JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH COVER SHEET PG 1

The JC/OH Instruction	Guide explains how to complete this f	form. 1 Filer ID (Ethics Commiss 00020591		2 Total pages filed: 27			
3 CANDIDATE /	MS / MRS / MR FIRST		MI	OFFICE USE			
OFFICEHOLDER NAME	The Honorable Eric V.			Date Received			
				ELECTRONICALL	Y FILED		
	NICKNAME LAST		SUFFIX	01/15/2025			
	Moye						
4 CANDIDATE / OFFICEHOLDER	ADDRESS / PO BOX; APT / SUITE #	; CITY;	ZIP CODE	Date Hand-delivered or Date	e Postmarked		
MAILING	2121 N. Pearl St., Suite 210			Receipt # A	mount		
ADDRESS	Mail Box 1						
Change of Address	Dallas, TX 75201			Date Processed			
				Date Imaged			
5 CAMPAIGN	MS / MRS / MR FIRST			MI			
TREASURER NAME	Mr. Thomas						
	NICKNAME LAST			SUFFIX			
	Tom Melsheir	mer					
6 CAMPAIGN	STREET ADDRESS (NO PO BOX PLE	ASE); APT	/ SUITE #; CITY;	STATE;	ZIP CODE		
TREASURER ADDRESS	2121 N. Pearl St.						
	Suite 900						
(Residence or Business)	Dallas, TX 75201						
7 CAMPAIGN	AREA CODE PHONE NUMBE	ER EXTENSION					
TREASURER PHONE	(214) 929-1443						
8 REPORT TYPE				1 Eth day, oftar asmaai	an transver		
	X January 15 30th da	y before election F	Runoff	15th day after campai appointment (officeho			
	July 15 Sth day		Exceeded modified	Final Report (Attach C	C/OH-FR)		
9 PERIOD	Month Day Year		Month Day	Year			
COVERED	10/27/2024	THROUGH	12/31/2024	4			
10 ELECTION	ELECTION DATE		ELECTION TYPE				
	Month Day Year	Primary	Runoff	Other			
	11/05/2024	X General	Special				
11 OFFICE	OFFICE HELD (if any)		12 OFFICE SOUGHT	(if known)			
	District Judge District 14 Dallas						
		GO TO PAGE 2					
L Forms provided by Te	xas Ethics Commission w	ww.ethics.state.tx.us		Version V	/4.1.0.5dd2ace2		

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH COVER SHEET PG 2 2 of 27

I

13 C / OH NAME	Moye, Eric V. (The H	onorable)		14 Filer ID 00020591	(Ethics Cor	nmission Filers)		
15 NOTICE FROM POLITICAL COMMITTEE(S)	This box is for notice of candidate / officeholder. <i>consent.</i> Candidates and	iceholder's kı	nowledge or					
Additional Pages		COMMITTEE NAME						
	GENERAL	COMMITTEE ADDR	ESS					
	COMMITTEE CAMPAIGN TREASURER NAME							
		COMMITTEE CAMP	AIGN TREASURER ADDRES	SS				
16 CONTRIBUTION TOTALS			NTRIBUTIONS(OTHER THAN CONTRIBUTIONS MADE ELE		, \$	0.00		
					\$	1,500.00		
EXPENDITURE		IZED POLITICAL EXF	OR GUARANTEES OF LOAN: PENDITURES	5)	\$	0.00		
TOTALS	-				•	0.00		
	4. TOTAL POLIT	ICAL EXPENDITU	RES		\$	47,494.18		
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE		S MAINTAINED AS OF THE L	AST DAY OF THE	\$	162,258.89		
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR		OUTSTANDING LOANS AS	OF THE LAST DAY	\$	0.00		
17 AFFIDAVIT								
		tr	swear, or affirm, under penalty ue and correct and includes a nder Title 15, Election Code.	/ of perjury, that the a Il information requirec	accompanying I to be report	g report is ed by me		
			The Hor	norable Eric V. Moy	/e			
		-	Signature of	Candidate or Officeh	older			
AFFIX NO	TARY STAMP / SEAL AB	OVE						
	Sworn to and subscribed before me, by the said, this the,							
of	, 20, to c	ertify which, witness m	ny hand and seal of office.					
Signature of offi	cer administering oath	Printed name of	f officer administering oath	Title of offic	er administe	ring oath		
Forms provided by Te	exas Ethics Commission	N WWW.e	thics.state.tx.us		Version V	4.1.0.5dd2ace2		

FORM JC/OH COVER SHEET PG 3

3 of 27

18 FILER NAME Moye, Eric V. (The Honorable)	19 Filer ID 00020591	(Ethics Commission Filers)
20 SCHEDULE SUBTOTALS	00020001	
NAME OF SCHEDULE		SUBTOTAL AMOUNT
1. X SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)		\$ 1,500.00
2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$
3. SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)		\$
4. SCHEDULE E(J): LOANS (JUDICIAL)		\$
5. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	S	\$ 19,453.45
6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$
7. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$
8. X SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$ 28,040.73
9. SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$
10. SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS (OF C/OH	\$
11. SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIO	ONS	\$
12. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F TO FILER	RETURNED	\$

SUBTOTALS - JC/OH

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instructi	on Guide explains how to complete this f	1 Total pages Schedule A(J)1: Sch: 1/1 Rpt: 4/27			
2 FILER NAME		3 Filer ID (Ethics Commission Filers)			
Moye, Eric V. (The Honorable)	00020591			
4 Date 5	Full name of contributor out-of-state PAC (ID#:_	7 Amount of Contribution (\$)			
11/12/2024	Malouf, Stephen (Mr.)		\$500.00		
6	Contributor address; City; State; Zip Code		•		
	Dallas, TX 75230				
8 Contributor's Prin		9 Contributor's Job Title			
Attorney		Attorney			
10 Contributor's emp	olover/law firm	11 Law firm of contributor's sp	nouse (if any)		
Malouf & Nocke	-				
	child, law firm of parent(s) (if any)				
	child, law little barefil(3) (ir ally)				
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)		
10/29/2024	Perez, Courtney (Ms.)		\$1,000.00		
	Contributor address; City; State; Zip Code				
	Arlington, TX 76005				
Contributor's Prin	ncipal Occupation	Contributor's Job Title			
Attorney		Attorney			
Contributor's emp	-	Law firm of contributor's sp	bouse (if any)		
Carter Arnett B					
If contributor is a	child, law firm of parent(s) (if any)				

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	ommittee	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Exp Legal Services The Instruction Guid		Office Over Polling Exp Printing Exp Salaries/Wa	ense Iges/Contract Labor		Travel in District Travel Out of Dis	quipment & Related Expense
1	Total pages Schedule F1:	FILER NA	ME				3	Filer ID	(Ethics Commission Filers)
	Sch: 1/3 Rpt: 5/27		c V. (The Honorable)				00020591	· · · ·
4	Date 12/02/2024	Payee nan American							
6	Amount (\$) \$4,637.07	Payee add P.O. Box Dallas, T	650448	State;	Zip Coo	e			
8	PURPOSE OF EXPENDITURE		(See Categories listed at the t rd Payment	op of this sche	edule)	Check if Austin	ı, TX,	ide of Texas. Com , officeholder living erican Expre	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/C	Officeholder name	С	Office soug	ht		Office he	eld
	Date	Payee nan	ne						
	11/04/2024	American	Express						
	Amount (\$) \$4,995.80	Payee add P.O. Box Dallas, T	650448	State;	; Zip Coo	e			
	PURPOSE OF EXPENDITURE		(See Categories listed at the t rd Payment	op of this sche	edule)	Check if Austin	n, TX,	ide of Texas. Com , officeholder living erican Expre	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/C	Officeholder name	C	Office soug	ht		Office he	eld
	Date	Payee nan	ne						
	11/04/2024		wyers Magazine DLI	M Gala					
	Amount (\$) \$1,000.00	Payee add 4100 Spr Suite 175 Dallas, T2	ing Valley Rd.	State;	Zip Coo	e			
	PURPOSE OF EXPENDITURE		(See Categories listed at the t ng Expense	op of this sche	edule)	Check if Austin	n, ⊤x, cont	ide of Texas. Com , officeholder living ribution to D	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/C	Officeholder name	C	Office soug	ht		Office he	eld

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment									
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)								
	Sch: 2/3 Rpt: 6/27	Moye, Eric V. (The Honorable) 00020591								
-	-									
4	Date	5 Payee name								
	11/05/2024	Democratic Monthly								
6	Amount (\$) \$250.00	7 Payee address; City; State; Zip Code 4100 Spring Valley Rd. Suite 175 Dallas, TX 75244								
8	PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Full page ads 								
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held								
	Date	Payee name								
	12/31/2024	Donorbox								
_	Amount (\$)	Payee address; City; State; Zip Code								
	\$70.58	1520 Belle View Blvd. #4106 Alexandria, VA 22307								
	PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Transaction fees for online donations during the reporting period 								
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held								
	Date	Payee name								
	11/24/2024	Graham, Rebekah								
-	Amount (\$)	Payee address; City; State; Zip Code								
	\$1,500.00	3413 Dublin Trail								
	DUDDOSE	Mesquite, TX 75149								
	PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Consulting Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Assistance with reporting 								
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held								

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made Candidate/Officeholder/Pol Credit Card Payment	
1 Total pages Schedule F	
Sch: 3/3 Rpt: 7/27	Moye, Eric V. (The Honorable) 00020591
4 Date 12/09/2024	5 Payee name I Messenger Media L.L.C.
6 Amount (\$) \$2,000.0	 7 Payee address; City; State; Zip Code 320 South R.L. Thornton, Suite 100 Dallas, TX 75203
8 PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign advertising
9 Complete <u>ONLY</u> if direct expenditure to benefit C	
Date 11/05/2024	Payee name InFocus Campaigns
Amount (\$) \$5,000.0	Payee address; City; State; Zip Code 0 4 NE 10th St., #260 Oklahoma City, OK 75201
PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Live GOTV campaigns
Complete <u>ONLY</u> if direct expenditure to benefit C	Candidate/Officeholder name Office sought Office held OH

		ENDITURE CATEGORIE					
Advertising Expense Accounting/Banking	Event Expe Fees	0	ffice Overhead/Rental Expense T	olicitation/Fundraising Expense ransportation Equipment & Related Expense			
Consulting Expense Contributions/ Donations Made By	/- Gift/Awards	s/Memorials Expense P	rinting Expense Ti	ravel in District ravel Out of District			
Candidate/Officeholder/Politica	5		-	THER (enter a category not listed above)			
1 Tatal warman Oak adula E4	·	ruction Guide explains ho	w to complete this form.	C Files ID (Ethics Commission Files)			
1 Total pages Schedule F4:		11		3 Filer ID (Ethics Commission Filers)			
Sch: 1/20 Rpt: 8/27	Moye, Eric V. (The			00020591			
4 CREDIT CARD ISSUER	Name of final	ncial institution	5 TOTAL OF UNITEMIZED EXPENDITURES	\$			
1000ER	America	n Express	CHARGED TO A CREDIT CARD	1.			
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	er Paid			
	\$1,741.57	12/20/2024					
7 PAYEE	(a) Payee name	1	(b) Payee address;	City, State, Zip Code			
			5251 Spring Valley Rd.				
	Al Biernat's						
			Dallas, TX 75254				
8 PURPOSE OF	(a) Category		(b) Description				
EXPENDITURE	(See Categories listed at the top Food/Beverage Expe	,	Food and beverages with	supporters			
X Political							
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX	, officeholder living expense			
9 Complete ONLY if direct Candidate/Officeholder name Office			ce sought	Office held			
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	er Paid			
	\$27.60	12/13/2024					
PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code			
			6025 Royal Lane, Suite 128				
	PaperSource						
			Dallas, TX 75230				
PURPOSE OF	(a) Category		(b) Description				
EXPENDITURE	(See Categories listed at the top Office Overhead/Rent		Purchase of books				
X Political							
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX	, officeholder living expense			
Complete ONLY if direct	Candidate/Officeholder	name Offi	ce sought	Office held			
expenditure to benefit C/OH		-					
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid			
	\$1,197.41	12/11/2024					
PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code			
	Noimon Marque		400 North Park Center				
	Neiman Marcus						
			Dallas, TX 75225				
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description				
	Gift/Awards/Memorial		Gifts for supporters				
X Political		-					
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.		, officeholder living expense			
Complete ONLY if direct	Candidate/Officeholder	name Offic	ce sought	Office held			
expenditure to benefit C/OH							

	EXPENDITURE CATEGORIES FOR BOX 10(a)									
	Accounting/Banking Fees		Loan Repayment/Reimbursement Solicitation/Fundraising Expense Office Overhead/Rental Expense Transportation Equipment & Related I Polling Expense Travel in District Salaries/Wages/Contract Labor OTHER (enter a category not listed at							
	The Inst	ruction Guide explains l	how to complete this form.							
1 Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethi	cs Commiss	sion Filers)			
Sch: 2/20 Rpt: 9/27	Moye, Eric V. (The	Honorable)			00020591					
4 CREDIT CARD	Name of fina	Name of financial institution 5 TOTAL OF								
ISSUER	see p	revious	EXPENDITURES CHARGED TO A CARD		Þ					
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Ca	ard Issuer	Paid					
	\$7.57	12/11/2024								
7 PAYEE	(a) Payee name	•	(b) Payee address;		City,	State,	Zip Code			
	Prime Video		Online							
			Online, TX 99999							
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description Subscription							
X Political	Office Overhead/Rent	tal Expense	Cubscription							
Non-Political		of Taylog, Complete Cabadula	T Check if	Austin TV	officebolder living ov					
9 Complete <u>ONLY</u> if direct	(c) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule	Diffice sought	Austin, TX, 6	officeholder living exp Office held	bense				
expenditure to benefit C/OH			Since sought							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Ca	ard Issuer	Paid					
	\$254.39	12/11/2024								
PAYEE	(a) Payee name	•	(b) Payee address;		City,	State,	Zip Code			
	Richemont Inc.		8687 N. Central, Suite 530							
	Richemont me.			Dallac TV 75225						
PURPOSE OF	(a) Catagony		(b) Description							
EXPENDITURE	(a) Category (See Categories listed at the top		Gift for supporter							
X Political	Gift/Awards/Memorial	ls Expense								
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	e T. Check if	Austin, TX,	officeholder living exp	oense				
Complete <u>ONLY</u> if direct	Candidate/Officeholder	r name C	Office sought		Office held					
expenditure to benefit C/OH										
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Ca	ard Issuer	Paid					
	\$1,573.54	12/10/2024								
PAYEE	(a) Payee name		(b) Payee address;		City,	State,	Zip Code			
	Dallas Fine Wine &	Spirits	3518 Oak Lawn A	ve.						
			Dallas, TX 75219							
PURPOSE OF	(a) Category		(b) Description							
EXPENDITURE	(See Categories listed at the top		Food and beverag	ges for si	upporters					
X Political	Food/Beverage Expe	lise								
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	e T. Check if	Austin, TX,	officeholder living exp	pense				
Complete <u>ONLY</u> if direct	Candidate/Officeholder		Office sought		Office held					
expenditure to benefit C/OH										

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	Event Expr Fees Food/Beve y - Gift/Award al Committee Legal Serv	erage Expense Pr s/Memorials Expense Pr rices Sa	oan Repayment/Re ffice Overhead/Ren olling Expense rinting Expense alaries/Wages/Cont	imbursement So ital Expense Tr Tr tract Labor O	blicitation/Fundraising E ansportation Equipmer avel in District avel Out of District THER (enter a categor	nt & Related I		
	The Inst	ruction Guide explains how	v to complete th	his form.				
1 Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethic	s Commiss	sion Filers)	
Sch: 3/20 Rpt: 10/27	Moye, Eric V. (The	Honorable)			00020591			
4 CREDIT CARD	Name of fina	ncial institution	5 TOTAL (OF UNITEMIZED				
ISSUER	see p	revious		DITURES ED TO A CREDIT	\$			
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issue	r Paid			
	\$159.89	12/09/2024						
7 PAYEE	(a) Payee name	•	(b) Payee a	ddress;	City,	State,	Zip Code	
			480 N. Mo	Carthy Blvd.				
	Arlo Technologies							
			Milpitas, C	CA 95035				
8 PURPOSE OF	(a) Category		(b) Descript	tion				
EXPENDITURE	(See Categories listed at the top	,	Office sup	plies				
X Political	Office Overhead/Rent	lai Expense						
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense		
9 Complete <u>ONLY</u> if direct	Candidate/Officeholder	name Offic	ce sought		Office held			
expenditure to benefit C/OH			-					
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issue	r Paid			
	\$2,457.28	12/07/2024						
PAYEE	(a) Payee name		(b) Payee a	ddress:	City,	State,	Zip Code	
			8687 N. Central, Suite 530					
	Richemont Inc.		out n. central, suite 550					
			Dallas, TX	(75225				
PURPOSE OF	(a) Category		(b) Descript					
EXPENDITURE	(See Categories listed at the top	,	Gifts for supporters					
X Political	Gift/Awards/Memorial	ls Expense						
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.	F	Check if Austin, TX,	officeholder living exp	ense		
Complete ONLY if direct	Candidate/Officeholder		Le sought		Office held			
expenditure to benefit C/OH								
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issue	r Paid			
	\$288.97	12/04/2024						
PAYEE	(a) Payee name		(b) Payee a	ddress;	City,	State,	Zip Code	
			5806 W. L	overs Lane				
	Dr. Delphinium		1					
			Dallas, TX	(75225				
PURPOSE OF	(a) Category		(b) Descript					
EXPENDITURE	(See Categories listed at the top Gift/Awards/Memorial		Gift for su	pporter				
X Political								
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.	٦	Check if Austin, TX,	officeholder living exp	ense		
Complete <u>ONLY</u> if direct	Candidate/Officeholder	r name Offic	ce sought		Office held			
expenditure to benefit C/OH								

		ENDITURE CATEGORI	• •					
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	y - Gift/Award				Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)			
Candidate/Onicenoiden/Folitica	5	truction Guide explains h	0			iy not iisted at	JUVE)	
1 Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethi	cs Commiss	sion Filers)	
Sch: 4/20 Rpt: 11/27	Moye, Eric V. (The	Honorable)			00020591			
4 CREDIT CARD	Name of fina	ncial institution	5 TOTAL OF UNI EXPENDITURE					
ISSUER	see p	see previous		S A CREDIT	\$			
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit C	Card Issuer	Paid			
	\$50.88	11/29/2024						
7 PAYEE	(a) Payee name	•	(b) Payee address;		City,	State,	Zip Code	
	Dallas Morning Ne	WS	1954 Commerce	St.				
			Dallas, TX 75202	1				
8 PURPOSE OF	(a) Category		(b) Description					
	(See Categories listed at the top Office Overhead/Ren	,	Subscription					
X Political		•						
Non-Political (c) Check if travel outside of Texas. Complete Schedule T.				if Austin, TX,	officeholder living exp	oense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholde	r name Of	fice sought		Office held			
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit C	Card Issuer	Paid			
	\$429.60	11/26/2024						
PAYEE	(a) Payee name	•	(b) Payee address;		City,	State,	Zip Code	
	Chambarlaina Ctar	k Chan	5330 Belt Line Rd.					
	Chamberlains Stea	ак & Спор						
			Dallas, TX 75254	4				
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	o of this schedule)	(b) Description Food and beverages with supporters					
X Political	Food/Beverage Expe	nse			supporters			
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	Г. Check	if Austin, TX,	officeholder living exp	oense		
Complete ONLY if direct	Candidate/Officeholde	r name Of	fice sought		Office held			
expenditure to benefit C/OH			1					
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit C	Card Issuer	Paid			
	\$34.00	11/02/2024						
PAYEE	(a) Payee name	•	(b) Payee address;		City,	State,	Zip Code	
	The Westin Galleria	a Dallas	13340 Dallas Pa	rkway				
		a Dallas		_				
			Dallas, TX 75240)				
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	o of this schedule)	(b) Description Food and bevera	anes with	sunnorter			
X Political	Food/Beverage Expe	nse		AGCS WILL	Sapporter			
Non-Political				16 A	-#			
	(c) Check if travel outside Candidate/Officeholde	of Texas. Complete Schedule	fice sought	. IT Austin, TX, (officeholder living exp Office held	Jense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		i name Of	ioo oougin		Since field			

Advertising Expense Eve Accounting/Banking Fee Consulting Expense Foo Contributions/ Donations Made By - Gft			erage Expense Is/Memorials Expense	IES FOR BOX 10(a) Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Travel in District Travel Out of District OTHER (enter a category not listed abov					
	Candidate/Officeholder/Politica	5	ruction Guide explains he	-		TIER (enter a catego	ry not listed at	JUVE)	
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethi	cs Commiss	sion Filers)	
	Sch: 5/20 Rpt: 12/27	Moye, Eric V. (The	Honorable)			00020591			
4	CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF U EXPENDITU CHARGED 1 CARD		\$			
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Crea	dit Card Issuer	Paid			
		\$21.28	11/09/2024						
7	PAYEE	(a) Payee name		(b) Payee addre	ess;	City,	State,	Zip Code	
		NYtimes.com		620 8th Ave.					
				New York, NY	Y 10018				
8	PURPOSE OF	(a) Category		(b) Description					
	EXPENDITURE	(See Categories listed at the top Office Overhead/Ren		Subscription					
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T	: Пс	heck if Austin, TX,	officeholder living exp	ense		
9	Complete ONLY if direct	Candidate/Officeholde	r name Of	fice sought		Office held			
e	xpenditure to benefit C/OH								
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Crea	dit Card Issuer	Paid			
		\$40.00	11/09/2024						
	PAYEE	(a) Payee name	1	(b) Payee addre	ess;	City,	State,	Zip Code	
		NTTA		5900 W. Plano Pkwy.					
		NITA							
				Plano, TX 750	093				
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description Toll tag charges for in district travel					
	X Political	Travel In District		Ton tay charg					
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T	. 🗌 c	heck if Austin, TX,	officeholder living exp	oense		
	Complete <u>ONLY</u> if direct	Candidate/Officeholde	r name Of	fice sought		Office held			
e	xpenditure to benefit C/OH				dit Oand Iaanaa	Defet			
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Crea	dit Card Issuer	Pald			
		\$65.97	11/19/2024						
	PAYEE	(a) Payee name		(b) Payee addre	ess;	City,	State,	Zip Code	
		Amazon.com		440 Terry Ave	e. North				
		Amazon.com							
		(a) Catagony		Seattle, WA 9	98109				
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description Office supplie	s				
	X Political	Office Overhead/Ren	tal Expense						
	Non-Political		of Texas. Complete Schedule 1		back if Auctio TX	officeholder living exp	onse		
⊢	Complete <u>ONLY</u> if direct	(c) Check if travel outside Candidate/Officeholde		fice sought	nook ii Austill, TA,	Office held			
e	xpenditure to benefit C/OH								

Advertising Expense Accounting/Banking Consulting Expense Contributions/Donations Ma Candidate/Officeholder/Pd		Event Exp Fees Food/Beve	erage Expense F Is/Memorials Expense F	ES FOR BOX oan Repayment/R Office Overhead/Re Polling Expense Printing Expense Galaries/Wages/Co	eimbursement ental Expense	Solicitation/Fundraising Transportation Equipme Travel in District Travel Out of District OTHER (enter a catego	ent & Related I	
		The Inst	ruction Guide explains ho	w to complete	this form.			
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Sch: 6/20 Rpt: 13/2	Moye, Eric	V. (The	Honorable)			00020591		
4 CREDIT CARD ISSUER	Nam		ncial institution revious	EXPEN	OF UNITEMIZE IDITURES GED TO A CRED	\$		
6 PAYMENT	(a) Amount Cha	rged	(b) Date of Charge	(c) Date(s)) Credit Card Issu	uer Paid		
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7 PAYEE	(a) Payee name	•		(b) Payee	address;	City,	State,	Zip Code
	Ace Parking	g PS		300 Cres	scent Court			
				Dallas, T	X 75201			
8 PURPOSE OF	(a) Category							
EXPENDITURE	(See Categories lister		of this schedule)	Parking a	at event			
X Political	Travel In Distr	ICT						
Non-Political	(C) Check if tra	vel outside	of Texas. Complete Schedule T.		Check if Austin,	TX, officeholder living ex	pense	
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	\$40.00		11/21/2024					
PAYEE	(a) Payee name	;		(b) Payee	address;	City,	State,	Zip Code
	NTTA			5900 W. Plano Pkwy.				
				Diana T	V 7E002			
PURPOSE OF	(a) Category			Plano, T2 (b) Descrip				
EXPENDITURE	(See Categories lister	d at the top	of this schedule)	Toll tag charges for travel in district				
X Political	Travel In Distr	ict						
Non-Political	(C) Check if tra	vel outside	of Texas. Complete Schedule T.	•	Check if Austin,	TX, officeholder living ex	pense	
Complete <u>ONLY</u> if direct		ceholder	r name Offi	ce sought		Office held		
expenditure to benefit C/C								
PAYMENT	(a) Amount Cha		(b) Date of Charge	(c) Date(s)) Credit Card Issi	uer Paid		
	\$556.04	Ļ	11/22/2024					
PAYEE	(a) Payee name	:		(b) Payee	address;	City,	State,	Zip Code
				400 Cres	scent Court			
	Crescent Co	ourt						
				Dallas, T				
PURPOSE OF	(a) Category	-1 -4 41 4		(b) Descri				
	(See Categories lister Food/Beverag		•	Food and	d beverages wi	th supporters		
X Political		1						
Non-Political								
Complete ONLY if direct		ceholde	r name Offi	ce sought		Office held		
expenditure to benefit C/0	рн							

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	Event Exp Fees Food/Beve - Gift/Award	erage Expense s/Memorials Expense	RES FOR BOX 10(a) Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor	Tran Trav Trav	itation/Fundraising sportation Equipme el in District el Out of District IER (enter a catego	ent & Related E	
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1 Total pages Schedule F4:	2 FILER NAME			3	B Filer ID (Eth	ics Commiss	ion Filers)
Sch: 7/20 Rpt: 14/27	Moye, Eric V. (The	Honorable)		C	00020591		
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEM EXPENDITURES CHARGED TO A C CARD	5	\$		
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card	d Issuer F	Paid		
	\$32.51	12/24/2024					
7 PAYEE	(a) Payee name		(b) Payee address;		City,	State,	Zip Code
	Dallas Morning Nev	NS	1954 Commerce St	t.			
			Dallas, TX 75201				
8 PURPOSE OF	(a) Category		(b) Description				
EXPENDITURE	(See Categories listed at the top Office Overhead/Ren		Subscriptions				
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T. Check if A	ustin, TX, of	ficeholder living ex	pense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholde	r name O	ffice sought		Office held		
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card	d Issuer F	Paid		
	\$89.16	12/21/2024					
PAYEE	(a) Payee name		(b) Payee address;		City,	State,	Zip Code
	Capital Grille		500 Crescent Ct				
			Dallas, TX 75201				
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description				
X Political	Food/Beverage Expe	,	Food and beverage	Food and beverages with supporters			
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T. Check if A	ustin, TX, of	ficeholder living ex	pense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholde	name O	ffice sought		Office held		
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card	d Issuer F	Paid		
	\$200.00	10/28/2024					
PAYEE	(a) Payee name		(b) Payee address;		City,	State,	Zip Code
	Hudson House Bel	tline	4933 Beltline Rd.				
			Addison, TX 75001				
PURPOSE OF	(a) Category	of this color title)	(b) Description				
EXPENDITURE	(See Categories listed at the top Food/Beverage Expe		Food and beverage	es with s	upporters		
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T. Check if A	ustin, TX, of	ficeholder living ex	pense	
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Accounting the introduct of the second s		EXPE	ENDITURE CATEGOR	IES FOR BOX 10	(a)					
Sch: 8/20 Rpt: 15/27 Moye, Eric V. (The Honorable) 00020591 4 CREDT CARD ISSUER Name of financial institution see previous 5 TOTAL OF UNITEMIZES CHARGED TO A CREDIT CARD \$ 6 PAYMENT (a) Amount Charged 540.00 (b) Date of Charge 10/30/2024 (c) Date(s) Credit Card Issuer Paid 7 PAYEE (a) Payee name NTTA (b) Payee address; 5900 W. Plano Pkwy. City, State, Zip Code 5900 W. Plano Pkwy. 8 PURPOSE OF EXPENDITURE EXPENDITURE (a) Category (b) On-Political (a) Category (be Ceagone listed at the top of this schedule) Travel In District (b) Payee address; Candidate/Officeholder name (c) Description Tol It ag charges for in district travel 9 Complete DALY if direct expenditure to benefit COH (a) Amount Charged \$29,79 (b) Date of Charge 11/01/2024 (c) Date(s) Credit Card Issuer Paid PAYEE (a) Amount Charged \$29,79 (b) Date of Charge 11/01/2024 (b) Payee address; 620 8th Ave. #1 City, State, Zip Code 620 8th Ave. #1 PAYEE (a) Category (c) Category It firmet expenditure to benefit COH (b) Payee address; 620 8th Ave. #1 City, State, Zip Code 620 8th Ave. #1 Purpose OF EXPENDITURE expenditure to benefit COH (b) Date of Charge 11/01/2024 (b) Description Subscription City, State, Zip Code 620 8th Ave. #1 Purpose OF EXPENDITURE expenditure to	Accounting/Banking Consulting Expense Contributions/ Donations Made By	Event Exp Fees Food/Beve / - Gift/Award I Committee Legal Serv	ense erage Expense s/Memorials Expense rices	Loan Repayment/Reim Office Overhead/Renta Polling Expense Printing Expense Salaries/Wages/Contra	bursement So I Expense Tra Tra tra tct Labor OT	ransportation Equipment & Related Expense ravel in District ravel Out of District				
Sch: 8/20 Rpt: 15/27 Moye, Eric V. (The Honorable) 00020591 4 CREDT CARD ISSUER Name of financial institution see previous 5 TOTAL OF UNITEMIZES CHARGED TO A CREDIT CARD \$ 6 PAYMENT (a) Amount Charged 540.00 (b) Date of Charge 10/30/2024 (c) Date(s) Credit Card Issuer Paid 7 PAYEE (a) Payee name NTTA (b) Payee address; 5900 W. Plano Pkwy. City, State, Zip Code 5900 W. Plano Pkwy. 8 PURPOSE OF EXPENDITURE EXPENDITURE (a) Category (b) On-Political (a) Category (be Ceagone listed at the top of this schedule) Travel In District (b) Payee address; Candidate/Officeholder name (c) Description Tol It ag charges for in district travel 9 Complete DALY if direct expenditure to benefit COH (a) Amount Charged \$29,79 (b) Date of Charge 11/01/2024 (c) Date(s) Credit Card Issuer Paid PAYEE (a) Amount Charged \$29,79 (b) Date of Charge 11/01/2024 (b) Payee address; 620 8th Ave. #1 City, State, Zip Code 620 8th Ave. #1 PAYEE (a) Category (c) Category It firmet expenditure to benefit COH (b) Payee address; 620 8th Ave. #1 City, State, Zip Code 620 8th Ave. #1 Purpose OF EXPENDITURE expenditure to benefit COH (b) Date of Charge 11/01/2024 (b) Description Subscription City, State, Zip Code 620 8th Ave. #1 Purpose OF EXPENDITURE expenditure to	1 Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethics Commission	n Filers)			
4 CREDIT CARD ISSUER Name of financial institution see previous 5 TOTAL OF UNITENIZED EXPENDITURE CHARGED TO A CREDIT CARD 5 6 PAYMENT (a) Amount Charged \$40.00 (b) Date of Charge 10/30/2024 (c) Date(s) Credit Card Issuer Paid 7 PAYEE (a) Payee name NTTA (b) Date of Charge 10/30/2024 (c) Date(s) Credit Card Issuer Paid 8 PURPOSE OF EXPENDITURE (a) Category (c) Category (c) Category (c) Category (c) Cated to use of the scheade) Travel In District (b) Description Toll tag charges for in district travel 9 Complete ONLX if direct expenditure to benefit C/OH (c) Date of Charge \$29.79 (c) Date of Charge \$29.79 (c) Date of Charge \$29.79 PAYEE (a) Payee name New York Times (b) Date of Charge \$29.79 (c) Date(s) Credit Card Issuer Paid PAYEE (a) Payee name New York Times (b) Date of Charge \$29.79 (c) Date(s) Credit Card Issuer Paid PAYEE (a) Payee name New York Times (b) Date of Charge \$29.79 (c) Date(s) Credit Card Issuer Paid (c) Category State (c) Category \$29.79 (b) Date of Charge \$29.79 (c) Date(s) Credit Card Issuer Paid (d) Reve or this schedule) Office Overhead/Rental Expense (b) Description Subscription (e) Description Subscription S			Honorable)			00020591	,			
ISSUER See prior See prior <thsee prior<="" th=""> <thsee prior<="" th=""></thsee></thsee>	4 CREDIT CARD			5 TOTAL OF	F UNITEMIZED					
\$40.00 10/30/2024 7 PAYEE (a) Payee name NTTA (b) Payee address; 590 W. Plano PKwy. City, 590 W. Plano PKwy. State, 590 W. Plano PKwy. 8 PURPOSE OF EXPENDITURE Political (a) Category (b) Cesc Gregory (ces Gregory Travel In District (b) Payee address; (c) Description Travel In District (b) Payee address; (c) Description City, 10 Description 9 Complete ONLY if direct expenditure to benefit COH (a) Amount Charged \$29.79 (b) Date of Charge 11/01/2024 (c) Date(s) Credit Card Issuer Paid PAYEE (a) Payee name New York Times (b) Payee address; (c) Date(s) Credit Card Issuer Paid State, Zip Code 620 8th Ave. #1 PURPOSE OF EXPENDITURE (a) Category (sec Calegory (sec Calegory (sec Calegory) (b) Date of Charge 11/01/2024 (b) Payee address; (c) Date(s) Credit Card Issuer Paid PURPOSE OF EXPENDITURE (a) Category (sec Calegory) (b) Date of this schedule) (b) Description (b) Description Von-Political (c) Check if austin of this schedule) (b) Description Subscription Von-Political (c) Check if austin of this schedule) (c) Deteck if Austin, TX, otherhodder liveg segnetse Complete QNLY if direct expenditure to benefit C/OH (b) Date of Charge (c) Date(s) Credit Card Issuer Paid PAYMENT (a) Amount		see p	see previous		TURES	\$				
7 PAYEE (a) Payee name (b) Payee address; City, State, Zip Code 8 PURPOSE OF (a) Category (b) Description Plano, TX 75093 Toll tag charges for in district travel 8 Political (c)	6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) C	redit Card Issuer	r Paid				
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8 PURPOSE OF EXPENDITURE (a) Category (b) Cascription Travel In District (b) Description Toll tag charges for in district travel 9 Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder mane Office held 9 Complete ONLY if direct expenditure to benefit C/OH (a) Amount Charged (b) Date of Charge (c) Date (b) Payee address; City, State, Zip Code PAYEE (a) Payee name New York Times (b) Payee address; City, State, Zip Code PURPOSE OF EXPENDITURE [a) Category (see Categories listed at the top of this schedule) Office Overthead/Re-ture (b) Payee address; City, State, Zip Code PURPOSE OF EXPENDITURE [a) Category (see Categories listed at the top of this schedule) Office Overthead/Re-ture (b) Description Subscription				5900 W. Pla	ano Pkwy.					
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PAYEE (a) Payee name New York Times (b) Payee address; 620 8th Ave. #1 City, 620 8th Ave. #1 State, 620 8th Ave. #1 Zip Code PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Subscription New York, NY 10018 Image: Category Subscription X Political (c) _ check if travel outside of Texas. Complete Schedule T. _ check if Austin, TX, officeholder living expense Image: Category Office Political Complete ONLY if direct expenditure to benefit C/OH (a) Amount Charged (b) Date of Charge (c) Cate(s) Credit Card Issuer Paid Image: Category Office Political PAYMENT (a) Payee name (b) Date of Charge (c) Date(s) Credit Card Issuer Paid Image: City, State, Zip Code PAYEE (a) Payee name (b) Payee address; City, State, Zip Code State, Zip Code Javiers Javiers Dallas, TX 75205 Image: City, State, Zip Code	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) C	redit Card Issuer	r Paid				
PURPOSE OF EXPENDITURE (a) Category (see Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Subscription Political (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Complete ONLY if direct expenditure to benefit C/OH (a) Amount Charged \$110.42 (b) Date of Charge \$1106/2024 Office Sought PAYEE (a) Payee name Javiers (b) Payee address; City, State, Zip Code PAYEE (a) Payee name Javiers (b) Payee address; City, State, Zip Code PAYEE (a) Payee name Javiers (b) Payee address; City, State, Zip Code PAYEE (a) Payee name Javiers (b) Payee address; City, State, Zip Code PAISE (b) Payee name (b) Payee address; City, State, Zip Code PAYEE (a) Payee name (b) Payee address; City, State, Zip Code PAYEE (b) Payee name (b) Payee address; City, State, Zip Code Dallas, TX 75205 Dallas, TX 7520		\$29.79	11/01/2024							
New York Times New York, NY 10018 PURPOSE OF EXPENDITURE (a) Category (see Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Subscription Non-Political (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Complete QNLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought PAYMENT (a) Amount Charged \$110.42 (b) Date of Charge (c) Date(s) Credit Card Issuer Paid PAYEE (a) Payee name (b) Payee address; City, State, Zip Code 4912 Cole Ave. Javiers Jalias, TX 75205 Dallas, TX 75205 Dallas, TX 75205	PAYEE	(a) Payee name		(b) Payee ad	dress;	City, State, Z	Zip Code			
PURPOSE OF EXPENDITURE (a) Category (see Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Subscription Non-Political (c)				620 8th Ave	e. #1					
PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Subscription Non-Political (c) Check if travel outside of Texas. Complete Schedule T. 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 \$110.42 (b) Date of Charge 11/06/2024 (c) Date(s) Credit Card Issuer Paid PAYEE (a) Payee name Javiers (b) Payee address; Dallas, TX 75205 City,		New York Times								
EXPENDITURE (See Categories listed at the top of this schedule) Subscription Y Political Office Overhead/Rental Expense Subscription Non-Political (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Complete QNLY if direct expenditure to benefit C/OH Candidate/Officeholder Imme (b) Date of Charge (b) Date of Charge (b) Date of Charge (a) Amount Charged (b) Date of Charge (a) Payee name (a) Payee name (a) Payee name Javiers (b) Payee address; City, State, Zip Code 4912 Cole Ave. Jalais, TX 75205										
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X Political Non-Political (c) Check if travel outside of Texas. Complete Schedule T. Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH PAYMENT (a) Amount Charged \$110.42 11/06/2024 (b) Payee address; City, State, Javiers (b) Payee address; City, State, Zip Code Ag12 Cole Ave. Dallas, TX 75205				Subscriptio	n					
Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held PAYMENT (a) Amount Charged \$110.42 (b) Date of Charge 11/06/2024 (c) Date(s) Credit Card Issuer Paid PAYEE (a) Payee name Javiers (b) Payee address; City, State, Zip Code Dallas, TX 75205 Dallas, TX 75205 Dallas, TX 75205 Dallas, TX 75205										
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PAYMENT (a) Amount Charged (b) Date of Charge (c) Date(s) Credit Card Issuer Paid \$110.42 11/06/2024 (b) Payee address; City, State, Zip Code PAYEE (a) Payee name (b) Payee address; City, State, Zip Code Javiers Javiers Dallas, TX 75205 Dallas, TX 75205	·	Candidate/Officeholder	name O	ffice sought		Office held				
PAYEE (a) Payee name (b) Payee address; City, State, Zip Code Javiers Jalas, TX 75205 Dallas, TX 75205	•	(a) Amount Chargod	(b) Data of Chargo	(c) Data(c) C	rodit Card Issue	Paid				
PAYEE (a) Payee name (b) Payee address; City, State, Zip Code Javiers Javiers Dallas, TX 75205 Dallas, TX 75205		.,		(C) Date(S) C	reuit Caru Issuer	Palu				
Javiers Dallas, TX 75205		\$110.42	11/06/2024							
Javiers Dallas, TX 75205	PAYEE	(a) Payee name	1	(b) Payee ad	dress;	City, State, Z	Zip Code			
Dallas, TX 75205		7		4912 Cole /	Ave.					
		Javiers								
DIDDOSE OF (a) Category (b) Description										
	PURPOSE OF				(b) Description					
Food/Beverage Expense				⊢ood and b	everages with	supporters				
X Political										
Non-Political (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	Non-Political				Check if Austin, TX,					
Complete ONLY if directCandidate/Officeholder nameOffice soughtOffice heldexpenditure to benefit C/OH		Candidate/Officeholder	name O	ffice sought		Office held				

	:5 MADE BY C			SCHEDULE F4			
	EXPE	ENDITURE CATEGOR	RIES FOR BOX 10(a)				
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	/ - Gift/Awards al Committee Legal Serv	rage Expense s/Memorials Expense ices	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 Inst	ruction Guide explains h	now to complete this form.				
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics Commission Filers)			
Sch: 9/20 Rpt: 16/27	Moye, Eric V. (The	Honorable)		00020591			
4 CREDIT CARD	Name of fina	ncial institution	5 TOTAL OF UNITEMIZ	ED			
ISSUER	see pi	see previous		EDIT \$			
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Is	suer Paid			
	\$563.95	11/19/2024					
7 PAYEE	(a) Payee name	•	(b) Payee address;	City, State, Zip Code			
		1401 Turtle Creek Blv	d.				
	The Mexican						
			Dallas, TX 75207				
8 PURPOSE OF	PURPOSE OF (a) Category						
EXPENDITURE (See Categories listed at the top of this schedule)			(b) Description Food and beverages v	with supporters			
x Political Food/Beverage Expense							
Non-Political		of Texas. Complete Schedule		n, TX, officeholder living expense			
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged \$24.89	(b) Date of Charge 11/19/2024	(c) Date(s) Credit Card Is	suer Paid			
PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code			
	Cindi's NV Dali & D	octourant	306 S. Houston St.				
	Cindi's NY Deli & R	estaurant					
			Dallas, TX 75202				
PURPOSE OF	(a) Category		(b) Description				
EXPENDITURE	(See Categories listed at the top Food/Beverage Expe		Food and beverages with supporter				
X Political	Food/Develage Lype	130					
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T. Check if Austir	n, TX, officeholder living expense			
Complete ONLY if direct	Candidate/Officeholder	•	office sought	Office held			
expenditure to benefit C/OH			0				
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Is	suer Paid			
		. ,					
	\$11.90	12/21/2024					
PAYEE	(a) Payee name	L	(b) Payee address;	City, State, Zip Code			
			Online				
	Prime Video						
			Online, TX 99999				
PURPOSE OF	(a) Category		(b) Description				
EXPENDITURE	(See Categories listed at the top		Subscription				
X Political	Office Overhead/Rental Expense						
Non-Political	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense						
Complete ONLY if direct	Candidate/Officeholder	name O	office sought	Office held			
expenditure to benefit C/OH							

Forms provided by Texas Ethics Commission

EXPENDITORES MADE BY CREDIT CARD						SC	HEDUL	е F4	
			EXPE	ENDITURE CATEGOR	ES FOR BO	(10(a)			
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donation Candidate/Officehold			Event Expe Fees Food/Beve Gift/Award Legal Serv	ense rage Expense s/Memorials Expense	Loan Repayment/ Office Overhead/f Polling Expense Printing Expense Salaries/Wages/C	Reinbursement Sc Rental Expense Tr Tr Contract Labor O	olicitation/Fundraising ansportation Equipme ravel in District ravel Out of District THER (enter a categor	nt & Related I	
1 Total pages Schedu							3 Filer ID (Ethi	commiss	
				Llonoroble)					SIGIT FILEIS)
Sch: 10/20 Rpt: 1	1//2/	-	•	Honorable)			00020591		
4 CREDIT CARD ISSUER		Name of financial institution see previous		EXPE	L OF UNITEMIZED NDITURES GED TO A CREDIT	\$			
6 PAYMENT		(a) Amount Ch	narged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid		
		\$10.8	1	10/30/2024					
7 PAYEE		(a) Payee nam	ne		(b) Paye	e address;	City,	State,	Zip Code
					11700 F	Preston Rd.			
	Staples								
				Dallas,	TX 75230				
8 PURPOSE OF		(a) Category (See Categories listed at the top of this schedule)			(b) Desci	•			
	Office Overhead/Rental Expense			Office s	upplies				
X Political				ľ					
Non-Political		(C) Check if t	ravel outside	of Texas. Complete Schedule	Т.	Check if Austin, TX,	officeholder living exp	ense	
				fice sought		Office held			
expenditure to benefit C/OH									
PAYMENT		(a) Amount Ch \$50.8		(b) Date of Charge 11/01/2024	(c) Date(s) Credit Card Issue	r Paid		
PAYEE		(a) Payee nam	ne	•	(b) Payee	e address;	City,	State,	Zip Code
		Dallas Morning News		1954 Co	ommerce St.				
		Danas Mo	ining ive						
		(-) O-t				TX 75201			
PURPOSE OF EXPENDITURE		(a) Category (See Categories lis	ted at the top	of this schedule)	(b) Desci Subscri				
X Political		Office Overh	ead/Ren	tal Expense	Subsch	ption			
Non-Political	F	<u></u>							
		(C) Check if t		of Texas. Complete Schedule	fice sought	Check if Austin, TX,	officeholder living exp Office held	ense	
Complete <u>ONLY</u> if a expenditure to benefit		oundiduct o	meenolaei	iname of	lice sought		enice neid		
PAYMENT		(a) Amount Ch	narged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid		
		\$43.2		11/02/2024		,			
		Ψ+0.2	0	11/02/2024					
PAYEE		(a) Payee nam	ne		(b) Paye	e address;	City,	State,	Zip Code
					1335 Da	allas Parkway			
		Apple Stor	re						
						TX 75240			
PURPOSE OF		(a) Category	tod at the ti	of this schooluls)	(b) Desci				
		(See Categories lise Office Overh			Comput	er supplies			
X Political				· ·					
Non-Political		(C) Check if t	ravel outside	of Texas. Complete Schedule	т.	Check if Austin, TX,	officeholder living exp	ense	
Complete ONLY if o		Candidate/O	fficeholder	name Of	fice sought		Office held		
expenditure to benefit	t C/OH								

		EXPE		S FOR BOX	10(a)			
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	/ - Gift/Awards	erage Expense Po s/Memorials Expense Pri	an Repayment/Re fice Overhead/Re Illing Expense inting Expense Iaries/Wages/Col	ental Expense Tra Tra Tra	blicitation/Fundraising B ansportation Equipmer avel in District avel Out of District ITHER (enter a categor	nt & Related	
		5	The Instruction Guide explains how to complete this form.				y not noted a	
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethic	s Commiss	sion Filers)
	Sch: 11/20 Rpt: 18/27	Moye, Eric V. (The	Honorable)			00020591		
4	CREDIT CARD	Name of final	ncial institution		OF UNITEMIZED			
	ISSUER	see pi	revious		DITURES GED TO A CREDIT	\$		
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issuer	r Paid		
		\$1.56	11/09/2024					
7	PAYEE	(a) Payee name		(b) Payee	address;	City,	State,	Zip Code
		HP Instant Ink		3000 Har	nover St.			
					, CA 94304			
8	PURPOSE OF	(a) Category	a) Catagon					
l°	EXPENDITURE	(See Categories listed at the top	,	(b) Descrip Compute	er supplies			
	X Political	Office Overhead/Rent	tal Expense					
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
9	Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought		Office held		
е	expenditure to benefit C/OH							
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issue	r Paid		
		\$7.57	11/11/2024					
	PAYEE	(a) Payee name	•	(b) Payee	address;	City,	State,	Zip Code
		Prime Video		Online				
				Online TX 00000				
┝	PURPOSE OF	(a) Category		Online, TX 99999 (b) Description				
	EXPENDITURE	(See Categories listed at the top	of this schedule)	Subscription				
	X Political	Office Overhead/Rent	tal Expense					
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense	
	Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought		Office held		
e	xpenditure to benefit C/OH							
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issue	r Paid		
		\$503.31	11/12/2024					
	PAYEE	(a) Payee name		(b) Payee	address;	City,	State,	Zip Code
		Dr. Delphinium		5806 W. Lovers Lane				
		2.1. Deiprinium		Dallas, TX 75225				
⊢	PURPOSE OF	(a) Category						
	EXPENDITURE	(See Categories listed at the top	(b) Description Flowers for supporter					
	X Political	Gift/Awards/Memorial	s Expense					
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin. TX.	officeholder living exp	ense	
⊢	Complete ONLY if direct	Candidate/Officeholder		e sought		Office held		
e	xpenditure to benefit C/OH							

EXPENDITORES MADE BY CREDIT CARD						HEDULE F4	
Advertising Expense	EXPE Event Expe		ES FOR BOX 1	.,	olicitation/Fundraising E	xpense	
Accounting/Banking Consulting Expense	Fees Offic Food/Beverage Expense Polli		Office Overhead/Rer Polling Expense	ntal Expense Tr Tr	ansportation Equipment avel in District		
Contributions/ Donations Made By Candidate/Officeholder/Politica	al Committee Legal Serv	ices	Printing Expense Salaries/Wages/Con	tract Labor O	avel Out of District THER (enter a category	not listed above)	
		ruction Guide explains ho	w to complete t	his form.	I		
1 Total pages Schedule F4: Sch: 12/20 Rpt: 19/27	2 FILER NAME Moye, Eric V. (The	Honorablo)			3 Filer ID (Ethic: 00020591	s Commission Filers)	
4 CREDIT CARD		ncial institution	5 TOTAL	OF UNITEMIZED	00020391		
ISSUER	see previous		EXPEN	DITURES ED TO A CREDIT	\$		
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	-	Credit Card Issue	l r Paid		
	\$2,238.94	11/18/2024					
7 PAYEE	(a) Payee name	•	(b) Payee a	-	City,	State, Zip Code	
	Nick & Sam's Grill		3008 Map	ole Ave.			
				75201			
8 PURPOSE OF	(a) Category		Dallas, TX 75201 (b) Description				
EXPENDITURE (See Categories listed at the top of this schedule)			Food and beverages with supporters				
X Political	Food/Beverage Expe	nse					
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T	· [Check if Austin, TX,	officeholder living expe	ense	
9 Complete ONLY if direct Candidate/Officeholder name Office					Office held		
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issue	r Paid		
	\$11.90	11/20/2024					
PAYEE	(a) Payee name	I	(b) Payee a	address;	City,	State, Zip Code	
	Prime Video		Online				
			Online, TX				
PURPOSE OF	(a) Category		(b) Descrip				
EXPENDITURE	(See Categories listed at the top Office Overhead/Rent		Subscripti				
X Political	Office Overfiead/Refi	lai Expense					
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living expe	ense	
Complete <u>ONLY</u> if direct	Candidate/Officeholder	name Off	ice sought		Office held		
expenditure to benefit C/OH PAYMENT	(a) Amount Charged	(b) Data of Charge		Cradit Card Issue	r Daid		
	(a) Amount Charged	(b) Date of Charge	(C) Date(S)	Credit Card Issue	i Palu		
	\$32.51	11/24/2024					
PAYEE	(a) Payee name		(b) Payee a	address;	City,	State, Zip Code	
	Dollas Marning No.		1954 Con	nmerce St.			
	Dallas Morning News						
PURPOSE OF	(a) Category		Dallas, T> (b) Descrip				
EXPENDITURE	(See Categories listed at the top		Subscripti				
X Political	Office Overhead/Ren	tal Expense					
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T	 . [Check if Austin, TX,	officeholder living expe	ense	
Complete <u>ONLY</u> if direct	Candidate/Officeholder		ice sought		Office held		
expenditure to benefit C/OH							

				0011			
	EXPE	ENDITURE CATEGORI	ES FOR BOX 10(a)				
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	Event Exp Fees Food/Beve y - Gift/Award	ense L rage Expense F s/Memorials Expense F	oan Repayment/Reimbursement Soffice Overhead/Rental Expense Printing Expense	Solicitation/Fundraising Exp Transportation Equipment of Travel in District Travel Out of District OTHER (enter a category r	& Related E		
	The Inst	ruction Guide explains ho	w to complete this form.				
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics	Commiss	ion Filers)	
Sch: 13/20 Rpt: 20/27	Moye, Eric V. (The	Honorable)		00020591			
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDI CARD	\$			
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	er Paid			
	\$70.00	12/24/2024					
7 PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code	
	Capital Grille DC		601 Pennsylvania Ave. N	1W			
			Washington, TX 20004				
8 PURPOSE OF	(a) Category		(b) Description				
EXPENDITURE	(See Categories listed at the top Food/Beverage Expe		Food and beverages with	h supporters			
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T	. Check if Austin, T	X, officeholder living expen	se		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name Off	ice sought	Office held			
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	er Paid			
	\$286.85	12/21/2024	(,,, ,,				
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code	
	Amazon.com		440 Terry Ave. North				
			Seattle, WA 98109				
PURPOSE OF	(a) Category		(b) Description				
EXPENDITURE	(See Categories listed at the top Office Overhead/Rent	,	Office supplies				
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T	. Check if Austin, T	X, officeholder living expen	se		
Complete ONLY if direct	Candidate/Officeholder	name Off	ice sought	Office held			
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	er Paid			
	\$798.81	12/20/2024					
PAYEE	(a) Payee name		(b) Payee address;	City,	State,	Zip Code	
			400 Crescent Court				
	Crescent Court						
			Dallas, TX 75201				
PURPOSE OF	(a) Category		(b) Description				
EXPENDITURE	(See Categories listed at the top Food/Beverage Expe		Food and beverages with	h supporters			
X Political							
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T	. Check if Austin, T	X, officeholder living expen	se		
Complete <u>ONLY</u> if direct	Candidate/Officeholder	name Off	ice sought	Office held			
expenditure to benefit C/OH							

	EXPENDITOR	SCHEDULE F4							
		EXPI	ENDITURE CATEGOR	RIES FOR BOX 10(a)					
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	I Committee Gift/Award Legal Serv	erage Expense s/Memorials Expense rices	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)				
1	Total pages Schedule F4:				3 Filer ID (Ethics Commission Filers)				
Ľ	Sch: 14/20 Rpt: 21/27	Moye, Eric V. (The	Honorable)		00020591				
4	CREDIT CARD		ncial institution	5 TOTAL OF UNITEMIZ					
	ISSUER	see previous		EXPENDITURES CHARGED TO A CRE CARD	\$				
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Is	ssuer Paid				
		\$5,500.00	12/20/2024						
7	PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code				
		11 Turpor Logal A	<u> </u>	P.O. Box 134002					
	J.L. Turner Legal Assoc.								
				Dallas, TX 75313					
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule)			(b) Description	ar 11 Turner Cabalarahin Fund					
Advertising Expense			Advertising sponsor in	or J.L. Turner Scholarship Fund					
				n, TX, officeholder living expense					
	9 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH								
Ļ	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Is	ssuer Paid				
		\$1,025.85	12/17/2024						
	PAYEE	(a) Payee name	•	(b) Payee address;	City, State, Zip Code				
		CVS Pharmacy		11661 Preston Rd., S	11661 Preston Rd., Suite 218				
		ever namacy		Dallas TV 75220	Dallas TX 75230				
-	PURPOSE OF	(a) Category		Dallas, TX 75230	(b) Description				
	EXPENDITURE	(See Categories listed at the top	of this schedule)	Merchandise and supplies					
	X Political	Office Overhead/Ren	tal Expense		r				
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T Check if Austi	n, TX, officeholder living expense				
⊢	Complete ONLY if direct	Candidate/Officeholder		ffice sought	Office held				
e	xpenditure to benefit C/OH								
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Is	ssuer Paid				
		\$122.00	12/17/2024						
	PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code				
		1 i		4912 Cole Ave.					
		Javiers							
L		() -		Dallas, TX 75205					
PURPOSE OF (a) Category EXPENDITURE (See Categories listed at the top of this schedule)			(b) Description	with supportors					
		Food/Beverage Expe		Food and beverages	with supporters				
	X Political								
L	Non-Political		of Texas. Complete Schedule		n, TX, officeholder living expense				
e	Complete <u>ONLY</u> if direct xpenditure to benefit C/OH	Candidate/Officeholder	name O	ffice sought	Office held				

				SCHEDULE F4				
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	Event Exp Fees Food/Beve / - Gift/Award I Committee Legal Serv	rage Expense s/Memorials Expense ices	RIES FOR BOX 10(a) 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)				
1 Total pages Schedule F4:	· · · · · · · · · · · · · · · · · · ·			3 Filer ID (Ethics Commission Filers)				
Sch: 15/20 Rpt: 22/27	Moye, Eric V. (The	Honorabla)		00020591				
		ncial institution	5 TOTAL OF UNITEMIZE					
4 CREDIT CARD ISSUER		see previous		\$ DIT				
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Iss	uer Paid				
	\$835.58	12/17/2024						
7 PAYEE	(a) Payee name	•	(b) Payee address;	City, State, Zip Code				
	NI		400 North Park Center					
Neiman Marcus								
			Dallas, TX 75225					
8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule)			(b) Description					
Gift/Awards/Memorials Expense			Gifts for supporters					
X Political		ľ						
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T. Check if Austin,	TX, officeholder living expense				
9 Complete ONLY if direct Candidate/Officeholder name Office sought Office held								
expenditure to benefit C/OH								
PAYMENT	(a) Amount Charged \$1,430.13	(b) Date of Charge 12/16/2024	(c) Date(s) Credit Card Iss	uer Paid				
PAYEE	(a) Payee name	•	(b) Payee address;	City, State, Zip Code				
	Fachini		33a Highland Park Villa	ıge				
	Fachini		Dallas, TX 75205					
PURPOSE OF	(a) Category		(b) Description					
EXPENDITURE	(See Categories listed at the top Food/Beverage Expe	,	Food and beverages with supporters					
X Political	FUUU/Deverage Expe	lise						
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T. Check if Austin,	TX, officeholder living expense				
Complete ONLY if direct	Candidate/Officeholder	name C	Office sought	Office held				
expenditure to benefit C/OH								
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Iss	uer Paid				
	\$14.60	12/16/2024						
PAYEE	(a) Payee name	1	(b) Payee address;	City, State, Zip Code				
			539 Preston Royal Sho	pping Center				
	USPS							
			Dallas, TX 75230					
PURPOSE OF	(a) Category	of this schedule)	(b) Description					
EXPENDITURE (See Categories listed at the top of this schedule) Office Overhead/Rental Expense			Business services - ma	Iling and shipping				
X Political		·						
Non-Political	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense							
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name C	office sought	Office held				

	SCHEDULE F4								
	EXPE	ENDITURE CATEGOR	RIES FOR BOX 10(a)						
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	/ - Gift/Awards al Committee Legal Serv	rage Expense s/Memorials Expense ices	Loan Repayment/Reimbursement Office Overhead/Rental Expense Poling 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)					
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics Commission Filers)					
Sch: 16/20 Rpt: 23/27	Moye, Eric V. (The	Honorable)		00020591					
4 CREDIT CARD		ncial institution	5 TOTAL OF UNITEMI						
ISSUER	see pi	see previous		EDIT					
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card	lssuer Paid					
	\$40.00	12/14/2024							
7 PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code					
	NTTA		5900 W. Plano Pkwy						
NITA									
			Plano, TX 75093						
8 PURPOSE OF EXPENDITURE	PURPOSE OF (a) Category EXPENDITURE (See Categories listed at the top of this schedule)			(b) Description Toll tag charges for travel in district					
	X Political								
Non-Political	(c) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule		tin, TX, officeholder living expense Office held					
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	ure to benefit C/OH								
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card	Issuer Paid					
	\$1,065.90	12/13/2024							
PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code					
	Crescent Court		400 Crescent Court						
			Dallas, TX 75201						
PURPOSE OF	(a) Category		(b) Description						
EXPENDITURE	(See Categories listed at the top		Food and beverages with supporters						
X Political	Food/Beverage Expe	lise							
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T. Check if Aus	tin, TX, officeholder living expense					
Complete ONLY if direct	Candidate/Officeholder	name C	Office sought	Office held					
expenditure to benefit C/OH									
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card	lssuer Paid					
	\$229.49	12/12/2024							
PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code					
Maria Dallas			8687 N. Central Expy	/, Suite 800					
	Macys Dallas								
			Dallas, TX 75225						
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description						
	Office Overhead/Rent		Office supplies						
X Political									
Non-Political		of Texas. Complete Schedule		tin, TX, officeholder living expense					
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name C	office sought	Office held					

B PURPOSE OF EXPENDITURE (a) Category (ther Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Office supplies 9 Complete QNLY if direct expenditure to benefit C/OH (c) Catedotrive of this schedule) Office Sought (b) Description Office supplies 9 Complete QNLY if direct expenditure to benefit C/OH (c) Catedotrive office holder name Office Sought PAYMENT (a) Amount Charged \$21.28 (b) Date of Charge 12/07/2024 (c) Date(s) Credit Card Issuer Paid PAYEE (a) Payee name NYtimes.com (b) Payee address; City, State, Zip Coc 620 8th Ave. PURPOSE OF EXPENDITURE (a) Category (the Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Subscription Complete QNLY if direct expenditure to benefit C/OH (c) Category (the Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Complete QNLY if direct expenditure to benefit C/OH (c) Category (the Categories listed at the top of this schedule) Office Sought (c) Date(s) Credit Card Issuer Paid PAYMENT (a) Amount Charged \$1,000.00 (b) Date of Charge (c) Date(s) Credit Card Issuer Paid (c) Date(s) Credit Card Issuer Paid PAYEE (a) Payee name \$1,000.00 (b) Date of Charge (c) Date(s) Credit Card Issuer Paid (c) Date(s) Credit Card Issuer Paid PAYMENT (a) Amount Charged \$1,000.00 (b) Date of Charge (c) Date(s) Credit Card		SCHEDULE F4							
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Advances Autor Regression for the partner include expansion f		EXPE	NDITURE CATEGOR	IES FOR BOX 10(a)					
1 Total pages Schedule F4: Sch: 17/20 Rpt: 24/27 2 FILER NAME: Moye, Eric V. (The Honorable) 3 Filer ID (Ethics Commission Files) 00020591 4 CREDIT CARD ISSUER Name of financial institution see previous 5 TOTAL OF UNITENES CHARGED TO A CREDIT CARD 5 6 PAYMENT (a) Amount Charged \$1.5.6 (b) Date of Charge 12/09/2024 (c) Date(s) Credit Card Issuer Paid 5 7 PAYEE (a) Payee name HP Instant Ink (b) Payee address; City, State, Zip Coc 3000 Hanover St. City, State, Zip Coc 3000 Hanover St. 8 PURPOSE OF EXPENDITURE (a) Category (See Caepointe issee at me top of this schedule) (b) Complete ONLY if direct expenditure to benefit C/OH (c) Clock if swell outside of Treas. Complete Soluty if direct expenditure to benefit C/OH Candidate/Officeholder name Office scought Office held 9 Complete ONLY if direct expenditure to benefit C/OH (a) Amount Charged \$21.28 (b) Date of Charge \$21.28 (c) Date of Charge \$21.28 (b) Payee address; City, State, Zip Coc 620 8th Ave. PAYEE (a) Payee name NYtimes.com (b) Payee address; City, State, Zip Coc 620 8th Ave. City, State, Zip Coc 620 8th Ave. PURPOSE OF EXPENDITURE (a) Category (See Campores state at the top of this schedule) Office Overhead/Rental Expense Citex if Auster, Tx othenbater Ining expense	Accounting/Banking Consulting Expense Contributions/ Donations Made By	Event Expe Fees Food/Beve /- Gift/Award I Committee Legal Serv	ense rage Expense s/Memorials Expense ices	Loan Repayment/Reimbursement S Office Overhead/Rental Expense T Polling Expense T Printing Expense T Salaries/Wages/Contract Labor C	ransportation Equipment & Related Expense ravel in District ravel Out of District				
Sch: 17/20 Rpt: 24/27 Moye, Eric V. (The Honorable) 00020591 4 CREDT CARD ISSUER Name of financial institution see previous 5 TOTAL OF UNITEMIZED CHARGED TO A CREDIT CARD \$ 6 PAYMENT (a) Amount Charged \$1.56 (b) Date of Charge 12/09/2024 (c) Date(s) Credit Card Issuer Paid \$ 7 PAYEE (a) Payee name HP Instant Ink (b) Payee address; City, State, Zip Coc 3000 Hanover St. City, State, Zip Coc 3000 Hanover St. 8 PURPOSE OF EXPENDITURE (a) Category (See Categories Issel at the top of this schedule) Office Coverhead/Rental Expense (b) Description Office supplies City, State, Zip Coc 3000 Hanover St. 9 Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name State Office sought Office held PAYEE (a) Payee name (b) Payee name State (b) Date of Charge State (c) Date(s) Credit Card Issuer Paid PAYEE (a) Amount Charged State (b) Date of Charge State (c) Date(s) Credit Card Issuer Paid PAYEE (a) Payee name NYtimes.com (b) Payee address; City, State, Zip Coc 620 8th Ave. City, State, Zip Coc 620 8th Ave. NYtimes.com New York, NY 10018 Candidate/Officeholder name Office Sought Office held PAYEE (a) Amount Charged St.000.0 (b) Date of Charge (b) Description <		· · · · · · · · · · · · · · · · · · ·	detion Oulde explains I						
4 CREDIT CARD ISSUER Name of financial institution see previous 5 TOTAL OF UNITENZED CHARGED TO A CREDIT CARD \$ 6 PAYMENT (a) Amount Charged \$1.56 (b) Date of Charge 12/09/2024 (c) Date(s) Credit Card Issuer Paid 7 PAYEE (a) Payee name HP Instant Ink (b) Payee address; 2000 Hanover St. City. State. Zip Coc 8 PURPOSE OF EXPENDITURE (a) Category (a) Category Cifice Overhead/Rental Expense (b) Description Office Supplies (c) Corect if two auside of Twos. Complete Schedule 7. Cnex if Ausin. TX. officeholder Ining expense 9 Complete ONLY if direct expenditure to benefit C/OH (a) Amount Charged (b) Date of Charge (b) Date of Charge (c) Date(s) Credit Card Issuer Paid Office rectarger is the lade of the top of this schedule 7. Cnex if Ausin. TX. officeholder Ining expense 9 Complete ONLY if direct expenditure to benefit C/OH (a) Amount Charged \$21.28 (b) Date of Charge (c) Date(s) Credit Card Issuer Paid Office held PAYEE (a) Payee name (b) Payee address; City. City. State. Zip Coc VITIMES.com Complete ONLY if direct Candidate/Officeholder name Office sought Office card Issuer Paid PAYEE (a) Category (Cardidate/Officeholder name Office sought	1 0								
ISSUER see previous EXPENDITURES CARD TO A CREDIT CARD \$ 6 PAYMENT (a) Amount Charged \$1.66 (b) Date of Charge 12/09/2024 (c) Date(s) Credit Card Issuer Paid 7 PAYEE (a) Payee name HP Instant Ink (b) Payee address: City. City. State. Zip Coc 3000 Hanover St. 8 PURPOSE OF EXPENDITURE Diffice Overhead/Rental Expense (a) Category (bac category to bis schedule) Office Overhead/Rental Expense (b) Description Office supplies Office Address: City. City. State. Zip Coc 9 Complete QALLY If direct expenditure to benefit C/OH Condidate/Officeholder name Office sought Office for the address: State. City. State. Zip Coc PAYEE (a) Amount Charged expenditure to benefit C/OH (b) Date of Charge 12/07/2024 (c) Date(s) Credit Card Issuer Paid City. State. Zip Coc PAYEE (a) Payee name NY times.com (b) Date of Charge 12/07/2024 (b) Payee address: City. City. State. Zip Coc PAYEE (a) Category (bree Callegory Candidate/Officeholder name Office Sought Ave. New York, NY 10018 Vertex Address: City. City. State. Zip Coc PAYEE (a) Category (bree Cally City of the code of the schedule) Office Overhead/Rental Expense Office sought Officeholder Imag expense Office held <td>Sch: 17/20 Rpt: 24/27</td> <td>Moye, Eric V. (The</td> <td>Honorable)</td> <td></td> <td>00020591</td>	Sch: 17/20 Rpt: 24/27	Moye, Eric V. (The	Honorable)		00020591				
See previous CHARGED TO A CREDIT 6 PAYMENT (a) Amount Charged \$1.56 (b) Date of Charge 12/09/2024 (c) Date(s) Credit Card Issuer Paid 7 PAYEE (a) Payee name HP Instant Ink (b) Payee address; 2000 Hanover St. City, State, Zip Coc 3000 Hanover St. 8 PURPOSE OF EXPENDITURE (a) Category (See Categories ited at the top of the schedule 1) (c)		Name of final	ncial institution						
S1.56 12/09/2024 PAYEE (a) Payee name HP Instant Ink Palo Alto, CA 94304 B PURPOSE OF EXPENDITURE (a) Category State (b) Payee address; Dollical (c) Category Mon-Political (c) Check if Austin, TX, officientoder living expense 9 Complete QNLY if direct Candidate/Officeholder name Office Denek if Austin, TX, officientoder living expense Office New York, NY 10018 PAYEE (a) Payee name (b) Date of Charge S21.28 12/07/2024 (c) Date(s) Credit Card Issuer Paid PAYEE (a) Category (b) Date of Twase (b) Payee address; City, State, Zip Coc S21.28 12/07/2024 (c) Date(s) Credit Card Issuer Paid PAYEE (a) Payee name (b) Date of Twase NYtimes.com New York, NY 10018 PURPOSE OF EXPENDITURE (a) Category Sec Carophere Sited at the ton of the schedule T. Check if Austin, TX, officeholder living expense Complete QNLY if direct (a) Category (b) Date of Charge (c) Date(s) Credit Card Issuer Paid Mon-Political (c) Deck if Austin, TX, officeholder living expense <t< td=""><td>ISSUER</td><td>see pi</td><td colspan="2">see previous</td><td></td></t<>	ISSUER	see pi	see previous						
7 PAYEE (a) Payee name (b) Payee address; City, State, Zip Coc 8 PURPOSE OF (a) Category (b) Description Office supplies (c) Category (c) Category <td>6 PAYMENT</td> <td>(a) Amount Charged</td> <td>(b) Date of Charge</td> <td>(c) Date(s) Credit Card Issue</td> <td>er Paid</td>	6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	er Paid				
Image: Construction of the product		\$1.56	12/09/2024						
HP Instant Ink Palo Alto, CA 94304 8 PURPOSE OF EXPENDITURE (a) Category (see Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description 9 Complete DNLY if direct expenditure to benefit C/OH (c)	7 PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code				
Palo Alto, CA 94304 8 PURPOSE OF EXPENDITURE Ann-Political (a) Category (See Cargones Issed at the top of this schedule) Office Overhead/Rental Expense (b) Description Office Supplies 9 Complete ONLY If direct expenditure to benefit C/OH Candidate/Officeholder name Office Sought PAYEE (a) Payee name NYtimes.com (b) Date of Charge 12/07/2024 (c) Date(s) Credit Card Issuer Paid PURPOSE OF EXPENDITURE (a) Category (See Categories Issid at the top of this schedule) Office Overhead/Rental Expense (b) Payee address; City, State, Zip Coc 620 8th Ave. PURPOSE OF EXPENDITURE (a) Category (See Categories Issid at the top of this schedule) Office Overhead/Rental Expense (b) Description Subscription Complete ONLY If direct expenditure to benefit C/OH (c) Check If tavel outside of Texas. Complete Schedule T. (b) Description Viscor Categories Issed at the top of this schedule) Office Overhead/Rental Expense (b) Description Subscription Very Positical (a) Category (See Categories Issed at the top of this schedule) Office Overhead/Rental Expense (b) Description Complete ONLY If direct expenditure to benefit C/OH (c) Category (See Categories Issed at the top of this schedule) Office Complete Sought Office held PAYEE (a) Amount Charged \$1,000.00 (b) Date of Charge 11/30/2024 (c)				3000 Hanover St.					
8 PURPOSE OF EXPENDITURE (a) Category (be categories listed at the top of this schedule) Office Coverhead/Rental Expense (b) Description Office supplies 9 Complete QNLY if direct expenditure to benefit C/OH (c)	HP Instant Ink								
8 PURPOSE OF EXPENDITURE (a) Category (be complete listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Office supplies 9 Non-Political Non-Political (c) Check if travel outside of Texas. Complete Schedule T. Candidate/Officeholder name Check if Austin. TX, officeholder living expense 9 Complete QNLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held PAYEE (a) Amount Charged \$21.28 (b) Date of Charge 12/07/2024 (c) Date(s) Credit Card Issuer Paid PAYEE (a) Payee name NYtimes.com (b) Payee address; City, State, Zip Cor 620 8th Ave. PURPOSE OF EXPENDITURE (a) Category (be categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Subscription Vitical (c) Check if travel outside of Texas. Complete Schedule T. Office Overhead/Rental Expense Check if Austin, TX, officeholder living expense Office Overhead/Rental Expense (c) Check if travel outside of Texas. Complete Schedule T. Office sought Check if Austin, TX, officeholder living expense PAYEE (a) Amount Charged (b) Date of Charge \$1,000.00 (b) Date of Charge (c) Date(s) Credit Card Issuer Paid PAYEE (a) Amount Charged \$1,000.00 (b) Date of Charge (c) Date(s) Credit Card Issuer Paid PAYEE (a) Payee name Harvard Un				Palo Alto, CA 94304					
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EXPENDITURE CATEGORIES FOR BOX 10(4) Extension Statusters											
1 Total pages Schedule F4: Sch: 20/20 Rpt: 27/27 2 FILER NAME Moye, Eric V. (The Honorable) 3 Filer ID (Ethics Commission Filers) 00020591 4 CREDIT CARD ISSUER Name of financial institution see previous 5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT \$ 6 PAYMENT (a) Amount Charged \$2,250.00 (b) Date of Charge 12/03/2024 (c) Date(s) Credit Card Issuer Paid \$ 7 PAYEE (a) Payee name Crescent Court (b) Payee address; Crescent Court City, State, Zip Code 400 Crescent Court 8 PURPOSE OF EXPENDITURE Non-Political (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Food/Beverage Expense (b) Description Food and beverages with supporters 9 Complete QNLY if direct Candidate/Officeholder name Office sought Office held	Accounting/Banking Consulting Expense Contributions/ Donations Made By -			Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense		Loan Repayment/Reimbursement So Office Overhead/Rental Expense Tra Polling Expense Tra Printing Expense Tra		Tra Tra Tra	ransportation Equipment & Related Expense ravel in District ravel Out of District		
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