratic Forum		(b) Payee address; City, State, Zip Code 4209 Parry Ave. Dallas, TX 75223	
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(b) Description Membership	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
6	PAYMENT	(a) Amount Charged \$209.00	(b) Date of Charge 09/03/2015	(c) Date(s) Credit Card Issuer Paid	
7	PAYEE	(a) Payee name Inthenewsonline.com		(b) Payee address; City, State, Zip Code 8517 Sunstate St. Tampa, FL 33634	
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(b) Description Framed article for Jury Room	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
		Candidate/Officeholder name		Office sought	Office held
6	PAYMENT	(a) Amount Charged \$77.98	(b) Date of Charge 09/07/2015	(c) Date(s) Credit Card Issuer Paid	
7	PAYEE	(a) Payee name La Calle Doce		(b) Payee address; City, State, Zip Code 1925 Skillman St. Dallas, TX 75206	
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(b) Description Food/beverage for meal with judicial colleagues	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
		Candidate/Officeholder name		Office sought	Office held

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1	Total pages Schedule F4: Sch: 2/31 Rpt: 77/107	2	FILER NAME Moye, Eric V. (The Honorable)	3	Filer ID (Ethics Commission Filers) 00020591
4	CREDIT CARD ISSUER	Name of financial institution		5	TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6	PAYMENT	(a) Amount Charged \$9.99	(b) Date of Charge 09/09/2015	(c) Date(s) Credit Card Issuer Paid	
7	PAYEE	(a) Payee name Dallas Morning News		(b) Payee address; City, State, Zip Code 508 Young Street Dallas, TX 75202	
8	PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description Subscription	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
6	PAYMENT	(a) Amount Charged \$360.00	(b) Date of Charge 09/14/2015	(c) Date(s) Credit Card Issuer Paid	
7	PAYEE	(a) Payee name PayPal		(b) Payee address; City, State, Zip Code 2221 North First Street San Jose, CA 95131	
8	PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description Business services	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
6	PAYMENT	(a) Amount Charged \$0.99	(b) Date of Charge 09/17/2015	(c) Date(s) Credit Card Issuer Paid	
7	PAYEE	(a) Payee name iTunes.com		(b) Payee address; City, State, Zip Code Online account Online, TX 00000	
8	PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description news subscriprion	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

The Instruction Guide explains how to complete this form.

1	Total pages Schedule F4: Sch: 3/31 Rpt: 78/107	2 FILER NAME Moye, Eric V. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020591
4	CREDIT CARD ISSUER	Name of financial institution	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6	PAYMENT	(a) Amount Charged \$21.64	(b) Date of Charge 09/17/2015
		(c) Date(s) Credit Card Issuer Paid	
7	PAYEE	(a) Payee name iTunes.com	(b) Payee address; City, State, Zip Code Online account Online, TX 00000
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description News subscription
		(c) <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
6	PAYMENT	(a) Amount Charged \$162.36	(b) Date of Charge 09/19/2015
		(c) Date(s) Credit Card Issuer Paid	
7	PAYEE	(a) Payee name Bed Bath & Beyond	(b) Payee address; City, State, Zip Code 8005 Park Lane Dallas, TX 75231
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description Gift for host or re-election reception
		(c) <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
6	PAYMENT	(a) Amount Charged \$841.11	(b) Date of Charge 09/27/2015
		(c) Date(s) Credit Card Issuer Paid	
7	PAYEE	(a) Payee name The Apple Store	(b) Payee address; City, State, Zip Code 3101 Knox St. Dallas, TX 75205
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description Office equipment
		(c) <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1	Total pages Schedule F4: Sch: 4/31 Rpt: 79/107	2	FILER NAME Moye, Eric V. (The Honorable)	3	Filer ID (Ethics Commission Filers) 00020591
4	CREDIT CARD ISSUER	Name of financial institution		5	TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6	PAYMENT	(a) Amount Charged \$5.00	(b) Date of Charge 10/01/2015	(c) Date(s) Credit Card Issuer Paid	
7	PAYEE	(a) Payee name Comerica Bank Tower		(b) Payee address; City, State, Zip Code 1717 Main Street Dallas, TX 75201	
8	PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Event Expense		(b) Description Parking	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
6	PAYMENT	(a) Amount Charged \$24.69	(b) Date of Charge 10/03/2015	(c) Date(s) Credit Card Issuer Paid	
7	PAYEE	(a) Payee name Eatzi's		(b) Payee address; City, State, Zip Code 3403 Oak Lawn Ave. Dallas, TX 75219	
8	PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description Food/beverages with supporters	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
		Candidate/Officeholder name		Office sought	Office held
6	PAYMENT	(a) Amount Charged \$62.13	(b) Date of Charge 10/12/2015	(c) Date(s) Credit Card Issuer Paid	
7	PAYEE	(a) Payee name Del Frisco's Grille		(b) Payee address; City, State, Zip Code 3232 McKinney Ave. Dallas, TX 75204	
8	PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description Meal with SMU African American Alumni Director	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
		Candidate/Officeholder name		Office sought	Office held

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 5/31 Rpt: 80/107		2 FILER NAME Moye, Eric V. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020591	
4 CREDIT CARD ISSUER		Name of financial institution		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$	
6 PAYMENT		(a) Amount Charged \$21.64	(b) Date of Charge 10/17/2015	(c) Date(s) Credit Card Issuer Paid	
7 PAYEE		(a) Payee name iTunes.com		(b) Payee address; City, State, Zip Code Online account Online, TX 00000	
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description Newspaper and magazine subscription	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
PAYMENT		(a) Amount Charged \$519.16	(b) Date of Charge 10/27/2015	(c) Date(s) Credit Card Issuer Paid	
PAYEE		(a) Payee name The Crescent Club		(b) Payee address; City, State, Zip Code 200 Crescent Court Dallas, TX 75201	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description Meal with former Court interns	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
PAYMENT		(a) Amount Charged \$15.07	(b) Date of Charge 11/04/2015	(c) Date(s) Credit Card Issuer Paid	
PAYEE		(a) Payee name FedEx		(b) Payee address; City, State, Zip Code 1999 Bryan St., Suite 149 Dallas, TX 75201	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description delivery charges	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 6/31 Rpt: 81/107	2 FILER NAME Moye, Eric V. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020591
4 CREDIT CARD ISSUER	Name of financial institution		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$9.99	(b) Date of Charge 11/10/2015	(c) Date(s) Credit Card Issuer Paid
7 PAYEE	(a) Payee name Dallas Morning News	(b) Payee address; City, State, Zip Code 508 Young Street Dallas, TX 75202	
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description Subscription
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held
PAYMENT	(a) Amount Charged \$116.44	(b) Date of Charge 12/06/2015	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name Hyatt Regency Lost Pines	(b) Payee address; City, State, Zip Code 575 Hyatt Lost Pines Road Cedar Creek, TX 78612	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Travel expenses to college for new judges
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held
PAYMENT	(a) Amount Charged \$5.65	(b) Date of Charge 12/08/2015	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name Exxonmobil	(b) Payee address; City, State, Zip Code 2061 TX-71 Cedar Creek, TX 78612	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Travel expenses for new judges college
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 7/31 Rpt: 82/107	2 FILER NAME Moye, Eric V. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020591
4 CREDIT CARD ISSUER	Name of financial institution	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$274.24	(b) Date of Charge 12/09/2015
7 PAYEE	(a) Payee name Hertz Car Rental	(c) Date(s) Credit Card Issuer Paid
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel Out of District (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	(b) Description Travel expenses for college for new judges <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
PAYMENT	(a) Amount Charged \$560.61	(b) Date of Charge 10/12/2015
PAYEE	(a) Payee name Saint Rocco's Restaurant	(c) Date(s) Credit Card Issuer Paid
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	(b) Description Meal with supporters <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
PAYMENT	(a) Amount Charged \$2.14	(b) Date of Charge 09/15/2015
PAYEE	(a) Payee name iTunes.com	(c) Date(s) Credit Card Issuer Paid
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	(b) Description news and magazine subscription <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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 F4: Sch: 8/31 Rpt: 83/107	2	FILER NAME Moye, Eric V. (The Honorable)	3	Filer ID (Ethics Commission Filers) 00020591
4	CREDIT CARD ISSUER	Name of financial institution		5	TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6	PAYMENT	(a) Amount Charged \$654.87	(b) Date of Charge 10/03/2015	(c) Date(s) Credit Card Issuer Paid	
7	PAYEE	(a) Payee name Cabelas Outfitters		(b) Payee address; City, State, Zip Code 1 Cabela Dr. Allen, TX 75002	
8	PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description office security equipment	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
6	PAYMENT	(a) Amount Charged \$0.99	(b) Date of Charge 10/17/2015	(c) Date(s) Credit Card Issuer Paid	
7	PAYEE	(a) Payee name iTunes.com		(b) Payee address; City, State, Zip Code Online account Online, TX 00000	
8	PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description news magazine subscription	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
6	PAYMENT	(a) Amount Charged \$77.93	(b) Date of Charge 11/02/2015	(c) Date(s) Credit Card Issuer Paid	
7	PAYEE	(a) Payee name Siegels		(b) Payee address; City, State, Zip Code 3209 N. Fitzhugh Dallas, TX 75204	
8	PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description Beverages for meal with supporters	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 9/31 Rpt: 84/107		2 FILER NAME Moye, Eric V. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020591	
4 CREDIT CARD ISSUER		Name of financial institution		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$	
6 PAYMENT		(a) Amount Charged \$16.83	(b) Date of Charge 11/07/2015	(c) Date(s) Credit Card Issuer Paid	
7 PAYEE		(a) Payee name FedEx		(b) Payee address; City, State, Zip Code 1999 Bryan St., Suite 149 Dallas, TX 75201	
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description Delivery services	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
				Office held	
PAYMENT		(a) Amount Charged \$0.99	(b) Date of Charge 11/17/2015	(c) Date(s) Credit Card Issuer Paid	
PAYEE		(a) Payee name iTunes.com		(b) Payee address; City, State, Zip Code Online account Online, TX 00000	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description subscription	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
				Office held	
PAYMENT		(a) Amount Charged \$172.33	(b) Date of Charge 11/23/2015	(c) Date(s) Credit Card Issuer Paid	
PAYEE		(a) Payee name The Crescent Club		(b) Payee address; City, State, Zip Code 200 Crescent Court Dallas, TX 75201	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description Meal with supporter; club dues	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
				Office held	

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1	Total pages Schedule F4: Sch: 10/31 Rpt:	2	FILER NAME Moye, Eric V. (The Honorable)	3	Filer ID (Ethics Commission Filers) 00020591
4	CREDIT CARD ISSUER	Name of financial institution		5	TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6	PAYMENT	(a) Amount Charged \$20.00	(b) Date of Charge 11/25/2015	(c) Date(s) Credit Card Issuer Paid	
7	PAYEE	(a) Payee name Babb Bros. BBQ		(b) Payee address; City, State, Zip Code 3015 Gulden Lane Dallas, TX 75212	
8	PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description Meal with Judge Craig Smith	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
6	PAYMENT	(a) Amount Charged \$409.96	(b) Date of Charge 11/30/2015	(c) Date(s) Credit Card Issuer Paid	
7	PAYEE	(a) Payee name Southwest Airlines		(b) Payee address; City, State, Zip Code Dallas Love Field Dallas, TX 75235	
8	PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Airfare to Austin to attend Judiciary meeting	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
		Candidate/Officeholder name		Office sought	Office held
6	PAYMENT	(a) Amount Charged \$100.00	(b) Date of Charge 12/01/2015	(c) Date(s) Credit Card Issuer Paid	
7	PAYEE	(a) Payee name Dallas Regional Chamber		(b) Payee address; City, State, Zip Code 500 N. Akard St., #2600 Dallas, TX 75201	
8	PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description membership dues	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
		Candidate/Officeholder name		Office sought	Office held

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 11/31 Rpt:		2 FILER NAME Moye, Eric V. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020591	
4 CREDIT CARD ISSUER		Name of financial institution		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$	
6 PAYMENT		(a) Amount Charged \$116.89	(b) Date of Charge 12/03/2015	(c) Date(s) Credit Card Issuer Paid	
7 PAYEE		(a) Payee name Target City Place		(b) Payee address; City, State, Zip Code 2417 N. Haskell Ave. Dallas, TX 75204	
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b) Description Blankets for blanket drive	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
				Office held	
PAYMENT		(a) Amount Charged \$42.38	(b) Date of Charge 12/06/2015	(c) Date(s) Credit Card Issuer Paid	
PAYEE		(a) Payee name Uber		(b) Payee address; City, State, Zip Code 507 Calles St. Austin, TX 78702	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Travel expenses for college for new judges	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
				Office held	
PAYMENT		(a) Amount Charged \$45.23	(b) Date of Charge 12/08/2015	(c) Date(s) Credit Card Issuer Paid	
PAYEE		(a) Payee name Rudy's Country Store & BBQ		(b) Payee address; City, State, Zip Code 2451 S. Capital of Texas Hwy. Austin, TX 78746	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description Travel expenses for college for new judges	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
				Office held	

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1	Total pages Schedule F4: Sch: 12/31 Rpt:	2	FILER NAME Moye, Eric V. (The Honorable)	3	Filer ID (Ethics Commission Filers) 00020591
4	CREDIT CARD ISSUER	Name of financial institution		5	TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6	PAYMENT	(a) Amount Charged \$6.48	(b) Date of Charge 09/03/2015	(c) Date(s) Credit Card Issuer Paid	
7	PAYEE	(a) Payee name iTunes.com		(b) Payee address; City, State, Zip Code Online account Online, TX 00000	
8	PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Subscription		(b) Description Subscription purchased from iTunes - no physical address to report	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
6	PAYMENT	(a) Amount Charged \$108.23	(b) Date of Charge 09/07/2015	(c) Date(s) Credit Card Issuer Paid	
7	PAYEE	(a) Payee name Dallas Fine Wine & Spirits		(b) Payee address; City, State, Zip Code 3518 Oak Lawn Ave. Dallas, TX 75219	
8	PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description Food/drink for meal with judicial colleagues	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
		Candidate/Officeholder name		Office sought	Office held
6	PAYMENT	(a) Amount Charged \$31.98	(b) Date of Charge 09/07/2015	(c) Date(s) Credit Card Issuer Paid	
7	PAYEE	(a) Payee name Eatzis's		(b) Payee address; City, State, Zip Code 3403 Oak Lawn Ave. Dallas, TX 75219	
8	PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description Food/beverage for meal with judicial colleagues	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
		Candidate/Officeholder name		Office sought	Office held

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 13/31 Rpt:	2 FILER NAME Moye, Eric V. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020591
4 CREDIT CARD ISSUER	Name of financial institution		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$19.99	(b) Date of Charge 09/15/2015	(c) Date(s) Credit Card Issuer Paid
7 PAYEE	(a) Payee name Yahoo	(b) Payee address; City, State, Zip Code online company online company, TX 00000	
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description Yahoo mail and telecom services - online company - no physical mailing address
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held
PAYMENT	(a) Amount Charged \$164.73	(b) Date of Charge 10/03/2015	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name Saint Rocco's Restaurant	(b) Payee address; City, State, Zip Code 3011 Gulden Lane Dallas, TX 75212	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description Food/beverage with supporters
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held
PAYMENT	(a) Amount Charged \$294.10	(b) Date of Charge 10/08/2015	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name SER Steak & Spirits	(b) Payee address; City, State, Zip Code 2201 N. Stemmons Fwy. Dallas, TX 75207	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description Meal with SMU African American Alumni Directors
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1	Total pages Schedule F4: Sch: 14/31 Rpt:	2	FILER NAME Moye, Eric V. (The Honorable)	3	Filer ID (Ethics Commission Filers) 00020591
4	CREDIT CARD ISSUER	Name of financial institution		5	TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6	PAYMENT	(a) Amount Charged \$140.71	(b) Date of Charge 10/10/2015	(c) Date(s) Credit Card Issuer Paid	
7	PAYEE	(a) Payee name Dallas Fine Wine & Spirits		(b) Payee address; City, State, Zip Code 3518 Oak Lawn Ave. Dallas, TX 75219	
8	PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description Food/beverages with supporters	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
6	PAYMENT	(a) Amount Charged \$250.00	(b) Date of Charge 10/20/2015	(c) Date(s) Credit Card Issuer Paid	
7	PAYEE	(a) Payee name St. Philip's School and		(b) Payee address; City, State, Zip Code 1600 Pennsylvania Ave. Dallas, TX 75215	
8	PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b) Description Charitable contribution to attend event to benefit school	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
		Candidate/Officeholder name		Office sought	Office held
6	PAYMENT	(a) Amount Charged \$80.50	(b) Date of Charge 11/04/2015	(c) Date(s) Credit Card Issuer Paid	
7	PAYEE	(a) Payee name Louie's		(b) Payee address; City, State, Zip Code 1839 N. Henderson Ave. Dallas, TX 75206	
8	PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description Food/beverages with supporter	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
		Candidate/Officeholder name		Office sought	Office held

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 15/31 Rpt:		2 FILER NAME Moye, Eric V. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020591	
4 CREDIT CARD ISSUER		Name of financial institution		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$	
6 PAYMENT		(a) Amount Charged \$127.44	(b) Date of Charge 11/05/2015	(c) Date(s) Credit Card Issuer Paid	
7 PAYEE		(a) Payee name Harris Connect		(b) Payee address; City, State, Zip Code 1400 Crossways Blvd., Suite 101 Chesapeake, VA 23320	
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Consulting Expense		(b) Description Consulting re data services/solutions	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	Office held
PAYMENT		(a) Amount Charged \$2.79	(b) Date of Charge 11/10/2015	(c) Date(s) Credit Card Issuer Paid	
PAYEE		(a) Payee name iTunes.com		(b) Payee address; City, State, Zip Code Online account Online, TX 00000	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description news magazine subscription	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	Office held
PAYMENT		(a) Amount Charged \$23.04	(b) Date of Charge 11/17/2015	(c) Date(s) Credit Card Issuer Paid	
PAYEE		(a) Payee name iTunes.com		(b) Payee address; City, State, Zip Code Online account Online, TX 00000	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description magazine and news subscription	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	Office held

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1	Total pages Schedule F4: Sch: 16/31 Rpt:	2	FILER NAME Moye, Eric V. (The Honorable)	3	Filer ID (Ethics Commission Filers) 00020591
4	CREDIT CARD ISSUER	Name of financial institution		5	TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6	PAYMENT	(a) Amount Charged \$32.70	(b) Date of Charge 12/09/2015	(c) Date(s) Credit Card Issuer Paid	
7	PAYEE	(a) Payee name Curb		(b) Payee address; City, State, Zip Code 100 N. Central Expy., Suite 700 Dallas, TX 75201	
8	PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Taxi service to airport	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
6	PAYMENT	(a) Amount Charged \$86.06	(b) Date of Charge 09/01/2015	(c) Date(s) Credit Card Issuer Paid	
7	PAYEE	(a) Payee name TLF Petals and Stems		(b) Payee address; City, State, Zip Code 13319 Montfort Drive Dallas, TX 75240	
8	PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense		(b) Description Flowers for lawyer memorial	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
		Candidate/Officeholder name		Office sought	Office held
6	PAYMENT	(a) Amount Charged \$19.32	(b) Date of Charge 09/04/2015	(c) Date(s) Credit Card Issuer Paid	
7	PAYEE	(a) Payee name FedEx		(b) Payee address; City, State, Zip Code 1999 Bryan St., Suite 149 Dallas, TX 75201	
8	PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description shipping/delivery expense	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
		Candidate/Officeholder name		Office sought	Office held

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1	Total pages Schedule F4: Sch: 17/31 Rpt:	2	FILER NAME Moye, Eric V. (The Honorable)	3	Filer ID (Ethics Commission Filers) 00020591
4	CREDIT CARD ISSUER	Name of financial institution		5	TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6	PAYMENT	(a) Amount Charged \$291.84	(b) Date of Charge 09/24/2015	(c) Date(s) Credit Card Issuer Paid	
7	PAYEE	(a) Payee name The Crescent Club		(b) Payee address; City, State, Zip Code 200 Crescent Court Dallas, TX 75201	
8	PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description Meal with summer clerks	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
6	PAYMENT	(a) Amount Charged \$11.85	(b) Date of Charge 09/27/2015	(c) Date(s) Credit Card Issuer Paid	
7	PAYEE	(a) Payee name The Apple Store		(b) Payee address; City, State, Zip Code 3101 Knox St. Dallas, TX 75205	
8	PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description Office equipment	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
		Candidate/Officeholder name		Office sought	Office held
6	PAYMENT	(a) Amount Charged \$158.75	(b) Date of Charge 09/28/2015	(c) Date(s) Credit Card Issuer Paid	
7	PAYEE	(a) Payee name Office Depol		(b) Payee address; City, State, Zip Code 2929 Oaklawn Ave. Dallas, TX 75219	
8	PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description Office equipment	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
		Candidate/Officeholder name		Office sought	Office held

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 18/31 Rpt:	2 FILER NAME Moye, Eric V. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020591
4 CREDIT CARD ISSUER	Name of financial institution	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$19.75	(b) Date of Charge 09/30/2015
7 PAYEE	(a) Payee name Towne Park Ltd.	(c) Date(s) Credit Card Issuer Paid
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description Parking
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held	
PAYMENT	(a) Amount Charged \$85.52	(b) Date of Charge 10/02/2015
PAYEE	(a) Payee name The Apple Store	(c) Date(s) Credit Card Issuer Paid
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Payee address; City, State, Zip Code 4201 Spring Valley Road Dallas, TX 75244
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held	
PAYMENT	(a) Amount Charged \$229.48	(b) Date of Charge 10/03/2015
PAYEE	(a) Payee name Dallas Fine Wine & Spirits	(c) Date(s) Credit Card Issuer Paid
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Payee address; City, State, Zip Code 3101 Knox St. Dallas, TX 75205
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held	

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 19/31 Rpt:	2 FILER NAME Moye, Eric V. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020591
4 CREDIT CARD ISSUER	Name of financial institution		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$61.11	(b) Date of Charge 10/08/2015	(c) Date(s) Credit Card Issuer Paid
7 PAYEE	(a) Payee name NTTA	(b) Payee address; City, State, Zip Code 5900 W. Plano Pkwy. Plano, TX 75093	
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Transportation Equipment And Related Expense		(b) Description Tolltag
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held
PAYMENT	(a) Amount Charged \$5.41	(b) Date of Charge 10/09/2015	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name SER Steak & Spirits	(b) Payee address; City, State, Zip Code 2201 N. Stemmons Fwy. Dallas, TX 75207	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description Parking at restaurant
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held
PAYMENT	(a) Amount Charged \$139.87	(b) Date of Charge 10/25/2015	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name Kirin Court	(b) Payee address; City, State, Zip Code 221 W. Polk St., #200 Richardson, TX 75081	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description meal with supporter
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 20/31 Rpt:	2 FILER NAME Moye, Eric V. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020591
4 CREDIT CARD ISSUER	Name of financial institution		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$17.30	(b) Date of Charge 11/01/2015	(c) Date(s) Credit Card Issuer Paid
7 PAYEE	(a) Payee name iTunes.com	(b) Payee address; City, State, Zip Code Online account Online, TX 00000	
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description subscription
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held
PAYMENT	(a) Amount Charged \$90.00	(b) Date of Charge 11/02/2015	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name Dallas Women's Foundation	(b) Payee address; City, State, Zip Code 8150 N. Central Expy. #110 Dallas, TX 75206	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b) Description Contribution to attend event
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held
PAYMENT	(a) Amount Charged \$10.99	(b) Date of Charge 11/02/2015	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name Eatzi's	(b) Payee address; City, State, Zip Code 3403 Oak Lawn Ave. Dallas, TX 75219	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description meal with supporters
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 21/31 Rpt:		2 FILER NAME Moye, Eric V. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020591	
4 CREDIT CARD ISSUER		Name of financial institution		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$	
6 PAYMENT		(a) Amount Charged \$16.00	(b) Date of Charge 11/14/2015	(c) Date(s) Credit Card Issuer Paid	
7 PAYEE		(a) Payee name Sheraton Hotel		(b) Payee address; City, State, Zip Code 4801 Lyndon B. Johnson Fwy. Dallas, TX 75244	
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Event Expense		(b) Description Parking at Dallas Black Tie event	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
				Office held	
PAYMENT		(a) Amount Charged \$216.50	(b) Date of Charge 11/16/2015	(c) Date(s) Credit Card Issuer Paid	
PAYEE		(a) Payee name Neiman Marcus		(b) Payee address; City, State, Zip Code 1618 Main Street Dallas, TX 75201	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense		(b) Description Gift for host of fundraiser	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
				Office held	
PAYMENT		(a) Amount Charged \$29.20	(b) Date of Charge 11/28/2015	(c) Date(s) Credit Card Issuer Paid	
PAYEE		(a) Payee name FedEx		(b) Payee address; City, State, Zip Code 1999 Bryan St., Suite 149 Dallas, TX 75201	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description Delivery charges	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
				Office held	

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 22/31 Rpt:	2 FILER NAME Moye, Eric V. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020591
4 CREDIT CARD ISSUER	Name of financial institution	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$
6 PAYMENT	(a) Amount Charged \$326.31	(b) Date of Charge 09/03/2015	(c) Date(s) Credit Card Issuer Paid
7 PAYEE	(a) Payee name Bugatti Ristorante	(b) Payee address; City, State, Zip Code 3802 W. Northwest Hwy. Dallas, TX 75220	
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description Dinner with supporters	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
PAYMENT	(a) Amount Charged \$68.46	(b) Date of Charge 09/08/2015	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name SER Steak & Spirits	(b) Payee address; City, State, Zip Code 2201 N. Stemmons Fwy. Dallas, TX 75207	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b) Description Meal with SMU African American Alumni Association	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
PAYMENT	(a) Amount Charged \$9.99	(b) Date of Charge 10/13/2015	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name Dallas Morning News	(b) Payee address; City, State, Zip Code 508 Young Street Dallas, TX 75202	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description Subscription	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 23/31 Rpt:	2 FILER NAME Moye, Eric V. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020591
4 CREDIT CARD ISSUER	Name of financial institution		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$58.80	(b) Date of Charge 10/30/2015	(c) Date(s) Credit Card Issuer Paid
7 PAYEE	(a) Payee name USPS	(b) Payee address; City, State, Zip Code 400 N. Ervay St. Dallas, TX 75201	
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description Package delivery
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held
PAYMENT	(a) Amount Charged \$90.22	(b) Date of Charge 11/02/2015	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name Central Market	(b) Payee address; City, State, Zip Code 5750 E. Lovers Lane Dallas, TX 75206	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description Food/beverage with supporters
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held
PAYMENT	(a) Amount Charged \$13.60	(b) Date of Charge 11/12/2015	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name iTunes.com	(b) Payee address; City, State, Zip Code Online account Online, TX 00000	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description 13.60
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 24/31 Rpt:		2 FILER NAME Moye, Eric V. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020591	
4 CREDIT CARD ISSUER		Name of financial institution		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$	
6 PAYMENT		(a) Amount Charged \$170.00	(b) Date of Charge 11/16/2015	(c) Date(s) Credit Card Issuer Paid	
7 PAYEE		(a) Payee name Havana Social Club		(b) Payee address; City, State, Zip Code 3030 Olive Street Dallas, TX 75219	
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description Meal with supporters	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
PAYMENT		(a) Amount Charged \$150.57	(b) Date of Charge 11/19/2015	(c) Date(s) Credit Card Issuer Paid	
PAYEE		(a) Payee name The Palm Restaurant		(b) Payee address; City, State, Zip Code 701 Ross Ave. Dallas, TX 75202	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description Meal with supporter	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
PAYMENT		(a) Amount Charged \$166.65	(b) Date of Charge 11/19/2015	(c) Date(s) Credit Card Issuer Paid	
PAYEE		(a) Payee name Dr. Delphinium		(b) Payee address; City, State, Zip Code 5806 W. Lovers Lane Dallas, TX 75225	
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political		(a) Category (See Categories listed at the top of this schedule) Event Expense		(b) Description Flowers for ABOTA event	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1	Total pages Schedule F4: Sch: 25/31 Rpt:	2	FILER NAME Moye, Eric V. (The Honorable)	3	Filer ID (Ethics Commission Filers) 00020591
4	CREDIT CARD ISSUER	Name of financial institution		5	TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6	PAYMENT	(a) Amount Charged \$216.48	(b) Date of Charge 12/05/2015	(c) Date(s) Credit Card Issuer Paid	
7	PAYEE	(a) Payee name Bed Bath & Beyond		(b) Payee address; City, State, Zip Code 8005 Park Lane Dallas, TX 75231	
8	PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense		(b) Description Gifts for supporters	
(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense					
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
6	PAYMENT	(a) Amount Charged \$645.07	(b) Date of Charge 12/07/2015	(c) Date(s) Credit Card Issuer Paid	
7	PAYEE	(a) Payee name Jeffrey's Restaurant		(b) Payee address; City, State, Zip Code 1204 W. Lynn St. Austin, TX 78703	
8	PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description Meal expense at college for new judges	
(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense					
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
6	PAYMENT	(a) Amount Charged \$42.73	(b) Date of Charge 12/08/2015	(c) Date(s) Credit Card Issuer Paid	
7	PAYEE	(a) Payee name Uber		(b) Payee address; City, State, Zip Code 507 Calles St. Austin, TX 78702	
8	PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Travel expenses for college for new judges	
(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense					
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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 F4: Sch: 26/31 Rpt:	2 FILER NAME Moye, Eric V. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00020591
4 CREDIT CARD ISSUER	Name of financial institution	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$16.84	(b) Date of Charge 12/09/2015
7 PAYEE	(a) Payee name Hyatt Regency Lost Pines	(c) Date(s) Credit Card Issuer Paid
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel Out of District (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	(b) Description Travel expenses for new judge's college <input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
PAYMENT	(a) Amount Charged \$200.00	(b) Date of Charge 12/10/2015
PAYEE	(a) Payee name American Inns of Court	(c) Date(s) Credit Card Issuer Paid
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Fees (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	(b) Description Membership Dues <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
PAYMENT	(a) Amount Charged \$40.00	(b) Date of Charge 12/10/2015
PAYEE	(a) Payee name NTTA	(c) Date(s) Credit Card Issuer Paid
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel In District (c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	(b) Description Toll tag charges <input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 27/31 Rpt:	2 FILER NAME Moye, Eric V. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020591
4 CREDIT CARD ISSUER	Name of financial institution		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$9.99	(b) Date of Charge 12/11/2015	(c) Date(s) Credit Card Issuer Paid
7 PAYEE	(a) Payee name Dallas Morning News		(b) Payee address; City, State, Zip Code 508 Young Street Dallas, TX 75202
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description subscription to newspaper
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held
PAYMENT	(a) Amount Charged \$19.95	(b) Date of Charge 12/11/2015	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name FedEx		(b) Payee address; City, State, Zip Code 1999 Bryan St., Suite 149 Dallas, TX 75201
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description Delivery charges
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held
PAYMENT	(a) Amount Charged \$16.94	(b) Date of Charge 12/12/2015	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name FedEx		(b) Payee address; City, State, Zip Code 1999 Bryan St., Suite 149 Dallas, TX 75201
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description Delivery charges
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1	Total pages Schedule F4: Sch: 28/31 Rpt:	2	FILER NAME Moye, Eric V. (The Honorable)	3	Filer ID (Ethics Commission Filers) 00020591
4	CREDIT CARD ISSUER	Name of financial institution		5	TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6	PAYMENT	(a) Amount Charged \$227.33	(b) Date of Charge 12/14/2015	(c) Date(s) Credit Card Issuer Paid	
7	PAYEE	(a) Payee name Art Restorations		(b) Payee address; City, State, Zip Code 7803 Inwood Rd. Dallas, TX 75209	
8	PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense		(b) Description Gift for supporter	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
6	PAYMENT	(a) Amount Charged \$20.00	(b) Date of Charge 12/15/2015	(c) Date(s) Credit Card Issuer Paid	
7	PAYEE	(a) Payee name American Airlines Center		(b) Payee address; City, State, Zip Code 2500 Vicotry Ave. Dallas, TX 75219	
8	PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Event Expense		(b) Description Parking for meal with Senator R. West	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
		Candidate/Officeholder name		Office sought	Office held
6	PAYMENT	(a) Amount Charged \$263.05	(b) Date of Charge 12/15/2015	(c) Date(s) Credit Card Issuer Paid	
7	PAYEE	(a) Payee name Neiman Marcus		(b) Payee address; City, State, Zip Code 1618 Main Street Dallas, TX 75201	
8	PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense		(b) Description Gift for fundraiser host	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense	
		Candidate/Officeholder name		Office sought	Office held

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 29/31 Rpt:	2 FILER NAME Moye, Eric V. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020591
4 CREDIT CARD ISSUER	Name of financial institution		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$151.46	(b) Date of Charge 12/15/2015	(c) Date(s) Credit Card Issuer Paid
7 PAYEE	(a) Payee name Toys R Us		(b) Payee address; City, State, Zip Code 9358 N. Central Expressway Dallas, TX 75231
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		(b) Description Toys for Dallas Sheriff Toy Drive for needy children
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held
PAYMENT	(a) Amount Charged \$100.00	(b) Date of Charge 12/16/2015	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name Louie's		(b) Payee address; City, State, Zip Code 1839 N. Henderson Ave. Dallas, TX 75206
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description Meal with supporter
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held
PAYMENT	(a) Amount Charged \$423.20	(b) Date of Charge 12/17/2015	(c) Date(s) Credit Card Issuer Paid
PAYEE	(a) Payee name American Airlines		(b) Payee address; City, State, Zip Code DFW Airport Dallas, TX 75261
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Airline ticket for trip to Washington, D.C. for meeting
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought Office held

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1	Total pages Schedule F4: Sch: 30/31 Rpt:	2	FILER NAME Moye, Eric V. (The Honorable)	3	Filer ID (Ethics Commission Filers) 00020591
4	CREDIT CARD ISSUER	Name of financial institution		5	TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6	PAYMENT	(a) Amount Charged \$0.99	(b) Date of Charge 12/17/2015	(c) Date(s) Credit Card Issuer Paid	
7	PAYEE	(a) Payee name iTunes.com		(b) Payee address; City, State, Zip Code Online account Online, TX 00000	
8	PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description news subscription	
		(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held
PAYMENT	(a) Amount Charged \$500.00	(b) Date of Charge 12/15/2015	(c) Date(s) Credit Card Issuer Paid		
PAYEE	(a) Payee name Neiman Marcus	(b) Payee address; City, State, Zip Code 1618 Main Street Dallas, TX 75201			
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense		(b) Description Gift for campaign worker		
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held	
PAYMENT	(a) Amount Charged \$120.00	(b) Date of Charge 12/15/2015	(c) Date(s) Credit Card Issuer Paid		
PAYEE	(a) Payee name Stonewall Democrats of Dallas	(b) Payee address; City, State, Zip Code P.O. Box 192305 Dallas, TX 75219			
PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Fees		(b) Description Membership dues		
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name		Office sought	Office held	

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(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 F4: Sch: 31/31 Rpt:	2 FILER NAME Moye, Eric V. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020591
4 CREDIT CARD ISSUER	Name of financial institution		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$
6 PAYMENT	(a) Amount Charged \$36.78	(b) Date of Charge 12/17/2015	(c) Date(s) Credit Card Issuer Paid
7 PAYEE	(a) Payee name iTunes.com		(b) Payee address; City, State, Zip Code Online account Online, TX 00000
8 PURPOSE OF EXPENDITURE <input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		(b) Description magazine and news subscription
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held

INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

SCHEDULE K

The Instruction Guide explains how to complete this form.		1 Total pages Schedule K: Sch: 1/1 Rpt: 107/107
2 FILER NAME Moye, Eric V. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00020591
4 Date 08/27/2015	5 Name of person from whom amount is received George Mason University Foundation, Inc.	8 Amount (\$) \$378.60
	6 Address of person from whom amount is received; City; State; Zip Code Fairfax, VA 22030	
	7 Purpose for which amount is received <input type="checkbox"/> Check if political contribution returned to filer Reimburse for Travel to Economics Institute for Judges	
Date 07/30/2015	Name of person from whom amount is received Smith, Craig (Judge)	Amount (\$) \$112.88
	Address of person from whom amount is received; City; State; Zip Code Dallas, TX 75201	
	Purpose for which amount is received <input type="checkbox"/> Check if political contribution returned to filer Reimbursement for Judicial Photo expense	