

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

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

The C/OH Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers)	2 Total pages filed:		
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI Mrs Martha A	OFFICE USE ONLY Date Received <div style="font-size: 2em; font-weight: bold;">JAN 18 2022</div> Date Hand-delivered or Date Postmarked <div style="display: flex; justify-content: space-between;"> <div>Receipt #</div> <div>Amount \$</div> </div> Date Processed Date Imaged			
	NICKNAME LAST SUFFIX Marty Muro				
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 2806 Field St San Angelo, TX. 76901				
5 CANDIDATE / OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER EXTENSION (325) 450-5094				
6 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Mrs. Sandy				
	NICKNAME LAST SUFFIX Ruiz-Kolb				
7 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 1005 Woodruff St.				
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (325) 234-1829				
9 REPORT TYPE	<div style="display: flex; flex-wrap: wrap;"> <div style="width: 50%;"><input checked="" type="checkbox"/> January 15</div> <div style="width: 50%;"><input type="checkbox"/> 30th day before election</div> <div style="width: 50%;"><input type="checkbox"/> Runoff</div> <div style="width: 50%;"><input type="checkbox"/> 15th day after campaign treasurer appointment (Officeholder Only)</div> <div style="width: 50%;"><input type="checkbox"/> July 15</div> <div style="width: 50%;"><input type="checkbox"/> 8th day before election</div> <div style="width: 50%;"><input type="checkbox"/> Exceeded Modified Reporting Limit</div> <div style="width: 50%;"><input type="checkbox"/> Final Report (Attach C/OH - FR)</div> </div>				
10 PERIOD COVERED	Month Day Year Month Day Year 8 / 24 / 21 THROUGH 12 / 31 / 21				
11 ELECTION	ELECTION DATE				
	Month Day Year 3 / 1 / 22				
12 OFFICE		13 OFFICE SOUGHT (if known) Justice of the Peace PCT. 3			
14 NOTICE FROM POLITICAL COMMITTEE(S) Additional Pages	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			

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 2

15 C/OH NAME
Muro, Martha A.

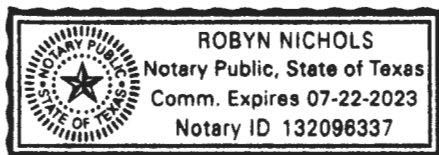
16 Filer ID (Ethics Commission Filers)

17 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 1,605.20
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURE.	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 2,321.35
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 776.04
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

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.

Martha A. Muro
Signature of Candidate or Officeholder

Please complete either option below:



(1) Affidavit

NOTARY STAMP / SEAL

Sworn to and subscribed before me by *Robyn Nichols* this the 18th day of January.

20 22, 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 _____, and my date of birth is _____.

My address is _____, _____, _____, _____, _____.
(street) (city) (state) (zip code) (country)

Executed in _____ County, State of _____, on the _____ day of _____, 20____.
(month) (year)

Signature of Candidate/Officeholder (Declarant)

SUBTOTALS - C/OH**FORM C/OH
COVER SHEET PG 3****19 FILER NAME****Muro, Martha A.****20 Filer ID (Ethics Commission Filers)****21 SCHEDULE SUBTOTALS
NAME OF SCHEDULE****SUBTOTAL
AMOUNT**

1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 1,605.20
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input checked="" type="checkbox"/> SCHEDULE E: LOANS	\$ 900.00
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$ 2,321.35
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS	\$
8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
9.	<input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS	\$ 608.50
10.	SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS	\$
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS**SCHEDULE A1**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 A1: 3
2 FILER NAME Muro, Martha A.		3 Filer ID (Ethics Commission Filers)
4 Date 11/19/2021	5 Full name of contributor out-of-state PAC (ID#: _____) Nickie Gotschall 6 Contributor address; City; State; Zip Code 63 E. 19th San Angelo, TX 76903	7 Amount of contribution (\$) 100.00
8 Principal occupation / Job title (See Instructions) Victim's Coordinator		9 Employer (See Instructions) TGC
Date 11/19/2021	Full name of contributor out-of-state PAC (ID#: _____) Sarah Lopez Contributor address; City; State; Zip Code 1820 W. Ave. J, San Angelo, TX. 76902	Amount of contribution (\$) 40.00
Principal occupation / Job title (See Instructions) RN		Employer (See Instructions) SMC
Date 11/19/2021	Full name of contributor out-of-state PAC (ID#: _____) AJ. Chapoy Contributor address; City; State; Zip Code 2251 Woodlawn Dr. San Angelo, TX. 76901	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions) Lineman		Employer (See Instructions) COSAC
Date 11/23/2021	Full name of contributor out-of-state PAC (ID#: _____) Jose/Brenda Mata Contributor address; City; State; Zip Code 1020 San Antonio San Angelo, TX. 76903	Amount of contribution (\$) 100.00
Principal occupation / Job title (See Instructions) Machine Op./ DHS CR		Employer (See Instructions) COSAC/DFPS
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**SCHEDULE A1**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 A1: 3
2 FILER NAME Muro, Martha A.		3 Filer ID (Ethics Commission Filers)
4 Date 11/23/2021	5 Full name of contributor out-of-state PAC (ID#: _____) Aurora Lozano 6 Contributor address; City; State; Zip Code 10473 Cottontail San Angelo, TX. 76901	7 Amount of contribution (\$) 100.00
8 Principal occupation / Job title (See Instructions) Home Health Care		9 Employer (See Instructions)
Date 11/23/2021	Full name of contributor out-of-state PAC (ID#: _____) JA. Ontiveros Contributor address; City; State; Zip Code 508 W. Concho St. 2C San Angelo, TX. 76903	Amount of contribution (\$) 300.00
Principal occupation / Job title (See Instructions) Bondsman		Employer (See Instructions) Self
Date 12/06/2021	Full name of contributor out-of-state PAC (ID#: _____) Criselda T. Bravo Contributor address; City; State; Zip Code 1720 Volney San Angelo, TX. 76903	Amount of contribution (\$) 200.00
Principal occupation / Job title (See Instructions) Paralegal		Employer (See Instructions) Web, Stokes, Sparks
Date 12/06/2021	Full name of contributor out-of-state PAC (ID#: _____) Rudolfo Montalvo Contributor address; City; State; Zip Code 4922 Oaklawn San Angelo, TX. 76901	Amount of contribution (\$) 300.00
Principal occupation / Job title (See Instructions) Home Builder		Employer (See Instructions) R&R Builders
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**SCHEDULE A1**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 A1: 3
2 FILER NAME Muro, Martha A.		3 Filer ID (Ethics Commission Filers)
4 Date 12/06/2021	5 Full name of contributor out-of-state PAC (ID#: _____) Suzie Marquez <hr/> 6 Contributor address; City; State; Zip Code 5212 Conley Ave, Odessa, TX 79762	7 Amount of contribution (\$) 100.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions)
Date 12/08/2021	Full name of contributor out-of-state PAC (ID#: _____) Terry Lowe <hr/> Contributor address; City; State; Zip Code 2302 Fisherman's RD, San Angelo, TX. 76904	Amount of contribution (\$) 240.20
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/15/2021	Full name of contributor out-of-state PAC (ID#: _____) Dana Routh <hr/> Contributor address; City; State; Zip Code 11701 S. Hwy 277 San Angelo, TX 76902	Amount of contribution (\$) 25.00
Principal occupation / Job title (See Instructions) Financial Rep.		Employer (See Instructions) PRSB
Date	Full name of contributor out-of-state PAC (ID#: _____) <hr/> Contributor address; City; State; Zip Code	Amount of contribution (\$)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

LOANS**SCHEDULE E**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 E: 2
2 FILER NAME Muro, Martha A.		3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED LOANS		\$
5 Date of loan 10/06/2021	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) Martha A. Muro	9 Loan Amount (\$) 200.00
6 Is lender a financial Institution? <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	8 Lender address; City; State; Zip Code 2806 Field St San Angelo, TX. 76901	10 Interest rate 0.00
		11 Maturity date
12 Principal occupation / Job title (See Instructions) Criminal Investigator		13 Employer (See Instructions) TGC
14 Description of Collateral <input checked="" type="checkbox"/> none		15 <input checked="" type="checkbox"/> Check if personal funds were deposited into political account (See Instructions)
16 GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	17 Name of guarantor	19 Amount Guaranteed (\$)
	18 Guarantor address; City; State; Zip Code	
20 Principal Occupation (See Instructions)		21 Employer (See Instructions)
<hr/>		
Date of loan 10/27/2021	Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) Martha A. Muro	Loan Amount (\$) 300.00
Is lender a financial Institution? <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Lender address; City; State; Zip Code 2806 Field St San Angelo, TX. 76901	Interest rate 0.00
		Maturity date
Principal occupation / Job title (See Instructions) Criminal Investigator		Employer (See Instructions) TGC
Description of Collateral <input checked="" type="checkbox"/> none		<input checked="" type="checkbox"/> Check if personal funds were deposited into political account (See Instructions)
GUARANTOR INFORMATION not applicable	Name of guarantor	Amount Guaranteed (\$)
	Guarantor address; City; State; Zip Code	
Principal Occupation (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If lender is out-of-state PAC, please see Instruction guide for additional reporting requirements.		

LOANS**SCHEDULE E**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 E: 2
2 FILER NAME Muro, Martha A.		3 Filer ID (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED LOANS		\$
5 Date of loan 11/19/2021	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) Martha A. Muro	9 Loan Amount (\$) 300.00
6 Is lender a financial Institution? <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	8 Lender address; City; State; Zip Code 2806 Field St San Angelo, TX. 76901	10 Interest rate 0.00
		11 Maturity date
12 Principal occupation / Job title (See Instructions) Criminal Investigator		13 Employer (See Instructions) TGC
14 Description of Collateral <input checked="" type="checkbox"/> none		15 <input checked="" type="checkbox"/> Check if personal funds were deposited into political account (See Instructions)
16 GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	17 Name of guarantor	19 Amount Guaranteed (\$)
	18 Guarantor address; City; State; Zip Code	
20 Principal Occupation (See Instructions)		21 Employer (See Instructions)
<hr/>		
Date of loan 12/08/2021	Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) Martha A. Muro	Loan Amount (\$) 100.00
Is lender a financial Institution? <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	Lender address; City; State; Zip Code 2806 Field St San Angelo, TX. 76901	Interest rate 0.00
		Maturity date
Principal occupation / Job title (See Instructions) Criminal Investigator		Employer (See Instructions) TGC
Description of Collateral <input checked="" type="checkbox"/> none		<input checked="" type="checkbox"/> Check if personal funds were deposited into political account (See Instructions)
GUARANTOR INFORMATION not applicable	Name of guarantor	Amount Guaranteed (\$)
	Guarantor address; City; State; Zip Code	
Principal Occupation (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If lender 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	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		2 FILER NAME Muro, Martha A.		3 Filer ID (Ethics Commission Filers)	
4 Date 09/09/2021		5 Payee name 1Community Federal Credit Union			
6 Amount (\$) 5.00		7 Payee address; City; State; Zip Code 355 Wildwood Dr, San Angelo, TX. 76904			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fee		(b) Description Membership Bank Fee		
	(c) Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>				
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
		Candidate / Officeholder name Martha A. Muro		Office sought Justice of the Peace PCT. 3	
Date 11/07/2021		Payee name Daley Professional Web Solutions			
Amount (\$) 29.00		Payee address; City; State; Zip Code 211 Cardinal Drive Montgomery, NY 12549			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising		Description Online website		
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
		Candidate / Officeholder name Martha A. Muro		Office sought Justice of the Peace PCT. 3	
Date 11/10/2021		Payee name Office Depot			
Amount (\$) 9.62		Payee address; City; State; Zip Code 4272 Sunset Dr Corner Of Sherwood Way &, Sunset Dr, San Angelo, TX 76904			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office expense		Description Pad, Columnar		
	Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense <input type="checkbox"/>				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
		Candidate / Officeholder name Martha A. Muro		Office sought Justice of the Peace PCT. 3	

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: 6		2 FILER NAME Muro, Martha A.		3 Filer ID (Ethics Commission Filers)	
4 Date 11/15/2021		5 Payee name Tom Green County Republican Party			
6 Amount (\$) 375.00		7 Payee address; City; State; Zip Code 2525 Johnson Street, Suite A San Angelo, TX. 76904			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Polling Expense		(b) Description Fee for name on ballot		
	(c) Check if travel outside of Texas. Complete Schedule T.		Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Martha A. Muro		Office sought Justice of the Peace PCT. 3	Office held
Date 11/17/2021		Payee name USPS			
Amount (\$) 59.00		Payee address; City; State; Zip Code 1 N. Abe, St. San Angelo, TX. 76902			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Office overhead/rental expense		Description PO. Box for campaign mail		
	Check if travel outside of Texas. Complete Schedule T.		Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Martha A. Muro		Office sought Justice of the Peace PCT. 3	Office held
Date 11/19/2021		Payee name Dollar Tree			
Amount (\$) 30.71		Payee address; City; State; Zip Code 613 W. 29th San Angelo, TX. 76903			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expense		Description decorations/costume/participant goodies for parade for campaign		
	Check if travel outside of Texas. Complete Schedule T.		Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Martha A. Muro		Office sought Justice of the Peace PCT. 3	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: <div style="font-size: 2em; margin-left: 10px;">6</div>	2 FILER NAME Muro, Martha A.	3 Filer ID (Ethics Commission Filers)
4 Date 11/19/2021	5 Payee name Canva Pty LTD.	
6 Amount (\$) <div style="font-size: 1.5em;">68.00</div>	7 Payee address; City; State; Zip Code 110 Kippax St. Surry Hills NSW 2010 Australia	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertisement	(b) Description Business Cards
	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name Martha A. Muro		
Office sought Justice of the Peace PCT. 3		
Office held		
Date 11/19/2021	Payee name Canva Pty LTD.	
Amount (\$) 68.00	Payee address; City; State; Zip Code 110 Kippax St. Surry Hills NSW 2010 Australia	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertisement	Description Push Cards
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name Martha A. Muro		
Office sought Justice of the Peace PCT. 3		
Office held		
Date 11/19/2021	Payee name Canva Pty LTD.	
Amount (\$) 97.50	Payee address; City; State; Zip Code 110 Kippax St. Surry Hills NSW 2010 Australia	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertisement	Description Banner
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name Martha A. Muro		
Office sought Justice of the Peace PCT. 3		
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: 6		2 FILER NAME Muro, Martha A.		3 Filer ID (Ethics Commission Filers)	
4 Date 11/21/2021		5 Payee name Go Daddy.com LLC			
6 Amount (\$) 31.48		7 Payee address; City; State; Zip Code 14455 N. Hayden Rd Scottsdale, AZ 85260			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising		(b) Description Online Website/Domain marthamuro.org		
	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Martha A. Muro		Office sought Justice of the Peace PCT. 3	
Date 11/22/2021		Payee name Vistaprint			
Amount (\$) 174.28		Payee address; City; State; Zip Code 170 Data Drive Waltham, MA 02451			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertisement		Description car magnets/car window decal		
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Martha A. Muro		Office sought Justice of the Peace PCT. 3	
Date 11/22/2021		Payee name Crazy Cheap Political Signs			
Amount (\$) 142.24		Payee address; City; State; Zip Code 11525 A Stonehollow Dr. Suite 100 Austin, TX. 78758			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertisement		Description Yard signs/stakes		
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	

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: <div style="font-size: 2em; margin-left: 10px;">6</div>	2 FILER NAME Muro, Martha A.	3 Filer ID (Ethics Commission Filers)
4 Date 11/27/2021	5 Payee name Dollar Tree	
6 Amount (\$) <div style="font-size: 1.5em;">23.82</div>	7 Payee address; City; State; Zip Code 3329 Sherwood Way San Angelo, TX. 76901	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description Decorations/parade float
	(c) Check if travel outside of Texas. Complete Schedule T. 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 Martha A. Muro Justice of the Peace PCT. 3	
Date 12/03/2021	Payee name West Texas IDR	
Amount (\$) <div style="font-size: 1.5em;">377.79</div>	Payee address; City; State; Zip Code 101 Paint Rock RD, San Angelo, TX. 76903	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertisement/fundraising	Description T-shirts
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Office sought Office held Martha A. Muro Justice of the Peace PCT. 3	
Date 12/04/2021	Payee name Walmart	
Amount (\$) <div style="font-size: 1.5em;">37.76</div>	Payee address; City; State; Zip Code 610 W. 29th San Angelo, TX. 76903	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event expense	Description Helium tank for parade balloons
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Office sought Office held Martha A. Muro Justice of the Peace PCT. 3	

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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	2 FILER NAME Muro, Martha A.	3 Filer ID (Ethics Commission Filers)
4 Date 12/27/2021	5 Payee name Crazy Cheap Political Signs	
6 Amount (\$) 233.17	7 Payee address; City; State; Zip Code 11525 A Stonehollow Dr, Suite 100 Austin, TX. 78758	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertisement	(b) Description yard signs/stakes
	(c) Check if travel outside of Texas. Complete Schedule T. 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 Martha A. Muro Justice of the Peace PCT. 3	
Date 12/27/2021	Payee name Crazy Cheap Political Signs	
Amount (\$) 558.98	Payee address; City; State; Zip Code 11525 A Stonehollow Dr, Suite 100 Austin, TX. 78758	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertisement	Description 4x4 signs
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name Office sought Office held Martha A. Muro Justice of the Peace PCT. 3	
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule)	Description
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name 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: 2		2 FILER NAME Muro, Martha A.		3 Filer ID (Ethics Commission Filers)	
4 Date 11/15/2021		5 Payee name Tom Green County Republican Party			
6 Amount (\$) 375.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		7 Payee address; 2525 Johnson Street Suite A		City; San Angelo, TX.	State; TX. 76904 Zip Code
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Polling Expense		(b) Description Fee for name on ballot		
	(c) Check if travel outside of Texas. Complete Schedule T.		Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Martha A. Muro		Office sought Justice of the Peace PCT.3	Office held
Date 11/19/2022		Payee name Canva PTY LTD.			
Amount (\$) 68.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		Payee address; 110 Kippax St. Surry Hills NSW 2010 Australia		City; City;	State; State; Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertisement		Description Business Cards		
	Check if travel outside of Texas. Complete Schedule T.		Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Martha A. Muro		Office sought Justice of the Peace PCT. 3	Office held
Date 11/19/2021		Payee name Canva PTY LTD.			
Amount (\$) 68.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		Payee address; 110 Kippax St. Surry Hills NSW 2010 Australia		City; City;	State; State; Zip Code
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertisement		Description Push Cards		
	Check if travel outside of Texas. Complete Schedule T.		Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name Martha A. Muro		Office sought Justice of the Peace PCT. 3	Office held

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POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

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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: 2		2 FILER NAME Muro, Martha A.		3 Filer ID (Ethics Commission Filers)	
4 Date 11/19/2021		5 Payee name Canva PTY LTD.			
6 Amount (\$) 97.50 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		7 Payee address; City; State; Zip Code 110 Kippax St. Surry Hills NSW 2010 Australia			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertisement		(b) Description Banner		
	(c) Check if travel outside of Texas. Complete Schedule T. 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 Martha A. Muro Justice of the Peace PCT. 3					
Date		Payee name			
Amount (\$) 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		
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held					
Date		Payee name			
Amount (\$) 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		
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held					
Date		Payee name			
Amount (\$) 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		
	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held					

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