# DIRECT CAMPAIGN EXPENDITURES CAMPAIGN FINANCE REPORT

### FORM DCE COVER SHEET PG 1

The DCE Instruction G	2 Total pages filed: 4					
3 FILER NAME	MS / MRS / MR	FIRST	•	MI	OFFICE	USE ONLY
	Mr.	Michael W.				OSE ONE I
	NICKNAME			SUFFIX	Date Received	
	INICKINAIVIE	LAST		SUFFIX	ELECTRONIC	ALLY FILED
		Moore			10/01/2025	
4 FILER ADDRESS	ADDRESS / PO BOX; AF	PT / SUITE #; CI	TY; STATE;	ZIP CODE		
	PO Box 823				Date Hand-delivered	or Date Postmarked
					Date Flama delivered	or Bato i Gottilation
	Andrews, TX 79714				Receipt #	Amount
E FILED DUONE			EVTENCION		4	
5 FILER PHONE		ONE NUMBER	EXTENSION		Date Processed	
	(432) 524-9653					
6 REPORT TYPE	January 15	X 3	Oth day before election		Date Imaged	
			de de la ferra de de c			
	July 15	□ 8	th day before election			
		☐ R	Runoff			
7 PERIOD COVERED	Month Day Yea			lonth Day	Year	
COVERED	08/01/2025	ı	HROUGH	09/26/202	5	
8 ELECTION	ELECTION DATE			ELECTION T		
	Month Day Yea	r   □'	Primary R	unoff	Other	
	11/04/2025		General X S <sub>I</sub>	pecial		
			<u> </u>			
9 FILER	Candidates	A. Supported				
ACTIVITY	(Identify by name or, if					
	applicable, classify by party.)					
(Attach lists on		B. Opposed				
plain paper to		В. Оррозси				
complete this report if						
necessary.)	0. Management	A Companied B			2005 44 04 5	0 11 1
	2. Measures (Describe by date and A. Supported Ballot ID:Prop A ESD Election Date:2025-11-04 Desc:Creation of a county ESD with tax increase				C:Creation of a	
	location of election and		ounty LOD With tax inc	Sicuso		
	nature of issue.)					
		B. Opposed				
	Officeholders     Assisted					
	(Identify by name or, if					
	applicable, classify by party.)					
GO TO PAGE 2						
I						

#### DIRECT CAMPAIGN EXPENDITURES CAMPAIGN FINANCE REPORT

# FORM DCE COVER SHEET PG 2

10	FILER NAME					11 Filer ID	(Ethics Commission Filers)
	Moore, Michael W. (Mr	·.)				00090056	
12 EXPENDITURE TOTALS  1. TOTAL UNITEMIZED POLITICAL EXPENDITURES				\$	0.00		
		2. TOTAL POLIT	ICAL EXPENDIT	URES		\$	1,500.00
13	AFFIDAVIT	•					
			1	I swear, or affirm, under p true and correct and inclu under Title 15, Election C	udes all infor	erjury, that the ac mation required	ecompanying report is to be reported by me
			Mr. Michae			el W. Moore	
			•			re of Filer	
				Signature of indiv		or Ithority to sign o	n behalf of entity
					(only if File	r is an entity)	
	AFFIX NOTARY STAME	P / SEAL ABOVE					
	Sworn to and subscribed	d before me, by the sa	uid		, t	his the	day
	of	, 20, to ce	rtify which, witness	my hand and seal of offic	ce.		
	Signature of officer ac	dministering oath	Printed name (	of officer administering or	ath	Title of office	er administering oath
	-	-		_			-

#### **SUBTOTALS - DCE**

#### FORM DCE COVER SHEET PG 3 3 of 4

14 FILER NAME 15 F	Filer ID (Ethics Commission Filers)
Moore, Michael W. (Mr.)	00090056
16 SCHEDULE SUBTOTALS  NAME OF SCHEDULE	SUBTOTAL AMOUNT
1. X SCHEDULE F1: POLITICAL EXPENDITURES	\$ 1,500.00
2. X SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ 0.00
3. X SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 0.00

#### POLITICAL EXPENDITURES SCHEDULE F1 **EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Travel Out of District OTHER (enter a category not listed above) Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 1/1 Rpt: 4/4 Moore, Michael W. (Mr.) 00090056 4 Date Payee name 08/13/2025 Creative Marketing Nerd 6 Amount (\$) Payee address; City; State; Zip Code \$1,500.00 200 N Texas #352 Expenditure from Odessa, TX 79760 corporate funds 8 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Advertising Expense **EXPENDITURE** Website Creation for ESD Campaign Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH