

# JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

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

<b>The JC/OH Instruction Guide explains how to complete this form.</b>		<b>1</b> Filer ID (Ethics Commission Filers) 00087819	<b>2</b> Total pages filed:  29	
<b>3</b> CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Ms.	FIRST Lisa A.	MI	<b>OFFICE USE ONLY</b>  Date Received <b>ELECTRONICALLY FILED</b> 01/11/2024
	NICKNAME	LAST Harvey Moore	SUFFIX	
<b>4</b> CANDIDATE / OFFICEHOLDER MAILING ADDRESS  <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; PO Box 4624  Victoria, TX 77903		ZIP CODE	Date Hand-delivered or Date Postmarked
				Receipt #
				Amount
				Date Processed
				Date Imaged
<b>5</b> CAMPAIGN TREASURER NAME	MS / MRS / MR Mrs.	FIRST Shaye	MI	
	NICKNAME	LAST Roskey	SUFFIX	
<b>6</b> CAMPAIGN TREASURER ADDRESS  (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); 109 Cumberland Gap  Victoria, TX 77904		APT / SUITE #;	CITY; STATE; ZIP CODE
<b>7</b> CAMPAIGN TREASURER PHONE	AREA CODE (361)	PHONE NUMBER 648-3316	EXTENSION	
<b>8</b> 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)			
<b>9</b> PERIOD COVERED	Month    Day    Year 07/01/2023	THROUGH	Month    Day    Year 12/31/2023	
<b>10</b> ELECTION	ELECTION DATE Month    Day    Year 03/05/2024		ELECTION TYPE <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special	
<b>11</b> OFFICE	OFFICE HELD (if any)		<b>12</b> OFFICE SOUGHT (if known) District Judge (Multi-county) District 24th	

**GO TO PAGE 2**

# JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH  
COVER SHEET PG 2

2 of 29

**13** C / OH NAME Harvey Moore, Lisa A. (Ms.) **14** Filer ID (Ethics Commission Filers)  
00087819

**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

<b>16</b> CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$	335.00
	2. <b>TOTAL POLITICAL CONTRIBUTIONS</b> (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	21,335.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$	0.00
	4. <b>TOTAL POLITICAL EXPENDITURES</b>	\$	4,697.62
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	18,898.72
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	1,000.00

**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.

Ms. Lisa A. Harvey Moore  
\_\_\_\_\_  
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****FORM JC/OH  
COVER SHEET PG 3**

3 of 29

<b>18 FILER NAME</b> Harvey Moore, Lisa A. (Ms.)		<b>19 Filer ID</b> (Ethics Commission Filers) 00087819
<b>20 SCHEDULE SUBTOTALS</b> NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)	\$ 21,335.00
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)	\$
4.	<input checked="" type="checkbox"/> SCHEDULE E(J): LOANS (JUDICIAL)	\$ 1,000.00
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 3,436.28
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$ 1,261.34
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A(J)1: Sch: 1/19 Rpt: 4/29
2 FILER NAME Harvey Moore, Lisa A. (Ms.)		3 Filer ID (Ethics Commission Filers) 00087819
4 Date 10/25/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alexander, Yvette	7 Amount of Contribution (\$)  \$100.00
	6 Contributor address; City; State; Zip Code  Victoria, TX 77905	
8 Contributor's Principal Occupation Homemaker		9 Contributor's Job Title Homemaker
10 Contributor's employer/law firm None		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 09/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Borchers-Leon, Charla	Amount of Contribution (\$)  \$250.00
	Contributor address; City; State; Zip Code  Victoria, TX 77901	
Contributor's Principal Occupation Ranching/Investments		Contributor's Job Title Ranching/Investments
Contributor's employer/law firm Self Employed		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 09/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bradicich & Uszynski, LLP	Amount of Contribution (\$)  \$2,000.00
	Contributor address; City; State; Zip Code  Victoria, TX 77901	
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

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 2/19 Rpt: 5/29
<b>2</b> FILER NAME Harvey Moore, Lisa A. (Ms.)		<b>3</b> Filer ID (Ethics Commission Filers) 00087819
<b>4</b> Date 09/19/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burdge, Thomas	<b>7</b> Amount of Contribution (\$) \$500.00
	<b>6</b> Contributor address; City; State; Zip Code  Victoria, TX 77904	
<b>8</b> Contributor's Principal Occupation Business Owner		<b>9</b> Contributor's Job Title Business Owner
<b>10</b> Contributor's employer/law firm Self Employed		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 09/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chambers, Nelda	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code  Victoria, TX 77901	
Contributor's Principal Occupation Real Estate		Contributor's Job Title Realtor
Contributor's employer/law firm All Star Properties		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 12/04/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cole, Cole, Easley & Sciba, PC	Amount of Contribution (\$) \$1,500.00
	Contributor address; City; State; Zip Code  Victoria, TX 77901	
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

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 3/19 Rpt: 6/29
<b>2</b> FILER NAME Harvey Moore, Lisa A. (Ms.)		<b>3</b> Filer ID (Ethics Commission Filers) 00087819
<b>4</b> Date 11/13/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cox, Gary (Dr.)	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>6</b> Contributor address; City; State; Zip Code  Victoria, TX 77901		
<b>8</b> Contributor's Principal Occupation Dermatologist		<b>9</b> Contributor's Job Title Dermatologist
<b>10</b> Contributor's employer/law firm Self Employed		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 12/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dietze & Reese, LLP	Amount of Contribution (\$)  \$300.00
Contributor address; City; State; Zip Code  Cuero, TX 77954		
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 09/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Donoghue, Christa	Amount of Contribution (\$)  \$100.00
Contributor address; City; State; Zip Code  Victoria, TX 77903		
Contributor's Principal Occupation Retired		Contributor's Job Title Retired
Contributor's employer/law firm None		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

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A(J)1: Sch: 4/19 Rpt: 7/29
2 FILER NAME Harvey Moore, Lisa A. (Ms.)		3 Filer ID (Ethics Commission Filers) 00087819
4 Date 09/09/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dornburg Law	7 Amount of Contribution (\$) \$2,500.00
	6 Contributor address; City; State; Zip Code  Victoria, TX 77901	
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 09/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Easley, Heidi	Amount of Contribution (\$) \$150.00
	Contributor address; City; State; Zip Code  Victoria, TX 77905	
Contributor's Principal Occupation County Clerk		Contributor's Job Title County Clerk
Contributor's employer/law firm Victoria County		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 09/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eaves, Sarah	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code  Austin, TX 78754	
Contributor's Principal Occupation Marketing		Contributor's Job Title Health Care Marketing
Contributor's employer/law firm Asuragen		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

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A(J)1: Sch: 5/19 Rpt: 8/29
2 FILER NAME Harvey Moore, Lisa A. (Ms.)		3 Filer ID (Ethics Commission Filers) 00087819
4 Date 09/29/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eckhoff, Cole	7 Amount of Contribution (\$)  \$250.00
	6 Contributor address; City; State; Zip Code  Austin, TX 78705	
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm The Werner 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 09/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eppinger, Bruce	Amount of Contribution (\$)  \$250.00
	Contributor address; City; State; Zip Code  Victoria, TX 77901	
Contributor's Principal Occupation Real Estate Management		Contributor's Job Title Real Estate Manager
Contributor's employer/law firm Self Employed		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 09/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Froehlich, R.L. (Dr.)	Amount of Contribution (\$)  \$100.00
	Contributor address; City; State; Zip Code  Meyersville, TX 77974	
Contributor's Principal Occupation Veterinarian		Contributor's Job Title Veterinarian
Contributor's employer/law firm Self Employed		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

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 6/19 Rpt: 9/29
<b>2</b> FILER NAME Harvey Moore, Lisa A. (Ms.)		<b>3</b> Filer ID (Ethics Commission Filers) 00087819
<b>4</b> Date 09/29/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garcia, Santos <hr/> <b>6</b> Contributor address; City; State; Zip Code  Victoria, TX 77901	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>8</b> Contributor's Principal Occupation Attorney		<b>9</b> Contributor's Job Title Attorney
<b>10</b> Contributor's employer/law firm Werner Law Group		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 10/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garza, Jennifer <hr/> Contributor address; City; State; Zip Code  Victoria, TX 77905	Amount of Contribution (\$)  \$100.00
Contributor's Principal Occupation Education		Contributor's Job Title Director
Contributor's employer/law firm University of Houston-Victoria		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 09/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gilliam, Jamie <hr/> Contributor address; City; State; Zip Code  Victoria, TX 77904	Amount of Contribution (\$)  \$250.00
Contributor's Principal Occupation Retired		Contributor's Job Title Retired
Contributor's employer/law firm None		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

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 7/19 Rpt: 10/29
<b>2</b> FILER NAME Harvey Moore, Lisa A. (Ms.)		<b>3</b> Filer ID (Ethics Commission Filers) 00087819
<b>4</b> Date 09/13/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gorouhi, Fariborz	<b>7</b> Amount of Contribution (\$) \$1,000.00
	<b>6</b> Contributor address; City; State; Zip Code  Victoria, TX 77904	
<b>8</b> Contributor's Principal Occupation Physician		<b>9</b> Contributor's Job Title Physician
<b>10</b> Contributor's employer/law firm Self Employed		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
<b>Date</b> 09/05/2023	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Harvey M.D., Robert	<b>Amount of Contribution (\$)</b> \$100.00
	<b>Contributor address; City; State; Zip Code</b>  Victoria, TX 77904	
<b>Contributor's Principal Occupation</b> Doctor		<b>Contributor's Job Title</b> Doctor
<b>Contributor's employer/law firm</b> Self Employed		<b>Law firm of contributor's spouse (if any)</b>
<b>If contributor is a child, law firm of parent(s) (if any)</b>		
<b>Date</b> 09/29/2023	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Heilker, Gay	<b>Amount of Contribution (\$)</b> \$250.00
	<b>Contributor address; City; State; Zip Code</b>  Victoria, TX 77903	
<b>Contributor's Principal Occupation</b> Business Owner		<b>Contributor's Job Title</b> Business Owner
<b>Contributor's employer/law firm</b> Self Employed		<b>Law firm of contributor's spouse (if any)</b>
<b>If contributor is a child, law firm of parent(s) (if any)</b>		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A(J)1: Sch: 8/19 Rpt: 11/29
2 FILER NAME Harvey Moore, Lisa A. (Ms.)		3 Filer ID (Ethics Commission Filers) 00087819
4 Date 09/09/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henry, Barbara	7 Amount of Contribution (\$)  \$100.00
	6 Contributor address; City; State; Zip Code  Victoria, TX 77901	
8 Contributor's Principal Occupation Administrative Assistant		9 Contributor's Job Title Administrative Assistant
10 Contributor's employer/law firm Crossroads Wealth Management		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 09/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kliem, Diane	Amount of Contribution (\$)  \$100.00
	Contributor address; City; State; Zip Code  Victoria, TX 77905	
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Kliem & Balusek		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 09/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Klotzman, Rachel	Amount of Contribution (\$)  \$100.00
	Contributor address; City; State; Zip Code  Victoria, TX 77901	
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Klotzman Law Firm, pllc		Law firm of contributor's spouse (if any) Klotzman Law Firm, pllc
If contributor is a child, law firm of parent(s) (if any)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A(J)1: Sch: 9/19 Rpt: 12/29
2 FILER NAME Harvey Moore, Lisa A. (Ms.)		3 Filer ID (Ethics Commission Filers) 00087819
4 Date 09/05/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Koetter, Dotty	7 Amount of Contribution (\$)  \$100.00
	6 Contributor address; City; State; Zip Code  Victoria, TX 77904	
8 Contributor's Principal Occupation Homemaker		9 Contributor's Job Title Homemaker
10 Contributor's employer/law firm None		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 09/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marbach, Kenneth	Amount of Contribution (\$)  \$100.00
	Contributor address; City; State; Zip Code  Victoria, TX 77905	
Contributor's Principal Occupation Construction Supervisor		Contributor's Job Title Construction Supervisor
Contributor's employer/law firm Targa Resources		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 09/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marr, Sharon	Amount of Contribution (\$)  \$200.00
	Contributor address; City; State; Zip Code  Victoria, TX 77904	
Contributor's Principal Occupation Homemaker		Contributor's Job Title Homemaker
Contributor's employer/law firm None		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

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 10/19 Rpt: 13/29
<b>2</b> FILER NAME Harvey Moore, Lisa A. (Ms.)		<b>3</b> Filer ID (Ethics Commission Filers) 00087819
<b>4</b> Date 11/13/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Matthys, William	<b>7</b> Amount of Contribution (\$)  \$100.00
	<b>6</b> Contributor address; City; State; Zip Code  Cuero, TX 77954	
<b>8</b> Contributor's Principal Occupation Retired		<b>9</b> Contributor's Job Title Retired
<b>10</b> Contributor's employer/law firm None		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
<b>Date</b> 09/05/2023	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) McCue, Denise	<b>Amount of Contribution (\$)</b>  \$100.00
	<b>Contributor address; City; State; Zip Code</b>  Victoria, TX 77901	
<b>Contributor's Principal Occupation</b> Business Owner		<b>Contributor's Job Title</b> Business Owner
<b>Contributor's employer/law firm</b> Self Employed		<b>Law firm of contributor's spouse (if any)</b>
<b>If contributor is a child, law firm of parent(s) (if any)</b>		
<b>Date</b> 09/29/2023	<b>Full name of contributor</b> <input type="checkbox"/> out-of-state PAC (ID#: _____) Meier, Michael	<b>Amount of Contribution (\$)</b>  \$1,000.00
	<b>Contributor address; City; State; Zip Code</b>  Victoria, TX 77904	
<b>Contributor's Principal Occupation</b> Attorney		<b>Contributor's Job Title</b> Attorney
<b>Contributor's employer/law firm</b> Bradicich & Uszynski, LLP		<b>Law firm of contributor's spouse (if any)</b>
<b>If contributor is a child, law firm of parent(s) (if any)</b>		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 11/19 Rpt: 14/29
<b>2</b> FILER NAME Harvey Moore, Lisa A. (Ms.)		<b>3</b> Filer ID (Ethics Commission Filers) 00087819
<b>4</b> Date 09/05/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Miori, Sharon ..... <b>6</b> Contributor address; City; State; Zip Code  Victoria, TX 77904	<b>7</b> Amount of Contribution (\$)  \$200.00
<b>8</b> Contributor's Principal Occupation Retired		<b>9</b> Contributor's Job Title Retired
<b>10</b> Contributor's employer/law firm None		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 09/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mohebtash, Pardis ..... Contributor address; City; State; Zip Code  Victoria, TX 77904	Amount of Contribution (\$)  \$1,000.00
Contributor's Principal Occupation None		Contributor's Job Title None
Contributor's employer/law firm None		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 09/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morrow, Stacey ..... Contributor address; City; State; Zip Code  Houston, TX 77095	Amount of Contribution (\$)  \$200.00
Contributor's Principal Occupation Human Resources		Contributor's Job Title Human Resources Manager
Contributor's employer/law firm HID Global Corporation		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

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 12/19 Rpt: 15/29
<b>2</b> FILER NAME Harvey Moore, Lisa A. (Ms.)		<b>3</b> Filer ID (Ethics Commission Filers) 00087819
<b>4</b> Date 09/05/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nalls, Joye LeAnn <hr/> <b>6</b> Contributor address; City; State; Zip Code  Victoria, TX 77905	<b>7</b> Amount of Contribution (\$)  \$200.00
<b>8</b> Contributor's Principal Occupation Financial Advisor		<b>9</b> Contributor's Job Title Finanancial Advisor
<b>10</b> Contributor's employer/law firm Nalls Insurance & Financial Services		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 09/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Raley, Pam <hr/> Contributor address; City; State; Zip Code  Victoria, TX 77904	Amount of Contribution (\$)  \$100.00
Contributor's Principal Occupation CPA		Contributor's Job Title CPA
Contributor's employer/law firm Self Employed		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 09/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roberts, Odefey, Witte & Wall, LLP <hr/> Contributor address; City; State; Zip Code  Victoria, TX 77979	Amount of Contribution (\$)  \$1,500.00
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)		

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A(J)1: Sch: 13/19 Rpt: 16/29
2 FILER NAME Harvey Moore, Lisa A. (Ms.)		3 Filer ID (Ethics Commission Filers) 00087819
4 Date 09/13/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roskey, Shaye	7 Amount of Contribution (\$) \$50.00
	6 Contributor address; City; State; Zip Code  Victoria, TX 77904	
8 Contributor's Principal Occupation Legal Assistant		9 Contributor's Job Title Legal Assistant
10 Contributor's employer/law firm Garland Sandhop, Jr. - Attorney at Law		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 09/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roskey, Shaye	Amount of Contribution (\$) \$200.00
	Contributor address; City; State; Zip Code  Victoria, TX 77904	
Contributor's Principal Occupation Legal Assistant		Contributor's Job Title Legal Assistant
Contributor's employer/law firm Garland Sandhop, Jr. - Attorney at Law		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 10/25/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sheppard, Cynthia	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code  Cuero, TX 77954	
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Self Employed		Law firm of contributor's spouse (if any) Crain & Sheppard
If contributor is a child, law firm of parent(s) (if any)		



# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A(J)1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 14/19 Rpt: 17/29
<b>2</b> FILER NAME Harvey Moore, Lisa A. (Ms.)		<b>3</b> Filer ID (Ethics Commission Filers) 00087819
<b>4</b> Date 09/29/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stanfield, Kim <hr/> <b>6</b> Contributor address; City; State; Zip Code  Victoria, TX 77904	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>8</b> Contributor's Principal Occupation Counseling services		<b>9</b> Contributor's Job Title Counselor
<b>10</b> Contributor's employer/law firm Self Employed		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 09/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stone, June <hr/> Contributor address; City; State; Zip Code  Victoria, TX 77904	Amount of Contribution (\$)  \$250.00
Contributor's Principal Occupation Retired		Contributor's Job Title Retired
Contributor's employer/law firm None		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 09/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stuhrenberg, Joan <hr/> Contributor address; City; State; Zip Code  Palacios, TX 77465	Amount of Contribution (\$)  \$200.00
Contributor's Principal Occupation Retired		Contributor's Job Title Retired
Contributor's employer/law firm None		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

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 15/19 Rpt: 18/29
<b>2</b> FILER NAME Harvey Moore, Lisa A. (Ms.)		<b>3</b> Filer ID (Ethics Commission Filers) 00087819
<b>4</b> Date 09/05/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stuhrenberg, Michele <hr/> <b>6</b> Contributor address; City; State; Zip Code  Palacios, TX 77465	<b>7</b> Amount of Contribution (\$)  \$200.00
<b>8</b> Contributor's Principal Occupation Retired		<b>9</b> Contributor's Job Title Retired
<b>10</b> Contributor's employer/law firm None		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 09/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stuhrenberg, William <hr/> Contributor address; City; State; Zip Code  Palacios, TX 77465	Amount of Contribution (\$)  \$200.00
Contributor's Principal Occupation Retired		Contributor's Job Title Retired
Contributor's employer/law firm None		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 09/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Talley, Mia <hr/> Contributor address; City; State; Zip Code  Victoria, TX 77904	Amount of Contribution (\$)  \$300.00
Contributor's Principal Occupation Marketing		Contributor's Job Title Market President/Chief Revenue Officer
Contributor's employer/law firm Townsquare Media		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

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A(J)1: Sch: 16/19 Rpt: 19/29
2 FILER NAME Harvey Moore, Lisa A. (Ms.)		3 Filer ID (Ethics Commission Filers) 00087819
4 Date 09/05/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Teinert, Paul	7 Amount of Contribution (\$)  \$250.00
	6 Contributor address; City; State; Zip Code  Victoria, TX 77904	
8 Contributor's Principal Occupation Certified Public Accountant		9 Contributor's Job Title Certified Public Accountant
10 Contributor's employer/law firm Self Employed		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 09/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas, Ashlie	Amount of Contribution (\$)  \$250.00
	Contributor address; City; State; Zip Code  Victoria, TX 77901	
Contributor's Principal Occupation Business Development		Contributor's Job Title Vice President
Contributor's employer/law firm C.L. Thomas Inc.		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 09/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas, Clifton	Amount of Contribution (\$)  \$500.00
	Contributor address; City; State; Zip Code  Victoria, TX 77902	
Contributor's Principal Occupation Business Owner		Contributor's Job Title Business Owner
Contributor's employer/law firm C.L. Thomas Inc.		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

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A(J)1: Sch: 17/19 Rpt: 20/29
2 FILER NAME Harvey Moore, Lisa A. (Ms.)		3 Filer ID (Ethics Commission Filers) 00087819
4 Date 09/13/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tobin M.D., Dennis	7 Amount of Contribution (\$)  \$100.00
	6 Contributor address; City; State; Zip Code  Victoria, TX 77903	
8 Contributor's Principal Occupation Physician		9 Contributor's Job Title Physician
10 Contributor's employer/law firm Self Employed		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 09/13/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tucker, Troy	Amount of Contribution (\$)  \$500.00
	Contributor address; City; State; Zip Code  Victoria, TX 77904	
Contributor's Principal Occupation Engineer		Contributor's Job Title Engineer
Contributor's employer/law firm Self Employed		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 09/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Villafranca, Glenn	Amount of Contribution (\$)  \$500.00
	Contributor address; City; State; Zip Code  Victoria, TX 77901	
Contributor's Principal Occupation Attorney		Contributor's Job Title Attorney
Contributor's employer/law firm Villafranca & Villafranca, 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

<b>The Instruction Guide explains how to complete this form.</b>		1 Total pages Schedule A(J)1: Sch: 18/19 Rpt: 21/29
2 FILER NAME Harvey Moore, Lisa A. (Ms.)		3 Filer ID (Ethics Commission Filers) 00087819
4 Date 09/05/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Villafranca, Nefali	7 Amount of Contribution (\$)  \$300.00
	6 Contributor address; City; State; Zip Code  Victoria, TX 77901	
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Attorney
10 Contributor's employer/law firm Villafranca & Villafranca, PC		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 09/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vivian, Danny	Amount of Contribution (\$)  \$100.00
	Contributor address; City; State; Zip Code  Victoria, TX 77901	
Contributor's Principal Occupation Photographer		Contributor's Job Title Photographer
Contributor's employer/law firm Self Employed		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 09/29/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wade, Becky	Amount of Contribution (\$)  \$100.00
	Contributor address; City; State; Zip Code  Victoria, TX 77904	
Contributor's Principal Occupation Court Coordinator		Contributor's Job Title Court Coordinator
Contributor's employer/law firm Victoria County		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

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A(J)1: Sch: 19/19 Rpt: 22/29
<b>2</b> FILER NAME Harvey Moore, Lisa A. (Ms.)		<b>3</b> Filer ID (Ethics Commission Filers) 00087819
<b>4</b> Date 09/29/2023	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wall, Joe	<b>7</b> Amount of Contribution (\$) \$300.00
<b>6</b> Contributor address; City; State; Zip Code  Victoria, TX 77902		
<b>8</b> Contributor's Principal Occupation Attorney		<b>9</b> Contributor's Job Title Attorney
<b>10</b> Contributor's employer/law firm Self Employed		<b>11</b> Law firm of contributor's spouse (if any)
<b>12</b> If contributor is a child, law firm of parent(s) (if any)		
Date 09/09/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) White Trash Services	Amount of Contribution (\$) \$500.00
Contributor address; City; State; Zip Code  Victoria, TX 77903		
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 09/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zafereo, Mark	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code  Victoria, TX 77904		
Contributor's Principal Occupation Financial Advisor		Contributor's Job Title Financial Advisor
Contributor's employer/law firm Wells Fargo Advisors		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

# LOANS (JUDICIAL)

# SCHEDULE E(J)

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule E(J): Sch: 1/1 Rpt: 23/29
<b>2</b> FILER NAME Harvey Moore, Lisa A. (Ms.)		<b>3</b> Filer ID (Ethics Commission Filers) 00087819
<b>4</b> TOTAL OF UNITEMIZED LOANS		<b>\$</b>
<b>5</b> Date of loan 08/03/2023	<b>7</b> Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) Harvey Moore, Lisa	<b>9</b> Loan Amount (\$) \$1,000.00
<b>6</b> Is lender a financial institution? No	<b>8</b> Lender address; City; State; Zip Code  Victoria, TX 77903	<b>10</b> Interest Rate  0
	<b>11</b> Maturity Date	
<b>12</b> Lender's Principal Occupation Associate Judge		<b>13</b> Lender's Job Title Associate Judge
<b>14</b> Lender's Employer/Law Firm None		<b>15</b> Law Firm of lender's spouse (if any)
<b>16</b> If lender is child, law firm of parent(s) (if any)		
<b>17</b> Description of Collateral <input checked="" type="checkbox"/> None		<b>18</b> Check if personal funds were deposited into political account (See Instructions) <input checked="" type="checkbox"/>
<b>19</b> GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	<b>20</b> Name of guarantor  ..... <b>21</b> Guarantor address; City; State; Zip Code	<b>22</b> Amount Guaranteed (\$)
<b>23</b> Guarantor's Principal Occupation		<b>24</b> Guarantor's Job Title
<b>25</b> Guarantor's Employer/Law Firm		<b>26</b> Law Firm of guarantor's spouse (if any)
<b>27</b> If guarantor is 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.

<b>1</b> Total pages Schedule F1: Sch: 1/2 Rpt: 24/29	<b>2</b> FILER NAME Harvey Moore, Lisa A. (Ms.)	<b>3</b> Filer ID (Ethics Commission Filers) 00087819
--	--	--

<b>4</b> Date 09/19/2023	<b>5</b> Payee name Aerocrafters
-----------------------------	-------------------------------------

<b>6</b> Amount (\$) \$929.61	<b>7</b> Payee address; City; State; Zip Code 309 E. Crestwood  Victoria, TX 77901
----------------------------------	---

<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Event Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Meet and greet campaign expense.
---------------------------------	--	--

<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
---	-----------------------------	---------------	-------------

Date 10/12/2023	Payee name Kurtz Printing Company
--------------------	--------------------------------------

Amount (\$) \$759.92	Payee address; City; State; Zip Code 110 Pin Oak  Victoria, TX 77901
-------------------------	---

<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Advertising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign T-shirts and car magnets.
-------------------------------	--	--

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
--	-----------------------------	---------------	-------------

Date 08/16/2023	Payee name Prosperity Bank
--------------------	-------------------------------

Amount (\$) \$36.75	Payee address; City; State; Zip Code 101 S. Main Street  Victoria, TX 77901
------------------------	--

<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Accounting/Banking	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Check order fee.
-------------------------------	---	--

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
--	-----------------------------	---------------	-------------



# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

**SCHEDULE F1**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
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.

<b>1</b> Total pages Schedule F1: Sch: 2/2 Rpt: 25/29	<b>2</b> FILER NAME Harvey Moore, Lisa A. (Ms.)	<b>3</b> Filer ID (Ethics Commission Filers) 00087819
--	--	--

<b>4</b> Date 11/21/2023	<b>5</b> Payee name Republican Party of Texas
-----------------------------	--

<b>6</b> Amount (\$) \$1,500.00	<b>7</b> Payee address; City; State; Zip Code 211 E. 7th Street Suite 915 Austin, TX 78701
------------------------------------	---

<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Application filing fee.
---------------------------------	---	---

<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
---	-----------------------------	---------------	-------------

Date 11/21/2023	Payee name U.S. Postal Service
--------------------	-----------------------------------

Amount (\$) \$210.00	Payee address; City; State; Zip Code 2804 Sam Houston  Victoria, TX 77904
-------------------------	--

<b>PURPOSE OF EXPENDITURE</b>	<b>(a)</b> Category (See Categories listed at the top of this schedule) Fees	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Post office box rental fee.
-------------------------------	---	---

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
--	-----------------------------	---------------	-------------

--	--	--	--

# POLITICAL EXPENDITURES FROM PERSONAL FUNDS

## SCHEDULE G

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule G: Sch: 1/4 Rpt: 26/29	<b>2</b> FILER NAME Harvey Moore, Lisa A. (Ms.)	<b>3</b> Filer ID (Ethics Commission Filers) 00087819
<b>4</b> Date 08/23/2023	<b>5</b> Payee name Dollar General	
<b>6</b> Amount (\$) \$6.50  <input checked="" type="checkbox"/> Reimbursement from political contributions intended	<b>7</b> Payee address; City; State; Zip Code 5106 N. Navarro Suite B Victoria, TX 77904	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Envelopes for campaign mailout.
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 08/12/2023	Payee name Family Dollar	
Amount (\$) \$10.25  <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 596 FM 616  Blessing, TX 77419	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Envelopes for campaign mailout.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 08/23/2023	Payee name Office Depot	
Amount (\$) \$66.00  <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 5106 N. Navarro  Victoria, TX 77904	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Roll of stamps for campaign mailout.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held

# POLITICAL EXPENDITURES FROM PERSONAL FUNDS

**SCHEDULE G**

**EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule G: Sch: 2/4 Rpt: 27/29	<b>2</b> FILER NAME Harvey Moore, Lisa A. (Ms.)	<b>3</b> Filer ID (Ethics Commission Filers) 00087819
<b>4</b> Date 09/07/2023	<b>5</b> Payee name U.S. Postal Service	
<b>6</b> Amount (\$) \$198.00  <input checked="" type="checkbox"/> Reimbursement from political contributions intended	<b>7</b> Payee address; City; State; Zip Code 2804 Sam Houston Drive  Victoria, TX 77904	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  (3) rolls of stamps for meet and greet mailout.
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 09/09/2023	Payee name U.S. Postal Service	
Amount (\$) \$66.00  <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 700 Henderson Street  Palacios, TX 77465	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense  (1) roll of stamps for meet and greet mailout.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held
Date 08/11/2023	Payee name UPS Store	
Amount (\$) \$456.57  <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 8806 N. Navarro Suite 600 Victoria, TX 77904	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	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 and stamps for mailout.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought                      Office held

# POLITICAL EXPENDITURES FROM PERSONAL FUNDS

## SCHEDULE G

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule G: Sch: 3/4 Rpt: 28/29	<b>2</b> FILER NAME Harvey Moore, Lisa A. (Ms.)	<b>3</b> Filer ID (Ethics Commission Filers) 00087819
<b>4</b> Date 08/15/2023	<b>5</b> Payee name UPS Store	
<b>6</b> Amount (\$) \$43.04 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	<b>7</b> Payee address; City; State; Zip Code 8806 N. Navarro Suite 600 Victoria, TX 77904	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Labels for campaign mailout.
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/23/2023	Payee name UPS Store	
Amount (\$) \$146.31 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 8806 N. Navarro Suite 600 Victoria, TX 77904	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Address labels, copies and stamps for campaign mailout.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/28/2023	Payee name UPS Store	
Amount (\$) \$81.77 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 8806 N. Navarro Suite 600 Victoria, TX 77904	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Labels and roll of stamps for campaign mailout.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

# POLITICAL EXPENDITURES FROM PERSONAL FUNDS

## SCHEDULE G

### EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

<b>1</b> Total pages Schedule G: Sch: 4/4 Rpt: 29/29	<b>2</b> FILER NAME Harvey Moore, Lisa A. (Ms.)	<b>3</b> Filer ID (Ethics Commission Filers) 00087819
<b>4</b> Date 09/06/2023	<b>5</b> Payee name UPS Store	
<b>6</b> Amount (\$) \$22.57  <input checked="" type="checkbox"/> Reimbursement from political contributions intended	<b>7</b> Payee address; City; State; Zip Code 8806 N. Navarro Suite 600 Victoria, TX 77904	
<b>8</b> PURPOSE OF EXPENDITURE	<b>(a)</b> Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	<b>(b)</b> Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Address labels for campaign mailout.
	<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name _____ Office sought _____ Office held _____	
Date 09/07/2023	Payee name UPS Store	
Amount (\$) \$148.31  <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 8806 N. Navarro Suite 600 Victoria, TX 77904	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Printing Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Meet and greet invitations.
	<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name _____ Office sought _____ Office held _____	
Date 09/12/2023	Payee name UPS Store	
Amount (\$) \$16.02  <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 8806 N. Navarro Suite 600 Victoria, TX 77904	
<b>PURPOSE OF EXPENDITURE</b>	Category (See Categories listed at the top of this schedule) Printing Expense	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Print additional meet and greet invitations.
	<b>9</b> Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name _____ Office sought _____ Office held _____	