

JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH
COVER SHEET PG 1

The JC/OH Instruction Guide explains how to complete this form.

1 Filer ID (Ethics Commission Filers)

2 Total pages filed: **33**

3 CANDIDATE / OFFICEHOLDER NAME

MS / MRS / MR: **MRS** FIRST: **M. Stiv** MI: **D**
NICKNAME: LAST: **Mosteller** SUFFIX:

OFFICE USE ONLY

Date Received

4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE

9518 Spring Branch Dallas TX 75238

Change of Address

BY

JOHN F. PARKER
COUNTY CLERK
DALLAS COUNTY
DEPUTY

2022 FEB 21 PM 12:31

FILED

5 CANDIDATE / OFFICEHOLDER PHONE

AREA CODE PHONE NUMBER EXTENSION

(214) 566-4836

Date Hand-delivered or Date Postmarked

6 CAMPAIGN TREASURER NAME

MS / MRS / MR: **M. Estelle** FIRST: **See** MI:
NICKNAME: LAST: **Estelle** SUFFIX:

Receipt Amount \$

Date Processed

Date Imaged

7 CAMPAIGN TREASURER ADDRESS (Residence or Business)

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE

6515 Pattering Green Dr. Dallas, TX 75232

8 CAMPAIGN TREASURER PHONE

AREA CODE PHONE NUMBER EXTENSION

(214) 493-1045

9 REPORT TYPE

January 15 30th day before election Runoff 15th day after campaign treasurer appointment (Officeholder Only)
 July 15 8th day before election Exceeded Modified Reporting Limit Final Report (Attach C/OH - FR)

10 PERIOD COVERED

Month Day Year Month Day Year

2/31/2022 THROUGH **2/21/2022**

11 ELECTION

ELECTION DATE ELECTION TYPE

Month Day Year Primary Runoff Other Description
 General Special

03/1/22

12 OFFICE

OFFICE HELD (if any)

13 OFFICE SOUGHT (if known)

Side of Dallas County Court at law #3

14 NOTICE FROM POLITICAL COMMITTEE(S)

THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.

COMMITTEE TYPE

COMMITTEE NAME

GENERAL

COMMITTEE ADDRESS

SPECIFIC

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

Additional Pages

GO TO PAGE 2

JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH
COVER SHEET PG 2

15 JC/OH NAME		16 Filer ID (Ethics Commission Filers)
17 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 0
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 19,125
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ 0
	4. TOTAL POLITICAL EXPENDITURES	\$ 25,383.14
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 10,579.11
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 15,000.00

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

Signature of Candidate/Officeholder

Please complete either option below:

(1) Affidavit

NOTARY STAMP/SEAL

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

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

OR

(2) Unsworn Declaration

My name is Misti Mosteller, and my date of birth is 3/22/72.
 My address is 9518 Spring Branch, Dallas, TX, 75238 Dallas.
(street) (city) (state) (zip code) (country)
 Executed in Dallas County, State of TX, on the 21 day of February, 2022.
(month) (year)

Signature of Candidate/Officeholder (Declarant)

SUBTOTALS - JC/OH

FORM JC/OH
COVER SHEET PG 3

19 FILER NAME <i>Mitch Masteller</i>		20 Filer ID (Ethics Commission Filers)
21 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ <i>19,125</i>
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ <i>0</i>
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$ <i>0</i>
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
5.	<input type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ <i>25,383.11</i>
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ <i>0</i>
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$ <i>0</i>
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ <i>5847.89</i>
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$ <i>0</i>
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$ <i>0</i>
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ <i>0</i>
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$ <i>0</i>

**MONETARY POLITICAL CONTRIBUTIONS
(JUDICIAL)**

SCHEDULE A(J)1

If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: <i>1 of 12</i>
2 FILER NAME <i>Mishi Musteller</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>1/31/22</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Settle Pon</i>	7 Amount of contribution (\$) <i>\$1500.00</i>
6 Contributor address; City; State; Zip Code <i>3333 Lee Parkway Ste 800 Dallas TX 75219</i>		
8 Contributor's principal occupation <i>LAW FIRM</i>		9 Contributor's job title
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date <i>1/31/22</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Somers Communications</i>	Amount of contribution (\$) <i>\$50.00</i>
Contributor address; City; State; Zip Code <i>9650 Zedler Dallas TX 75238</i>		
Contributor's principal occupation <i>Event Planner</i>		Contributor's job title <i>owner</i>
Contributor's employer/law firm <i>/</i>		Law firm of contributor's spouse (if any) <i>/</i>
If contributor is a child, law firm of parent(s) (if any) <i>/</i>		
Date <i>2/1/22</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Ronnie Gosselin</i>	Amount of contribution (\$) <i>\$150.00</i>
Contributor address; City; State; Zip Code <i>1201 Peachtree #4900 Atlanta, GA 30309</i>		
Contributor's principal occupation <i>Attorney</i>		Contributor's job title <i>Attorney</i>
Contributor's employer/law firm <i>A. J. Bird</i>		Law firm of contributor's spouse (if any) <i>/</i>
If contributor is a child, law firm of parent(s) (if any)		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

**MONETARY POLITICAL CONTRIBUTIONS
(JUDICIAL)**

SCHEDULE A(J)1

If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: 29/12
2 FILER NAME Misti Masteller		3 Filer ID (Ethics Commission Filers)
4 Date 2/1/22	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Kimberly Ratcliff	7 Amount of contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code 7311 Casa Zama Ave Dallas TX 75214		
8 Contributor's principal occupation Attorney		9 Contributor's job title Partner
10 Contributor's employer/law firm De Hay + Elliston LLP		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 2/1/22	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Amy Grant	Amount of contribution (\$) \$100.00
Contributor address; City; State; Zip Code 3003 Braemar Waco TX		
Contributor's principal occupation Director Charitable Giving		Contributor's job title Director Charitable Giving
Contributor's employer/law firm Baylor University		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 2/1/22	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Leigh Bailey	Amount of contribution (\$) \$500.00
Contributor address; City; State; Zip Code Will Supplund		
Contributor's principal occupation Will Supplund		Contributor's job title Will Supplund
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

**MONETARY POLITICAL CONTRIBUTIONS
(JUDICIAL)**

SCHEDULE A(J)1

If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A(J)1:

3 of 12

2 FILER NAME

Misti Mosdeller

3 Filer ID (Ethics Commission Filers)

4 Date

2/3/22

5 Full name of contributor

Clarissa Price

out-of-state PAC ID#: _____

7 Amount of contribution (\$)

\$ 100.00

6 Contributor address; City; State; Zip Code

900 Jackson #100 Dallas, TX 75202

8 Contributor's principal occupation

Attorney

9 Contributor's job title

Attorney

10 Contributor's employer/law firm

11 Law firm of contributor's spouse (if any)

12 If contributor is a child, law firm of parent(s) (if any)

Date

2/7/22

Full name of contributor

Judy Williams

out-of-state PAC ID#: _____

Amount of contribution (\$)

\$ 50.00

Contributor address; City; State; Zip Code

3781 Shady Hill Dallas TX 75209

Contributor's principal occupation

Retired

Contributor's job title

Retired

Contributor's employer/law firm

Law firm of contributor's spouse (if any)

If contributor is a child, law firm of parent(s) (if any)

Date

2/7/22

Full name of contributor

Rachel McWhorter

out-of-state PAC ID#: _____

Amount of contribution (\$)

\$ 50.00

Contributor address; City; State; Zip Code

7815 Blackbird Ln Dallas TX 75238

Contributor's principal occupation

Education Admin

Contributor's job title

Director at Dallas College

Contributor's employer/law firm

TWU

Law firm of contributor's spouse (if any)

If contributor is a child, law firm of parent(s) (if any)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

**MONETARY POLITICAL CONTRIBUTIONS
(JUDICIAL)**

SCHEDULE A(J)1

If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: <i>4 of 12</i>
2 FILER NAME <i>Misti Mosteller</i>		3 Filer ID (Ethics Commission Filers)
4 Date <i>2/8/22</i>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Chanul Terrain</i>	7 Amount of contribution (\$) <i>\$ 200.00</i>
	6 Contributor address; City; State; Zip Code <i>500 N. Akard #1500 Dallas TX 75201</i>	
8 Contributor's principal occupation <i>Business owner</i>		9 Contributor's job title <i>owner</i>
10 Contributor's employer/law firm <i>LALA Healthcare Solutions</i>		11 Law firm of contributor's spouse (if any) <i>/</i>
12 If contributor is a child, law firm of parent(s) (if any) <i>/</i>		
Date <i>2/8/22</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Silliam Keith</i>	Amount of contribution (\$) <i>\$ 1500.00</i>
	Contributor address; City; State; Zip Code <i>901 Main St. #400 Dallas TX 75202</i>	
Contributor's principal occupation <i>Attorney</i>		Contributor's job title <i>Partner</i>
Contributor's employer/law firm <i>Wilson Elser</i>		Law firm of contributor's spouse (if any) <i>/</i>
If contributor is a child, law firm of parent(s) (if any) <i>/</i>		
Date <i>2/8/22</i>	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ <i>Gordon Nees</i>	Amount of contribution (\$) <i>\$ 2500.00</i>
	Contributor address; City; State; Zip Code <i>2200 Ross Ave #3700 Dallas TX 75201</i>	
Contributor's principal occupation <i>LAW office</i>		Contributor's job title <i>/</i>
Contributor's employer/law firm <i>/</i>		Law firm of contributor's spouse (if any) <i>/</i>
If contributor is a child, law firm of parent(s) (if any) <i>/</i>		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

**MONETARY POLITICAL CONTRIBUTIONS
(JUDICIAL)**

SCHEDULE A(J)1

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The Instruction Guide explains how to complete this form.

1 Total pages Schedule A(J)1:

5 of 12

2 FILER NAME

Misti Moskelner

3 Filer ID (Ethics Commission Filers)

4 Date

2/8/22

5 Full name of contributor out-of-state PAC ID#: _____

Jason Irvin

7 Amount of contribution (\$)

\$ 100.00

6 Contributor address; City; State; Zip Code

2200 Ross Ave #3700 Dallas TX 75202

8 Contributor's principal occupation

A Horney

9 Contributor's job title

A Horney

10 Contributor's employer/law firm

Garden Rees

11 Law firm of contributor's spouse (if any)

12 If contributor is a child, law firm of parent(s) (if any)

Date

2/9/22

Full name of contributor out-of-state PAC ID#: _____

Jennifer Aufrecht

Amount of contribution (\$)

\$ 200.00

Contributor address; City; State; Zip Code

2810 Rolling Ln. Southludg TX 76092

Contributor's principal occupation

A Horney

Contributor's job title

A Horney

Contributor's employer/law firm

Thompson Coe

Law firm of contributor's spouse (if any)

If contributor is a child, law firm of parent(s) (if any)

~~2810 Rolling Ln South~~

Date

2/9/22

Full name of contributor out-of-state PAC ID#: _____

Jessica Rean

Amount of contribution (\$)

\$ 250.00

Contributor address; City; State; Zip Code

302 N. Market St. #300 Dallas TX 75202

Contributor's principal occupation

Attorney

Contributor's job title

Partner

Contributor's employer/law firm

Deen Omar

Law firm of contributor's spouse (if any)

If contributor is a child, law firm of parent(s) (if any)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A(J)1:

6 of 12

2 FILER NAME

Misti Mosfelder

3 Filer ID (Ethics Commission Filers)

4 Date

2/9/22

5 Full name of contributor

out-of-state PAC ID#: _____

Mary Wansley

7 Amount of contribution (\$)

\$ 100.00

6 Contributor address;

City;

State;

Zip Code

4514 Lake Ave Ste 600 Dallas TX 75245

8 Contributor's principal occupation

Therapist

9 Contributor's job title

Therapist

10 Contributor's employer/law firm

Wansley - O

11 Law firm of contributor's spouse (if any)

12 If contributor is a child, law firm of parent(s) (if any)

Date

2/9/22

Full name of contributor

out-of-state PAC ID#: _____

Pamela Williams

Amount of contribution (\$)

\$ 50.00

Contributor address;

City;

State;

Zip Code

4308 Crown Knoll Flowingwood 75028

Contributor's principal occupation

Attorney

Contributor's job title

Partner

Contributor's employer/law firm

Deborah Ellison

Law firm of contributor's spouse (if any)

If contributor is a child, law firm of parent(s) (if any)

Date

2/9/22

Full name of contributor

out-of-state PAC ID#: _____

Jennifer Dickey

Amount of contribution (\$)

\$ 250.00

Contributor address;

City;

State;

Zip Code

4417 Westway Ave Dallas TX 75245

Contributor's principal occupation

Attorney

Contributor's job title

Attorney

Contributor's employer/law firm

Brown Law Firm

Law firm of contributor's spouse (if any)

Fausto Drinler

If contributor is a child, law firm of parent(s) (if any)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

**MONETARY POLITICAL CONTRIBUTIONS
(JUDICIAL)**

SCHEDULE A(J)1

If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: 7 of 12
2 FILER NAME Misti Moskeller		3 Filer ID (Ethics Commission Filers)
4 Date 2/9/22	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Todd Suddesen	7 Amount of contribution (\$) \$ 100.00
6 Contributor address; City; State; Zip Code 1901 Rising Star Dr. Allen, TX 75013		
8 Contributor's principal occupation Attorney		9 Contributor's job title Partner
10 Contributor's employer/law firm DeWayt Ellison		11 Law firm of contributor's spouse (if any) ---
12 If contributor is a child, law firm of parent(s) (if any) ---		
Date 2/9/21	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Charles W. Branham	Amount of contribution (\$) \$ 1000.00
Contributor address; City; State; Zip Code 4746 Swiss Ave Dallas, TX 75214		
Contributor's principal occupation Attorney		Contributor's job title Partner
Contributor's employer/law firm Dean Omar		Law firm of contributor's spouse (if any) ---
If contributor is a child, law firm of parent(s) (if any) ---		
Date 2/9/22	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Emgene Flores	Amount of contribution (\$) \$ 1000.00
Contributor address; City; State; Zip Code 7311 Pleasant View Dr Dallas, TX 75231		
Contributor's principal occupation will supplied		Contributor's job title will supplied
Contributor's employer/law firm ---		Law firm of contributor's spouse (if any) ---
If contributor is a child, law firm of parent(s) (if any) ---		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

**MONETARY POLITICAL CONTRIBUTIONS
(JUDICIAL)**

SCHEDULE A(J)1

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: 8 of 12
2 FILER NAME Misti Moskeller		3 Filer ID (Ethics Commission Filers)
4 Date 2/9/22	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Bell Munnally + Martin LLP	7 Amount of contribution (\$) \$2500.00
6 Contributor address; City; State; Zip Code 2323 Ross Ave Ste 1400 Dallas TX 75201		
8 Contributor's principal occupation LAW FIRM		9 Contributor's job title LAW FIRM
10 Contributor's employer/law firm		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 2/9/22	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Deems Stepp Law LLP	Amount of contribution (\$) \$1500.00
Contributor address; City; State; Zip Code 325 N. Saint Paul Ste 1500 Dallas TX 75201		
Contributor's principal occupation LAW FIRM		Contributor's job title LAW FIRM
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 2/10/22	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Kyle Sherdell	Amount of contribution (\$) \$50.00
Contributor address; City; State; Zip Code 701 Main St. 3500 Dallas TX - 75202		
Contributor's principal occupation Attorney		Contributor's job title Partner
Contributor's employer/law firm DeHoy & Ellison		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A(J)1:

9 of 12

2 FILER NAME

Misti Mosteller

3 Filer ID (Ethics Commission Filers)

4 Date

2/10/22

5 Full name of contributor out-of-state PAC ID#: _____

Jennifer Green

7 Amount of contribution (\$)

\$ 1000.00

6 Contributor address; City; State; Zip Code

70584. Eric Dr. Mansfield, TX, 76063

8 Contributor's principal occupation

A Home

9 Contributor's job title

Partner

10 Contributor's employer/law firm

DeWay F. Ellison

11 Law firm of contributor's spouse (if any)

12 If contributor is a child, law firm of parent(s) (if any)

Date

2/10/22

Full name of contributor out-of-state PAC ID#: _____

Beverly Bond

Amount of contribution (\$)

\$ 100.00

Contributor address; City; State; Zip Code

4201 Forbes Dr. Plano, TX 75093

Contributor's principal occupation

A Home

Contributor's job title

Partner

Contributor's employer/law firm

Gordon Rees

Law firm of contributor's spouse (if any)

If contributor is a child, law firm of parent(s) (if any)

Date

2/11/22

Full name of contributor out-of-state PAC ID#: _____

Stephen Dollar

Amount of contribution (\$)

\$ 1000.00

Contributor address; City; State; Zip Code

2200 Ross Ave Dallas, TX 75201

Contributor's principal occupation

A Home

Contributor's job title

Partner

Contributor's employer/law firm

Northern Rose Fullbright

Law firm of contributor's spouse (if any)

If contributor is a child, law firm of parent(s) (if any)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A(J)1:

10 of 12

2 FILER NAME

Misti Masteller

3 Filer ID (Ethics Commission Filers)

4 Date

2/12/22

5 Full name of contributor

Kim Radcliff

out-of-state PAC ID#: _____

7 Amount of contribution (\$)

\$100.00

6 Contributor address;

City;

State;

Zip Code

7311 Casa Loma Dallas TX 75214

8 Contributor's principal occupation

A Horney

9 Contributor's job title

Partner

10 Contributor's employer/law firm

Debra + Ellisha

11 Law firm of contributor's spouse (if any)

12 If contributor is a child, law firm of parent(s) (if any)

Date

2/12/22

Full name of contributor

Justin Utes

out-of-state PAC ID#: _____

Amount of contribution (\$)

\$50.00

Contributor address;

City;

State;

Zip Code

3333 Lee Parkway 8th Floor Dallas TX 75219

Contributor's principal occupation

A Horney

Contributor's job title

Associate

Contributor's employer/law firm

Settle Pon

Law firm of contributor's spouse (if any)

If contributor is a child, law firm of parent(s) (if any)

Date

2/14/22

Full name of contributor

Ginger Tye

out-of-state PAC ID#: _____

Amount of contribution (\$)

\$200.00

Contributor address;

City;

State;

Zip Code

5600 W. Honors Lane Dallas TX 75209

Contributor's principal occupation

A Horney

Contributor's job title

A Horney

Contributor's employer/law firm

Tye Law Firm

Law firm of contributor's spouse (if any)

If contributor is a child, law firm of parent(s) (if any)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)

SCHEDULE A(J)1

If the requested information is not applicable, DO NOT include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: 11 of 12
2 FILER NAME Misti Moskeller		3 Filer ID (Ethics Commission Filers)
4 Date 2/16/22	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Jennifer Judin	7 Amount of contribution (\$) \$ 500.00
6 Contributor address; City; State; Zip Code 3007 Club House Rd. Kerrillhoff TX 75028		
8 Contributor's principal occupation retired	9 Contributor's job title retired	
10 Contributor's employer/law firm	11 Law firm of contributor's spouse (if any)	
12 If contributor is a child, law firm of parent(s) (if any)		

Date 2/19/22	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Lynne Cooley	Amount of contribution (\$) \$ 50.00
Contributor address; City; State; Zip Code 1450 Steel Dr. Newville TN 37185		
Contributor's principal occupation retired	Contributor's job title retired	
Contributor's employer/law firm	Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)		

Date 2/20/22	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Terome Brown	Amount of contribution (\$) \$ 25.00
Contributor address; City; State; Zip Code will supplement		
Contributor's principal occupation will supplement	Contributor's job title will supplement	
Contributor's employer/law firm	Law firm of contributor's spouse (if any)	
If contributor is a child, law firm of parent(s) (if any)		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

**MONETARY POLITICAL CONTRIBUTIONS
(JUDICIAL)**

SCHEDULE A(J)1

If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: 12 of 12
2 FILER NAME M. Sti Mosteller		3 Filer ID (Ethics Commission Filers)
4 Date 2/20/22	5 Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Chris Manning	7 Amount of contribution (\$) \$1000.00
6 Contributor address; City; State; Zip Code 901 Main St #3500 Dallas TX 75202		
8 Contributor's principal occupation Attorney		9 Contributor's job title Partner
10 Contributor's employer/law firm DeHoyt Ellison		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		

Date 2/20/22	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Gary Ellison	Amount of contribution (\$) \$1000.00
Contributor address; City; State; Zip Code 401 Main St #3500 Dallas TX 75202		
Contributor's principal occupation Attorney		Contributor's job title Partner
Contributor's employer/law firm DeHoyt Ellison		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

Date 2/20/22	Full name of contributor <input type="checkbox"/> out-of-state PAC ID#: _____ Blanca Silguero	Amount of contribution (\$) \$200.00
Contributor address; City; State; Zip Code 2033 Winterway Arlington TX 76010		
Contributor's principal occupation Facialist		Contributor's job title Facialist
Contributor's employer/law firm Self employed		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, **DO NOT** include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 1713	2 FILER NAME Misti Mosdeller	3 Filer ID (Ethics Commission Filers)
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4 Date 11/31/22	5 Payee name Paypal
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6 Amount (\$) \$143.84	7 Payee address; City; State; Zip Code
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description Paypal Fees
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 11/31/22	Payee name Paypal
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Amount (\$) \$1.94	Payee address; City; State; Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Accounting/Banking	Description Paypal fees
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 11/30/22	Payee name Greenlight Design Studios
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Amount (\$) \$250.00	Payee address; 601 Marshall Ave. Atlanta GA 30317
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising	Description Sign Design
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 2913	2 FILER NAME Misha Mosdeller	3 Filer ID (Ethics Commission Filers)
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4 Date 2/1/22	5 Payee name Paypal
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6 Amount (\$) \$13,38	7 Payee address; City; State; Zip Code
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description Paypal fees
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 2/1/22	Payee name Paypal
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Amount (\$) \$96.62	Payee address; City; State; Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Accounting/Banking	Description Paypal fees
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 2/1/22	Payee name Paypal
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Amount (\$) \$14.94	Payee address; City; State; Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Accounting/Banking	Description Paypal fees
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 3913	2 FILER NAME Misti Musteller	3 Filer ID (Ethics Commission Filers)
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4 Date 2/2/22	5 Payee name Elite News
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6 Amount (\$) \$500.00	7 Payee address; Elite News SPO. Box 380017 Duncanville TX 75103	City;	State;	Zip Code
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising	(b) Description Campaign Ad
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 2/3/22	Payee name Paypal
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Amount (\$) \$3.38	Payee address;	City;	State;	Zip Code
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8 PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Accounting/ Banking	Description paypal fees
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 2/4/22	Payee name Costco Visa
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Amount (\$) \$500	Payee address;	City;	State;	Zip Code
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8 PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event/credit card	Description Se F 4 Registration Fee for Forum
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: # 713	2 FILER NAME M. Stu. Masteller	3 Filer ID (Ethics Commission Filers)
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4 Date 2/7/22	5 Payee name Costco Visa
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6 Amount (\$) 250.00	7 Payee address; City; State; Zip Code
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising/credit card	(b) Description see F4 Dallas County Demos
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 2/9/22	Payee name Costco Visa
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Amount (\$) 920.13	Payee address; City; State; Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising/credit card	Description see F4 Photos
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 2/10/22	Payee name Robert Flass
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Amount (\$) 250.00	Payee address; City; State; Zip Code P.O. Box 223584 Dallas, TX 75222
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event expense	Description Sound System
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: <i>5913</i>	2 FILER NAME <i>Misti Mosteller</i>	3 Filer ID (Ethics Commission Filers)
4 Date <i>2/7/22</i>	5 Payee name <i>Paypal</i>	
6 Amount (\$) <i>\$11.94</i>	7 Payee address, City, State, Zip Code	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Fees</i>	(b) Description <i>paypal fee</i>
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name Office sought Office held		
Date <i>2/7/22</i>	Payee name <i>paypal</i>	
Amount (\$) <i>\$11.94</i>	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Fees</i>	Description <i>paypal fee</i>
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Candidate / Officeholder name Office sought Office held		
Date <i>2/8/22</i>	Payee name <i>paypal</i>	
Amount (\$) <i>\$16.27</i>	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Fees</i>	Description <i>paypal fee</i>
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Candidate / Officeholder name Office sought Office held		

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 6 of 13	2 FILER NAME Misty Moskeller	3 Filer ID (Ethics Commission Filers)
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4 Date 2/8/22	5 Payee name Paypal
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6 Amount (\$) \$43.84	7 Payee address; City; State; Zip Code
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description paypal fee
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 2/8/22	Payee name Paypal
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Amount (\$) \$172.74	Payee address; City; State; Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description paypal fees
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 2/8/22	Payee name Paypal
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Amount (\$) \$3.38	Payee address; City; State; Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description paypal fees
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 9913	2 FILER NAME M. Stu Moskeller	3 Filer ID (Ethics Commission Filers)
4 Date 2/9/22	5 Payee name Berry-Herring Negeest ASSO.	
6 Amount (\$) \$15,000.00	7 Payee address; City; State; Zip Code 633 W. Davis St. Suite 345 Dallas, TX 75208	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description Campaign Consultant
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date	Payee name
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Amount (\$)	Payee address; City; State; Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

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

Amount (\$)	Payee address; City; State; Zip Code
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, DO NOT include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 8 of 13	2 FILER NAME Misti Mosteller	3 Filer ID (Ethics Commission Filers)
4 Date 2/10/22	5 Payee name Paypal	
6 Amount (\$) \$29.39	7 Payee address: _____ City: _____ State: _____ Zip Code _____	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description Paypal fees
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought _____ Office held _____
Date 2/10/22	Payee name Paypal	
Amount (\$) \$3.38	Payee address: _____ City: _____ State: _____ Zip Code _____	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description Paypal fees
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought _____ Office held _____
Date 2/11/22	Payee name Paypal	
Amount (\$) \$29.39	Payee address: _____ City: _____ State: _____ Zip Code _____	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description Paypal fees
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought _____ Office held _____

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, **DO NOT** include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 9 of 13	2 FILER NAME Misti Mosteller	3 Filer ID (Ethics Commission Filers)
4 Date 2/10/22	5 Payee name Costco Visa	
6 Amount (\$) \$1142.50	7 Payee address; City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit card Event Expense	(b) Description See F4 Event Venue
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 2/9/22	Payee name Fed EX	
Amount (\$) \$124.35	Payee address; City; State; Zip Code 902 Ross Ave Dallas, TX. 75202	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising	Description Boards + Card print
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 2/14/22	Payee name Costco Credit Card	
Amount (\$) \$2723.38	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising Expense	Description See F4 Signs - Yard
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, **DO NOT** include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 10 of 13	2 FILER NAME M. Stu. Mosdeller	3 Filer ID (Ethics Commission Filers)
4 Date 2/22/22	5 Payee name Paypal	
6 Amount (\$) \$ 3.38	7 Payee address; City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description Paypal fees
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 2/12/22	Payee name Paypal	
Amount (\$) \$1.94	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description Paypal
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 2/14/22	Payee name Paypal	
Amount (\$) \$6.27	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Fees	Description paypal
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, **DO NOT** include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: <i>12 of 13</i>	2 FILER NAME <i>Misti Mosteller</i>	3 Filer ID (Ethics Commission Filers)
4 Date <i>2/16/22</i>	5 Payee name <i>Paypal</i>	
6 Amount (\$) <i>\$14.94</i>	7 Payee address; City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Fees</i>	(b) Description <i>Paypal fees</i>
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date <i>2/19/22</i>	Payee name <i>Paypal</i>	
Amount (\$) <i>\$1.94</i>	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Fees</i>	Description <i>paypal fees</i>
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date <i>2/20/22</i>	Payee name <i>Paypal</i>	
Amount (\$) <i>\$1.21</i>	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Fees</i>	Description <i>Paypal fees</i>
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, **DO NOT** include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 1293	2 FILER NAME M. Stu Mosbeller	3 Filer ID (Ethics Commission Filers)
4 Date 2/18/22	5 Payee name Donna Greene	
6 Amount (\$) \$405.00	7 Payee address; City; State; Zip Code 9635 Timber Leaf Dr Dallas TX 75243	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contract labor	(b) Description Poll Greeter
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 2/18/22	Payee name Tie Pate	
Amount (\$) \$405.00	Payee address; City; State; Zip Code 9635 Timber leaf Dr. Dallas, TX 75243	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contract labor	Description Poll Greeter
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 2/18/22	Payee name RaDonna Dotson	
Amount (\$) \$440.00	Payee address; City; State; Zip Code 801 Beckleywood Dr. #216 Dallas, TX 75232	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Contract labor	Description Poll Greeter
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

If the requested information is not applicable, **DO NOT** include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 13 of 13	2 FILER NAME: <i>Misti Moskeller</i>	3 Filer ID (Ethics Commission Filers)
4 Date: <i>2/17/22</i>	5 Payee name: <i>Costco Visa</i>	
6 Amount (\$): <i>\$811.58</i>	7 Payee address; City; State; Zip Code	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Credit Card/Adherk's</i>	(b) Description <i>See #4 Ph Awards</i>
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date: <i>2/18/22</i>	Payee name: <i>Coy Murchison</i>	
Amount (\$): <i>\$420</i>	Payee address; City; State; Zip Code: <i>633 W. Davis St. H 3415 Dallas, TX 75208</i>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>adherking</i>	Description <i>Printed materials-stubs</i>
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date: <i>2/18/22</i>	Payee name: <i>Bertha Cole</i>	
Amount (\$): <i>\$930</i>	Payee address; City; State; Zip Code: <i>Will Supplement</i>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>contract labor</i>	Description <i>Roll Greater</i>
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

If the requested information is not applicable, DO NOT include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: 1 of 3	2 FILER NAME Mr. Stu. Muskeller	3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$
5 Date 2/4/22	6 Payee name Dallas County Democrats	
7 Amount (\$) \$250.00	8 Payee address; City; State; Zip Code 1414 W. North Star Ave Dallas TX 75204	
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description Registration fee for Candidate Forum
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
11 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held
Date 2/9/22	Payee name Jesse Horn Buckle	
Amount (\$) \$920.13	Payee address; City; State; Zip Code P.O. Box 227382 Dallas, TX 75222	
TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising	Description Photos
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

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EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

If the requested information is not applicable, **DO NOT** include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: 2 of 3	2 FILER NAME Misti Mosteller	3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$
5 Date 2/14/22	6 Payee name Texas Trade Graphics	
7 Amount (\$) \$12723.38	8 Payee address; City; State; Zip Code 2935 Irving Blvd. #201 Dallas TX 75247	
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description Word Signs
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

Date 2/17/22	Payee name Golden Rule Printing	
Amount (\$) \$811.88	Payee address; City; State; Zip Code 5401 Davis Blvd. Ft. Worth TX. 76180	
TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising	Description Push Cards
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

If the requested information is not applicable, DO NOT include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 10(a)

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: 393	2 FILER NAME: Might Maskeley	3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD		\$
5 Date: 2/9/22	6 Payee name: Dot's Hop House	
7 Amount (\$): \$1142.50	8 Payee address; City; State; Zip Code: 2645 Commerce St. Dallas, TX 75225	
9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description Venue
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
11 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought / Office held

Date	Payee name		
Amount (\$)	Payee address; City; State; Zip Code		
TYPE OF EXPENDITURE	<input type="checkbox"/> Political <input type="checkbox"/> Non-Political		
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description	
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held

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POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

If the requested information is not applicable, **DO NOT** include this page in the report.

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel In District
Travel Out Of District
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: <i>1 ↑</i>	2 FILER NAME <i>Misti Mosteller</i>	3 Filer ID (Ethics Commission Filers)
4 Date <i>2/10/22</i>	5 Payee name <i>Vostige International</i>	
6 Amount (\$) <i>\$ 475.69</i> <input type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code <i>509 N. Hampton Rd. #203 DeSoto, TX 75115</i>	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Advertising</i>	(b) Description <i>T-shirts</i>
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

Date	Payee name	
Amount (\$) <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

Date	Payee name	
Amount (\$) <input type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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OUTSTANDING LOANS

SCHEDULE L

If the requested information is not applicable, **DO NOT** include this page in the report.

The Instruction Guide explains how to complete this form.

1 Total pages Schedule L: 1

2 FILER NAME

M. Stu Moskeller

3 Filer ID (Ethics Commission Filers)

LENDER INFORMATION

4 Name of lender

M. Stu Moskeller

5 Lender address;

9514 Spring Branch Dallas TX 75238

GUARANTOR INFORMATION

6 Name of guarantor

not applicable

7 Guarantor address;

City; State; Zip Code

LENDER INFORMATION

Name of lender

Lender address;

City; State; Zip Code

GUARANTOR INFORMATION

Name of guarantor

not applicable

Guarantor address;

City; State; Zip Code

LENDER INFORMATION

Name of lender

Lender address;

City; State; Zip Code

GUARANTOR INFORMATION

Name of guarantor

not applicable

Guarantor address;

City; State; Zip Code

LENDER INFORMATION

Name of lender

Lender address;

City; State; Zip Code

GUARANTOR INFORMATION

Name of guarantor

not applicable

Guarantor address;

City; State; Zip Code

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