CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction	n Guide explains how to comp	lete this form	1 Filer ID(Eth	nics Commissio	on filers)	2 Total pages filed
3 CANDIDATE /	MS/MRS/MR F	FIRST	MI		OFFICE	E USE ONLY
OFFICEHOLDER	:	Sandie	Mullins	Dat	e Received	
NAME	NICKNAME L	LAST	SUFFIX		10/26/2015	
	r i	Moger				
4 CANDIDATE /	ADDRESS / PO BOX;	APT/SUITE #; CIT	Y; STATE; ZIP C	ODE		
OFFICEHOLDER	PO Box 1581					
MAILING				Date	Hand-delivered	or Date Postmarked
ADDRESS	Houston, TX 77251					
Change of address						
5 CANDIDATE /	AREA CODE F	PHONE NUMBER	EXTENSION			
OFFICEHOLDER						
PHONE						
6 CAMPAIGN	MS/MRS/MR F	FIRST	MI	Rec	ceipt #	Amount
TREASURER	F	Bert		Dat	e Processed	
NAME	NICKNAME L	LAST	SUFFIX	Dat	e Imaged	
		Keller				
7 CAMPAIGN	STREET ADDRESS (No PO Box Please);	APT/SUITE # ;	CITY;	STATE;	ZIP CODE
TREASURER	12306					
ADDRESS	Broken Bough Dr					
(Resident or business)	Houston, TX 77024					
8 CAMPAIGN	AREA CODE F	PHONE NUMBER	EXTENSION			
TREASURER PHONE						
	January 15 30th day befor	re election	al repport (Attach C/OH	- FR)	ded \$500 limit	
9 REPORT TYPE		—-		—		· · · · · · · · · · · · · · · · · · ·
	July 15 X 8th day before	e election Ru	noff	15th d	ay after campaign trea	surer appointment(officeholder only)
10 PERIOD	Month Day	Year			Month Day	Year
COVERED	9/25/2015		THROUGH		10/24/2	2015
11 ELECTION	ELECTION DATE	ELECTIO	N TYPE			
	Month Day Year			4		
	11/3/2015	Primary	Rur	1011	X General	Special
12 OFFICE	OFFICE HELD (if any)	I	13 OF	FICE SOUGHT (if k	(nown)	
			Ci	ty Council -	District G	

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH

COVER SHEET PG 2

14 FILER NAME Sandie Mullins Moger		15 Filer ID (Ethics Commission Filers)		
	expenditures may have	political contributions accepted or political expenditures n been made without the candidate's or officeholder's know receive notice of such expenditures.		
16 NOTICE FROM	COMMITTEE TYPE	COMMITTEE NAME		
POLITICAL	GENERAL	COMMITTEE ADDRESS		
COMMITTEE(S)				
	SPECIFIC			
		COMMITTEE CAMPAIGN TREASURER NAME		
additional pages		COMMITTEE CAMPAIGN TREASURER ADDRESS		
17 CONTRIBUTION TOTALS		AL CONTRIBUTIONS OF \$50 OR LESS (C NS, OR GUARANTEES OF LOANS), UNLE		\$0.00
	2 TOTAL POLITIC	AL CONTRIBUTIONS		\$15,234.32
	(OTHER THAN F	PLEDGES, LOANS, OR GUARANTEES OF	LOANS)	
EXPENDITURE TOTALS	3 TOTAL POLITIC	AL EXPENDITURES OF \$100 OR LESS, U	INLESS ITEMIZED	\$0.00
	4 TOTAL POLITIC	AL EXPENDITURES		\$62,745.59
CONTRIBUTION BALANCE	5 TOTAL POLITIC OF REPORTING	AL CONTRIBUTIONS MAINTAINED AS OF	THE LAST DAY	\$0.00
OUTSTANDING LOAN TOTALS	6 TOTAL PRINCIP LAST DAY OF T	AL AMOUNT OF ALL OUTSTANDING LOA HE REPORTING PERIOD	ANS AS OF THE	\$0.00
18 AFFIDAVIT				
		report is true a	rm, under penalty of perjury, th nd correct and includes all info e under Title 15, Election Code	rmation required to be
			Larry M. Hicks	
			Signature of Candidate or (Officeholder
AFFIX NOT STAMP / SE	-			
	-	I		day
of	, 20	, to certify which, witness my h	and and seal of office.	
Signature of officer admin	nistering oath	Print name of officer administering o	ath Title of officer	administering oath

SUBTOTALS - COH FORM C/OH **COVER SHEET PG 3** 19 FILER NAME Sandie Mullins Moger 20 Filer ID (Ethics Commission Filers) 21 SCHEDULE SUBTOTALS SUBTOTAL NAME OF SCHEDULE AMOUNT SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS 1. 10050 SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS 2. 5184.32 SCHEDULE B: PLEDGED CONTRIBUTIONS 3. SCHEDULE E: LOANS 4. SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS 5. 33201.87 SCHEDULE F2: UNPAID INCURRED OBLIGATIONS 6. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLICITAL CONTRIBUTIONS 7. SCHEDULE F4: EXPENDITURES MADE FROM CREDIT CARD 8. SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS 9. 29543.72 SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH 10. 11. SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER 12.

CANDIDATE / OFFICEHOLDER REPORT: NOTICE FROM POLITICAL COMMITTEE(S)

C/OH NAME Sandie Mullins Moger

FORM C/OH ADDENDUM

ACCOUNT # (Ethics Commission filers)

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.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE	A1
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he Instruction	Guide explains how to complete	e this form.		1 Total Pages Schedule A1:
FILER NAME	Sandie Mullins Moger			3 Filer ID (Ethics Commission filers)
Date	5 Full name of contributor	out of state	PAC(ID#)	
	Gregory A. Degeorge			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
10/15/2015		Houston	TX 77057	\$2,500.00
Principal oc	cupation / Job title (See Instructions)		9 Employer (See Instruc	ctions)
Date	5 Full name of contributor	out of state	PAC(ID#)	
	Kathaleen Wall			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
10/14/2015		Houston	TX 77001	\$5,000.00
Principal oc	cupation / Job title (See Instructions)		9 Employer (See Instruc	tions)
Date	5 Full name of contributor	out of state	PAC(ID#)	
	Greater Houston Resturant Association PAC			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
9/30/2015		Houston	TX 77007	\$500.00
Principal oc	cupation / Job title (See Instructions)		9 Employer (See Instruc	tions)
Date	5 Full name of contributor	out of state	PAC(ID#)	
	John Ross Wallace	_		7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
10/8/2015		Houston	TX 77057	\$300.00
Principal oc	cupation / Job title (See Instructions)		9 Employer (See Instruc	tions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruct	ion Guide explains how to comple	1 Total Pages Schedule A1:		
2 FILER NA	ME Sandie Mullins Moger			3 Filer ID (Ethics Commission filers)
4 Date	5 Full name of contributor	out of state	PAC(ID#)	
			- ()	
	Bruce Nichols			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
10/14/20	15	Houston	TX 77024	100.00
8 Princip	al occupation / Job title (See Instructions)		9 Employer (See Instruc	
4 Date	5 Full name of contributor	out of state	PAC(ID#)	
	Tracey F. Moss			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
10/7/201	5	Houston	TX 77055	100.00
8 Princip	al occupation / Job title (See Instructions)		9 Employer (See Instruc	tions)
4 Date	5 Full name of contributor	out of state	PAC(ID#)	
	Houston Westside PAC			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
10/12/20	15	Houston	TX 77242	250.00
8 Princip	al occupation / Job title (See Instructions)		9 Employer (See Instruc	cuons)
4 Date	5 Full name of contributor	out of state	PAC(ID#)	
	John G. Pohlman			7 Amount of contributions (\$)
	6 Contributor address;	City;	State; Zip Code	
10/7/201	5	Houston	TX 77008	100.00
8 Princip	al occupation / Job title (See Instructions)		9 Employer (See Instruc	ltions)
4 Date	5 Full name of contributor	out of state	PAC(ID#)	
1	I			1

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.				1 Total Pages Schedule A1:		
2 FILER NAME	Sandie Mullins Moger			3 Filer ID (Ethics Commission filers)		
	Beirne, Maynard & Parsons, LL	_P		7 Amount of contributions (\$)		
	6 Contributor address;	City;	State; Zip Code			
10/12/2015		Houston	TX 77056	500.00		
B Principal oc	ccupation / Job title (See Instructions)	9 Employer (See Instruc	ctions)		
1 Date	5 Full name of contributor Stephanie M. Newell	out of state	PAC(ID#)	7 Amount of contributions (\$)		
	6 Contributor address;	City;	State; Zip Code			
10/6/2015		Houston	TX 77024	100.00		
3 Principal oc	Ccupation / Job title (See Instructions)	9 Employer (See Instruc	L ctions)		
1 Date	5 Full name of contributor	out of state	PAC(ID#)			
	Nolia Rohde			7 Amount of contributions (\$)		
10/6/2015	Nolia Rohde 6 Contributor address;	City; Houston	State; Zip Code TX 77077	7 Amount of contributions (\$)		
	6 Contributor address;	Houston	TX 77077	100.00		
		Houston		100.00		
3 Principal oc	6 Contributor address;	Houston	TX 77077	100.00		
3 Principal oc	6 Contributor address; ccupation / Job title (See Instructions 5 Full name of contributor	Houston	TX 77077 9 Employer (See Instruc	- 100.00 ctions)		
 Principal oc Date 10/9/2015 	6 Contributor address; ccupation / Job title (See Instructions 5 Full name of contributor Bernard Toomey	Houston) out of state City; Kingwood	TX 77077 9 Employer (See Instruct PAC(ID#) State; Zip Code	tions) 7 Amount of contributions (\$) 250.00		

MONETAR	Y POLITICAL CONTI	SCHEDULE		
The Instruction (Guide explains how to complet	e this form.		1 Total Pages Schedule A1:
2 FILER NAME	Sandie Mullins Moger			3 Filer ID (Ethics Commission filers)
10/21/2015	6 Contributor address;	City; Pattison	State; Zip Code TX 77466	- 250.00
8 Principal occ	upation / Job title (See Instructions)		9 Employer (See Instru	ctions)
	ATTACH ADDITIC	ONAL COPIES	S OF THIS SCHEDUL	E AS NEEDED
	If contributor is out-of-state PA	C, please see in	struction guide for addition	onal reporting requirements

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

CONTRIBU	TIONS					
The Instruction Guide explains how to complete this form.				1	Total Pages Scl	hedule A2:
2 FILER NAME S	andie Mullins Moger			3 F	iler ID (Ethics Commi	ssion filers)
4 TOTAL OF UN	TEMIZED IN-KIND POLITICA	AL CONTRIBU	TIONS	\$		
5 Date	6 Full name of contributor Charles Moger	out of state	PAC(ID#)	8	Amount of	9 In-Kind contribution
					contributions (\$)	description
	7 Contributor address;	City;	State; Zip Code	•		
10/22/2015		Houston	TX 77077		3775.00	TV Production
					Check if travel outsi Schedule T	de of Texas, complete
10 Principal occu	pation / Job title (See Instructions)		11 Employer (See Instru	uctior	ns)	
5 Date	6 Full name of contributor	out of state	PAC(ID#)			
	Mills Worsham			8	Amount of contributions (\$)	9 In-Kind contribution description
	7 Contributor address;	City;	State; Zip Code			
10/1/2015		Houston	TX 77042		250.00	Meet & Greet
					Check if travel outsi Schedule T	de of Texas, complete
10 Principal occu	pation / Job title (See Instructions)		11 Employer (See Instru	uctior	ns)	
5 Date	6 Full name of contributor	out of state	PAC(ID#)			
	Paul Lock			8	Amount of contributions (\$)	9 In-Kind contribution description
	7 Contributor address;	City;	State; Zip Code	•		
10/26/2015		Houston	TX 77042		120.00	Meet & Greet
					Check if travel outsi Schedule T	de of Texas, complete
10 Principal occu	pation / Job title (See Instructions)		11 Employer (See Instru	uctior	ns)	

SCHEDULE A2

NON-MONETARY (IN-KIND) POLITICAL

NON-MON	NON-MONETARY (IN-KIND) POLITICAL						SCHEDULE A2
CONTRIB	UTIONS						
The Instruction Guide explains how to complete this form.				1	Total Pages Sch	nedule A2:	
2 FILER NAME Sandie Mullins Moger				3 Fi	ler ID (Ethics Commis	sion filers)	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS				\$			
5 Date	6 Full name of contributor Fred Welling	out of stat	e PAC(ID#)		8	Amount of contributions (\$)	9 In-Kind contribution description
9/25/2015	7 Contributor address;	City; Houston	State; TX 77007	Zip Code		1039.32 Check if travel outsid Schedule T	Food/beverage for fundraiser de of Texas, complete
10 Principal o	occupation / Job title (See Instructions	,		er (See Instru			
	ATTACH ADDIT						
	If contributor is out-of-state	PAC, please see in	struction guid	le for additio	nal r	eporting requiremen	ts

	The Instruction Guide ex	xplains how to c	omplete this for	m
1 Total pages Schedule F1:	² FILER NAME Sandie Mullins	s Moger		3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name			
10/5/2015	University Copy Center			
6 Amount (\$)	7 Payee address; City;	State;	Zip Code	
448.16	4434 University Dr, STE 170)		
	Houston TX 77204-6042			
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description		
		Check if t	travel outside of 1	Fexas, complete Schedule T
		Check if <i>i</i>	Austin, TX, office	holder living expense
	Printing Expense		Campaign Materi	als
9 Complete ONLY if direct	Candidate / Officehoder name	office sought		office held
expendituree to benefit C/OH				
4 Date	5 Payee name			
10/7/2015	University Copy Center			
6 Amount (\$)	7 Payee address; City;	State;	Zip Code	
854.34	4434 University Dr, STE 170)		
	Houston TX 77204-6042			
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description		
		Check if t	travel outside of T	Fexas, complete Schedule T
		Check if	Austin, TX, officel	holder living expense
	Printing Expense		Campaign Materi	
9 Complete ONLY if direct	Candidate / Officehoder name	office sought		office held
expendituree to benefit C/OH		0		
4 Date	5 Payee name			
10/8/2015	Larry M. Hicks			
6 Amount (\$)	7 Payee address; City;	State;	Zip Code	
			p 0000	
405.00	10500 Northwest Freeway, S	512212		

(b) Description

Houston TX 77092

8 PURPOSE OF EXPENDITURE (a) Category

SCHEDULE F1

The Instruction Guide explains how to complete this form.					
1 Total pages Schedule F1:	² FILER NAME Sandie Mullins	Moger	3 Filer ID (Ethics Commission filers)		
	Accounting/Banking	Check if travel outside of Te Check if Austin, TX, officeho Campaign Finance	older living expense		
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought o	ffice held		
4 Date	5 Payee name				
10/12/2015	BMAHV				
6 Amount (\$)	7 Payee address; City;	State; Zip Code			
500.00	7817 Calhoun Houston TX 77033				
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description			
	Advertising Expense	Check if travel outside of Te Check if Austin, TX, officeho Political Events			
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought o	ffice held		

	The Instruction Guid	e explains how to	complete this for	rm.
1 Total pages Schedule F1:	² FILER NAME Sandie Mull	ins Moger		3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name			
9/30/2015	Bison Signs			
6 Amount (\$)	7 Payee address; City;	State;	Zip Code	
1,266.85	10100 Clay Road Suite G			
	Houston TX 77080			
PURPOSE OF EXPENDITURE	(a) Category	(b) Descriptio	n	
		Check i	if travel outside of	Texas, complete Schedule T
		Check i	if Austin, TX, office	eholder living expense
	Advertising Expense		Campaign Signs	
O Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought		office held
	<u> </u>			
4 Date	5 Payee name			
10/6/2015	Raconteur Media Compa	-		
ን Amount (\$)	7 Payee address; City;	State;	Zip Code	
246.11	101 W. 6th Street Suite 61	3		
	Austin TX 78701			
B PURPOSE OF EXPENDITURE	(a) Category	(b) Descriptio		
				Texas, complete Schedule T
		Check i		eholder living expense
	Solicitation/Fundraising Expense		Email Messages	
Complete ONLY if direct	Candidate / Officehoder name	office sought		office held
expendituree to benefit C/OH		onice sought		onceneid
L Date	5 Payee name			
10/6/2015	Beavers Media			
6 Amount (\$)	7 Payee address; City;	State;	Zip Code	
1,500.00	8925 Briar Forest Dr.			

The Instruction Guide explains how to complete this form.			
1 Total pages Schedule F1:	² FILER NAME Sandie Mullins	Moger	3 Filer ID (Ethics Commission filers)
	Advertising Expense	Check if travel outside of Te Check if Austin, TX, officeho September Retaine	older living expense
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name c	ffice sought o	ffice held
4 Date	5 Payee name		
10/6/2015	What's Up Radio Program		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
8,000.00	12337 Jones Road, Suite 450 Houston TX 77070		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
	Advertising Expense	Check if travel outside of Te Check if Austin, TX, officeho Campaign Ad	
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	ffice sought o	ffice held

	The Instruction Guide	explains how to	complete this fo	prm.
1 Total pages Schedule F1:	² FILER NAME Sandie Mullir	ns Moger		3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name			-
10/6/2015	Barfield			
6 Amount (\$)	7 Payee address; City;	State;	Zip Code	
600.00	1312 Woodvine Dr.			
	Houston TX 77055			
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Descriptio	n	
		Check	if travel outside of	Texas, complete Schedule T
		Check	if Austin, TX, offic	eholder living expense
	Advertising Expense		Photography	
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought		office held
4 Date	5 Payee name			
10/4/2015	GreenGo			
6 Amount (\$)	7 Payee address; City;	State;	Zip Code	
900.00	117 1/2 Dresden St.			
	Houston TX 77012			
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Descriptio	n	
		Check	if travel outside of	Texas, complete Schedule T
		Check	if Austin, TX, offic	eholder living expense
	Salaries/Wages/Contract		Campaign Signs	3
	Labor			
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought		office held
4 Date	5 Payee name			
10/6/2015	GreenGo			
6 Amount (\$)	7 Payee address; City;	State;	Zip Code	
1,650.00	117 1/2 Dresden St.			

The Instruction Guide explains how to complete this form.				
1 Total pages Schedule F1:	² FILER NAME Sandie Mullins	Moger	3 Filer ID (Ethics Commission filers)	
	Salaries/Wages/Contract Labor	Check if travel outside of To Check if Austin, TX, officeh Blockwalking	exas, complete Schedule T older living expense	
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought c	office held	
4 Date	5 Payee name			
10/6/2015	Moscarelli Media			
6 Amount (\$)	7 Payee address; City;	State; Zip Code		
4,000.00	1641 1/2 Cortlandt St. Houston TX 77008			
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description		
	Advertising Expense	Check if travel outside of To Check if Austin, TX, officeh Cable TV	exas, complete Schedule T older living expense	
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought c	office held	

	The Instruction Guide	e explains how to complet	e this form.
1 Total pages Schedule F1:	² FILER NAME Sandie Mulli	ns Moger	3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name		
10/8/2015	DiscPro		
6 Amount (\$)	7 Payee address; City;	State; Zip Co	de
5,853.99	339 Greens Landing Drive		
	Houston TX 77038		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel o	utside of Texas, complete Schedule T
		Check if Austin,	TX, officeholder living expense
	Printing Expense	Postage	
			<i>"</i>
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought	office held
4 Date	5 Payee name		
10/12/2015			
6 Amount (\$)	University Copy Center 7 Payee address; City;	State; Zip Co	10
506.07	4434 University Dr, STE 17		
500.07			
	Houston TX 77204-6042		
8 PURPOSE OF EXPENDITURE		(b) Description	
			utside of Texas, complete Schedule T
			TX, officeholder living expense
	Printing Expense		gn Materials
			5
9 Complete ONLY if direct	Candidate / Officehoder name	office sought	office held
expendituree to benefit C/OH			
4 Date	5 Payee name		
10/13/2015	Larry M Hicks, CPA		
6 Amount (\$)	7 Payee address; City;	State; Zip Co	de
150.00	10500 Northwest Freeway,	, STE 212	

(b) Description

Houston TX 77092

8 PURPOSE OF EXPENDITURE (a) Category

	The Instruction Guide e	xplains how to complete this form	n.
1 Total pages Schedule F1:	² FILER NAME Sandie Mullins	Moger	3 Filer ID (Ethics Commission filers)
	Accounting/Banking	Check if travel outside of Te Check if Austin, TX, officeh Accounting service	older living expense
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought c	office held
4 Date	5 Payee name		
10/21/2015	DiscPro		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
6,284.90	339 Greens Landing Drive Houston TX 77038		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
	Advertising Expense	Check if travel outside of Te Check if Austin, TX, officeh Mailer	
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought c	office held

	CONTRIBUTIONS		
	The Instruction Guide e	xplains how to complete this for	rm.
1 Total pages Schedule F1:	² FILER NAME Sandie Mullins	Moger	3 Filer ID (Ethics Commission filers)
4 Date	5 Payee name		
10/14/2015	Piryx,Inc		
6 Amount (\$)	7 Payee address; City;	State; Zip Code	
36.45	580 Howard St. #402		
	San Francisco CA 94105		
8 PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Check if travel outside of Check if Austin, TX, office	Texas, complete Schedule T sholder living expense
	Accounting/Banking	Transactions Fee	9
9 Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought	office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

		The Instance is a Outline service is	
1	Total pages Schedule F2:	The Instruction Guide explains here a series of the series	3 Filer ID (Ethics Commission filers)
'	Total pages Schedule 12.	2 FILER NAME Sandie Mullins Moger	
4	TOTAL OF UNITEMIZED UNPA	-	\$
5	Date	6 Payee name	
	10/2/2015	DiscPro	
7	Amount (\$)	8 Payee address; City;	State; Zip Code
	4,605.00	339 Greens Landing Drive	
		Houston TX 77038	
9	TYPE OF EXPENDITURE	Political	Non-Political
10	PURPOSE OF EXPENDITURE	(a) Category (I	b) Description
			Check if travel outside of Texas, complete Schedule T
			Check if Austin, TX, officeholder living expense
		Advertising Expense	Mailer
11	Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought office held
		Sandi Mullins Moger C	City Council - District G N/A
5	Date	6 Payee name	
	10/6/2015	Encore Printstore	
7	Amount (\$)	8 Payee address; City;	State; Zip Code
	549.21	21815 Katy Freeway Suite C-1	10
		Katy TX 77450	
9	TYPE OF EXPENDITURE	Political	Non-Political
10	PURPOSE OF EXPENDITURE	(a) Category (l	b) Description
			Check if travel outside of Texas, complete Schedule T
			Check if Austin, TX, officeholder living expense
		Advertising Expense	Campaign Advertising Materials
11	Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought office held
	experience to benefit 0/011		City Council - District G N/A
		Sandi Mullins Moger C	
5	Date		
5	Date 10/23/2015		

	NPAID INCURRED	OBLIGATIONS	SCHEDULE F2
		The Instruction Guide explains	how to complete this form.
1	Total pages Schedule F2:	2 FILER NAME Sandie Mullins Moger	3 Filer ID (Ethics Commission filers)
4	TOTAL OF UNITEMIZED UNPA	ID INCURRED OBLIGATIONS	\$
	394.93	1126 S 70th Street Milwaukee Wi 53214	
9	TYPE OF EXPENDITURE	Political	Non-Political
10	PURPOSE OF EXPENDITURE	(a) Category	(b) Description
		Advertising Expense	Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Phone Calls
11	Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought office held
		Sandi Mullins Moger	City Council - District G N/A
5	Date	6 Payee name	
	10/24/2015	Colon and Co.	
7	Amount (\$)	8 Payee address; City;	State; Zip Code
	5,000.00	3311 Richmond, Ste 319 Houston TX 77098	
9	TYPE OF EXPENDITURE	Political	Non-Political
10	PURPOSE OF EXPENDITURE	(a) Category	(b) Description
		Consulting Expense	Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Consulting Expense
11	Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought office held
		Sandi Mullins Moger	City Council - District G N/A
5	Date	6 Payee name	
	10/24/2015	Colon and Co.	
7	Amount (\$)	8 Payee address; City;	State; Zip Code
	100.00	3311 Richmond, Ste 319	
		Houston TX 77098	

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UNPAID INCURRED OBLIGATIONS

			The Instruction Guide explains how to complete this form.			
1	Total pages Schedule F2:	2	FILER NAME Sandie Mullins Moger		3 Filer ID (Ethics Commission filers)	
4	TOTAL OF UNITEMIZED UNPA	١D	INCURRED OBLIGATIONS		\$	
9	TYPE OF EXPENDITURE		Political		Non-Political	
10	PURPOSE OF EXPENDITURE	(a) Category	(b) [Description	
					Check if travel outside of Texas, complete Schedule T	
					Check if Austin, TX, officeholder living expense	
			Campaign Event Expense		Campaign Event Printing	
11	Complete ONLY if direct	C	andidate / Officehoder name		office sought office held	
	expendituree to benefit C/OH		Condi Mulling Magar	City		
			Sandi Mullins Moger	City	Council - District G N/A	
5	Date	6	Payee name			
	10/24/2015		Colon and Co.			
7	Amount (\$)	8	Payee address; City;	Sta	ate; Zip Code	
	3,750.00		3311 Richmond, Ste 319			
			Houston TX 77098			
9	TYPE OF EXPENDITURE		Political		Non-Political	
10	PURPOSE OF EXPENDITURE	(a) Category	(b) [Description	
					Check if travel outside of Texas, complete Schedule T	
					Check if Austin, TX, officeholder living expense	
			Campaign Contract Labor		Check if Austin, TX, officeholder living expense Campaign Event & Field Work	
			Campaign Contract Labor			
			Campaign Contract Labor			
11	Complete ONLY if direct	C	Campaign Contract Labor			
11	Complete ONLY if direct expendituree to benefit C/OH	Ci	andidate / Officehoder name	City	Campaign Event & Field Work office sought office held	
11		Ci		City	Campaign Event & Field Work	
11		C;	andidate / Officehoder name	City	Campaign Event & Field Work office sought office held	
	expendituree to benefit C/OH		andidate / Officehoder name Sandi Mullins Moger	City	Campaign Event & Field Work office sought office held	
5	expendituree to benefit C/OH		andidate / Officehoder name Sandi Mullins Moger Payee name		Campaign Event & Field Work office sought office held	
5	expendituree to benefit C/OH Date 10/24/2015	6	andidate / Officehoder name Sandi Mullins Moger Payee name Colon and Co.		Campaign Event & Field Work office sought Council - District G N/A	
5	expendituree to benefit C/OH Date 10/24/2015 Amount (\$)	6	andidate / Officehoder name Sandi Mullins Moger Payee name Colon and Co. Payee address; City;		Campaign Event & Field Work office sought Council - District G N/A	
5	expendituree to benefit C/OH Date 10/24/2015 Amount (\$)	6	andidate / Officehoder name Sandi Mullins Moger Payee name Colon and Co. Payee address; City;		Campaign Event & Field Work office sought Council - District G N/A	
5	expendituree to benefit C/OH Date 10/24/2015 Amount (\$)	6	andidate / Officehoder name Sandi Mullins Moger Payee name Colon and Co. Payee address; City; 3311 Richmond, Ste 319		Campaign Event & Field Work office sought Council - District G N/A	
7	expendituree to benefit C/OH Date 10/24/2015 Amount (\$) 366.39	6	andidate / Officehoder name Sandi Mullins Moger Payee name Colon and Co. Payee address; City; 3311 Richmond, Ste 319 Houston TX 77098 Political	Sta	Campaign Event & Field Work office sought Council - District G N/A ate; Zip Code	

U	UNPAID INCURRED OBLIGATIONS SCHEDULE F			
	The Instruction Guide explains how to complete this form.			
1	Total pages Schedule F2:	2 FILER NAME Sandie Mu Moger	Ilins 3 Filer ID (Ethics Commission filers)	
4	TOTAL OF UNITEMIZED UNPA	AID INCURRED OBLIGATIONS	\$	
		Advertising Expense	Check if Austin, TX, officeholder living expense Campaign Advertising Materials	
11	Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought office held	
		Sandi Mullins Moger	City Council - District G N/A	
5	Date 10/22/2015	6 Payee name Sutter House Printing &	Mailing	
7	Amount (\$)	8 Payee address; City;	State; Zip Code	
	7,239.28	14760 Memorial Drive, S	te 303	
		Houston TX 77079		
9	TYPE OF EXPENDITURE	Political	Non-Political	
10	PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Advertising Expense	Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Campaign Advertising Materials	
11	Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought office held	
		Sandi Mullins Moger	City Council - District G N/A	

	NPAID INCURRED		SCHEDULE		
	The Instruction Guide explains how to complete this form.				
1	Total pages Schedule F2:	FILER NAME Sandie Mullins Moger	3 Filer ID (Ethics Commission filers)		
4	TOTAL OF UNITEMIZED UNPA	ID INCURRED OBLIGATIONS	\$		
5	Date	6 Payee name			
	10/19/2015	Encore Printstore			
7	Amount (\$)	8 Payee address; City;	State; Zip Code		
	572.97	21815 Katy Freeway Suite C-11	10		
		Katy TX 77450			
9	TYPE OF EXPENDITURE	Political	Non-Political		
10	PURPOSE OF EXPENDITURE	(a) Category (t	b) Description		
			Check if travel outside of Texas, complete Schedule T		
			Check if Austin, TX, officeholder living expense		
		Advertising Expense	Campaign Advertising Materials		
11	Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought office held		
		Sandi Mullins Moger C	City Council - District G N/A		
5	Date	6 Payee name			
	10/12/2015	DiscPro			
7	Amount (\$)	8 Payee address; City;	State; Zip Code		
	4,605.00	339 Greens Landing Drive			
	·				
		Houston TX 77038			
9	TYPE OF EXPENDITURE	Political	Non-Political		
10	PURPOSE OF EXPENDITURE	(a) Category (t	b) Description		
		ľ	Check if travel outside of Texas, complete Schedule T		
			Check if Austin, TX, officeholder living expense		
		Advertising Expense	Campaign Advertising Materials		
11	Complete ONLY if direct	Candidate / Officehoder name	office sought office held		
	expendituree to benefit C/OH		-		
		Sandi Mullins Moger C	City Council - District G N/A		
5	Date	6 Payee name			
5	Date 10/21/2015	6 Payee name GreenGo			

U	NPAID INCURRED	OBLIGATIONS	SCHEDULE F2	
	The Instruction Guide explains how to complete this form.			
1	Total pages Schedule F2:	FILER NAME Sandie Mullins Moger	S 3 Filer ID (Ethics Commission filers)	
4	TOTAL OF UNITEMIZED UNPA	ID INCURRED OBLIGATIONS	\$	
	2,300.00	117 1/2 Dresden Street Houston TX 77012		
9	TYPE OF EXPENDITURE	Political	Non-Political	
10	PURPOSE OF EXPENDITURE	(a) Category	(b) Description	
		Polling Expense	Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Blockwalking	
11	Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought office held	
		Sandi Mullins Moger	City Council - District G N/A	
5	Date	6 Payee name		
	9/25/2015	GreenGo		
7	Amount (\$)	8 Payee address; City;	State; Zip Code	
	1,200.00	117 1/2 Dresden Street		
		Houston TX 77012		
9	TYPE OF EXPENDITURE	Political	Non-Political	
10	PURPOSE OF EXPENDITURE	(a) Category Polling Expense	(b) Description Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense Blockwalking	
11	Complete ONLY if direct expendituree to benefit C/OH	Candidate / Officehoder name	office sought office held	
		Sandi Mullins Moger	City Council - District G N/A	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES

POLITICAL EXP	PENDITURES ERSONAL FUNDS	SCHEDULE G
	The Instruction Guide explains how	to complete this form.
1 Total Pages Schedule G:	² FILER NAME Sandie Mullins Moger	3 FilerID (Ethics Commission filers)
4 Date	5 Payee name	
10/1/2015	Conservative Media Properties	
6 Amount (\$)	7 Payee Address;	City; State; Zip Code
10,000.00	2211 Norfolk St. Suite 920	Houston TX 77098
X Reimbursement from		
political contributions		
intended		
8	(a) Category	(b) Description
PURPOSE OF	Advertising Expense	Campaign Ad
EXPENDITURE		Check if travel outside of Texas, complete Schedule T
		Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
	1	
4 Date	5 Payee name	
10/7/2015	Moscarelli Media, LLC	
6 Amount (\$)	7 Payee Address;	City; State; Zip Code
18,515.00	1641 1/2 Cortlandt St.	Houston TX 77008
X Reimbursement from		
political contributions		
intended		
8	(a) Category	(b) Description
PURPOSE OF EXPENDITURE	Advertising Expense	Cable TV Buy
		Check if travel outside of Texas, complete Schedule T
		Check if Austin, TX, officeholder living expense
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
4 Date	5 Payee name	
9/25/2015	Costco	
6 Amount (\$)	7 Payee Address;	City; State; Zip Code
1,028.72	3836 Richmond	Houston TX 77027
X Reimbursement from		
political contributions		
intended		
8	(a) Category	(b) Description

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

	MADE I ROM FERSONAL I ONDS				
	The Instruction Guide explains how to complete this form.				
1	Total Pages Schedule G:	² FILER NAME Sandie Mullins Moger	3 FilerID (Ethics Commission filers)		
	PURPOSE OF EXPENDITURE	Event Expense	Food and beverage for fundraiser Check if travel outside of Texas, complete Schedule T Check if Austin, TX, officeholder living expense		
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED