# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

## FORM C/OH COVER SHEET PG 1

The C/OH Instruction	Guide explains how to compl	ete this form.	1 Filer ID (Ethics Comm 00069344		2 Total pages f	iled: 66
3 CANDIDATE /	MS / MRS / MR	FIRST		MI	OFFICE	USE ONLY
OFFICEHOLDER NAME	The Honorable	Morgan D.			Date Received ELECTRONIC	ALLY FILED
	NICKNAME	LAST Meyer		SUFFIX	07/14/2023	
4 CANDIDATE /	ADDRESS / PO BOX; APT	/ SUITE #; CIT	Υ;	ZIP CODE	Date Hand-delivered	or Date Postmarked
OFFICEHOLDER MAILING	3838 Oak Lawn Avenue					
ADDRESS	Suite 400				Receipt #	Amount
Change of Address	Dallas, TX 75219				Date Processed	
					Date Imaged	
5 CAMPAIGN	MS / MRS / MR	FIRST		MI	-	
TREASURER NAME	Mr.	Jeff				
	NICKNAME	LAST		SUFFIX		
		Staubach				
6 CAMPAIGN	STREET ADDRESS (NO PO	BOX PLEASE);	AP	T / SUITE #; CITY	; ST.	ATE; ZIP CODE
TREASURER ADDRESS	8343 Douglas Ave., Ste. 1	00				
(Residence or Business)	Dallas, TX 75225					
7 CAMPAIGN TREASURER PHONE	AREA CODE PHON (214) 438-6177	IE NUMBER E	EXTENSION			
8 REPORT TYPE	January 15	30th day before	election	Runoff	15th day after ca	ımpaign treasurer iceholder only)
	X July 15	8th day before 6	election	Exceeded modified reporting limit	Final Report (Att	ach C/OH-FR)
9 PERIOD	Month Day Year			Month Day	Year	
COVERED	01/01/2023	TH	IROUGH	06/30/20	23	
10 ELECTION	ELECTION DATE			ELECTION TYPE	_	
	Month Day Year	XP	rimary	Runoff	Other	
	03/05/2024	G	eneral	Special		
11 OFFICE	OFFICE HELD (if any)			12 OFFICE SOUGH	T (if known)	
	State Representative Distr	rict 108		State Represen	ntative District 108	3
	•			•		
		GO T	O PAGE 2			

## CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

## FORM C/OH COVER SHEET PG 2

2 of 166

13 C / OH NAME	Meyer, Morgan D. (T	he Honorable)	<b>14</b> Filer ID 00069344	(Ethics Commission Filers			
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political ex These expenditures may have been made of d officeholders are required to report this info	without the candidate's or office	eholder's knowledge or			
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME					
Ш	GENERAL						
		COMMITTEE ADDRESS					
	SPECIFIC						
		COMMITTEE CAMPAIGN TREASURER N	IAME				
			DDD500				
		COMMITTEE CAMPAIGN TREASURER A	ADDRESS				
16 CONTRIBUTION TOTALS		IZED POLITICAL CONTRIBUTIONS (OTHE		\$ 0.0			
		CAL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF	LOANS)	\$ 180,227.0			
EXPENDITURE TOTALS							
	4. TOTAL POLITION	4. TOTAL POLITICAL EXPENDITURES					
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PI	AL CONTRIBUTIONS MAINTAINED AS OF ERIOD	THE LAST DAY OF THE	\$ 360,618.9			
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF	PAL AMOUNT OF ALL OUTSTANDING LOARTING PERIOD	ANS AS OF THE LAST DAY	\$ 0.0			
<b>17</b> AFFIDAVIT		I swear, or affirm, under true and correct and inc under Title 15, Election	r penalty of perjury, that the ac cludes all information required t Code.	companying report is to be reported by me			
		The	e Honorable Morgan D. Mey	yer			
		Sign	ature of Candidate or Officeho	lder			
AFFIX NO	TARY STAMP / SEAL AB	OVE					
Sworn to and subs	cribed before me, by the s	aid	, this the	day			
of	, 20, to c	ertify which, witness my hand and seal of off	fice.				
Signature of office	cer administering	Printed name of officer administering	Title of office	er administering oath			

## **SUBTOTALS - C/OH**

## FORM C/OH COVER SHEET PG 3

			C	OVER SHE	<b>ET PG 3</b> 3 of 166
	ER NAM	ME organ D. (The Honorable)	<b>19</b> Filer ID 00069344	(Ethics Commi	ssion Filers)
		E SUBTOTALS SCHEDULE		SUBTOTA	AL AMOUNT
1.	Х	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	180,227.00
2.		\$			
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.		SCHEDULE E: LOANS		\$	
5.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	5	\$	74,837.92
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	DNS	\$	
8.	Х	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	7,757.59
9.	Х	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	8,068.32
10.		SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF	OF C/OH	\$	
11.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	DNS	\$	
12.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F TO FILER	RETURNED	\$	

	MONEI	ARY POLITICAL (	CONTRIBUTIO	INS		SCHEDU	LE <b>A1</b>
	The Instru	ction Guide explains hov	v to complete this fo	orm.	1	Total pages Schedule A1: Sch: 1/13 Rpt: 4/166	
2	FILER NAME	D (The Heavelle)			3	Filer ID (Ethics Commission	on Filers)
		an D. (The Honorable)	_		┖	00069344	
4	Date 06/19/2023	<ul><li>5 Full name of contributor Aboussie, Kenneth</li><li>6 Contributor address; City; S</li></ul>	out-of-state PAC (ID#:		7 	Amount of Contribution (\$)	\$5,000.00
		Dallas, TX 75205					
8	Principal occu Real Estate	pation / Job title (See Instructions	5)	9 Employer (See Instruction Stonelake	s)		
	Date 06/24/2023	Full name of contributor Aldredge, Mark	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$500.00
		Contributor address; City; S	tate; Zip Code				
		Dallas, TX 75225					
	Principal occu	pation / Job title (See Instructions	5)	Employer (See Instruction	s)		
	Date	Full name of contributor	out-of-state PAC (ID#:		Τ	Amount of Contribution (\$)	
	06/19/2023	Allen, Tom			]		\$500.00
		Contributor address; City; S	tate; Zip Code				
		Dallas, TX 75225					
	Principal occu	pation / Job title (See Instructions	5)	Employer (See Instruction	s)		
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	06/27/2023					\$500.00	
		Austin, TX 78701					
	Principal occu	pation / Job title (See Instructions	5)	Employer (See Instruction	s)		
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	06/21/2023	Associa PAC					\$1,000.00
		Contributor address; City; S	tate; Zip Code				
		Dallas, TX 75205					
	Principal occu	pation / Job title (See Instructions	5)	Employer (See Instruction	s)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDU	LE <b>A1</b>
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 2/13 Rpt: 5/166	
2	FILER NAME Meyer, Morg	gan D. (The Honorable)		3	Filer ID (Ethics Commission 00069344	ion Filers)
4	Date 06/27/2023	Full name of contributor	)	7	Amount of Contribution (\$)	\$15,000.00
		Dallas, TX 75207				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	)		
	Date 06/19/2023	Full name of contributor out-of-state PAC (ID#:_ Beck, Henry Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$5,000.00
	Principal occu	Dallas, TX 75201 pation / Job title (See Instructions)	Employer (See Instructions			
	Chairman Chairman	pation / Job title (See Instructions)	Beck Group	) 		
	Date 06/28/2023	Full name of contributor out-of-state PAC (ID#:_ Beecherl, Will Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$5,000.00
		Dallas, TX 75205				
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions Retired	)		
	Date 06/27/2023	Full name of contributor out-of-state PAC (ID#: Blackwell, Pryor Contributor address; City; State; Zip Code Dallas, TX 75205			Amount of Contribution (\$)	\$2,500.00
		pation / Job title (See Instructions) Real Estate Developer	Employer (See Instructions Bandera Ventures	)		
	Date 06/30/2023	Full name of contributor out-of-state PAC (ID#:_ Brentwood Public Affairs  Contributor address; City; State; Zip Code  Austin, TX 78701			Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		

	MONET	ARY POLITICAL (	CONTRIBUTION	NS	5		SCHEDUI	E A1
	The Instru	ction Guide explains how	to complete this for	rm	ı <b>.</b>	1	Total pages Schedule A1: Sch: 3/13 Rpt: 6/166	
2	FILER NAME Meyer, Morg	gan D. (The Honorable)				3	Filer ID (Ethics Commission 00069344	on Filers)
4	Date 06/28/2023	5 Full name of contributor Brown, Coleman  6 Contributor address; City; Si	out-of-state PAC (ID#:			7	Amount of Contribution (\$)	\$1,000.00
_	Delicalizado a	Dallas, TX 75225	, la					
8	Principal occu Partner	pation / Job title (See Instructions	9		Employer (See Instructions Stonelake	5)		
	Date 06/30/2023	Full name of contributor Bryant, Kevin Contributor address; City; S					Amount of Contribution (\$)	\$1,000.00
	Principal occu	Dallas, TX 75201  pation / Job title (See Instructions	<i>.</i> )		Employer (See Instructions	7		
	Attorney	pation 7 305 the (See Instructions	,,		Crow Holdings	')		
	Date 06/20/2023	Full name of contributor Carona, Sr., John Contributor address; City; S	out-of-state PAC (ID#:				Amount of Contribution (\$)	\$2,500.00
		Dallas, TX 75205						
	Principal occu President &	pation / Job title (See Instructions CEO	(3)		Employer (See Instructions Associa	5)		
	Date 06/19/2023	Full name of contributor Carter, Harold Contributor address; City; Si Dallas, TX 75225	out-of-state PAC (ID#:				Amount of Contribution (\$)	\$75.00
	Principal occu	pation / Job title (See Instructions	s)	E	Employer (See Instructions	)		
	Date 06/19/2023	Full name of contributor Cejka, Amanda Contributor address; City; S Dallas, TX 75225	out-of-state PAC (ID#:				Amount of Contribution (\$)	\$100.00
	Principal occu	pation / Job title (See Instructions	s)	E	Employer (See Instructions	()		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDU	LE <b>A1</b>
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 4/13 Rpt: 7/166	
2	FILER NAME Meyer, Morg	gan D. (The Honorable)		3	Filer ID (Ethics Commissi 00069344	on Filers)
4	Date 06/19/2023	5 Full name of contributor out-of-state PAC (ID#:_ Crabb, Roger  6 Contributor address; City; State; Zip Code	)	7	Amount of Contribution (\$)	\$100.00
_		Dallas, TX 75225				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	)		
	Date 06/29/2023	Full name of contributor out-of-state PAC (ID#:_ Crow, Harlan Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$15,000.00
	Principal occu	Dallas, TX 75219 pation / Job title (See Instructions)	Employer (See Instructions	)		
	Chairman	,	Crow Holdings	,		
	Date 06/26/2023	Full name of contributor out-of-state PAC (ID#: Dedman Jr., Robert Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$5,000.00
		Dallas, TX 75225				
	Principal occu President	pation / Job title (See Instructions)	Employer (See Instructions DFI Management	)		
	Date 06/30/2023	Full name of contributor out-of-state PAC (ID#:_FLD Interests  Contributor address; City; State; Zip Code  Dallas, TX 75204	)		Amount of Contribution (\$)	\$5,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 06/26/2023	Full name of contributor out-of-state PAC (ID#:_Ford, Gerald  Contributor address; City; State; Zip Code  Dallas, TX 75205	)		Amount of Contribution (\$)	\$5,000.00
	Principal occu Chairman ar	pation / Job title (See Instructions) nd CEO	Employer (See Instructions Diamond A Ford	)		

	MONEI	ARY POLITICAL C	ONTRIBUTIO	NS		SCHEDUI	LE A1
	The Instru	ction Guide explains how	to complete this fo	rm.	1	Total pages Schedule A1: Sch: 5/13 Rpt: 8/166	
2	FILER NAME Meyer, Morg	an D. (The Honorable)			3	Filer ID (Ethics Commission 00069344	on Filers)
4	Date 06/28/2023	<ul><li>5 Full name of contributor</li><li>Foxworth, Walter</li><li>6 Contributor address; City; St</li></ul>	out-of-state PAC (ID#:		7	Amount of Contribution (\$)	\$1,000.00
8	Principal occu Retired	Dallas, TX 75230 pation / Job title (See Instructions	) [9	Employer (See Instructions     Retired	5)		
	Date 06/28/2023	Full name of contributor Gelczer, Robert Contributor address; City; St	out-of-state PAC (ID#:ate; Zip Code	)		Amount of Contribution (\$)	\$200.00
	Principal occu	Edmond, OK 73034 pation / Job title (See Instructions	)	Employer (See Instructions	5)		
	Date 06/26/2023	Full name of contributor Hallam, James Contributor address; City; St	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$3,000.00
		Dallas, TX 75235					
		pation / Job title (See Instructions nd Legislative Affairs	)	Employer (See Instructions Ben E. Keith Co.	5)		
	Date 06/27/2023	Full name of contributor Hallam, John Contributor address; City; St. Dallas, TX 75205	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$3,000.00
	·	pation / Job title (See Instructions pard Member		Employer (See Instructions Ben E. Keith Co.	5)		
	Date 06/26/2023	Full name of contributor Hallam, Jr., Robert Contributor address; City; St. Dallas, TX 75205	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$3,000.00
	Principal occu Wholesaler	pation / Job title (See Instructions		Employer (See Instructions Ben E. Keith Co.	()		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUI	LE <b>A1</b>
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 6/13 Rpt: 9/166	
2	FILER NAME Meyer, Morg	an D. (The Honorable)		3	Filer ID (Ethics Commission 00069344	on Filers)
4	Date 06/28/2023	<ul> <li>Full name of contributor</li></ul>		7	Amount of Contribution (\$)	\$250.00
_	Dein sin al a sau	Dallas, TX 75205	O Frankrije (Construction			
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)	)		
	Date 06/23/2023	Full name of contributor out-of-state PAC (ID#:_ Hotel PAC of THLA  Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	Austin, TX 78701 pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 06/29/2023	Full name of contributor out-of-state PAC (ID#:_ Howard, Jay Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 06/19/2023	Full name of contributor out-of-state PAC (ID#:_ Kelly, Richard Contributor address; City; State; Zip Code Dallas, TX 75225			Amount of Contribution (\$)	\$1,000.00
	Principal occu Real estate	pation / Job title (See Instructions) executive	Employer (See Instructions LumaResidential	)		
	Date 06/30/2023	Full name of contributor out-of-state PAC (ID#:_Krug, Adam Contributor address; City; State; Zip Code Dallas, TX 75225			Amount of Contribution (\$)	\$250.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E <b>A1</b>
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 7/13 Rpt: 10/166	
2	FILER NAME Meyer, Morg	jan D. (The Honorable)		3	Filer ID (Ethics Commission 00069344	n Filers)
4	Date 06/28/2023	<ul> <li>Full name of contributor  out-of-state PAC (ID#:_Longhofer, Matt</li> <li>Contributor address; City; State; Zip Code</li> </ul>		7	Amount of Contribution (\$)	\$300.00
_	<u> </u>	Dallas, TX 75225				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	)		
	Date 06/29/2023	Full name of contributor			Amount of Contribution (\$)	\$200.00
	Principal occu	Dallas, TX 75225 pation / Job title (See Instructions)	Employer (See Instructions	)		
	· ····o.pa. oooa	paner, cos ano (cos menastro)				
	Date 06/27/2023	Full name of contributor out-of-state PAC (ID#:_ Matthews, Jack Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$5,000.00
		Lewisville, TX 75057				
	Principal occu Developer	pation / Job title (See Instructions)	Employer (See Instructions Matthews Holdings	)		
	Date 06/19/2023	Full name of contributor out-of-state PAC (ID#:_Maus, Elizabeth  Contributor address; City; State; Zip Code  Dallas, TX 75204	)		Amount of Contribution (\$)	\$50.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 06/30/2023	Full name of contributor out-of-state PAC (ID#:_McBee, Lynn Contributor address; City; State; Zip Code  Dallas, TX 75204	)		Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDULE A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 8/13 Rpt: 11/166
2	FILER NAME Meyer, Morg	an D. (The Honorable)		3	Filer ID (Ethics Commission Filers) 00069344
4	Date 06/19/2023	<ul> <li>Full name of contributor</li></ul>	)	7	Amount of Contribution (\$) \$100.00
		Dalllas, TX 75205			
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	)	
	Date 06/29/2023	Full name of contributor out-of-state PAC (ID#:_ McGuire, Natalie Contributor address; City; State; Zip Code			Amount of Contribution (\$) \$15,000.00
	Principal occu	Dallas, TX 75205 pation / Job title (See Instructions)	Employer (See Instructions		
	Homemaker		Self		
	Date 06/27/2023	Full name of contributor out-of-state PAC (ID#:_ Moak Casey PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$) \$1,000.00
		Austin, TX 78746			
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)	
	Date 06/20/2023	Full name of contributor out-of-state PAC (ID#:_ Neil, Jr, F. James  Contributor address; City; State; Zip Code  Dallas, TX 75234			Amount of Contribution (\$) \$200.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)	
	Date 06/22/2023	Full name of contributor out-of-state PAC (ID#:_ Payne, Bill Contributor address; City; State; Zip Code  Dallas, TX 75219			Amount of Contribution (\$) \$5,000.00
	Principal occu Investor	pation / Job title (See Instructions)	Employer (See Instructions Druid Hills Capital, LLC	)	

	MONEI	ARY POLITICAL (	CONTRIBUTIO	NS		SCHEDUL	E <b>A1</b>
	The Instru	ction Guide explains hov	w to complete this fo	rm.	1	Fotal pages Schedule A1: Sch: 9/13 Rpt: 12/166	
2	FILER NAME					Filer ID (Ethics Commission	n Filers)
		an D. (The Honorable)			_	00069344	
4	Date 06/23/2023	<b>5</b> Full name of contributor Perot Jr., Ross	out-of-state PAC (ID#:	_	7 /	Amount of Contribution (\$)	\$5,000.00
		6 Contributor address; City; S	State; Zip Code				
		Dallas, TX 75219					
8	Principal occu	pation / Job title (See Instruction	s)	9 Employer (See Instructions	s)		
	Chairman			The Perot Companies			
	Date	Full name of contributor	out-of-state PAC (ID#:		/	Amount of Contribution (\$)	
	06/23/2023	Popolo, Joe	_				\$5,000.00
		Contributor address; City; S	State; Zip Code		1		
			•				
		Dallas, TX 75225					
	Principal occu	pation / Job title (See Instruction	s)	Employer (See Instructions	s)		
	CEO			Charles & Potomac Cap	pital,	LLC	
	Date	Full name of contributor	out-of-state PAC (ID#:	)	,	Amount of Contribution (\$)	
	06/20/2023	Rees-Jones, Trevor	_			\$	10,000.00
		Contributor address; City; S	State; Zip Code		1		
		Dallas, TX 75225					
		pation / Job title (See Instruction	s)	Employer (See Instructions	s)		
	President, C	EO and Founder		Chief Oil & Gas LLC			
	Date	Full name of contributor	out-of-state PAC (ID#:	)	/	Amount of Contribution (\$)	
	06/19/2023	Robinson, Shelby					\$2.00
		Contributor address; City; S	State; Zip Code		1		
		Niceville, FL 32578					
	Principal occu	pation / Job title (See Instruction	s)	Employer (See Instructions	s)		
	Date	Full name of contributor	out-of-state PAC (ID#:		/	Amount of Contribution (\$)	
	06/23/2023	Sewell, Carl					\$5,000.00
		Contributor address; City; S	State; Zip Code		1		
		Dallas, TX 75220					
_		pation / Job title (See Instruction	s)	Employer (See Instructions			
	President			Sewell Automotive Com	npani	es	
			<u> </u>				

	MONET	ARY POLITICAL (	SCHEDULE A1				
	The Instruc	ction Guide explains how	m.	1	Total pages Schedule A1: Sch: 10/13 Rpt: 13/166		
2	FILER NAME Meyer, Morg	an D. (The Honorable)			3	Filer ID (Ethics Commission 00069344	on Filers)
4			7	Amount of Contribution (\$)	\$2,500.00		
_		Dallas, TX 75220			Ĺ		
8	Principal occu President	pation / Job title (See Instruction	s) <b>9</b>	Employer (See Instructions Sewell Automotive Com		nies	
	Date Full name of contributor out-of-state PAC (ID#:)  06/25/2023 Shelby, Aaron  Contributor address; City; State; Zip Code		•	Amount of Contribution (\$)	\$1,000.00		
	Principal occur	Dallas, TX 75225 pation / Job title (See Instruction	s)	Employer (See Instructions	s)		
Banking Prosperity Bank					-,		
	Date 06/23/2023	Full name of contributor Stalnaker, David Contributor address; City; S	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$2,500.00
		Dallas, TX 75225	<u>,                                      </u>				
	Principal occu Wealth Mana	pation / Job title (See Instruction ager	s)	Employer (See Instructions Symmetry Capital Advis		SLLC	
	Date 06/28/2023	Full name of contributor Steinhart, Ronald Contributor address; City; S Dallas, TX 75230	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$500.00
Principal occupation / Job title (See Instructions)  Employer (See Instruction				s)			
	Date 06/19/2023	Full name of contributor Steinhart, Ronald Contributor address; City; S Dallas, TX 75230	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instruction	s)	Employer (See Instructions	5)		
			<u> </u>				

	MONEI	ARY POLITICAL (	SCHEDULE A1				
	The Instruc	ction Guide explains how	1	Total pages Schedule A1: Sch: 11/13 Rpt: 14/166			
2	FILER NAME	5 (7)			3	Filer ID (Ethics Commissi	on Filers)
		an D. (The Honorable)	_			00069344	
4	Date 06/26/2023	<ul><li>5 Full name of contributor Stroud, James</li><li>6 Contributor address; City; St</li></ul>	out-of-state PAC (ID#: ate; Zip Code	)	7	Amount of Contribution (\$)	\$2,500.00
0	Dringing Local	Dallas, TX 75225	) [0	Employer (See Instructions			
0	Real Estate	pation / Job title (See Instructions	9	Employer (See Instructions Stroud Companies	)		
	Date Full name of contributor out-of-state PAC (ID#:)  06/20/2023 Susser, Sam  Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$2,500.00	
		Dallas, TX 75220					
	Principal occupation / Job title (See Instructions)  Chairman & CEO  Employer (See Instruction Susser Bank				)		
Date Full name of contributor out- 06/19/2023 Talley, Matthew  Contributor address; City; State; Zip		out-of-state PAC (ID#:ate; Zip Code			Amount of Contribution (\$)	\$1,000.00	
		Dallas, TX 75205					
	Principal occu Investments	pation / Job title (See Instructions	)	Employer (See Instructions MDT Investments	)		
Date Full name of contributor  06/19/2023 Terry, Mike  Contributor address; City; State  Dallas, TX 75206		out-of-state PAC (ID#:ate; Zip Code			Amount of Contribution (\$)	\$2,500.00	
	Principal occu President	pation / Job title (See Instructions	(1)	Employer (See Instructions M. Terry Enterprises	)		
Date  O6/28/2023  Full name of contributor out-of-state PAC (ID#:)  Texans for Lawsuit Reform PAC  Contributor address; City; State; Zip Code  Austin, TX 78701				Amount of Contribution (\$)	\$15,000.00		
	Principal occu	pation / Job title (See Instructions	)	Employer (See Instructions	)		

	MONET	ARY POLITICAL CONTRIBUTION	SCHEDULE A1			
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 12/13 Rpt: 15/166	
2	FILER NAME Meyer, Morg	jan D. (The Honorable)		3	Filer ID (Ethics Commissi 00069344	on Filers)
4			7	Amount of Contribution (\$)	\$10,000.00	
_		Austin, TX 78701				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	)		
	Date Full name of contributor out-of-state PAC (ID#:)  06/30/2023 Tibbals, J Michael  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$250.00	
	Principal occu	Dallas, TX 75251 pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 06/23/2023	Full name of contributor out-of-state PAC (ID#:_ Urquhart, Polly Contributor address; City; State; Zip Code Dallas, TX 75230			Amount of Contribution (\$)	\$50.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 06/19/2023	Full name of contributor out-of-state PAC (ID#:_ Waggoner, Richard  Contributor address; City; State; Zip Code  Dallas, TX 75225			Amount of Contribution (\$)	\$200.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 06/19/2023	Full name of contributor out-of-state PAC (ID#:_ Weekley, Richard Contributor address; City; State; Zip Code  Houston, TX 77027			Amount of Contribution (\$)	\$1,500.00
	Principal occu Chairman &	pation / Job title (See Instructions) CEO	Employer (See Instructions Texans for Lawsuit Refo			

	MONET	ARY POLITICAL CONTRIBUTION	NS		SCHEDU	LE <b>A1</b>
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 13/13 Rpt: 16/166	
2	FILER NAME Meyer, Morg	gan D. (The Honorable)		3	Filer ID (Ethics Commission 00069344	on Filers)
4	Date 06/29/2023	Date 5 Full name of contributor out-of-state PAC (ID#:		7	Amount of Contribution (\$)	\$50.00
		Woodville, TX 75979		L		
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date Full name of contributor out-of-state PAC (ID#:			•	Amount of Contribution (\$)	\$1,000.00
	Principal occu	Austin, TX 78701 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> S)		
	Date	Full name of contributor  out-of-state PAC (ID#:_	)	Т	Amount of Contribution (\$)	
	06/19/2023	Williams, Doug  Contributor address; City; State; Zip Code		•	(4)	\$250.00
		Dallas, TX 75229				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 06/28/2023	Full name of contributor out-of-state PAC (ID#:_ Willingham, Clark Contributor address; City; State; Zip Code		•	Amount of Contribution (\$)	\$100.00
	Principal occu	Dallas, TX 75219 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> S)		

## SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Candidate/Officeholder/Politica Credit Card Payment		
Cieuii Caiu Payinelli	The Instruction Guide explains how to complete this form.	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	
Sch: 1/78 Rpt: 17/166	Meyer, Morgan D. (The Honorable) 00069344	
4 Date	5 Payee name	
01/27/2023	AGI Renters Insurance	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$22.67	401 Guadalupe Street	
	Apt 1613	
	Austin, TX 78701	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Office Overhead/Rental Expense	
LAFENDITORE	X Check if Austin, TX, officeholder living expense	
	Rental insurance payment for officeholder's apartment in Austin	
O Commission ONLY if dispose		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held H	
Data		_
Date 02/27/2023	Payee name AGI Renters Insurance	
		_
Amount (\$)	Payee address; City; State; Zip Code	
\$22.67	401 Guadalupe Street	
	Apt 1613	
	Austin, TX 78701	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description	
EXPENDITURE	Office Overhead/Rental Expense  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense	
	Rental insurance payment for officeholder's	
	apartment in Austin	
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/OI	H	
Date	Payee name	
03/27/2023	AGI Renters Insurance	
Amount (\$)	Payee address; City; State; Zip Code	
\$22.67	401 Guadalupe Street	
	Apt. 1613	
	Austin, TX 78701	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	_
OF EXPENDITURE	Office Overhead/Rental Expense	
LXI LINDITORE	X Check if Austin, TX, officeholder living expense	
	Rental insurance payment for officeholder's apartment in Austin	
Complete <u>ONLY</u> if direct	Candidate/Officeholder name Office sought Office held	_
expenditure to benefit C/OI		
		$\dashv$
Forms provided by Tayas F	thics Commission www.athics.state.tv.us. Version V2.5.1.a18ea2	005

### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica			Legal Services		ig Exper es/Wage	es/Contract Labor		OTHER (enter a	category not listed abo	ove)
	Credit Card Payment			The Instruction Gu	ide explains how to	comp	lete this form.				
1	Total pages Schedule F1:	2	FILER NAME					3	Filer ID	(Ethics Commission	on Filers)
	Sch: 2/78 Rpt: 18/166		Meyer, Morg	jan D. (The Hon	iorable)				00069344		
4	Date	5	Payee name								
	04/27/2023		AGI Renters	Insurance							
6	Amount (\$)	7	Payee addres	s; City;	State; Zip	Code					
	\$22.67		401 Guadalı	upe Street							
			Apt. 1613								
			Austin, TX 7	8701							
8	PURPOSE	(a)	Catagony			(h)	<b>)</b> Description				
Ü	OF	(۵)		e Categories listed at th		(5)		outsi	de of Texas. Com	plete Schedule T.	
	EXPENDITURE		Office Overi	icaa/Neritai Exp	,C113C		ш		officeholder living		
										or officeholder's	;
							apartment in	Au	stin		
9	Complete ONLY if direct		Candidate/Offic	eholder name	Office	sought	i		Office he	eld	
	expenditure to benefit C/Ol	Н									
_	Date		Payee name								
	05/30/2023		AGI Renters	Insurance							
	Amount (\$)	T	Payee addres	s; City;	State; Zip	Code					
	\$22.67		401 Guadalı	upe Street							
			Apt 1613								
			Austin, TX 7	8701							
	PURPOSE	(a)		e Categories listed at th		(b)	<b>)</b> Description				
	OF	``'		e Categories listed at th nead/Rental Exp		(2)		outsi	de of Texas. Com	plete Schedule T.	
	EXPENDITURE						X Check if Austin	, TX	officeholder living	expense	
										or officeholder's	;
							apartment in	Au	Sum		
	Complete ONLY if direct expenditure to benefit C/O		Candidate/Offic	ceholder name	Office	sought	İ		Office he	eld	
	experientare to benefit G/O	''									
	Date		Payee name								
	06/27/2023		AGI Renters	Insurance							
	Amount (\$)		Payee addres	s; City;	State; Zip	Code					
	\$22.67		401 Guadalı	upe Street							
			Apt 1613								
			Austin, TX 7	8701							
	PURPOSE	(a)	Category (Se	e Categories listed at th	e top of this schedule)	(b)	<b>)</b> Description				
	OF EXPENDITURE			nead/Rental Exp			ш		de of Texas. Com		
	EXI ENDITORE						_		officeholder living		
							apartment in			or officeholder's	<b>;</b>
	Complete CMIV'S	<u> </u>	Condidat 100	a la a lal s :: :	000					- l al	
	Complete ONLY if direct expenditure to benefit C/Ol		Candidate/Offic	enolaer name	Office	sought	Į.		Office he	eid	
_											

### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	
1 Total pages Schedule F1: Sch: 3/78 Rpt: 19/166	2 FILER NAME Meyer, Morgan D. (The Honorable)  3 Filer ID (Ethics Commission Filers) 00069344
4 Date	5 Payee name
01/25/2023	AT&T
6 Amount (\$) \$70.68	7 Payee address; City; State; Zip Code 208 S. Akard Street  Dallas, TX 75202
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense
EXPENDITURE	\times \text{Check if Austin, TX, officeholder living expense}  Internet for officeholder's Austin apartment
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held
Date	Payee name
02/21/2023	AT&T
Amount (\$)	Payee address; City; State; Zip Code
\$62.60	208 S. Akard Street
BURDOOF	Dallas, TX 75202
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  Office Overhead/Rental Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Office Overhead/Rental Expense  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	Internet for officeholder's Austin apartment
Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held
Date	Payee name
03/23/2023	AT&T
Amount (\$)	Payee address; City; State; Zip Code
\$65.63	208 S. Akard Street
	Dallas, TX 75202
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description
EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.    Check if Austin, TX, officeholder living expense
	Internet for officeholder's Austin apartment
Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held

### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

se Travel in D ise Travel Out es/Contract Labor OTHER (ei

	Candidate/Officeholder/Politica Credit Card Payment	Committee 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:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 4/78 Rpt: 20/166	Meyer, Morgan D. (The Honorable) 00069344
4	Date	5 Payee name
	04/19/2023	AT&T
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$64.66	208 S. Akard Street
		Dallas, TX 75202
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense  Check if travel outside of Texas. Complete Schedule T.
		☐ Check if Austin, TX, officeholder living expense  Internet for officeholder's Austin apartment
		internet for officeriolder 37 distin apartment
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	05/22/2023	AT&T
	Amount (\$)	Payee address; City; State; Zip Code
	\$65.63	208 S. Akard Street
	,	
		Dallas, TX 75202
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		☐ Check if Austin, TX, officeholder living expense ☐ Internet for officeholder's Austin apartment
		internet for officeriolder's Austin apartment
	Complete ONL V if direct	Candidate/Officeholder name Office sought Office held
	Complete ONLY if direct expenditure to benefit C/OI	
	Date	Payee name
	06/20/2023	AT&T
	Amount (\$)	Payee address; City; State; Zip Code
	\$65.63	208 S. Akard Street
		Dallas, TX 75202
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
	EXPENDITURE	X Check if Austin, TX, officeholder living expense
		Internet for officeholder's Austin apartment
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experiencies to benefit C/OI	<u> </u>

### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	Committee 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:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 5/78 Rpt: 21/166	Meyer, Morgan D. (The Honorable) 00069344
4	Date	5 Payee name
	01/23/2023	Adobe
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$25.97	345 Park Avenue
		San Jose, CA 95110
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Online office support software for campaign
		Offiline office support software for campaign
_	0 1: 0.11.7.7.1.	
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	<u> </u>	
	Date	Payee name
	02/22/2023	Adobe
	Amount (\$)	Payee address; City; State; Zip Code
	\$25.97	345 Park Avenue
		San Jose, CA 95110
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Online office support software for campaign
		Chimic office support software for campaign
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	03/22/2023	Adobe
	Amount (\$)	Payee address; City; State; Zip Code
	\$25.97	345 Park Avenue
		San Jose, CA 95110
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
		Check if Austin, TX, officeholder living expense
		Online office support software for campaign
	Commission ONE V. C. P.	Condidate/Officeholder name
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
		•

### SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	I Committee 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:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 6/78 Rpt: 22/166	Meyer, Morgan D. (The Honorable) 00069344
4	Date	5 Payee name
	04/24/2023	Adobe
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$25.97	345 Park Avenue
		San Jose, CA 95110
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Online office support software for campaign
		Offiline office support software for campaign
_	Commiste ONII V if disent	Candidate/Officeholder name Office sought Office held
9	Complete ONLY if direct expenditure to benefit C/OI	the state of the s
	Date	Payee name
	05/22/2023	Adobe
	Amount (\$)	Payee address; City; State; Zip Code
	\$25.97	345 Park Avenue
	Ψ23.31	545 Falk/Wellac
		San Jose, CA 95110
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense   Check if travel outside of Texas. Complete Schedule T.
	LAFENDITORE	Check if Austin, TX, officeholder living expense
		Online office support software for campaign
	Complete ONL V if direct	Candidate/Officeholder name Office sought Office held
	Complete ONLY if direct expenditure to benefit C/OI	· · · · · · · · · · · · · · · · · · ·
	Date	Payee name
	06/22/2023	Adobe
	Amount (\$)	Payee address; City; State; Zip Code
	\$25.97	345 Park Avenue
		San Jose, CA 95110
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense   Check if travel outside of Texas. Complete Schedule T.
	LAFENDITORE	Check if Austin, TX, officeholder living expense
		Online office support software for campaign
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office hold
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

### SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 7/78 Rpt: 23/166	Meyer, Morgan D. (The Honorable) 00069344
4	Date	5 Payee name
	05/22/2023	Allyn Politcal LLC
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$3,000.00	3838 Oak Lawn Avenue
		#400
		Dallas, TX 75219
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Consulting Expense
		Campaign Consulting Services
		Campaigh Consulting Services
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	05/22/2023	Allyn Politcal LLC
	Amount (\$)	Payee address; City; State; Zip Code
	\$52.30	3838 Oak Lawn Avenue
		#400
		Dallas, TX 75219
	PURPOSE	
	OF	(a) Category (See Categories listed at the top of this schedule)  Consulting Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Consulting Expense Check if Austin, TX, officeholder living expense
		Web hosting annual fee
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held
	experiorure to benefit C/Or	
	Date	Payee name
	05/22/2023	Allyn Politcal LLC
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,597.04	3838 Oak Lawn Avenue
		#400
		Dallas, TX 75219
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense
		Creative, Printing, Mail Shop and Postage of
		campaign mail piece
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

ng Expense Event Expense Loan Repayment/Reimbu

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	I Committee 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:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 8/78 Rpt: 24/166	Meyer, Morgan D. (The Honorable) 00069344
4	Date	5 Payee name
	01/06/2023	Amazon
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$321.12	410 Terry Ave. North
		Seattle, WA 98109
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Office supplies for Capitol Office
		Cinice Supplies for Capitor Cinice
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
F	Date	Payee name
	01/03/2023	Amazon
Г	Amount (\$)	Payee address; City; State; Zip Code
	\$36.49	410 Terry Ave N.
		Seattle, WA 98109
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Supplies for Capitol Office
		Cappines for Eapher Emilies
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
H	Date	Payee name
	01/09/2023	Amazon
H	Amount (\$)	Payee address; City; State; Zip Code
	\$23.69	410 Terry Ave N.
		, and the second
		Seattle, WA 98109
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
l	LXI ENDITORE	Check if Austin, TX, officeholder living expense
		Supplies for Capitol Office
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	· · · · · · · · · · · · · · · · · · ·
$\vdash$		

### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -Event Expense Fees

Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	I Committee 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:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 9/78 Rpt: 25/166	Meyer, Morgan D. (The Honorable) 00069344
4	Date	5 Payee name
	01/30/2023	Amazon
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$28.13	410 Terry Ave N.
		Seattle, WA 98109
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
		Check if Austin, TX, officeholder living expense  Supplies for Capitol Office
		Supplies for Capitor Office
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/OI	
H	Date	Payee name
	01/30/2023	Amazon
┝	Amount (\$)	Payee address; City; State; Zip Code
	\$44.60	410 Terry Ave N.
	Ψ44.00	410 Telly Ave IV.
		0 11 144 00400
L		Seattle, WA 98109
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Supplies for Capitol Office
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
H	Date	Payee name
	03/27/2023	Amazon
H	Amount (\$)	Payee address; City; State; Zip Code
	\$14.88	410 Terry Ave N.
	,	
		Seattle, WA 98109
H	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Office Overhead/Rental Expense  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Supplies for Capitol Office
L		
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1

### SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	I Committee 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:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 10/78 Rpt:	Meyer, Morgan D. (The Honorable) 00069344
4	Date	5 Payee name
	03/27/2023	Amazon
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$44.60	410 Terry Ave N.
		Seattle, WA 98109
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
		Check if Austin, TX, officeholder living expense Supplies for Capitol Office
		Supplies for Supplies the Supplies
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	04/10/2023	Amazon
	Amount (\$)	Payee address; City; State; Zip Code
	\$44.60	410 Terry Ave N.
	Ψ+4.00	410 Tony / We W.
		Seattle, WA 98109
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Supplies for Capitol Office
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	05/01/2023	Amazon
	Amount (\$)	Payee address; City; State; Zip Code
	\$37.50	410 Terry Ave N.
		Seattle, WA 98109
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Supplies for Capitol Office
		Supplies for Suprior Office
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Com

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	I Committee 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:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 11/78 Rpt:	Meyer, Morgan D. (The Honorable) 00069344
4	Date	5 Payee name
	05/03/2023	Amazon
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$38.86	410 Terry Ave N.
		Seattle, WA 98109
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Supplies for Capitol Office
		Supplies for Suprior Office
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/O	
_	Date	Payee name
	06/12/2023	Angie Chen Button Campaign
	Amount (\$)	Payee address; City; State; Zip Code
	\$157.00	P.O. Box 832748
		Richardson, TX 75083
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Asian American Day at the Capitol food sponsorship
		Asian American Day at the Capitol 1000 sponsorship
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Data	
	Date	Payee name
	06/15/2023	BCP Beaumont Rainbow Room
	Amount (\$)	Payee address; City; State; Zip Code
	\$100.00	P.O. Box 5974
		Beaumont, TX 77726
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Charitable donation as a gift from committee chairs
		to Speaker Phelan
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Commi

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

ment Solicitation/Fundraising Expense
nse Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

	Candidate/Officeholder/Politica Credit Card Payment	I Committee 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:	
L	Sch: 12/78 Rpt:	Meyer, Morgan D. (The Honorable) 00069344
4	Date	5 Payee name
	04/27/2023	Byers, Jenna
6	Amount (\$)	7 Payee address; City; State; Zip Code
l	\$850.00	2610 Allen Street
l		Apt. 1508
		Dallas, TX 75204
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
l	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Contract labor for campaign services
		Contract labor for campaign services
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/O	the state of the s
F	Date	Payee name
l	06/15/2023	Byers, Jenna
H	Amount (\$)	Payee address; City; State; Zip Code
l	\$1,700.00	2610 Allen Street
		Apt. 1508
		Dallas, TX 75204
H	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.
l	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Contract labor for campaign services
┝	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/Ol	•
⊨	Date	Payee name
l	01/19/2023	Canva
┝	Amount (\$)	Payee address; City; State; Zip Code
l	\$12.99	75 East Santa Clara Street
l	Ψ12.55	75 Last Santa State Street
		San Jose, CA 95113
Г	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
l	OF EXPENDITURE	Office Overhead/Rental Expense
l		Check if Austin, TX, officeholder living expense
		Online office support software for campaign
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
$\vdash$		

### SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee Event Expense Fees

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District
OTHER (enter a category not listed above)

	Credit Card Payment	The Instruction Guide explains how to co	mple	ete this form.			
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)			
	Sch: 13/78 Rpt:	Meyer, Morgan D. (The Honorable)		00069344			
4	Date	5 Payee name		<u> </u>			
	02/21/2023	Canva					
6	Amount (\$)	7 Payee address; City; State; Zip Co	de				
	\$12.99	75 East Santa Clara Street					
		San Jose, CA 95113					
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description			
	OF EXPENDITURE	Office Overhead/Rental Expense		Check if travel outside of Texas. Complete Schedule T.			
				Check if Austin, TX, officeholder living expense Online office support software for campaign			
				Online office support software for campaign			
9	Complete ONLY if direct	Candidate/Officeholder name Office sou	aht	Office held			
Ð	expenditure to benefit C/OI		ynt	Office field			
_	Date	Davis same					
	03/20/2023	Payee name Canva					
			مام				
	Amount (\$)	Payee address; City; State; Zip Co 75 East Santa Clara Street	ae				
	\$12.99	75 East Santa Clara Street					
		0104.05440					
		San Jose, CA 95113					
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b)	Description  Chaple if travel outside of Taylor Complete Schoolule T			
	EXPENDITURE	Office Overhead/Rental Expense		Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense			
				Online office support software for campaign			
	Complete ONLY if direct Candidate/Officeholder name Office sought Office held						
	expenditure to benefit C/OI	1					
	Date	Payee name					
	04/19/2023	Canva					
	Amount (\$)	Payee address; City; State; Zip Co	de				
	\$12.99	75 East Santa Clara Street					
		San Jose, CA 95113					
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description			
	OF	Office Overhead/Rental Expense	,	Check if travel outside of Texas. Complete Schedule T.			
	EXPENDITURE	·		Check if Austin, TX, officeholder living expense			
				Online office support software for campaign			
	Operation ONE VIII II	Outstide to 10 ff and address of		Office 1 11			
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	gnt	Office held			
_							

### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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)

	Credit Card Payment	The Instruction Guide explains how to comple	ete this form.
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 14/78 Rpt:	Meyer, Morgan D. (The Honorable)	00069344
4	Date	5 Payee name	•
	05/19/2023	Canva	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$12.99	75 East Santa Clara Street	
		San Jose, CA 95113	
8	PURPOSE		Description
ľ	OF	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	2.100 2.100 au. 1.100 au.	Check if Austin, TX, officeholder living expense
			Online office support software for campaign
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	experientare to benefit Grot	'	
	Date	Payee name	
	06/20/2023	Canva	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$12.99	75 East Santa Clara Street	
		San Jose, CA 95113	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
	OF EXPENDITURE	Office Overhead/Rental Expense	Check if travel outside of Texas. Complete Schedule T.
			Check if Austin, TX, officeholder living expense
			Online office support software for campaign
_	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	- · · · · · · · · · · · · · · · · · · ·	Office Held
	Data	B	
	Date 02/13/2023	Payee name Central Market	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$24.49	4001 N Lamar Blvd.	
		Austin, TX 78756	
	PURPOSE OF	,	Description
	EXPENDITURE	Food/Beverage Expense	Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
			Office Lunch for Capitol staff
			•
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI		

### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment						
Ļ							
1	Total pages Schedule F1:						
	Sch: 15/78 Rpt:	Meyer, Morgan D. (The Honorable) 00069344					
4	Date	5 Payee name					
	01/17/2023	City of Austin					
6	Amount (\$)	7 Payee address; City; State; Zip Code					
	\$20.20	4815 Mueller Blvd					
		Austin, TX 78723					
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
	OF	Office Overhead/Rental Expense					
	EXPENDITURE	X Check if Austin, TX, officeholder living expense					
		Utilities for officeholder's apartment in Austin					
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held					
	experiulture to beliefit C/Or						
	Date	Payee name					
	02/10/2023	City of Austin					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$50.68	4815 Mueller Blvd					
		Austin, TX 78723					
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
OF EXPENDITURE		Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.					
		X Check if Austin, TX, officeholder living expense					
		Utilities for officeholder's apartment in Austin					
	Compulate ONLY if direct	Candidate/Officeholder name Office sought Office held					
	Complete <u>ONLY</u> if direct expenditure to benefit C/O						
	Date	Payee name					
	03/13/2023	City of Austin					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$82.63	4815 Mueller Blvd					
		Austin, TX 78723					
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
	OF EXPENDITURE	Office Overhead/Rental Expense					
	EXI ENDITORE	X Check if Austin, TX, officeholder living expense					
		Utilities for officeholder's apartment in Austin					
_	Commission ONE V. C. F.	Condidate/Officeholder name					
	Complete <u>ONLY</u> if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH						

### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - al Cor	mmittee	Gift/Awards/Memo	•		Vages	/Contract Labor		Travel Out of D OTHER (enter a	oistrict a category not listed above)
L		_			n Guide explain	is how to co	mple	ete this form.	_		
1	Total pages Schedule F1:	2							3	Filer ID	(Ethics Commission Filers)
	Sch: 16/78 Rpt:		Meyer, Mor	gan D. (The	Honorable)					00069344	
4	Date	5	Payee name								
	04/10/2023		City of Aust	in							
6	Amount (\$)	7	Payee addre	ss; City;	Stat	te; Zip Co	de				
	\$79.53		4815 Muelle	er Blvd							
			Austin, TX	78723							
8	PURPOSE	(a)	Category (5)	ee Categories liste	d at the top of this s	schedule)	(b)	Description			
	OF	<u> </u>		head/Rental		onedale)		:	outsi	de of Texas. Cor	mplete Schedule T.
	EXPENDITURE				1			_		officeholder livin	
								Utilities for of	fice	eholder's ap	partment in Austin
9	Complete ONLY if direct		Candidate/Offi	ceholder nam	е	Office sou	ght			Office h	neld
	expenditure to benefit C/OI	Η									
	Date		Payee name								
	05/09/2023		City of Aust	in							
	Amount (\$)		Payee addre	ss; City;	Stat	te; Zip Co	de				
	\$82.29		4815 Muelle	er Blvd							
			Austin, TX	78723							
	PURPOSE	(a)	Category (Se	ee Categories liste	d at the top of this s	schedule)	(b)	Description			
	OF EXPENDITURE			head/Rental				ш			mplete Schedule T.
										officeholder livin	
								ounties for or	псе	noluers ap	partment in Austin
L	Complete ONLY if direct	<u> </u>	Candidata/O#:	coholdor nom		Office	abt			Office	oold
	Complete ONLY if direct expenditure to benefit C/OH		Januiuale/Offi	ceholder nam	<del>5</del>	Office sou	ynt			Office h	leiu
L	Data	<u> </u>									
	Date		Payee name								
	06/06/2023		City of Aust	ın							
	Amount (\$)		Payee addre	ss; City;	Stat	te; Zip Co	de				
	\$100.75		4815 Muelle	er Blvd							
			Austin, TX	78723							
	PURPOSE	(a)	Category (Se	ee Categories liste	d at the top of this s	schedule)	(b)	Description			
	OF EXPENDITURE			head/Rental							mplete Schedule T.
										officeholder livin	
								Utilities for of	uce	enolder's ap	partment in Austin
	Complete ONLY if direct	Ļ	Candidata/Off:	ceholder nam		Office	abt			Office h	pold
	Complete ONLY if direct expenditure to benefit C/OH		Janunuate/OM	cenoidei nami	<del>5</del>	Office sou	ynı			Onice n	iciu

### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committ

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 17/78 Rpt:	Meyer, Morgan D. (The Honorable) 00069344
4	Date	5 Payee name
	04/12/2023	Clayton Spangler Photographic Design
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$125.00	PO Box 99
		Hillsboro, WV 24946
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		88th Panoramic photo for campaign usage and
		distribution
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	01/03/2023	Constant Contact
	Amount (\$)	Payee address; City; State; Zip Code
	\$250.51	1601 Trapelo Road
		Watham, MA 02451
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		E-newsletter account for campaign
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	<del>-</del>
	Date	Payee name
	02/02/2023	Constant Contact
	Amount (\$)	Payee address; City; State; Zip Code
	\$250.51	1601 Trapelo Road
		Watham, MA 02451
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  E-newsletter account for campaign
		E-newsietter account for campaign
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	<b>y</b>

### SCHEDULE F1

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

Event Expense Loan Repayment/Reimbursement
Fees Office Overhead/Rental Expense
Food/Beverage Expense Polling Expense
Gift/Awards/Memorials Expense Printing Expense
Loan Services Salaries/Waces/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (onter a category pet listed above)

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 18/78 Rpt:	Meyer, Morgan D. (The Honorable) 00069344
4	Date	5 Payee name
	03/02/2023	Constant Contact
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$250.51	1601 Trapelo Road
		Watham, MA 02451
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Advertising Expense  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		E-newsletter account for campaign
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	04/03/2023	Constant Contact
	Amount (\$)	Payee address; City; State; Zip Code
	\$250.51	1601 Trapelo Road
		Watham, MA 02451
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		E-newsletter account for campaign
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	<b>D</b> .	
	Date	Payee name
	05/02/2023	Constant Contact
	Amount (\$)	Payee address; City; State; Zip Code
	\$250.51	1601 Trapelo Road
		Watham, MA 02451
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  E-newsletter account for campaign
		2 nonclosed account for campaign
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	· · · · · · · · · · · · · · · · · · ·

### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee

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)

	Credit Card Payment	The Instruction Guide explains how to comp	lete this form.
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 19/78 Rpt:	Meyer, Morgan D. (The Honorable)	00069344
4	Date	5 Payee name	
	06/02/2023	Constant Contact	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$250.51	1601 Trapelo Road	
		Wathern MA 024E1	
Ļ	DUDDOOF	Watham, MA 02451	N -
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  Advertising Expense	Description Check if travel outside of Texas. Complete Schedule T.
l	EXPENDITURE	Advertising Expense	Check if Austin, TX, officeholder living expense
			E-newsletter account for campaign
Ļ	Complete CNII V if direct	Condidate (Office helder news	Office held
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sough	t Office held
⊨	Date	Payee name	
	03/17/2023	Costco	
-	Amount (\$)	Payee address; City; State; Zip Code	
	\$20.56	10401 Research Blvd.	
l			
		Austin, TX 78759	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	) Description
	OF EXPENDITURE	Office Overhead/Rental Expense	Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
			Supplies for Capitol Office
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sough	t Office held
L	experientare to benefit 6/01	<u> </u>	
	Date	Payee name	
L	03/17/2023	Costco	
l	Amount (\$) \$41.44	Payee address; City; State; Zip Code 10401 Research Blvd.	
	<b>\$41.44</b>	10401 Research bivu.	
		Austin, TX 78759	
┝	PURPOSE		) Description
l	OF EXPENDITURE	Office Overhead/Rental Expense	Check if travel outside of Texas. Complete Schedule T.
l	EXPENDITORE		Check if Austin, TX, officeholder living expense  Supplies for Capitol Office
			Supplies for Capitor Office
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sough	t Office held
	expenditure to benefit C/O		

### SCHEDULE F1

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

Event Expense Loan Repayment/Reimbursement
Fees Office Overhead/Rental Expense
Food/Beverage Expense Polling Expense
Gift/Awards/Memorials Expense Printing Expense
Final Services Salaries/Wangs/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (onter a category pet listed above)

Credit Card Payment	The Instruction Guide explains how to d	-	ete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)	
Sch: 20/78 Rpt:	Meyer, Morgan D. (The Honorable)		00069344
4 Date	5 Payee name		
03/31/2023	Costco		
6 Amount (\$)	7 Payee address; City; State; Zip C	ode	
\$52.11	10401 Research Blvd.		
	Austin, TX 78759		
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
OF	Office Overhead/Rental Expense	(~)	Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE			Check if Austin, TX, officeholder living expense
			Supplies for Capitol Office
9 Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate/Officeholder name Office so	ught	Office held
experiorure to beriefit C/C	VIT		
Date	Payee name		
05/08/2023	Costco		
Amount (\$)	Payee address; City; State; Zip C	ode	
\$115.40	10401 Research Blvd.		
	Austin, TX 78759		
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
OF	Office Overhead/Rental Expense	` ′	Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE			Check if Austin, TX, officeholder living expense
			Supplies for Capitol Office
Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate/Officeholder name Office so	ught	Office held
experience to borrow ore			
Date	Payee name		
05/22/2023	Costco		
Amount (\$)	Payee address; City; State; Zip C	ode	
\$23.45	10401 Research Blvd.		
	Austin, TX 78759		
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
OF EXPENDITURE	Office Overhead/Rental Expense		Check if travel outside of Texas. Complete Schedule T.
LAFENDITORE			Check if Austin, TX, officeholder living expense
			Supplies for Capitol Office
Operation Children	Open Middle (Office helder)		06
Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate/Officeholder name Office so OH	ught	Office held

#### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Co

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		nmittee	Gift/Awards/Memo Legal Services The Instruction	ials Expense Guide explains		Wages	s/Contract Labor		Travel Out of D OTHER (enter	istrict a category not listed above)	
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	(Ethics Commission Filers)	
	Sch: 21/78 Rpt:			gan D. (The I	Honorable)					00069344		
4	Date	5	Payee name									
	06/08/2023		Costco									
6	Amount (\$)	7	Payee addres	s; City;	State	; Zip Co	ode					
	\$23.45		10401 Rese	arch Blvd.								
			Austin, TX 7	8759								
8	PURPOSE	(a)	Category (Se	e Categories listed	at the top of this sch	hedule)	(b)	Description				
	OF EXPENDITURE			nead/Rental I							nplete Schedule T.	
								<b>—</b>		officeholder livin	g expense	
								Supplies for 0	oap	olloi Ollice		
Ļ	Complete ONLY if direct	L	Sandidata (Offi			Office co.	, au la d			Office le	امام	
9	Complete ONLY if direct expenditure to benefit C/OI		zandidate/Oiii	ceholder name	•	Office sou	ugni			Office h	leid	
	Date		Payee name									_
	01/30/2023		Dallas Cour	ity Council of	Republican \	Nomen						
	Amount (\$)		Payee addres	ss; City;	State	e; Zip Co	ode					_
	\$250.00		11617 N. C	entral Expres	sway							
			Ste. 240									
			Dallas, TX 7	5243								
	PURPOSE	(a)	Category (Sc	e Categories listed	at the top of this sch	hedule)	(b)	Description				
	OF EXPENDITURE		Contribution	s/Donations	Made By			_	outsi	de of Texas. Cor	nplete Schedule T.	
	LAPENDITORE		Candidate/0	Officeholder/F	Political Comn	nittee		_		officeholder livin		
								Nuts and Bolt	ts i	raining Spo	onsorsnip	
_	Complete ONLY if direct	<u> </u>	Candidato/Offi	ceholder name		Office sou	ıaht			Office h	old	
	expenditure to benefit C/OI		zarididate/Offi	scholder Hame	•	Office 30t	agrit			Office fi	iciu	
_	Date		Payee name									_
	03/08/2023		,	ity Republica	n Partv							
	Amount (\$)		Payee addres			e; Zip Co	ahe					
	\$1,500.00		•	entral Expwy	Siaic	ε, Ζιρ Οι	oue					
	Ψ1,500.00		Suite 240	znii ai Expwy								
				VEO 40								
			Dallas, TX 7									
	PURPOSE OF	(a)			at the top of this sch	hedule)	(b)	Description	outoi	do of Toyon Cor	nplete Schedule T.	
	EXPENDITURE			s/Donations	Made By Political Comn	nittee				officeholder livin		
			Our laidate/	Jiliocholaci71	Ontiodi Comin	intec		Reagan Day				
								-	•	-		
	Complete ONLY if direct		andidate/Offi	ceholder name	. (	Office sou	ught			Office h	eld	_
	expenditure to benefit C/OI	Н										

#### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committe

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	I Committee 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:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 22/78 Rpt:	Meyer, Morgan D. (The Honorable) 00069344
4	Date	5 Payee name
	05/16/2023	Etsy
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$875.66	117 Adams St.
		Brooklyn, NY 11201
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Gift/Awards/Memorials Expense
		Check if Austin, TX, officeholder living expense  Gifts for Capitol Staff
		Citts for Capitor Stan
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/OI	
F	Date	Payee name
	06/28/2023	Exchange Club of Lake Highlands
⊢	Amount (\$)	Payee address; City; State; Zip Code
	\$200.00	P.O. Box 823725
	¥200.00	. 18. 28. 820. 2
		Dallas, TX 75382
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Sponsorship for Fourth of July Parade
		Sponsorship for Fourth of July Farade
⊢	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
F	Date	Payee name
	01/11/2023	Extra Space Storage
H	Amount (\$)	Payee address; City; State; Zip Code
	\$222.00	4920 McKinney Avenue
		Dallas, TX 75204
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
		Check if Austin, TX, officeholder living expense  Campaign storage units
		Campaign storage units
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	· · · · · · · · · · · · · · · · · · ·
$\vdash$		
ı		

#### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
_	Total manage Cabadula F1.	<u> </u>
1	Total pages Schedule F1: Sch: 23/78 Rpt:	2 FILER NAME  Meyer, Morgan D. (The Honorable)  3 Filer ID (Ethics Commission Filers)  00069344
4	Date	F. Davidson
4		5 Payee name
	01/19/2023	Extra Space Storage
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$316.00	4920 McKinney Avenue
		D. H. TV 75004
		Dallas, TX 75204
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Campaign storage units
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	<del>1</del>
$\vdash$	Date	Dougo namo
		Payee name
	02/13/2023	Extra Space Storage
	Amount (\$)	Payee address; City; State; Zip Code
	\$230.00	4920 McKinney Avenue
		Dollar TV 75204
		Dallas, TX 75204
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
		Check if Austin, TX, officeholder living expense
		Campaign storage units
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	<del>1</del>
	Date	Payee name
	02/21/2023	Extra Space Storage
	Amount (\$)	Payee address; City; State; Zip Code
	\$332.00	4920 McKinney Avenue
		Dallas, TX 75204
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Office Overhead/Rental Expense  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Campaign storage units
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	Complete ONLY if direct expenditure to benefit C/Ol	
1		

### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committe

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	I Committee 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:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 24/78 Rpt:	Meyer, Morgan D. (The Honorable) 00069344
4	Date	5 Payee name
	02/28/2023	Extra Space Storage
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$331.00	4920 McKinney Avenue
		Dallas, TX 75204
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Campaign storage units
		Sumpaign storage units
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/O	
-	Date	Dougo nama
		Payee name
	03/13/2023	Extra Space Storage
	Amount (\$)	Payee address; City; State; Zip Code
	\$230.00	4920 McKinney Avenue
		Dallas, TX 75204
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
		Compaign storage units
		Campaign storage units
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	
_	_	
	Date	Payee name
	03/20/2023	Extra Space Storage
	Amount (\$)	Payee address; City; State; Zip Code
	\$332.00	4920 McKinney Avenue
		Dallas, TX 75204
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
		Check if Austin, TX, officeholder living expense
		Campaign storage units
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_		

### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Comm

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Lenal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 25/78 Rpt:	Meyer, Morgan D. (The Honorable) 00069344
4	Date	5 Payee name
	03/28/2023	Extra Space Storage
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$331.00	4920 McKinney Avenue
		Dallas, TX 75204
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Campaign storage units
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OH	H. The state of th
	Date	Payee name
	04/11/2023	Extra Space Storage
	Amount (\$)	Payee address; City; State; Zip Code
	\$230.00	4920 McKinney Avenue
	!	
		Dallas, TX 75204
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	!	Campaign storage units
	!	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	- · · · · · · · · · · · · · · · · · · ·
_	Date	Payee name
	04/19/2023	Extra Space Storage
	Amount (\$)	Payee address; City; State; Zip Code
	\$332.00	4920 McKinney Avenue
	l	Dallas, TX 75204
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  Office Overhead/Rental Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Campaign storage units
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OF	4

### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Advertising Expense Event Expense
Accounting/Banking Fees
Consulting Expense Food/Beverage
Contributions/ Donations Made By - Gift/Awards/Mer

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 26/78 Rpt:	Meyer, Morgan D. (The Honorable) 00069344
4 Date	5 Payee name
04/28/2023	Extra Space Storage
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$331.00	4920 McKinney Avenue
	Dallas, TX 75204
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	Campaign storage units
	Sumpargh storage arms
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Data	T -
Date	Payee name
05/11/2023	Extra Space Storage
Amount (\$)	Payee address; City; State; Zip Code
\$230.00	4920 McKinney Avenue
	Dallas, TX 75204
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense   Check if travel outside of Texas. Complete Schedule T.
_/	Check if Austin, TX, officeholder living expense
	Campaign storage units
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
· 	
Date	Payee name
05/19/2023	Extra Space Storage
Amount (\$)	Payee address; City; State; Zip Code
\$332.00	4920 McKinney Avenue
	Dallas, TX 75204
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense   Check if travel outside of Texas. Complete Schedule T.
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	Campaign storage units
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
expenditure to benefit 6/6	"

#### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Commi Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica			Giff/Awards/Memorials Legal Services		Salaries/W		e /Contract Labor		OTHER (enter a	strict a category not listed abo	ve)
	Credit Card Payment			The Instruction G	uide explains ho	w to con	nple	ete this form.				
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	(Ethics Commission	on Filers)
	Sch: 27/78 Rpt:		Meyer, Morç	gan D. (The Ho	norable)					00069344		
4	Date	5	Payee name					•	_			
	05/30/2023		Extra Space	Storage								
6	Amount (\$)	7	Payee addres	ss; City;	State;	Zip Cod	de					
	\$331.00		4920 McKin	ney Avenue								
			Dallas, TX 7	5204								
8	PURPOSE	(a)		e Categories listed at t	h - 4		(b)	Description				
	OF	(-,		e Categories listed at t nead/Rental Exp		uie)	(~)		outsi	de of Texas. Con	nplete Schedule T.	
	EXPENDITURE		000 0.10		<b>5000</b>			Check if Austin,	, TX,	officeholder livin	g expense	
								Campaign sto	ora	ge units		
9	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Offic	ceholder name	Off	ice soug	ght			Office h	eld	
	experiulture to beliefit C/Oi											
	Date		Payee name									
	06/08/2023		Extra Space	Storage								
	Amount (\$)		Payee addres	ss; City;	State;	Zip Cod	de					
	\$218.64		4920 McKin	ney Avenue								
			Dallas, TX 7	5204								
	PURPOSE	(a)	Category (Se	e Categories listed at t	he top of this schedu	ule)	(b)	Description				
	OF EXPENDITURE		Office Overh	nead/Rental Exp	pense			<b>=</b>			nplete Schedule T.	
								Campaign sto		officeholder livin	g expense	
								oumpaign st	JI a	ge arms		
	Complete ONLY if direct		Candidate/Offic	ceholder name	Off	ice soug	aht			Office h	eld	
	expenditure to benefit C/OI						J					
_	Date		Payee name									
	06/12/2023		Extra Space	Storage								
	Amount (\$)		Payee addres		State;	Zin Cor	de					
	\$230.00		4920 McKin	-	State,	Zip C00	uc					
	Ψ200.00		1020 111011111	noy / wondo								
			Dallas, TX 7	5204								
	DUDDOCE	(0)					/b\	Description				
	PURPOSE OF	(a)		e Categories listed at t nead/Rental Ex		ule)	(D)	Description  Check if travel of	outsi	de of Texas. Con	nplete Schedule T.	
	EXPENDITURE		Office Over	ieau/Rentai Ex	pense					officeholder livin		
								Campaign sto	ora	ge units		
	Complete ONLY if direct		Candidate/Offic	ceholder name	Off	ice souç	ght			Office h	eld	
L	expenditure to benefit C/OI	п 										

### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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)

	Credit Card Payment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	_
	Sch: 28/78 Rpt:	Meyer, Morgan D. (The Honorable) 00069344	
4	Date	5 Payee name	
	06/20/2023	Extra Space Storage	
6	Amount (\$)	7 Payee address; City; State; Zip Code	_
	\$332.00	4920 McKinney Avenue	
		Dallas, TX 75204	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Office Overhead/Rental Expense	
		Check if Austin, TX, officeholder living expense	
		Campaign storage units	
_	0 1: 0 1: 0		_
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held H	
	<u> </u>		_
	Date	Payee name	
	06/28/2023	Extra Space Storage	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$331.00	4920 McKinney Avenue	
		Dallas, TX 75204	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense	
		Campaign storage units	
		Campaign storage unite	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/O		
_			_
	Date	Payee name	
	05/10/2023	FedEx	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$2.17	110 E 2nd St.	
		Austin, TX 78701	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	_
	OF EXPENDITURE	Advertising Expense	
	EXPENDITURE	Check if Austin, TX, officeholder living expense	
		Mailing of Campaign Materials	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/O	n	

### SCHEDULE F1

Advertising Expense Event Expense
Accounting/Banking Fees
Consulting Expense Food/Beverage
Contributions/ Donations Made By - Gift/Awards/Mer

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 29/78 Rpt:	Meyer, Morgan D. (The Honorable) 00069344
4	Date	5 Payee name
	04/24/2023	Fedex
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$92.32	3905 Oak Lawn Avenue
		Dallas, TX 75219
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Gift/Awards/Memorials Expense
		Printing constituent letters of congrats
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Date	Payee name
	05/08/2023	Fedex
	Amount (\$)	Payee address; City; State; Zip Code
	\$8.11	3905 Oak Lawn Avenue
	Ψ0.11	5555 Gail Lawii / Wellac
		Dallas, TX 75219
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Printing constituent letters of congrats
		Timung constituent letters of congrute
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	<b>y</b>
	Date	Payee name
	05/08/2023	Payee name Fedex
	Amount (\$) \$128.78	Payee address; City; State; Zip Code
	Φ120.70	3905 Oak Lawn Avenue
		Dallas, TX 75219
	DUDDOCE	I ma
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description  Gift/Awards/Memorials Expense  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Printing constituent letters of congrats
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1
1		

### SCHEDULE F1

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

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries (Contract Labor Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (onter a category pet listed above)

	Credit Card Payment	The Instruction Guide explains how to co	-	ete this form.
1	Total pages Schedule F1:			3 Filer ID (Ethics Commission Filers)
	Sch: 30/78 Rpt:	Meyer, Morgan D. (The Honorable)		00069344
4	Date	5 Payee name		•
	05/08/2023	Fedex		
6	Amount (\$)	7 Payee address; City; State; Zip Co	de	
	\$1,021.44	3905 Oak Lawn Avenue		
		Dallas, TX 75219		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF	Gift/Awards/Memorials Expense	` '	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	· ·		Check if Austin, TX, officeholder living expense
				Printing constituent letters of congrats
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	ght	Office held
	Date	Payee name		
	05/19/2023	Fedex		
	Amount (\$)	Payee address; City; State; Zip Co	de	
	\$19.57	3905 Oak Lawn Avenue		
		Dallas, TX 75219		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE	Advertising Expense		Check if travel outside of Texas. Complete Schedule T.
	EXI ENDITORE			Check if Austin, TX, officeholder living expense
				Mailing of campaign materials
	Complete ONLY if direct	Candidate/Officeholder name Office sour	aht	Office held
	expenditure to benefit C/OI	•	ynı	Office field
	Date	Payee name		
	05/22/2023	Fedex		
	Amount (\$)	Payee address; City; State; Zip Co	de	
	\$80.71	3905 Oak Lawn Avenue		
		Dallas, TX 75219		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE	Advertising Expense		Check if travel outside of Texas. Complete Schedule T.
				Check if Austin, TX, officeholder living expense  Mailing of campaign materials
				maining of campaign materials
	Complete ONLY if direct	Candidate/Officeholder name Office sou	abt	Office held
	expenditure to benefit C/OI	•	grit	Office Held

### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Commi

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	I Committee 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:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 31/78 Rpt:	Meyer, Morgan D. (The Honorable) 00069344
4	Date	5 Payee name
	06/14/2023	Fedex
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$3.24	3905 Oak Lawn Ave
		Dallas, TX 75219
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense
		Check if Austin, TX, officeholder living expense Office supplies for District Office
		Cinice Supplies for Bistrict Cinice
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
١	expenditure to benefit C/O	
$\vdash$	Date	Davisa nama
	06/15/2023	Payee name
		Fedex
	Amount (\$)	Payee address; City; State; Zip Code
	\$12.00	3905 Oak Lawn Ave
		Dallas, TX 75219
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense
		Check if Austin, TX, officeholder living expense
		Mailing of campaign materials
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Data	
	Date	Payee name Fedex
	06/23/2023	- 55-51
	Amount (\$)	Payee address; City; State; Zip Code
	\$30.86	3905 Oak Lawn Ave
		Dallas, TX 75219
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Mailing of campaign materials
		Mailing of Campaign materials
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

#### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 32/78 Rpt:	Meyer, Morgan D. (The Honorable) 00069344
4 Date	5 Payee name
05/11/2023	Fedex
6 Amount (\$) \$91.73	7 Payee address; City; State; Zip Code 110 E 2nd St.  Austin, TX 78701
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Advertising Expense  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Mailing of Campaign Materials
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H
Date	Payee name
01/31/2023	Figueiras, Elizabeth
Amount (\$) \$750.00	Payee address; City; State; Zip Code 4330 Bull Creek Rd. Apt. 4117 Austin, TX 78731
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Contract labor for campaign services
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date 04/11/2023	Payee name Figueiras, Elizabeth
Amount (\$) \$750.00	Payee address; City; State; Zip Code 4330 Bull Creek Rd. Apt. 4117 Austin, TX 78731
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Contract labor for campaign services
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H

#### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political C

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Gift/Awards/Memorials Exper nmittee Legal Services The Instruction Guide 6	Salaries/V	/ages	s/Contract Labor		Travel Out of Dist OTHER (enter a	trict category not listed above)
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID	(Ethics Commission Filers)
	Sch: 33/78 Rpt:		Meyer, Morgan D. (The Honora	ble)				00069344	
4	Date	5	Payee name			·			
	06/22/2023		Food Heads						
6	Amount (\$)	7	Payee address; City;	State; Zip Co	de				
	\$93.73		616 W 34th St.						
			: TV 70705						
Ļ		<u> </u>	Austin, TX 78705						
8	PURPOSE OF	(a) 	Category (See Categories listed at the top	of this schedule)	(b)	Description  Check if travel or	utsi	de of Texas. Comp	nlete Schedule T
	EXPENDITURE		Food/Beverage Expense					officeholder living	
						Office Lunch f	or	Capitol staff	
9	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Officeholder name	Office sou	ght			Office he	ld
		_							
	Date		Payee name						
	02/02/2023	L	Gables Republic Square	01-1 7:- 0-	-1-				
	Amount (\$) \$2,926.81		Payee address; City;	State; Zip Co	ae				
	\$2,920.81		401 Guadalupe Street						
			Apt 1613 Austin, TX 78701						
	PURPOSE	(0)			(h)	Description			
	OF	(a)	Category (See Categories listed at the top Office Overhead/Rental Expens		(D)	Description  Check if travel o	utsi	de of Texas. Comp	olete Schedule T.
	EXPENDITURE		Office Overhead/Nertial Experie			_		officeholder living	
						Rent for office	eho	lder's apartn	nent in Austin
	Operation ONLY if allowed	L_	Develored to the control of the cont	0#:	4			O#: b	1.1
	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Officeholder name	Office sou	gnı			Office he	10
	Date		Payee name						
	03/02/2023		Gables Republic Square						
	Amount (\$)		Payee address; City;	State; Zip Co	de				
	\$3,258.60		401 Guadalupe Street						
			Apt 1613						
		_	Austin, TX 78701		<i>a</i> >				
	PURPOSE OF	(a) 	Category (See Categories listed at the top Office Overhead/Rental Expens		(D)	Description  Check if travel o	utsi	de of Texas. Comp	olete Schedule T.
	EXPENDITURE		Office Overflead/Nertial Expens			_		officeholder living	
						Rent for office	eho	lder's apartn	nent in Austin
	Complete ONLY if direct	Ļ	Candidate/Officeholder name	Office	abt			Office he	Id
	Complete ONLY if direct expenditure to benefit C/OI		candidate/Onicendidel Haine	Office sou	yııı			Office fie	iu

#### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (onter a category not listed above)

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - Il Coi	mmittee	Gift/Awards/Me Legal Services	·			ages.	e /Contract Labor ete this form.			evel Out of I HER (enter		ct tegory not listed abov	/e)
Ļ		-	EU EB:		.on Guide ex	λριαιτί <b>5</b> 110	OVV TO COL	iipie	ac uns ioiiii.	l.				Euletin On the first	. =1
1	Total pages Schedule F1:	2				. 1 . 3				3		er ID	,	Ethics Commissio	n Filers)
	Sch: 34/78 Rpt:		Meyer, Mor	gan D. (Th	e Honorab	oie)					υ0	069344	ŀ		
4	Date	5	Payee name												
	04/03/2023		Gables Rep	ublic Squa	re										
6	Amount (\$)	7	Payee addre	ss; City;		State;	Zip Co	de							
	\$3,346.07		401 Guadal	upe Street											
			Apt 1613												
			Austin, TX	78701											
8	PURPOSE	(a)	Category (Se		stad at 41 '	of this -	lula)	(h)	Description						
ľ	OF	(۳)	Office Over				dule)	(5)	Check if travel	outsi	side o	f Texas. Co	mple	te Schedule T.	
	EXPENDITURE		JIIIOC OVGI	- Journ Cill	a Lapense	•			X Check if Austin						
									Rent for office	ehc	olde	er's apa	rtme	ent in Austin	
9	Complete ONLY if direct		Candidate/Offi	ceholder na	me	Of	fice sou	ght				Office	held		
	expenditure to benefit C/OI	Η													
	Date		Payee name												
	05/02/2023		Gables Rep	ublic Squa	re										
	Amount (\$)		Payee addre	ss; City;		State;	Zip Co	de							
	\$3,149.81		401 Guadal	upe Street											
			Apt 1613												
			Austin, TX	78701											
	PURPOSE	(a)	Category (Se	o Catogorios lis	tod at the ton o	of this school	tulo)	(b)	Description						
	OF	l` <i>'</i>	Office Over				auic)	. ,	Check if travel	outsi	side o	f Texas. Co	omple	te Schedule T.	
	EXPENDITURE				-p- 500				X Check if Austin						
									Rent for office	eho	olde	er's apai	rtme	ent in Austin	
	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Offi	ceholder na	me	Of	fice sou	ght				Office	held		
	Date		Payee name												
	06/02/2023		Gables Rep	ublic Saua	re										
_		$\vdash$				Ctoto:	Zin Co	do							
	Amount (\$)		Payee addres 401 Guadal	•		Sidle,	Zip Co	ue							
	\$2,542.46			upe Street											
			Apt 1613												
			Austin, TX	78701									_		
	PURPOSE OF	(a)	Category (Se				dule)	(b)	Description						
	EXPENDITURE		Office Over	head/Rent	al Expense	е			Check if travel						
									X Check if Austin						
									. Control Office	J. 10	Jiuc	o apai		/ WOUII	
	Complete ONLY if direct	L(	Candidate/Offi	ceholder na	me	Of	fice sou	aht				Office	held		
	expenditure to benefit C/O				-	3.	004	J				00	. 5.0		

### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Event Expense Loan Repayment/Reimbu

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committe

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

	Candidate/Officeholder/Politica Credit Card Payment	I Committee 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:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 35/78 Rpt:	Meyer, Morgan D. (The Honorable) 00069344
4	Date	5 Payee name
	01/03/2023	Google Suite
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$57.56	1600 Amphitheatre Parkway
		Mountain View, CA 94043
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Online office support software for campaign
		Chine office support software for earnpaign
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
$\vdash$	Dete	
	Date	Payee name
	02/01/2023	Google Suite
	Amount (\$)	Payee address; City; State; Zip Code
	\$15.98	1600 Amphitheatre Parkway
		Mountain View, CA 94043
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Online office support software for campaign
		Chimic chies support solumns for sumpaign
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	- · · · · · · · · · · · · · · · · · · ·
_	Data	Davies same
	Date 02/02/2023	Payee name Google Suite
		<u> </u>
	Amount (\$)	Payee address; City; State; Zip Code
	\$57.56	1600 Amphitheatre Parkway
		Mountain View, CA 94043
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
		Check if Austin, TX, officeholder living expense Online office support software for campaign
		Offiline office support software for campaign
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_		

### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	I Committee 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:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)				
	Sch: 36/78 Rpt:	Meyer, Morgan D. (The Honorable) 00069344				
4	Date	5 Payee name				
	03/02/2023	Google Suite				
6	Amount (\$)	7 Payee address; City; State; Zip Code				
	\$57.56	1600 Amphitheatre Parkway				
		Mountain View, CA 94043				
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense				
		Online office support software for campaign				
		Chimo chico capport contrato for campaign				
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held				
9	expenditure to benefit C/O					
$\vdash$	Dete					
	Date	Payee name				
	04/03/2023	Google Suite				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$57.56	1600 Amphitheatre Parkway				
		Mountain View, CA 94043				
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense				
		Online office support software for campaign				
		Chine office support software for campaign				
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held				
	expenditure to benefit C/O					
	<b>D</b> .					
	Date	Payee name				
	05/02/2023	Google Suite				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$62.04	1600 Amphitheatre Parkway				
		Mountain View, CA 94043				
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.				
		Check if Austin, TX, officeholder living expense				
		Online office support software for campaign				
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI					

### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solaries (Contract Labor,

	Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 37/78 Rpt:	Meyer, Morgan D. (The Honorable) 00069344
4	Date	5 Payee name
	06/02/2023	Google Suite
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$63.96	1600 Amphitheatre Parkway
		Mountain View, CA 94043
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Online office support software for campaign
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1
	Date	Payee name
	01/05/2023	H-E-B
	Amount (\$)	Payee address; City; State; Zip Code
	\$217.87	1000 E 41st St.
		Austin, TX 78751
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Supplies for Capitol Office
		Capping 18. Capital Cine
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1
	Date	Payee name
	01/17/2023	H-E-B
	Amount (\$)	Payee address; City; State; Zip Code
	\$84.26	1000 E 41st St.
		Austin, TX 78751
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Supplies for Capitol Office
		Supplies for Supitor Strice
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
ı		

### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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

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)

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1: Sch: 38/78 Rpt:	2 FILER NAME Meyer, Morgan D. (The Honorable)  3 Filer ID (Ethics Commission Filers) 00069344
4	Date 01/23/2023	5 Payee name H-E-B
6	Amount (\$) \$91.84	7 Payee address; City; State; Zip Code 7901 US-290
8	PURPOSE OF EXPENDITURE	Austin, TX 78736  (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense Supplies for Capitol Office
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date 01/27/2023	Payee name H-E-B
	Amount (\$) \$43.19	Payee address; City; State; Zip Code 5800 W Slaughter Ln.  Austin, TX 78749
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense  (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Supplies for Capitol Office
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date 02/21/2023	Payee name H-E-B
	Amount (\$) \$88.11	Payee address; City; State; Zip Code 5800 W Slaughter Ln.
		Austin, TX 78749
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Supplies for Capitol Office
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

#### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Comm

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	I Committee 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:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 39/78 Rpt:	Meyer, Morgan D. (The Honorable) 00069344
4	Date	5 Payee name
	02/27/2023	H-E-B
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$79.58	7901 US-290
		Austin, TX 78736
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Supplies for Capitol Office
		σαρρίτου στιτος στι
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/OI	
⊨	Data	
	Date	Payee name
L	03/06/2023	H-E-B
	Amount (\$)	Payee address; City; State; Zip Code
	\$55.25	5800 W Slaughter Ln.
		Austin, TX 78749
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Supplies for Capitol Office
		Supplies for Capitor Office
┝	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
⊨	Date	Davida marea
	03/27/2023	Payee name H-E-B
L		
	Amount (\$)	Payee address; City; State; Zip Code
	\$106.54	5800 W Slaughter Ln.
		Austin, TX 78749
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Supplies for Capitol Office
		Supplies for Capitor Office
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
$\vdash$		

### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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

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)

	Credit Card Payment	The Instruction Guide explains how to comple	ete this form.
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 40/78 Rpt:	Meyer, Morgan D. (The Honorable)	00069344
4	Date	5 Payee name	·
	04/03/2023	H-E-B	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$13.47	5800 W Slaughter Ln.	
		Austin, TX 78749	
8	PURPOSE OF	, , ,	Description
	EXPENDITURE	Office Overhead/Rental Expense	Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
			Supplies for Capitol Office
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O	4	
	Date	Payee name	
	04/14/2023	H-E-B	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$27.04	5800 W Slaughter Ln.	
		Austin, TX 78749	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
	OF EXPENDITURE	Office Overhead/Rental Expense	Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
			Supplies for Capitol Office
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O	4	
	Date	Payee name	
	04/25/2023	H-E-B	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$142.66	5800 W Slaughter Ln.	
		Austin, TX 78749	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
	OF EXPENDITURE	Office Overhead/Rental Expense	Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
			Supplies for Capitol Office
			11 - San
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O		

### SCHEDULE F1

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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

mbursement Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)

orean oara'r aymeni	The Instruction Guide explains how to co	omplete this form.		
1 Total pages Schedule F1:	2 FILER NAME		3 Filer ID	(Ethics Commission Filers)
Sch: 41/78 Rpt:	Meyer, Morgan D. (The Honorable)		00069344	
4 Date	5 Payee name		L	
05/01/2023	H-E-B			
6 Amount (\$)	7 Payee address; City; State; Zip Co	ode		
\$54.16	7901 US-290			
	Austin, TX 78736			
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
OF EXPENDITURE	Office Overhead/Rental Expense	Check if travel	outside of Texas. Com	
LXI LINDITORE		. —	n, TX, officeholder living	g expense
		Supplies for	Capitol Office	
9 Complete ONLY if direct	Candidate/Officeholder name Office so	laht.	Office he	7ld
expenditure to benefit C/O		igni	Office fie	eiu
	1			
Date	Payee name			
05/02/2023	H-E-B			
Amount (\$)	Payee address; City; State; Zip Co	ode		
\$54.44	5800 W Slaughter Ln.			
	Austin, TX 78749			
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
EXPENDITURE	Office Overhead/Rental Expense		l outside of Texas. Com n, TX, officeholder living	
			Capitol Office	, σ.φοπου
			·	
Complete ONLY if direct	Candidate/Officeholder name Office sou	<u>ı                                    </u>	Office he	eld
expenditure to benefit C/O	PH			
Date	Payee name			
05/08/2023	H-E-B			
Amount (\$)	Payee address; City; State; Zip Co	ode		
\$84.05	5800 W Slaughter Ln.			
	Austin, TX 78749			
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
OF	Office Overhead/Rental Expense		outside of Texas. Com	plete Schedule T.
EXPENDITURE	Since Gremedantental Expense		n, TX, officeholder living	gexpense
		Supplies for	Capitol Office	
Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate/Officeholder name Office sou	ıght	Office he	eld
ехрениките ко репенк С/О	71			

### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries (Contract Labor

	Candidate/Officeholder/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 42/78 Rpt:	Meyer, Morgan D. (The Honorable) 00069344
4	Date	5 Payee name
	05/15/2023	H-E-B
6	Amount (\$) \$77.86	7 Payee address; City; State; Zip Code 7901 US-290
		Austin, TX 78736
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Supplies for Capitol Office
9	Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	05/17/2023	H-E-B
	Amount (\$)	Payee address; City; State; Zip Code
	\$84.44	2301 S Congress Ave.
		Austin, TX 78704
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Supplies for Capitol Office
		Cappines for Capitor Cities
	Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	05/30/2023	H-E-B
	Amount (\$)	Payee address; City; State; Zip Code
	\$142.96	6900 Brodie Ln.
	\$142.90	6900 Broule Lit.
		Austin, TX 78745
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Supplies for Capitol Office
		Supplies for Capitor Office
	Complete ONLY if direct	Condidate/Officeholder name Office cought
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held

#### SCHEDULE F1

Advertising Expense Event Expense
Accounting/Banking Fees
Consulting Expense Food/Beverage
Contributions/ Donations Made Ry - Giff(Alwards/Me)

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (outpers extrapply not listed above)

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 43/78 Rpt:	Meyer, Morgan D. (The Honorable)  00069344
4	Date	5 Payee name
	02/01/2023	Harland Clarke
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$102.78	4055 Corporate Dr.
		Ste 100
		Grapevine, TX 76051
8	PURPOSE	
ľ	OF	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense  (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Checks for campaign account
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	05/19/2023	Hitt Marketing Devices
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,081.80	3231 W. MacArthur Blvd.
		Santa Ana, CA 92704
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Gifts for Committe Members
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
L	expenditure to benefit C/OI	1
	Date	Payee name
	01/30/2023	Hobby Lobby
	Amount (\$)	Payee address; City; State; Zip Code
	\$64.92	6600 S MoPac Expy.
		Austin, TX 78749
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Supplies for Capitol Office
		Supplies to Suprior Silver
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	· · · · · · · · · · · · · · · · · · ·

#### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
g Expense Event Expense Loan Repayment/Reimbu

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committe

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	I Committee 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:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 44/78 Rpt:	Meyer, Morgan D. (The Honorable) 00069344
4	Date	5 Payee name
	02/13/2023	Hobby Lobby
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$54.11	6600 S MoPac Expy.
		Austin, TX 78749
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Supplies for Capitol Office
		Cappinos for Capitor Cirio
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	06/22/2023	Hotels.com
H	Amount (\$)	Payee address; City; State; Zip Code
	\$686.90	5400 LBJ Freeway
		Ste. 500
		Dallas, TX 75240
H	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Travel In District  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Lodging for officeholder for officeholder activities
L	2	
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
L		
	Date	Payee name
	01/31/2023	JL Long Band Boosters
	Amount (\$)	Payee address; City; State; Zip Code
	\$100.00	6034 Junius Street
		Dallas, TX 75214
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By
		Candidate/Officeholder/Political Committee
		big band bash Sponsorship
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	· · · · · · · · · · · · · · · · · · ·
$\vdash$		
l		

#### SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (orders extraggly get listed above)

	Candidate/Officeholder/Politica Credit Card Payment			Legal Services		alaries/Wa		e /Contract Labor		OTHER (enter a	istrict a category not listed above	9)
	Credit Card Payment			The Instruction G	uide explains hov	w to com	nple	ete this form.				
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	(Ethics Commission	Filers)
	Sch: 45/78 Rpt:		Meyer, Morg	an D. (The Ho	norable)					00069344		
4	Date	5	Payee name									
	05/30/2023		Jimmy Johns	S								
6	Amount (\$)	7	Payee addres	s; City;	State; Z	Zip Cod	le					
	\$76.26		601 W Marti	n Luther King J	Ir Blvd.							
			Austin, TX 7	8701								
8	PURPOSE	(a)		e Categories listed at t		(	(b)	Description				
ľ	OF	``'		e Categories listed at t age Expense	ne top of this schedu	iie)	(~)		outsi	de of Texas. Con	nplete Schedule T.	
	EXPENDITURE		1 OOG/Bevere	age Expense				_		officeholder livin		
								Office Lunch	for	Capitol sta	ff	
9	Complete ONLY if direct		Candidate/Offic	eholder name	Offic	ce soug	ht			Office h	eld	
	expenditure to benefit C/OI	Н										
	Date		Payee name									
	01/27/2023		Jotform									
	Amount (\$)		Payee addres	s; City;	State; Z	Zip Cod	le					
	\$10.75		1750 Montgo	omery Street								
			San Francis	co, CA 94111								
	PURPOSE	(a)	Category (Se	e Categories listed at t	he top of this schedu	ıle)	(b)	Description				
	OF EXPENDITURE		Solicitation/F	-undraising Exp	oense			<b>=</b>		de of Texas. Con officeholder livin	nplete Schedule T.	
								<b>—</b>			ampaign website	
								Continuation	011	11 1003 101 0	ampaign website	
_	Complete ONLY if direct	<u> </u>	Candidate/Offic	eholder name	Offic	ce soug	ıht			Office h	eld	
	expenditure to benefit C/O		20.10.00.07		· · · · · ·	00 0049	,			000		
-	Date	Π	Payee name									
	02/27/2023		Jotform									
		┝		City:	State: 7	7in Cod	10					
	Amount (\$) \$10.75		Payee addres	•	State; Z	zip Cou	ie					
	Ф10.75		1750 Monigo	omery Street								
			C	04 04144								
		ļ.,		co, CA 94111		1.						
	PURPOSE OF	(a) 		e Categories listed at t		ıle) (	(b)	Description	outoi	do of Toyon Con	nplete Schedule T.	
	EXPENDITURE		Solicitation/F	Fundraising Exp	oense			ш		officeholder livin		
								_			ampaign website	
	Complete ONLY if direct		Candidate/Offic	ceholder name	Offic	ce soug	ht			Office h	eld	
	expenditure to benefit C/O					J						
I												

### SCHEDULE F1

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)

	Credit Card Payment	The Instruction Guide explains how to complete this	form.
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 46/78 Rpt:	Meyer, Morgan D. (The Honorable)	00069344
4	Date	5 Payee name	
	03/27/2023	Jotform	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$10.75	1750 Montgomery Street	
		San Francisco, CA 94111	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Descri	ription
	OF EXPENDITURE	Collectation in analysing Expense	eck if travel outside of Texas. Complete Schedule T.
			eck if Austin, TX, officeholder living expense ribution form fees for campaign website
		Contra	insulation form rees for earnpaight website
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
ľ	expenditure to benefit C/O		Cinco nois
_	Date	Payee name	
	04/27/2023	Jotform	
_	Amount (\$)	Payee address; City; State; Zip Code	
	\$10.75	1750 Montgomery Street	
	410.110	1700 Montgomery Caroot	
		San Francisco, CA 94111	
_	PURPOSE		india.
	OF	(a) Category (See Categories listed at the top of this schedule)  Solicitation/Fundraising Expense	eck if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Solicitation and all and all and all and all all all all all all all all all al	eck if Austin, TX, officeholder living expense
		Contr	ribution form fees for campaign website
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	experiditure to beliefit C/Or	1	
	Date	Payee name	
	05/30/2023	Jotform	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$10.75	1750 Montgomery Street	
		San Francisco, CA 94111	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Descri	ription
	OF EXPENDITURE	Solicitation/i dildialsing Expense	eck if travel outside of Texas. Complete Schedule T.
			eck if Austin, TX, officeholder living expense ribution form fees for campaign website
		Conti	indution form fees for earnpaigh website
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O	•	Onice field

### SCHEDULE F1

Advertising Expense Event Expense
Accounting/Banking Fees
Consulting Expense Food/Beverage
Contributions/ Donations Made By Contributions/ Officials India Committee
Graduates/Officials India Committee

Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	I Committee 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:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 47/78 Rpt:	Meyer, Morgan D. (The Honorable) 00069344
4	Date	5 Payee name
	06/27/2023	Jotform
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$10.75	1750 Montgomery Street
		San Francisco, CA 94111
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Solicitation/Fundraising Expense Check if travel outside of Texas. Complete Schedule T.
		Contribution form fees for campaign website
		Containation from 1000 for campaign wobsite
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1
	Date	Payee name
	03/06/2023	Katie's House of Flowers
	Amount (\$)	Payee address; City; State; Zip Code
	\$108.29	402 Bayshore Dr
		Niceville, FL 32578
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Gift for Campaign Staff
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	04/11/2023	Law Offices of Kevin C. Stewart
	Amount (\$)	Payee address; City; State; Zip Code
	\$625.00	6801 Yaupon Drive
		Austin, TX 78759
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Legal Services Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Campaign finance and ethics consulting
		Campaign intended and ethics consulting
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

#### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -Event Expense Fees

Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	I Committee 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:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 48/78 Rpt:	Meyer, Morgan D. (The Honorable) 00069344
4	Date	5 Payee name
	01/10/2023	Law Offices of Kevin C. Stewart
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$625.00	6801 Yaupon Drive
		Austin, TX 78759
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Legal Services Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Campaign finance and ethics consulting
		Campaig. manos and cance concataing
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	05/04/2023	Lin Asian Bar
Г	Amount (\$)	Payee address; City; State; Zip Code
	\$100.00	1203 W. 6th Street
		Austin, TX 78703
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Gift for campaign staff
		Cit for barripaign stain
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
F	Date	Payee name
	01/04/2023	Local Foods
H	Amount (\$)	Payee address; City; State; Zip Code
	\$87.40	454 W 2nd St.
		Austin, TX 78701
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense
	LXI ENDITORE	Check if Austin, TX, officeholder living expense
		Office Lunch for Capitol staff
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	<b>U</b>
$\vdash$		

#### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Commit

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	Al Committee 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:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 49/78 Rpt:	Meyer, Morgan D. (The Honorable) 00069344
4	Date	5 Payee name
	01/10/2023	Local Foods
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$140.51	454 W 2nd St.
		Austin, TX 78701
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Office Lunch for Capitol staff
		Cinice Edition for Supilor stain
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
H	Date	Payee name
	06/21/2023	Lowe's
	Amount (\$)	Payee address; City; State; Zip Code
	\$55.14	6011 Lemmon Ave
		Dallas, TX 75209
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Storage bins for campaign storage
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	H
	Date	Payee name
	01/17/2023	M Crowd Restaurant Group
	Amount (\$)	Payee address; City; State; Zip Code
	\$100.00	350 E. Royal Lane
		Suite 126
		Irving, TX 75039
$\vdash$	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Gift/Awards/Memorials Expense
	EXPENDITORE	Check if Austin, TX, officeholder living expense
		Gift for campaign staff
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought Office hold
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held H
$\vdash$		
L		

#### SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
_		· · · · · · · · · · · · · · · · · · ·
1	Total pages Schedule F1:	
	Sch: 50/78 Rpt:	Meyer, Morgan D. (The Honorable) 00069344
4	Date	5 Payee name
	01/30/2023	Marquess, Ryan
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$750.00	1506 Ridgemont Drive
		Austin, TX 78723
_	DUDDOOF	
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Contract labor for campaign services
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
$\vdash$	Date	Davida marra
		Payee name
	04/11/2023	Marquess, Ryan
	Amount (\$)	Payee address; City; State; Zip Code
	\$750.00	1506 Ridgemont Drive
		Austin, TX 78723
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
	ZA ZHOHOKZ	Check if Austin, TX, officeholder living expense
		Contract labor for campaign services
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	01/30/2023	McComb, Charles
	Amount (\$)	Payee address; City; State; Zip Code
	\$750.00	9412 Lightwood CV
		Austin, TX 78748
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Contract labor for campaign services
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1

### SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense
Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment		Legal Services  The Instruction Guide	Salaries	Wages	s/Contract Labor		OTHER (enter a	category not listed above)
1	Γotal pages Schedule F1:	2 FILER NAME					3	Filer ID	(Ethics Commission Filers)
	Sch: 51/78 Rpt:	Meyer, Mor	gan D. (The Honor	able)				00069344	
4 [	Date	<b>5</b> Payee name							
(	04/12/2023	McComb, C	harles						
6 4	Amount (\$) \$800.00	7 Payee addres 9412 Lightw Austin, TX 7	rood CV	State; Zip C	ode				
8	PURPOSE OF EXPENDITURE		e Categories listed at the to ges/Contract Labo		(b)	_	, TX,	de of Texas. Com officeholder living or campaign	expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Offid	ceholder name	Office so	ught			Office he	eld
	Date	Payee name							
(	05/22/2023	McGuire Mc	orman						
A	Amount (\$) \$156.62	Payee addres 1711 S. Cor Suite 200 Austin, TX 7	ngress Ave.	State; Zip C	ode				
	PURPOSE OF EXPENDITURE		e Categories listed at the to 'Memorials Expens		(b)	<b>=</b>		de of Texas. Com officeholder living	
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Offic	ceholder name	Office so	ught			Office he	eld
[	Date	Payee name							
	03/01/2023	Modern Mai	ket						
A	Amount (\$) \$97.58	Payee addres 401 Congre	•	State; Zip C	ode				
		Austin, TX 7	8701						
	PURPOSE OF EXPENDITURE	1	e Categories listed at the to age Expense	p of this schedule)	(b)		, TX,	de of Texas. Com officeholder living Capitol staf	expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Offic	ceholder name	Office so	ught			Office he	eld

#### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Reimbursement Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

	Candidate/Officeholder/Politica		mmittee Legal Services Salaries/W		e /Contract Labor		OTHER (enter a	category not listed above)	
	Credit Card Payment		The Instruction Guide explains how to con	mple	ete this form.				
1	Total pages Schedule F1:	2	FILER NAME			3	Filer ID	(Ethics Commission Filers)	
	Sch: 52/78 Rpt:		Meyer, Morgan D. (The Honorable)				00069344		
4	Date	5	Payee name		I				_
	06/22/2023		Night and Day Moving						
6	Amount (\$)	17	Payee address; City; State; Zip Coo	de					—
٠	\$420.00	ľ	401 Guadalupe St	uc					
	Ψ-120.00		401 Oddadape Ot						
			Austin TV 70701						
		┖	Austin, TX 78701						
8	PURPOSE OF	(a)	c , (con timegener material are top or time contents)	(b)	Description				
	EXPENDITURE		Office Overhead/Rental Expense		<u>—</u>		de of Texas. Comp officeholder living		
					_			lder's apartment in	
					Austin				
9	Complete ONLY if direct		L Candidate/Officeholder name Office souc	aht			Office he	ald.	
Ĭ	expenditure to benefit C/O		zandrado, em centrado mario	9			Omoc ne	714	
_	Data	_							_
	Date		Payee name						
	01/30/2023	▙	Nordstrom						
	Amount (\$)		Payee address; City; State; Zip Coo	de					
	\$62.79		2901 S Capital of Texas Hwy.						
			Austin, TX 78746						
	PURPOSE	(a)	Category (See Categories listed at the top of this schedule)	(b)	Description				
	OF EXPENDITURE		Office Overhead/Rental Expense		<u></u>		de of Texas. Comp officeholder living		
					Supplies for C			expense	
					Cupplies for C	Jup			
	Complete ONLY if direct	<u> </u>	Landidate/Officeholder name Office sout	aht			Office he	ald.	
	expenditure to benefit C/O		Zandidate/Omeenelder name	9110			Omoo ne	710	
	Data	_	Para a same						—
	Date 05/22/2023		Payee name North Dallas Chamber of Commerce						
	Amount (\$)		Payee address; City; State; Zip Coo	ae					
	\$450.00		5710 Lyndon B Johnson Fwy Unit 100						
			Dallas, TX 75240						
	PURPOSE OF	(a)	Category (See Categories listed at the top of this schedule)	(b)	Description				
	EXPENDITURE		Fees		므		de of Texas. Comp officeholder living		
					Campaign me				
					oampaign me	,,,,,,	octomp duce	,	
	Complete ONLY if direct	<u> </u>		aht			Office he	eld	
	expenditure to benefit C/Ol		- Suite Suite	ar			Cilioc IIC	····	

### SCHEDULE F1

#### **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)

Credit Card Payment	The Instruction Guide explains how to co	omplete this form.		
1 Total pages Schedule F1:	2 FILER NAME		3 Filer ID	(Ethics Commission Filers)
Sch: 53/78 Rpt:	Meyer, Morgan D. (The Honorable)		00069344	
4 Date	5 Payee name			
05/16/2023	North Dallas Chamber of Commerce			
6 Amount (\$)	7 Payee address; City; State; Zip Co	ode		
\$20.00	5710 LBJ Fwy, Suite 100			
	Dallas, TX 75204			
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description	vel outside of Texas. Cor	mplete Schodule T
EXPENDITURE	Fees	<u> </u>	stin, TX, officeholder livir	
		Ticket for o	ne staff membe	to event in district
9 Complete ONLY if direct	Candidate/Officeholder name Office sou	ıght	Office h	neld
expenditure to benefit C/C	H			
Date	Payee name			
05/31/2023	North Texas Crime Commission			
Amount (\$)	Payee address; City; State; Zip Co	ode		
\$35.00	P.O. Box 601723			
	Dallas, TX 75360			
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
OF EXPENDITURE	Fees	ı <u>—</u>	vel outside of Texas. Con stin, TX, officeholder livir	
		. –		to district luncheon
Complete ONLY if direct	Candidate/Officeholder name Office sou	ıght	Office h	neld
expenditure to benefit C/C	PH			
Date	Payee name			
04/18/2023	North Texas Crime Commission			
Amount (\$)	Payee address; City; State; Zip Co	ode		
\$45.00	5710 Lyndon B Johnson Fwy Unit 100			
	Dallas, TX 75240			
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
OF EXPENDITURE	Fees	Check if trav	vel outside of Texas. Co	
LXI LINDITORE			stin, TX, officeholder livir	ng expense r to event in district
		l licket for o	me stan member	to event in district
Complete ONLY if direct	Candidate/Officeholder name Office sou	ıaht	Office h	neld
expenditure to benefit C/C		agrit	Office I	iciu

#### SCHEDULE F1

Advertising Expense Event Expense
Accounting/Banking Fees
Consulting Expense Food/Beverage
Contributions/ Donations Made By - Gift/Awards/Mer

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Li  The Instruction Guide explains how to complete this fo			OTHER (enter a	category not listed above)	
1	Total pages Schedule F1:	2 FILER NAME	:	3	Filer ID	(Ethics Commission Filer	s)
	Sch: 54/78 Rpt:	Meyer, Morgan D. (The Honorable)			00069344		
4	Date	5 Payee name					
	06/29/2023	Northwood Hills HOA					
6	Amount (\$)	7 Payee address; City; State; Zip Code					
	\$200.00	PO Box 800874					
		Dallas, TX 75380					
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Descript			l	whate Cabadula T	
	EXPENDITURE	Continuations/Bondions Made By			officeholder living	plete Schedule T. gexpense	
					ay Parade d		
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought			Office he	eld	
	experialiture to benefit C/Oi						
	Date	Payee name					
	06/14/2023	Office Max					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$25.20	2415 N Haskell Ave					
		Dallas, TX 75204					
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description					
	EXPENDITURE	Office Overficad/Nertial Experise			de of Texas. Com officeholder living	plete Schedule T.	
					or District O		
			• •				
	Complete ONLY if direct	Candidate/Officeholder name Office sought			Office he	eld	
	expenditure to benefit C/O	l					
	Date	Payee name					
	01/23/2023	Open Phone					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$10.00	149 New Montgomery Street					
		San Francisco, CA 94105					
	PURPOSE OF	(a) Category (see Categories listed at the top of this schedule) (b) Description (continuous categories listed at the top of this schedule)		utcic	to of Toyas Com	plete Schedule T.	
	EXPENDITURE	Office Overficad/Nertial Expense			officeholder living		
		, <u> </u>			e subscription		
	Complete ONLY if direct	Candidate/Officeholder name Office sought			Office he	eld	
L	expenditure to benefit C/O						

### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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

Event Expense Fees Food/Beverage Expense Gitt/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)

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 55/78 Rpt:	Meyer, Morgan D. (The Honorable) 00069344
4	Date	5 Payee name
	02/23/2023	Open Phone
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$10.00	149 New Montgomery Street
		San Francisco, CA 94105
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
	<b>2</b> /4 <b>2</b> /12 <b>1</b>	Campaign phone subscription
		Campaign phone subscription
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held
	experialitate to bettern over	
	Date	Payee name
	03/23/2023	Open Phone
	Amount (\$)	Payee address; City; State; Zip Code
	\$10.00	149 New Montgomery Street
		San Francisco, CA 94105
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
	<b>2</b> /4 <b>2</b> /12 <b>1</b>	Check if Austin, TX, officeholder living expense
		Campaign phone subscription
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experialitate to bettern over	<u> </u>
	Date	Payee name
	04/24/2023	Open Phone
	Amount (\$)	Payee address; City; State; Zip Code
	\$10.00	149 New Montgomery Street
		San Francisco, CA 94105
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		Campaign phone subscription
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries (Contract Labor

	Candidate/Officeholder/Politica Credit Card Payment	I Committee 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:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 56/78 Rpt:	Meyer, Morgan D. (The Honorable) 00069344
4	Date	5 Payee name
	05/23/2023	Open Phone
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$10.00	149 New Montgomery Street
		San Francisco, CA 94105
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Campaign phone subscription
		Campaign priorie subscription
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	Complete ONLY if direct expenditure to benefit C/O	
_	<u> </u>	
	Date	Payee name
	06/23/2023	Open Phone
	Amount (\$)	Payee address; City; State; Zip Code
	\$10.00	149 New Montgomery Street
		San Francisco, CA 94105
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Campaign phone subscription
		Campaign phone subscription
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Data	
	Date	Payee name
	05/26/2023	Oriental Trading
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,270.97	P.O. Box 2308
		Omaha, NE 68103
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T.
		Condy for Fourth of July Parado
		Candy for Fourth of July Parade
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_		

## SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Com

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

bursement Solicitation/Fundraising Expense
I Expense Transportation Equipment & Related Expense
Travel in District
Travel Out of District
ct Labor OTHER (enter a category not listed above)

	Candidate/Officeholder/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 57/78 Rpt:	Meyer, Morgan D. (The Honorable) 00069344
4	Date	5 Payee name
	05/04/2023	Park whiz
6	Amount (\$) \$21.00	7 Payee address; City; State; Zip Code 801 Wood St
		Dallas, TX 75202
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Fees  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Parking pass for event
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	05/11/2023	R+D Dallas
	Amount (\$) \$57.09	Payee address; City; State; Zip Code 8300 Preston Center Plaza
		Dallas, TX 75225
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Campaign meeting to discuss campaign issues
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	01/04/2023	Robinson, Shelby
	Amount (\$) \$5,000.00	Payee address; City; State; Zip Code 1960 Hattie Mae Lane
		Niceville, FL 32578
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Contract labor for campaign services
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

## SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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

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)

	Credit Card Payment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commis	sion Filers)
	Sch: 58/78 Rpt:	Meyer, Morgan D. (The Honorable) 00069344	
4	Date	5 Payee name	
	01/04/2023	Robinson, Shelby	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$2,000.00	1960 Hattie Mae Lane	
		Niceville, FL 32578	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Salaries/Wages/Contract Labor	
	EXPENDITURE	Check if Austin, TX, officeholder living expense	
		Contract labor for campaign services	
L			
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held OH	
	·		
	Date	Payee name	
	01/20/2023	Robinson, Shelby	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$2,000.00	1960 Hattie Mae Lane	
		Niceville, FL 32578	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.	
		Contract labor for campaign services	
		Contract labor for campaign services	
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/O	<b>5</b>	
	Date	Payee name	
	02/17/2023	Robinson, Shelby	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$2,000.00		
	Ψ2,000.00	1999 Hattle Mac Larie	
		Niceville, FL 32578	
	DUDDOOF		
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  Salaries/Mages/Contract Lahor  Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense	
		Contract labor for campaign services	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/Ol	JH	

### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Event Expense
Accounting/Banking Fees
Consulting Expense Food/Beverage
Constitution Properties Mode Page 1

Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica			Gift/Awards/Memorial Legal Services	s Expense	Salaries/W		e /Contract Labor		OTHER (enter a	strict a category not listed above	e)		
	Credit Card Payment			The Instruction G	uide explains	how to co	mple	ete this form.						
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	(Ethics Commission	Filers)		
	Sch: 59/78 Rpt:		Meyer, Morg	jan D. (The Ho	norable)					00069344				
4	4 Date 5 Payee name													
	03/21/2023		Robinson, S	helby										
6	Amount (\$)	7	Payee addres	s; City;	State	e; Zip Co	de							
	\$2,000.00		1960 Hattie	Mae Lane										
			Niceville, FL	32578										
8	PURPOSE	⊢		e Categories listed at	41 4 <b>6</b> 41-1	la a alcola N	(b)	Description						
ľ	OF			e Categories listed at ges/Contract L		nedule)	(~)		outsi	de of Texas. Con	plete Schedule T.			
	EXPENDITURE		00.00.100,110	900,001				Check if Austin,	TX,	TX, officeholder living expense				
								Contract labo	r fc	or campaign	services			
9	Complete ONLY if direct expenditure to benefit C/OI		andidate/Offic	eholder name		Office sou	ght			Office h	eld			
	experialitate to beliefit C/Oi	''												
	Date		Payee name											
	04/14/2023		Robinson, S	helby										
	Amount (\$)		Payee addres	s; City;	State	e; Zip Co	de							
	\$2,000.00		1960 Hattie	Mae Lane										
			Niceville, FL	32578										
	PURPOSE	(a)	Category (Se	e Categories listed at	the top of this sc	hedule)	(b)	Description						
	OF EXPENDITURE			ges/Contract L				<b>=</b>			nplete Schedule T.			
	-							Contract labo		officeholder livin				
								Contract labo	1 10	n campaign	Scivices			
	Complete ONLY if direct	<u> </u>	Candidate/Offic	eholder name		Office sou	aht			Office h	eld			
	expenditure to benefit C/OI		randato, o mo	onordor namo		J55 554	9			J	o.u			
-	Date	l	Payee name											
	05/15/2023	ı	Robinson, S	helhv										
	Amount (\$)	┝	Payee addres		State	e; Zip Co	do							
	\$2,000.00	ı	1960 Hattie		Siale	s, Zip Co	ue							
	Ψ2,000.00		1500 Hattie	Mac Lanc										
			Niceville, FL	22570										
	DUDDOOF	-					(1-)							
	PURPOSE OF			e Categories listed at		hedule)	(D)	Description  Check if travel of	outsi	de of Texas. Com	nplete Schedule T.			
	EXPENDITURE		Salaties/wa	ges/Contract L	.abui					officeholder livin				
								Contract labo	r fc	or campaign	services			
	Complete ONLY if direct		andidate/Offic	eholder name		Office sou	ght			Office h	eld			
L	expenditure to benefit C/OI	H _					_							

## SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	I Committee 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:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 60/78 Rpt:	Meyer, Morgan D. (The Honorable) 00069344
4	Date	5 Payee name
	06/15/2023	Robinson, Shelby
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$2,000.00	1960 Hattie Mae Lane
		Niceville, FL 32578
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
		Contract labor for campaign services
		Contract labor for earnpaight services
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	- · · · · · · · · · · · · · · · · · · ·
_		
	Date	Payee name
	06/29/2023	Shoal Creek Saloon
	Amount (\$)	Payee address; City; State; Zip Code
	\$103.19	909 N Lamar Blvd.
		Austin, TX 78703
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Office Lunch for Capitol staff
		Office Eurich for Capitor Stair
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	- · · · · · · · · · · · · · · · · · · ·
_	5 .	
	Date	Payee name
	05/08/2023	Sweet Green
	Amount (\$)	Payee address; City; State; Zip Code
	\$142.99	200 W 2nd St.
		Austin, TX 78701
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Office Lunch for Capitol staff
		Office Eurich for Capitor Stair
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

## SCHEDULE F1

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

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)

	Credit Card Payment	The Instruction Guide explains how to comp	nplete	e this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 61/78 Rpt:	Meyer, Morgan D. (The Honorable)		00069344
4	Date	5 Payee name		
	02/14/2023	Taco Deli		
6	Amount (\$)	7 Payee address; City; State; Zip Code	le	
	\$75.80	301 Congress Ave.		
		Austin, TX 78701		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	(b) [	Description
	OF EXPENDITURE	Food/Beverage Expense	Ī	Check if travel outside of Texas. Complete Schedule T.
			L	Check if Austin, TX, officeholder living expense Office Lunch for Capitol staff
			`	Since Editor for Suprior Stair
9	Complete ONLY if direct	Candidate/Officeholder name Office sough	ht	Office held
	expenditure to benefit C/O			0.1130 1.010
_	Date	Payee name		
	06/26/2023	Taco Ranch		
	Amount (\$)	Payee address; City; State; Zip Code	le	_
	\$29.23	5033 US-290		
	Ψ20.20	0000 00 200		
		Austin, TX 78735		
	PURPOSE		(b) r	
	OF	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	ω, <sub>L</sub>	Description  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	1 oou/beverage Expense	Ī	Check if Austin, TX, officeholder living expense
			(	Office Breakfast for Capitol staff
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sough	ht	Office held
	experientare to benefit 6/61			
	Date	Payee name		
	01/10/2023	Target		
	Amount (\$)	Payee address; City; State; Zip Code	le	
	\$108.24	5621 N I H 35		
		Austin, TX 78723		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) [	Description
	OF EXPENDITURE	Office Overhead/Rental Expense	Į	Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
			L	Office supplies for Capitol Office
	Complete ONLY if direct	Candidate/Officeholder name Office sough	ht	Office held
	expenditure to benefit C/O	•		

## SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Event Expense

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By

Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense
Printing Expense

Candidate/Officeholder/Political Credit Card Payment	Committee 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:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 62/78 Rpt:	Meyer, Morgan D. (The Honorable) 00069344
4 Date	5 Payee name
04/10/2023	Target
6 Amount (\$) \$50.12	7 Payee address; City; State; Zip Code 5300 S MoPac Expy.  Austin, TX 78749
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense  (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Supplies for Capitol Office
9 Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held
Date	Payee name
04/18/2023	Target
Amount (\$) \$44.68	Payee address; City; State; Zip Code 5300 S MoPac Expy.
	Austin, TX 78749
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Supplies for Capitol Office
Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held
Date 02/13/2023	Payee name Tax1099.com
Amount (\$) \$34.52	Payee address; City; State; Zip Code  1 East Center Street #250
	Fayetteville, AR 72701
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense  (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Online office support software for campaign
Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held

## SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 63/78 Rpt:	Meyer, Morgan D. (The Honorable) 00069344
4	Date	5 Payee name
	06/08/2023	Texas House of Representatives
6	Amount (\$) \$238.37	7 Payee address; City; State; Zip Code P.O. Box 2910
		Austin, TX 78768
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
l	OF EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.
l	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		Officeholder travel not covered by state
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	04/04/2023	Texas Republican Legislative Caucus
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,000.00	PO Box 13305
		Austin, TX 78771
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		2023 Membership Dues
		2020 Monisoronip Bade
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	04/18/2023	The Capitol Grill
H	Amount (\$)	Payee address; City; State; Zip Code
	\$36.16	117 W 4th St.
		Austin, TX 78701
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
l	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Office Lunch for Capitol staff
		Office Eurion for Capitor stair
_	Complete ONLV if direct	Candidate/Officeholder name Office sought Office held
	Complete ONLY if direct expenditure to benefit C/OI	

## SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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)

	Credit Card Payment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 64/78 Rpt:	Meyer, Morgan D. (The Honorable)	00069344
4	Date	5 Payee name	
	04/21/2023	The Capitol Grill	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$3.25	117 W 4th St.	
		Augtin TV 70701	
Ļ	DUDDOOF	Austin, TX 78701	
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  Food/Beverage Expense  (b) Description  Check if trave	el outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Aust	tin, TX, officeholder living expense
		Office Lunch	h for Capitol staff
Ļ	Operation ONLY if dispose	On didn't (Office helder name	Office held
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
H	Date	Dougo nama	
	04/21/2023	Payee name The Capitol Grill	
-	Amount (\$)	Payee address; City; State; Zip Code	
	\$22.95	117 W 4th St.	
		Austin, TX 78701	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	1 Ood/Develage Expense	el outside of Texas. Complete Schedule T. iin, TX, officeholder living expense
			h for Capitol staff
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	1	
	Date	Payee name	
	06/13/2023	The Home Depot	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$172.12	375 E FM 1382	
		Cedar Hill, TX 75104	
	PURPOSE		
	OF	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	el outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Aust	in, TX, officeholder living expense
		Shelf for sto	orage unit
_	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI		Since Held
H			
l			

## SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Comm

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 65/78 Rpt:	Meyer, Morgan D. (The Honorable) 00069344
4	Date	5 Payee name
	02/16/2023	Toast Wine Bar
6	Amount (\$) \$49.73	7 Payee address; City; State; Zip Code 4550 E Hwy 20 STE D
		Niceville, FL 32578
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Gift/Awards/Memorials Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Gift for Campaign Staff
9	Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	04/07/2023	Toulouse Knox Henderson
	Amount (\$) \$71.00	Payee address; City; State; Zip Code 3314 Knox St.
		Dallas, TX 75205
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Campaign meeting to discuss campaign issues
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	05/23/2023	Twin Liquors
	Amount (\$) \$25.09	Payee address; City; State; Zip Code 1600 Lavaca St.
		Austin, TX 78701
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense  (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Gift for Staff
	Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held

## SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

Event Expense Fees Food/Beverage Expense Git/Awards/Memorials Expense

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		mmittee	Gift/Awards/Memorial Legal Services  The Instruction G	s Expense		Expens Wages	e /Contract Labor		Travel in District Travel Out of Di OTHER (enter a		ove)
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	(Ethics Commiss	ion Filers)
	Sch: 66/78 Rpt:			gan D. (The Ho	norable)					00069344	•	-
4	Date	5	Payee name									
	03/27/2023		UPS									
6	Amount (\$)	7	Payee addre	ss; City;	State;	Zip Co	ode					
	\$17.60		5701 Slaug	hter Lane								
			A-130									
			Austin, TX	78749								
8	PURPOSE	(2)					(h)	Description				
ľ	OF	lα	Advertising	ee Categories listed at	the top of this sche	edule)	(6)	Description  Check if travel of	outsi	de of Texas. Com	plete Schedule T.	
	EXPENDITURE		Advertising	Схрепас				_		officeholder living		
								Mailing of Ca	mp	aign Materi	als	
9	Complete ONLY if direct expenditure to benefit C/OF		Candidate/Off	iceholder name	C	Office sou	ught			Office h	eld	
F	Date		Payee name									
	04/13/2023		VistaPrint									
⊢	Amount (\$)		Payee addre	ss; City;	State.	Zip Co	nde					
	\$29.22		275 Wymar		Oldio,	Z.Ip O	ouc					
	Ψ23.22		215 Wymai	Tolleet								
L			Waltham, N	/IA 02451								
	PURPOSE OF	(a)		ee Categories listed at		edule)	(b)	Description				
	EXPENDITURE		Office Over	head/Rental Ex	pense			<b>=</b>		de of Texas. Com officeholder living	plete Schedule T.	
								Business card				
										o. campang	Ottali	
	Complete ONLY if direct expenditure to benefit C/OH		Candidate/Off	iceholder name	C	Office sou	<u>l</u> ught			Office h	eld	
F	Date		Payee name									
	01/03/2023		Walmart Su									
┝					Ctoto	Zip Co	odo					
	Amount (\$)		Payee addre		State,	Zip Ci	oue					
	\$6.97		710 E Ben	write bivu.								
			Austin, TX	78704								
	PURPOSE	(a)	Category (S	ee Categories listed at	the top of this sche	edule)	(b)	Description				
	OF EXPENDITURE		Office Over	head/Rental Ex	pense			_			plete Schedule T.	
	-							Supplies for C		officeholder living	g expense	
								oupplies for C	Jaμ	ntoi Oilice		
	Complete ONLY if direct	Ц	Condidate /Off	iooboldor		office as:	uabt.			Office	ald	
	Complete ONLY if direct expenditure to benefit C/OH		Januluate/Off	iceholder name	C	Office sou	ugnt			Office h	eiu	

## SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Credit Card Payment	The Instruction Guide explains how to complete	
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 67/78 Rpt:	Meyer, Morgan D. (The Honorable)	00069344
4	Date	5 Payee name	·
	01/03/2023	Walmart Supercenter	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$278.26	5017 US-290	
		Austin, TX 78735	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
	OF EXPENDITURE	Office Overhead/Rental Expense	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITORE		Check if Austin, TX, officeholder living expense
			Supplies for Capitol Office
_			25.
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	01/03/2023	Walmart Supercenter	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$205.70	710 E Ben White Blvd.	
		Austin, TX 78704	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
	OF EXPENDITURE	Office Overhead/Rental Expense	Check if travel outside of Texas. Complete Schedule T.
			Check if Austin, TX, officeholder living expense
			Supplies for Capitol Office
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI		Office field
	<u> </u>		
	Date	Payee name Walmort Supercenter	
	01/09/2023	Walmart Supercenter	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$46.55	5017 US-290	
		Austin, TX 78735	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	Description
	OF EXPENDITURE	Office Overhead/Rental Expense	Check if travel outside of Texas. Complete Schedule T.
		L	Check if Austin, TX, officeholder living expense  Supplies for Capitol Office
			Supplied for Outstor Office
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	9	Office field

## SCHEDULE F1

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

Event Expense Loan Repayment/Reimbursement
Fees Office Overhead/Rental Expense
Food/Beverage Expense Polling Expense
Gitt/Awards/Memorials Expense Printing Expense
Legal Services Salaries/Wangs/Contract Labor

	Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 68/78 Rpt:	Meyer, Morgan D. (The Honorable) 00069344
4	Date	5 Payee name
	01/30/2023	Walmart Supercenter
6	Amount (\$) \$137.48	7 Payee address; City; State; Zip Code 710 E Ben White Blvd.
		Austin, TX 78704
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Supplies for Capitol Office
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	03/13/2023	Walmart Supercenter
	Amount (\$) \$122.88	Payee address; City; State; Zip Code 710 E Ben White Blvd.
		Austin, TX 78704
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Supplies for Capitol Office
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date 06/08/2023	Payee name Walton's Fancy Staple
	Amount (\$) \$132.58	Payee address; City; State; Zip Code 609 W 6th St.
		Austin, TX 78701
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense  (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Office Lunch for Capitol staff
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

## SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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

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)

	Credit Card Payment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	_
	Sch: 69/78 Rpt:	Meyer, Morgan D. (The Honorable) 00069344	
4	Date	5 Payee name	_
	01/25/2023	Wat, Nicholas	
6	Amount (\$)	7 Payee address; City; State; Zip Code	_
	\$750.00	2829 Reunion Blvd	
		Austin, TX 78737	
8	PURPOSE		_
ľ	OF	(a) Category (See Categories listed at the top of this schedule)  Salaries/Wages/Contract Labor  (b) Description  Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Check if Austin, TX, officeholder living expense	
		Contract labor for campaign services	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI	1	
	Date	Payee name	_
	04/10/2023	Wat, Nicholas	
	Amount (\$)	Payee address; City; State; Zip Code	_
	\$750.00	2829 Reunion Blvd	
		Austin, TX 78737	
_	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	_
	OF	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Check if Austin, TX, officeholder living expense	
		Contract labor for campaign services	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
	experience to benefit Gree		
	Date	Payee name	
	05/01/2023	WuChow	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$175.00	500 W. 5th Street	
		Austin, TX 78701	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	_
	OF EXPENDITURE	Gift/Awards/Memorials Expense	
	EXI ENDITORE	Cift for commonism others	
		Gift for campaign staff	
L	Complete ONE V if direct	Condidate/Officeholder name Office cought	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	

## SCHEDULE F1

### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	1
Sch: 70/78 Rpt:	Meyer, Morgan D. (The Honorable)    3 Filer ID (Ethics Commission Filers)   00069344
4 Date	5 Payee name
01/03/2023	YouTube TV
6 Amount (\$) \$59.53	7 Payee address; City; State; Zip Code 901 Cherry Ave San Bruno, CA 94066
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Office Overhead/Rental Expense
EXPENDITURE	Check if Austin, TX, officeholder living expense  YouTube TV service charge for officeholder's apartment
Complete <u>ONLY</u> if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought Office held
Date	Payee name
01/06/2023	YouTube TV
Amount (\$)	Payee address; City; State; Zip Code
\$12.57	901 Cherry Ave
DUDDOST	San Bruno, CA 94066
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  Office Overhead/Rental Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Office Overhead/Rental Expense  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	YouTube TV service charge for officeholder's apartment
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
01/30/2023	YouTube TV
Amount (\$)	Payee address; City; State; Zip Code
\$86.58	901 Cherry Ave
	San Bruno, CA 94066
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description
EXPENDITURE	Office Overhead/Rental Expense  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	YouTube TV service charge for officeholder's
	apartment
Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held

## SCHEDULE F1

### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica			_egal Services		alaries/Wa		e /Contract Labor		OTHER (enter a	category not listed	above)
	Credit Card Payment			The Instruction G	uide explains hov	w to con	nple	te this form.				
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	(Ethics Commi	ssion Filers)
	Sch: 71/78 Rpt:		Meyer, Morg	an D. (The Ho	norable)					00069344		
4	Date	5	Payee name									
	01/31/2023		YouTube TV	,								
6	Amount (\$)	7	Payee addres	s; City;	State; Z	7in Cod	de de					
Ĭ	\$59.53	ľ	901 Cherry	•	State, 2	p						
	Ψ00.00		JOI Officity /									
			Cara Davina	24.04000								
		┖	San Bruno,	JA 94066								
8	PURPOSE OF	(a)		e Categories listed at t		ile)	(b)	Description				
	EXPENDITURE		Office Overh	ead/Rental Ex	pense			<b>=</b>		de of Texas. Com officeholder living	plete Schedule T.	
								X Check if Austin, YouTube TV				ler's
								apartment	00.	vice cridige		2010
9	Complete ONLY if direct		Candidate/Offic	eholder name	Offic	ce soug	ht			Office he	ald	
3	expenditure to benefit C/OI		Sandidate/Onic	enoluei name	Onic	ce soug	jiit			Office file	ziu –	
		_										
	Date		Payee name									
	03/01/2023	┖	YouTube TV									
	Amount (\$)		Payee addres		State; Z	Zip Cod	de					
	\$59.53		149 New Mo	intgomery Stre	et							
			San Bruno,	CA 94066								
	PURPOSE	(a)	Category (Se	e Categories listed at t	he top of this schedul	ıle)	(b)	Description				
	OF EXPENDITURE			ead/Rental Ex				<b></b>			plete Schedule T.	
	LXI LINDITORL							ш		officeholder living		1. 1.
								YouTube TV apartment	ser	vice charge	tor officenoic	aers
	2	<u> </u>										
	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Offic	eholder name	Offic	ce soug	jht			Office he	eld	
	<u>'</u>	_										
	Date		Payee name									
	03/01/2023		YouTube T\	•								
	Amount (\$)		Payee addres	s; City;	State; Z	Zip Cod	de					
	\$86.58		149 New Mo	ntgomery Stre	et							
			San Bruno,	CA 94066								
	PURPOSE	(a)	Category (Se	e Categories listed at t	he top of this schedul	ile)	(b)	Description				
	OF EXPENDITURE			ead/Rental Ex				ᅟ			plete Schedule T.	
	EXPENDITORE							_		officeholder living		
								YouTube TV apartment	ser	vice charge	for officehold	der's
								αραιτιποπι				
	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Offic	eholder name	Offic	ce soug	ght			Office he	eld	
	experiencies to benefit C/OI	''										

## SCHEDULE F1

### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

nt Solicitation/Fundraising Expense
e Transportation Equipment & Related Expense
Travel in District
OTHER (enter a category not listed above)

	Candidate/Officeholder/Politica Credit Card Payment	I Committee	Legal Services  The Instruction Guide exp		Vages	/Contract Labor		OTHER (enter a	category not listed above)	
1	Total pages Schedule F1:	2 FILER NAMI					3	Filer ID	(Ethics Commission Fi	lers)
	Sch: 72/78 Rpt:		gan D. (The Honorable	9)				00069344		
4	Date	5 Payee name								
	03/29/2023	YouTube T	V							
6	Amount (\$)	7 Payee addre	ess; City;	State; Zip Co	ode					
	\$70.35	149 New M	ontgomery Street							
		San Bruno,	CA 94066							
8	PURPOSE	(a) Category (S	ee Categories listed at the top of t	his schedule)	(b)	Description				
	OF EXPENDITURE	Office Over	head/Rental Expense			ш		de of Texas. Com		
						_		officeholder living	for officeholder's	
						apartment	361	vice charge	ioi officeriolaei s	
9	Complete ONLY if direct expenditure to benefit C/OI		iceholder name	Office sou	ight			Office he	eld	
	experioration benefit C/Or	1								
	Date	Payee name								
	03/30/2023	YouTube T	V							
	Amount (\$)	Payee addre	ess; City;	State; Zip Co	ode					
	\$86.58	149 New M	ontgomery Street							
		San Bruno,	CA 94066							
	PURPOSE OF	(a) Category (S	ee Categories listed at the top of t	his schedule)	(b)	Description				
	EXPENDITURE	Office Over	head/Rental Expense			=		de of Texas. Comp officeholder living		
						_			for officeholder's	
						apartment	00.	vice charge	ioi dinodrididoi d	
	Complete ONLY if direct expenditure to benefit C/Oh		iceholder name	Office sou	ıght			Office he	eld	
	Date	Payee name								
	05/01/2023	YouTube T	V							
	Amount (\$)	Payee addre	ess; City;	State; Zip Co	ode					
	\$79.01	149 New M	ontgomery Street							
		San Bruno,	CA 94066							
	PURPOSE OF		ee Categories listed at the top of t	his schedule)	(b)	Description	_			
	EXPENDITURE	Office Over	head/Rental Expense			ш		de of Texas. Com		
						ш		officeholder living	for officeholder's	
						apartment	301	vice charge	ior officeriolaer 3	
	Complete ONLY if direct	Candidate/Off	iceholder name	Office sou	l laht			Office he	eld	
	expenditure to benefit C/OH									
l										

## SCHEDULE F1

### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	I Committee	Legal Services  The Instruction Guide exp		Vages	Contract Labor		OTHER (enter a	category not listed above)	
1	Total pages Schedule F1:	2 FILER NAMI					3	Filer ID	(Ethics Commission	Filers)
	Sch: 73/78 Rpt:		gan D. (The Honorable	e)				00069344		•
4	Date	5 Payee name								
	05/01/2023	YouTube T	V							
6	Amount (\$)	<b>7</b> Payee addre	ess; City;	State; Zip Co	de					
	\$95.24	149 New M	ontgomery Street							
		San Bruno,	CA 94066							
8	PURPOSE OF	(a) Category (S	ee Categories listed at the top of t	his schedule)	(b)	Description				
	EXPENDITURE	Office Over	head/Rental Expense			ш		de of Texas. Com		
						_		officeholder living	for officeholder's	
						apartment	301	vice charge	ioi officeriolaei s	
9	Complete ONLY if direct		iceholder name	Office sou	ght			Office he	eld	
	expenditure to benefit C/OI	1								
	Date	Payee name								
	05/30/2023	YouTube T	V							
	Amount (\$)	Payee addre	ess; City;	State; Zip Co	de					
	\$79.01	149 New M	ontgomery Street							
		San Bruno,	CA 94066							
	PURPOSE OF	(a) Category (S	ee Categories listed at the top of t	his schedule)	(b)	Description				
	EXPENDITURE	Office Over	head/Rental Expense			<b>=</b>		de of Texas. Comp officeholder living		
						<b>—</b>			for officeholder's	
						apartment	301	vice charge	ioi omeenoidei s	
	Complete ONLY if direct expenditure to benefit C/O		iceholder name	Office sou	ght			Office he	eld	
	experioritire to benefit C/Or	1								
	Date	Payee name								
	05/30/2023	YouTube T	V							
	Amount (\$)	Payee addre	ess; City;	State; Zip Co	de					
	\$95.24	149 New M	ontgomery Street							
		San Bruno,	CA 94066							
	PURPOSE OF		ee Categories listed at the top of t	his schedule)	(b)	Description				
	EXPENDITURE	Office Over	head/Rental Expense			ш		de of Texas. Com		
						_		officeholder living	for officeholder's	
						apartment	301	vice charge	ioi oilicerioidei 3	
-	Complete ONLY if direct	Candidate/Off	iceholder name	Office sou	aht			Office he	eld	
	expenditure to benefit C/OH									
$\vdash$										
l										

### SCHEDULE F1

### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		
<u> </u>	T.1 C.1.1 =:		_
1	Total pages Schedule F1: Sch: 74/78 Rpt:	2 FILER NAME  Meyer, Morgan D. (The Honorable)  3 Filer ID (Ethics Commission Filers) 00069344	
L	·		_
4	Date	5 Payee name	
	06/29/2023	YouTube TV	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$79.01	149 New Montgomery Street	
		San Bruno, CA 94066	
8	PURPOSE		_
°	OF	(a) Category (See Categories listed at the top of this schedule)  Office Overhead/Rental Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Office Overhead/Rental Expense  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense	
		YouTube TV service charge for officeholder's	
		apartment	
<u>_</u>	Operation Children		_
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
	experiantare to benefit Great		
	Date	Payee name	
	06/30/2023	YouTube TV	
	Amount (\$)	Payee address; City; State; Zip Code	_
	\$95.24	149 New Montgomery Street	
	+001E1		
		Con Prime CA 040CC	
		San Bruno, CA 94066	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.	
	- <del>-</del>	X Check if Austin, TX, officeholder living expense	
		YouTube TV service charge for officeholder's apartment	
L			_
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
L			
	Date	Payee name	
	01/03/2023	Zoom	ĺ
	Amount (\$)	Payee address; City; State; Zip Code	_
	\$15.98	55 Almaden Blvd	
		Floor 6	
		San Jose, CA 95113	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.	
	-	Compaign zoom account	
		Campaign zoom account	ſ
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
L	CAPCHUILLIC TO DEHEIL C/OI		
l			

### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Commi

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 75/78 Rpt:	Meyer, Morgan D. (The Honorable)
4	Date	5 Payee name
	01/30/2023	Zoom
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$331.00	55 Almaden Blvd
		Floor 6
		San Jose, CA 95113
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Office Overhead/Rental Expense
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Campaign zoom account
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experialitate to beliefit C/OI	'
	Date	Payee name
	03/01/2023	Zoom
	Amount (\$)	Payee address; City; State; Zip Code
	\$15.98	55 Almaden Blvd
		Floor 6
		San Jose, CA 95113
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Campaign zoom account
		Campaign 200m account
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	04/03/2023	Zoom
	Amount (\$)	Payee address; City; State; Zip Code
	\$17.05	55 Almaden Blvd
		Floor 6
		San Jose, CA 95113
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		Campaign zoom account
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

## SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Comm

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	I Committee 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:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 76/78 Rpt:	Meyer, Morgan D. (The Honorable) 00069344
4	Date	5 Payee name
	05/01/2023	Zoom
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$17.05	55 Almaden Blvd
		Floor 6
		San Jose, CA 95113
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Campaign zoom account
Ļ	Operation ONE V & discont	Openhalte Office held
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
⊨		
	Date	Payee name
L	06/01/2023	Zoom
	Amount (\$)	Payee address; City; State; Zip Code
	\$17.05	55 Almaden Blvd
		Floor 6
		San Jose, CA 95113
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Campaign zoom account
Н	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
F	Date	Payee name
	01/05/2023	Zoom
	Amount (\$)	Payee address; City; State; Zip Code
	\$15.98	55 Almaden Blvd
		Floor 6
		San Jose, CA 95113
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Office Overhead/Rental Expense  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Campaign zoom account
L	Complete CNUV'S	Condidate Office holder name
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
dash		

## SCHEDULE F1

### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

	Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.	OTHER (enter a category not listed above)
1	Total pages Schedule F1: Sch: 77/78 Rpt:	2 FILER NAME Meyer, Morgan D. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00069344
4	Date 02/06/2023	5 Payee name Zoom	
6	Amount (\$) \$15.98	7 Payee address; City; State; Zip Code 55 Almaden Blvd Floor 6 San Jose, CA 95113	
8	PURPOSE OF EXPENDITURE	emice everneda/Nemai Expense	l outside of Texas. Complete Schedule T. n, TX, officeholder living expense DOM ACCOUNT
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held
	Date 03/06/2023	Payee name Zoom	
	Amount (\$) \$17.05	Payee address; City; State; Zip Code 55 Almaden Blvd Floor 6 San Jose, CA 95113	
	PURPOSE OF EXPENDITURE	Office Overficad/Nertial Experise	l outside of Texas. Complete Schedule T. n, TX, officeholder living expense DOM account
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held
	Date 04/05/2023	Payee name Zoom	
	Amount (\$) \$17.05	Payee address; City; State; Zip Code 55 Almaden Blvd Floor 6 San Jose, CA 95113	
	PURPOSE OF EXPENDITURE	Onice Overneau/Nerital Expense	l outside of Texas. Complete Schedule T. n, TX, officeholder living expense DOM account

Candidate/Officeholder name

Complete ONLY if direct

expenditure to benefit C/OH

Office sought

Office held

## SCHEDULE F1

### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Gift/Awards/Memorials Expense Printing I Legal Services Salaries/  The Instruction Guide explains how to co	Wages	s/Contract Labor OTHER (enter a category not listed above)
	Sch: 78/78 Rpt:	2	FILER NAME Meyer, Morgan D. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00069344
4	Date 05/05/2023	5	Payee name Zoom		
6	Amount (\$) \$17.05	7	Payee address; City; State; Zip C 55 Almaden Blvd Floor 6 San Jose, CA 95113	ode	
8	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b)	Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Campaign zoom account
9	Complete ONLY if direct expenditure to benefit C/O		Candidate/Officeholder name Office so	ught	Office held
	Date 06/05/2023		Payee name Zoom		
	Amount (\$) \$17.05		Payee address; City; State; Zip C 55 Almaden Blvd Floor 6 San Jose, CA 95113	ode	
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b)	Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Campaign zoom account
	Complete ONLY if direct expenditure to benefit C/O		Candidate/Officeholder name Office so	ught	Office held

#### EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Travel Out of District Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 1/68 Rpt: 95/166 Meyer, Morgan D. (The Honorable) 00069344 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ Payee name 5 Date 03/28/2023 **ATXP** Amount (\$) Payee address; State; Zip Code City; 600 W. 2nd Street \$68.54 Austin, TX 78701 TYPE OF Non-Political Х Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Food and beverage at meeting to discuss officeholder issues 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 06/23/2023 **ATXP** Amount (\$) Payee address; City; State; Zip Code \$95.06 600 W. 2nd Street Austin, TX 78701 TYPE OF Non-Political Χ Political **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Food and beverage at mtg to dicsus officeholder issues Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

#### EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Travel Out of District Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 2/68 Rpt: 96/166 Meyer, Morgan D. (The Honorable) 00069344 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 5 Date Payee name 04/21/2023 Austin Bergstrom Intl Airport Paradies Lagardere Amount (\$) Payee address; City; State; Zip Code \$18.24 #3178 Departure Lounge Austin, TX 78719 TYPE OF Non-Political Х Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Food and beverage while traveling for officeholder duties 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 06/01/2023 Austin Bergstrom Intl Airport Paradies Lagardere Payee address: Amount (\$) City; State; Zip Code \$35.23 #3178 Departure Lounge Austin, TX 78719 TYPE OF Non-Political Χ Political **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Food and beverage while traveling for officeholder duties Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

#### EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Travel Out of District Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 3/68 Rpt: 97/166 Meyer, Morgan D. (The Honorable) 00069344 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 5 Date Payee name 01/19/2023 Austin Bergstrom Intl Airport Paradies Lagardere Amount (\$) Payee address; City; State; Zip Code \$10.99 3600 Presidential Blvd Austin, TX 78719 TYPE OF Non-Political Х Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Food and beverage for officeholder while traveling for officeholder business 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 01/19/2023 Austin Bergstrom Intl Airport Paradies Lagardere Amount (\$) Payee address; City; State; Zip Code \$6.87 3600 Presidential Blvd Austin, TX 78719 TYPE OF Non-Political Χ Political **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Food and beverage for officeholder while traveling for officeholder business Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

#### EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Travel Out of District Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 4/68 Rpt: 98/166 Meyer, Morgan D. (The Honorable) 00069344 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 5 Date Payee name 04/21/2023 Austin Bergstrom Intl Airport Paradies Lagardere Amount (\$) Payee address; City; State; Zip Code \$34.23 3600 Presidential Blvd Austin, TX 78719 TYPE OF Non-Political Х Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Food and beverage for meeting to discuss officeholder issues 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name Austin Bergstrom Intl Airport Paradies Lagardere 05/20/2023 Amount (\$) Payee address; City; State; Zip Code \$14.58 3600 Presidential Blvd Austin, TX 78719 TYPE OF Non-Political Χ Political **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Food and beverage for meeting to discuss officeholder issues Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

#### EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Travel Out of District Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 5/68 Rpt: 99/166 Meyer, Morgan D. (The Honorable) 00069344 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ Payee name 5 Date 01/26/2023 Austin Book People Amount (\$) Payee address; State; Zip Code \$4.99 5812 Trade Center Drive Austin, TX 78744 TYPE OF Non-Political Х Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Food and beverage for officeholder while traveling for officeholder business 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 03/03/2023 **CEFCO** Payee address: Amount (\$) City; State; Zip Code \$4.10 11810 N. IH 35 Jarrell, TX 76537 TYPE OF Non-Political Х Political **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Food and beverage for officeholder while traveling for officeholder business Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

#### EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Travel Out of District Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 6/68 Rpt: Meyer, Morgan D. (The Honorable) 00069344 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 5 Date Payee name 05/29/2023 Casino El Camino Amount (\$) Payee address; State; Zip Code City; \$42.00 517 E 6th St Austin, TX 78701 TYPE OF Non-Political Х Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Food and beverage for meeting to discuss officeholder issues 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 05/20/2023 East Food Park Austin Airport Amount (\$) Payee address; City; State; Zip Code \$3.79 3600 Presidential Blvd Austin, TX 78719 TYPE OF Non-Political Х Political **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Food and beverage for officeholder while traveling for officeholder business Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

#### EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Travel Out of District Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 7/68 Rpt: Meyer, Morgan D. (The Honorable) 00069344 \$ TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD 5 Date Payee name 01/23/2023 Fixe Southern House Amount (\$) Payee address; State; Zip Code City; \$182.52 500 W 5th St Austin, TX 79701 TYPE OF Non-Political Х Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Meal for officeholder while in Austin for officeholder business 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 06/28/2023 Four Seasons Hotel Austin Amount (\$) Payee address; City; State; Zip Code \$45.47 98 San Jacinto Boulevard Austin, TX 78701 TYPE OF Non-Political Χ Political **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Food and beverage for mtg to discuss officeholder issues Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

#### EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Travel Out of District Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 8/68 Rpt: Meyer, Morgan D. (The Honorable) 00069344 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 5 Date Payee name 05/12/2023 Hotel ZaZa Austin Amount (\$) Payee address; State; Zip Code City; \$107.00 400 Lavaca St. Austin, TX 78701 **TYPE OF** Non-Political Х Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Food and beverage while traveling for officeholder duties 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 02/01/2023 Hotel ZaZa Amount (\$) Payee address; City; State; Zip Code \$41.64 400 Lavaca Street Austin, TX 78701 **TYPE OF** Non-Political Χ Political **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense

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**EXPENDITURE** 

Complete ONLY if direct

expenditure to benefit C/OH

Candidate/Officeholder name

www.ethics.state.tx.us

Office sought

Version V3.5.1.a18ea2ca

Check if Austin, TX, officeholder living expense

discuss officeholder issues

Food and beverage for officeholder during mtg to

Office held

#### EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Travel Out of District Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 9/68 Rpt: Meyer, Morgan D. (The Honorable) 00069344 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 5 Date Payee name 02/03/2023 Hotel ZaZa Amount (\$) Payee address; State; Zip Code City; \$89.85 400 Lavaca Street Austin, TX 78701 **TYPE OF** Non-Political Х Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Food and beverage for officeholder during mtg to discuss officeholder issues 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 02/20/2023 Hotel ZaZa Amount (\$) Payee address; City; State; Zip Code \$131.50 400 Lavaca Street Austin, TX 78701 **TYPE OF** Non-Political Χ Political **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Food and beverage for officeholder while in Austin Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

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Version V3.5.1.a18ea2ca

#### EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Travel Out of District Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 10/68 Rpt: Meyer, Morgan D. (The Honorable) 00069344 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 5 Date Payee name 02/20/2023 Hotel ZaZa Amount (\$) Payee address; State; Zip Code City; \$40.36 400 Lavaca Street Austin, TX 78701 **TYPE OF** Non-Political Х Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Food and beverage for officeholder during mtg to discuss officeholder issues 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 02/27/2023 Hotel ZaZa Amount (\$) Payee address; City; State; Zip Code \$63.87 400 Lavaca Street Austin, TX 78701 **TYPE OF** Non-Political Х Political **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Food and beverage for officeholder during meeting to discuss officeholder issues Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

#### EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Travel Out of District Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 11/68 Rpt: Meyer, Morgan D. (The Honorable) 00069344 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ Payee name 5 Date 02/07/2023 **Hudson News** Amount (\$) Payee address; State; Zip Code City; \$5.89 7555 Lemon Avenue Dallas, TX 75209 **TYPE OF** Non-Political Х Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Food for officeholder while traveling for officeholder business 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 03/30/2023 **Hudson News** Amount (\$) Payee address; City; State; Zip Code \$4.89 7555 Lemon Avenue Dallas, TX 75209 **TYPE OF** Non-Political Χ Political **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Food and beverage while traveling for officeholder duties Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

#### EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor Travel Out of District OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 12/68 Rpt: Meyer, Morgan D. (The Honorable) 00069344 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ Payee name Date 04/16/2023 **Hudson News** Amount (\$) Payee address; State; Zip Code City; \$37.35 7555 Lemon Avenue Dallas, TX 75209 **TYPE OF** Non-Political Х Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Office Overhead/Rental Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Supplies for officeholder while traveling 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 04/20/2023 III Forks Amount (\$) Payee address; City; State; Zip Code \$147.33 111 Lavaca Street Austin, TX 78701 **TYPE OF** Non-Political Χ Political **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Food and beverage for meeting to discuss officeholder issues Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

#### EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Travel Out of District Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 13/68 Rpt: Meyer, Morgan D. (The Honorable) 00069344 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 5 Date Payee name 04/25/2023 Irene's Amount (\$) Payee address; State; Zip Code City; \$180.33 506 West Avenue Austin, TX 78701 **TYPE OF** Non-Political Х Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Food and beverage for meeting to discuss officeholder issues 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 05/18/2023 Irene's Amount (\$) Payee address; City; State; Zip Code \$337.91 506 West Avenue Austin, TX 78701 **TYPE OF** Non-Political Χ Political **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Food and beverage for meeting to discuss officeholder issues Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

#### EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Travel Out of District Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 14/68 Rpt: Meyer, Morgan D. (The Honorable) 00069344 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 5 Date Payee name 05/25/2023 Irene's Amount (\$) Payee address; State; Zip Code City; \$11.74 506 West Avenue Austin, TX 78701 **TYPE OF** Non-Political Х Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Food and beverage for meeting to discuss officeholder issues 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 05/25/2023 Irene's Amount (\$) Payee address; City; State; Zip Code \$38.56 506 West Avenue Austin, TX 78701 **TYPE OF** Non-Political Χ Political **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Food and beverage for meeting to discuss officeholder issues Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

# EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Travel Out of District Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 15/68 Rpt: Meyer, Morgan D. (The Honorable) 00069344 \$ TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD Payee name 5 Date 01/18/2023 JW Marriott Austin Amount (\$) Payee address; State; Zip Code \$225.36 110 E. 2nd Street Austin, TX 78701 **TYPE OF** Non-Political Х Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Food and beverage for officeholder while traveling for officeholder business 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 05/13/2023 JW Marriott Austin Amount (\$) Payee address; City; State; Zip Code \$76.96 110 East 2nd Street Austin, TX 78701 **TYPE OF** Non-Political Х Political **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Food and beverage for meeting to discuss officeholder issues Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

# EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Travel Out of District Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 16/68 Rpt: Meyer, Morgan D. (The Honorable) 00069344 \$ TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD Payee name 5 Date 05/13/2023 JW Marriott Austin Amount (\$) Payee address; State; Zip Code \$35.31 110 East 2nd Street Austin, TX 78701 **TYPE OF** Non-Political Х Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Food and beverage for meeting to discuss officeholder issues 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 06/22/2023 JW Marriott Austin Amount (\$) Payee address; City; State; Zip Code \$94.00 110 East 2nd Street Austin, TX 78701 **TYPE OF** Non-Political Χ Political **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Travel Out of District **EXPENDITURE** Check if Austin, TX, officeholder living expense Lodging for officeholder while traveling for officeholder duties Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

## EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Travel Out of District Gift/Awards/Memorials Expense Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 17/68 Rpt: Meyer, Morgan D. (The Honorable) 00069344 \$ TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD Payee name 5 Date 06/22/2023 JW Marriott Austin Amount (\$) Payee address; State; Zip Code \$127.74 110 East 2nd Street Austin, TX 78701 **TYPE OF** Non-Political Х Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Travel Out of District **EXPENDITURE** Check if Austin, TX, officeholder living expense Lodging for officeholder while traveling for officeholder duties 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 06/23/2023 JW Marriott Austin Amount (\$) Payee address; City; State; Zip Code \$484.37 110 East 2nd Street Austin, TX 78701 **TYPE OF** Non-Political Χ Political **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Travel Out of District **EXPENDITURE** Check if Austin, TX, officeholder living expense Lodging for officeholder while traveling for officeholder duties Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

### EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Travel Out of District Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 18/68 Rpt: Meyer, Morgan D. (The Honorable) 00069344 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ Payee name 5 Date 01/16/2023 Jason's Deli Amount (\$) Payee address; City; State; Zip Code \$15.57 8008 Herb Kelleher Way Dallas, TX 75235 **TYPE OF** Non-Political Х Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Food for officeholder while traveling for officeholder duties 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 02/23/2023 Jimmy Johns Amount (\$) Payee address; City; State; Zip Code \$8.85 601 W. Martin Luther King Jr Blvd Austin, TX 78701 **TYPE OF** Non-Political Χ Political **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Food for officeholder while traveling for officeholder business Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

### EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Travel Out of District Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 19/68 Rpt: Meyer, Morgan D. (The Honorable) 00069344 \$ TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD Payee name 5 Date 04/03/2023 Lonesome Dove Western Bistro Amount (\$) Payee address; State; Zip Code City; \$112.17 123 W. 6th Street Austin, TX 78701 **TYPE OF** Non-Political Х Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Food and beverage while traveling for officeholder duties 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 06/29/2023 McDonalds Amount (\$) Payee address; City; State; Zip Code \$3.56 7961 S IH 35 Robinson, TX 76706 **TYPE OF** Non-Political Х Political **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Food and beverage for officeholder while traveling for officeholder duties Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

#### EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Travel Out of District Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 20/68 Rpt: Meyer, Morgan D. (The Honorable) 00069344 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 5 Date Payee name 04/18/2023 Neighborhood Bar Amount (\$) Payee address; State; Zip Code \$219.83 701 Congress Ave. Austin, TX 78701 **TYPE OF** Non-Political Х Political **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Food and beverage for meeting to discuss officeholder issues Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 01/09/2023 North Italia Amount (\$) Payee address; City; State; Zip Code \$175.00 500 W. 2nd St 120

## EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Travel Out of District Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 21/68 Rpt: Meyer, Morgan D. (The Honorable) 00069344 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 5 Date Payee name 01/11/2023 North Italia Amount (\$) Payee address; State; Zip Code City; \$162.48 500 W. 2nd St 120 Austin, TX 78701 **TYPE OF** Non-Political Х Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Food and beverage for officeholder during meeting to discuss officeholder issues 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 01/17/2023 North Italia Amount (\$) Payee address; City; State; Zip Code \$55.00 500 W. 2nd St 120 Austin, TX 78701 **TYPE OF** Non-Political Χ Political **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Food and beverage for officeholder during mtg to discuss officeholder issues Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

# EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Travel Out of District Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 22/68 Rpt: Meyer, Morgan D. (The Honorable) 00069344 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 5 Date Payee name 02/20/2023 North Italia Amount (\$) Payee address; State; Zip Code City; \$63.04 500 W. 2nd St 120 Austin, TX 78701 **TYPE OF** Non-Political Х Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Food and beverage for officeholder during mtg to discuss officeholder issues 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 02/26/2023 North Italia Amount (\$) Payee address; City; State; Zip Code \$70.00 500 W. 2nd St 120 Austin, TX 78701 **TYPE OF** Non-Political Х Political **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Food and beverage for officeholder during mtg to discuss officeholder issues Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

# EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Travel Out of District Gift/Awards/Memorials Expense Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 23/68 Rpt: Meyer, Morgan D. (The Honorable) 00069344 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 5 Date Payee name 03/09/2023 North Italia Amount (\$) Payee address; City; State; Zip Code \$74.79 500 W. 2nd Street Ste. 120 Austin, TX 78701 **TYPE OF** Non-Political Х Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Meal for officeholder while in Austin for officeholder business 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 04/26/2023 North Italia Amount (\$) Payee address; City; State; Zip Code \$66.39 500 W. 2nd Street 120 Austin, TX 78701 **TYPE OF** Non-Political Χ Political **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Food and beverage for meeting to discuss officeholder issues Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

# EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Travel Out of District Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 24/68 Rpt: Meyer, Morgan D. (The Honorable) 00069344 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 5 Date Payee name 06/19/2023 North Italia Amount (\$) Payee address; City; State; Zip Code \$98.81 500 W. 2nd Street Ste. 120 Austin, TX 78701 **TYPE OF** Non-Political Х Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Food and beverage at mtg to dicsus officeholder issues 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 06/19/2023 North Italia Amount (\$) Payee address; City; State; Zip Code \$124.33 500 W. 2nd Street Ste. 120 Austin, TX 78701 **TYPE OF** Non-Political Χ Political **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Food and beverage at mtg to dicsus officeholder issues Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

# EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Travel Out of District Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 25/68 Rpt: Meyer, Morgan D. (The Honorable) 00069344 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ Date Payee name 5 03/04/2023 Omni Hotel Dallas Amount (\$) Payee address; State; Zip Code \$13.00 555 South Lamar Street Dallas, TX 75202 **TYPE OF** Non-Political Х Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Beverage for officeholder while attending event 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 03/29/2023 Pilot Amount (\$) Payee address; City; State; Zip Code \$4.74 8055 S I-35 Robinson, TX 76706 **TYPE OF** Non-Political Χ Political **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Food and beverage while traveling for officeholder duties Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

#### EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Travel Out of District Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 26/68 Rpt: Meyer, Morgan D. (The Honorable) 00069344 4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 5 Date Payee name 04/14/2023 Pilot Amount (\$) Payee address; State; Zip Code City; \$7.57 8055 South I-35 Robinson, TX 76706 **TYPE OF** Non-Political Х Political **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Food and beverage while traveling for officeholder duties Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 04/14/2023 Pilot Amount (\$) Payee address; City; State; Zip Code

#### EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Travel Out of District Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 27/68 Rpt: Meyer, Morgan D. (The Honorable) 00069344 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 5 Date Payee name 04/24/2023 Polvo's Amount (\$) Payee address; State; Zip Code City; 360 Nueces Street \$84.66 Austin, TX 78701 **TYPE OF** Non-Political Х Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Food and beverage for meeting to discuss officeholder issues 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 06/28/2023 Quicktrip Amount (\$) Payee address; City; State; Zip Code \$1.61 2350 S. New Road Waco, TX 76711 **TYPE OF** Non-Political Х Political **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense

Complete ONLY if direct

expenditure to benefit C/OH

Candidate/Officeholder name

Food and beverage while traveling for officeholder

Office held

duties

Office sought

# EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Travel Out of District Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 28/68 Rpt: Meyer, Morgan D. (The Honorable) 00069344 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 5 Date Payee name 02/20/2023 Royal Blue AMLI Amount (\$) Payee address; State; Zip Code City; 241 W. 3rd Street \$133.06 Austin, TX 78701 **TYPE OF** Non-Political Х Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Food and beverage for officeholder while in Austin 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 02/26/2023 Shell Amount (\$) Payee address; City; State; Zip Code \$9.82 105 N. College West, TX 76691 **TYPE OF** Non-Political Χ Political **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Food for officeholder while traveling for officeholder business Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

# EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Travel Out of District Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 29/68 Rpt: Meyer, Morgan D. (The Honorable) 00069344 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 5 Date Payee name 03/03/2023 Shell Amount (\$) Payee address; State; Zip Code City; \$3.13 1020 Dale Evans Dr. Italy, TX 76651 **TYPE OF** Non-Political Х Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Food for officeholder while traveling for officeholder business 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 06/20/2023 Shell Amount (\$) Payee address; City; State; Zip Code \$8.94 105 N. College West, TX 76691 **TYPE OF** Non-Political Χ Political **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Food and beverage while traveling for officeholder duties Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

#### EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Travel Out of District Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 30/68 Rpt: Meyer, Morgan D. (The Honorable) 00069344 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ Date 5 Payee name 04/28/2023 Shinsei Amount (\$) Payee address; City; State; Zip Code \$295.06 7713 Inwood Road Dallas, TX 75209 **TYPE OF** Non-Political Х Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Food and beverage for mtg to discuss officeholder issues 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 03/28/2023 Starbucks Amount (\$) Payee address; City; State; Zip Code \$6.66 Dallas Love Field Airport Dallas, TX 75209 **TYPE OF** Non-Political Χ Political **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Food and beverage for officeholder while traveling for officeholder business Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

## EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Travel Out of District Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 31/68 Rpt: Meyer, Morgan D. (The Honorable) 00069344 \$ TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD 5 Date Payee name 06/29/2023 Stephen F. Austin Royal Sonesta Hotel Amount (\$) Payee address; City; State; Zip Code \$435.68 701 Congress Avenue Austin, TX 78701 **TYPE OF** Non-Political Х Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Travel Out of District **EXPENDITURE** Check if Austin, TX, officeholder living expense Lodging for officeholder while traveling for officeholder duties 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 03/03/2023 Subway Payee address: Amount (\$) City; State; Zip Code \$6.48 11810 N. IH 35 Jarrell, TX 76537 **TYPE OF** Non-Political Χ Political **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Food for officeholder while traveling for officeholder business Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

#### EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Travel Out of District Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 32/68 Rpt: Meyer, Morgan D. (The Honorable) 00069344 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 5 Date Payee name 06/19/2023 Subway Amount (\$) Payee address; State; Zip Code City; \$6.27 100 LR Campbell Italy, TX 76651 **TYPE OF** Non-Political Х Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Food and beverage while traveling for officeholder duties 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 01/09/2023 Target Payee address: Amount (\$) City; State; Zip Code \$95.48 901 E. 5th Street Suite 140 Austin, TX 78702 **TYPE OF** Non-Political Χ Political **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Office Overhead/Rental Expense **EXPENDITURE** X Check if Austin, TX, officeholder living expense Supplies for Capitol office and officeholder Austin apartment Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

### EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Travel Out of District Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 33/68 Rpt: Meyer, Morgan D. (The Honorable) 00069344 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ Date 5 Payee name 01/08/2023 Taverna Amount (\$) Payee address; State; Zip Code City; \$331.89 258 W. 2nd Street Austin, TX 78701 **TYPE OF** Non-Political Х Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Food for officeholder during meeting to discuss officeholder issues 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 01/30/2023 **Texas Travel Center** Amount (\$) Payee address; City; State; Zip Code \$1.80 22612 S IH 35 Salado, TX 76571 **TYPE OF** Non-Political Х Political **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Food for officeholder while traveling for officeholder business Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

## EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Travel Out of District Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 34/68 Rpt: Meyer, Morgan D. (The Honorable) 00069344 \$ TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD Payee name 5 Date 06/23/2023 The Grove Downtown Austin Amount (\$) Payee address; State; Zip Code \$148.85 800 W 6th St, Ste. 100 Austin, TX 78701 **TYPE OF** Non-Political Х Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Food and beverage at mtg to dicsus officeholder issues 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 01/30/2023 The Grove Downtown Austin Amount (\$) Payee address; City; State; Zip Code \$21.43 800 W 6th St #100 Austin, TX 78701 **TYPE OF** Non-Political Χ Political **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Food for officeholder during mtg to discuss officeholder issues Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

# EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Travel Out of District Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 35/68 Rpt: Meyer, Morgan D. (The Honorable) 00069344 \$ TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD Payee name 5 Date 03/15/2023 The Grove Downtown Austin Amount (\$) Payee address; State; Zip Code City; \$140.35 800 W 6th St #100 Austin, TX 78701 **TYPE OF** Non-Political Х Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Food for officeholder during meeting to discuss officeholder issues 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 05/14/2023 The Grove Downtown Austin Amount (\$) Payee address; City; State; Zip Code \$84.43 800 W 6th St #100 Austin, TX 78701 **TYPE OF** Non-Political Χ Political **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Food and beverage for meeting to discuss officeholder issues Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

# EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Travel Out of District Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 36/68 Rpt: Meyer, Morgan D. (The Honorable) 00069344 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 5 Date Payee name 06/19/2023 Tiger Mart Amount (\$) Payee address; City; State; Zip Code \$4.74 101 LR Campbell Road Italy, TX 76651 **TYPE OF** Non-Political Х Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Food and beverage for officeholder while traveling for officeholder duties 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 01/09/2023 **Trader Joes** Amount (\$) Payee address; City; State; Zip Code \$28.12 211 Walter Sealholm Drive Suite 100 Austin, TX 78701 **TYPE OF** Non-Political Χ Political **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Office Overhead/Rental Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Supplies for Capitol office Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

#### EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Travel Out of District Gift/Awards/Memorials Expense Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 37/68 Rpt: Meyer, Morgan D. (The Honorable) 00069344 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 5 Date Payee name 01/12/2023 Uber Amount (\$) Payee address; City; State; Zip Code \$24.94 1455 Market St. Ste 400 San Francisco, CA 94103 **TYPE OF** Political Non-Political Х **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Travel In District **EXPENDITURE** Check if Austin, TX, officeholder living expense Uber from Love Field Airport to home - travel for officeholder duties 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 01/16/2023 Uber Amount (\$) Payee address; City; State; Zip Code \$28.62 1455 Market St. Ste 400 San Francisco, CA 94103 **TYPE OF** Non-Political Political Х **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Travel Out of District **EXPENDITURE** Check if Austin, TX, officeholder living expense Uber for officeholder from Austin airport to apartment Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

### EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Travel Out of District Gift/Awards/Memorials Expense Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 38/68 Rpt: Meyer, Morgan D. (The Honorable) 00069344 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 5 Date Payee name 01/24/2023 Uber Amount (\$) Payee address; City; State; Zip Code \$22.99 1455 Market St. Ste 400 San Francisco, CA 94103 **TYPE OF** Political Non-Political Х **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Travel Out of District **EXPENDITURE** Check if Austin, TX, officeholder living expense Uber for officeholder from Austin airport to apartment Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 01/25/2023 Uber Amount (\$) Payee address; City; State; Zip Code \$18.28 1455 Market St. Ste 400 San Francisco, CA 94103

# EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Travel Out of District Gift/Awards/Memorials Expense Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 39/68 Rpt: Meyer, Morgan D. (The Honorable) 00069344 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 5 Date Payee name 01/25/2023 Uber Amount (\$) Payee address; City; State; Zip Code \$15.81 1455 Market St. Ste 400 San Francisco, CA 94103 **TYPE OF** Political Non-Political Х **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Travel Out of District **EXPENDITURE** Check if Austin, TX, officeholder living expense Uber for officeholder to an officeholder event 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 02/07/2023 Uber Amount (\$) Payee address; City; State; Zip Code \$28.77 1455 Market St. Ste 400 San Francisco, CA 94103 **TYPE OF** Non-Political Political Х **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Travel Out of District **EXPENDITURE** Check if Austin, TX, officeholder living expense Uber for officeholder to officeholder event Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

## EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Travel Out of District Gift/Awards/Memorials Expense Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 40/68 Rpt: Meyer, Morgan D. (The Honorable) 00069344 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ Date 5 Payee name 02/08/2023 Uber Amount (\$) Payee address; City; State; Zip Code \$21.05 1455 Market St. Ste 400 San Francisco, CA 94103 **TYPE OF** Political Non-Political Х **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Travel Out of District **EXPENDITURE** Check if Austin, TX, officeholder living expense Uber for officeholder to officeholder event 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 02/14/2023 Uber Amount (\$) Payee address; City; State; Zip Code \$16.67 1455 Market St. Ste 400 San Francisco, CA 94103 **TYPE OF** Non-Political Political Х **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Travel Out of District **EXPENDITURE** Check if Austin, TX, officeholder living expense Uber for officeholder traveling to officeholder event Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

# EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Travel Out of District Gift/Awards/Memorials Expense Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 41/68 Rpt: Meyer, Morgan D. (The Honorable) 00069344 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 5 Date Payee name 02/20/2023 Uber Amount (\$) Payee address; City; State; Zip Code \$8.65 1455 Market St. Ste 400 San Francisco, CA 94103 **TYPE OF** Political Non-Political Х **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Travel Out of District **EXPENDITURE** Check if Austin, TX, officeholder living expense Uber for officeholder traveling to Capitol 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 02/20/2023 Uber Amount (\$) Payee address; City; State; Zip Code \$27.65 1455 Market St. Ste 400 San Francisco, CA 94103 **TYPE OF** Non-Political Political Х **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Travel Out of District **EXPENDITURE** Check if Austin, TX, officeholder living expense Uber for officeholder from Austin airport to apartment Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

# EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Travel Out of District Gift/Awards/Memorials Expense Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 42/68 Rpt: Meyer, Morgan D. (The Honorable) 00069344 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 5 Date Payee name 03/02/2023 Uber Amount (\$) Payee address; City; State; Zip Code \$8.93 1455 Market St. Ste 400 San Francisco, CA 94103 **TYPE OF** Political Non-Political Х **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Travel Out of District **EXPENDITURE** Check if Austin, TX, officeholder living expense Uber from Capitol to Austin apartment 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 03/04/2023 Uber Amount (\$) Payee address; City; State; Zip Code \$52.69 1455 Market St. Ste 400 San Francisco, CA 94103 **TYPE OF** Non-Political Political Х **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Travel In District **EXPENDITURE** Check if Austin, TX, officeholder living expense Uber for officeholder to Reagan Day event in Dallas Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

# EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Travel Out of District Gift/Awards/Memorials Expense Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 43/68 Rpt: Meyer, Morgan D. (The Honorable) 00069344 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 5 Date Payee name 03/04/2023 Uber Amount (\$) Payee address; City; State; Zip Code \$44.64 1455 Market St. Ste 400 San Francisco, CA 94103 **TYPE OF** Political Non-Political Х **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Travel In District **EXPENDITURE** Check if Austin, TX, officeholder living expense Uber for officeholder from Reagan Day event in Dallas 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 03/05/2023 Uber Amount (\$) Payee address; City; State; Zip Code \$26.51 1455 Market St. Ste 400 San Francisco, CA 94103 **TYPE OF** Non-Political Political Х **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Travel Out of District **EXPENDITURE** Check if Austin, TX, officeholder living expense Uber for officeholder from Austin airport to Austin apartment Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

# EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Travel Out of District Gift/Awards/Memorials Expense Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 44/68 Rpt: Meyer, Morgan D. (The Honorable) 00069344 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ Date 5 Payee name 03/06/2023 Uber Amount (\$) Payee address; City; State; Zip Code \$16.61 1455 Market St. Ste 400 San Francisco, CA 94103 **TYPE OF** Political Non-Political Х **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Travel Out of District **EXPENDITURE** Check if Austin, TX, officeholder living expense Uber for officeholder from apartment to event in Austin 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 03/06/2023 Uber Amount (\$) Payee address; City; State; Zip Code \$7.47 1455 Market St. Ste 400 San Francisco, CA 94103 **TYPE OF** Non-Political Political Х **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Travel Out of District **EXPENDITURE** Check if Austin, TX, officeholder living expense Uber for officeholder from Capitol to apartment Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

# EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Travel Out of District Gift/Awards/Memorials Expense Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 45/68 Rpt: Meyer, Morgan D. (The Honorable) 00069344 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ Date 5 Payee name 03/09/2023 Uber Amount (\$) Payee address; City; State; Zip Code \$34.88 1455 Market St. Ste 400 San Francisco, CA 94103 **TYPE OF** Political Non-Political Х **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Travel Out of District **EXPENDITURE** Check if Austin, TX, officeholder living expense Uber for officeholder from airport to apartment 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 03/10/2023 Uber Amount (\$) Payee address; City; State; Zip Code \$24.85 1455 Market St. Ste 400 San Francisco, CA 94103 **TYPE OF** Non-Political Political Х **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Travel Out of District **EXPENDITURE** Check if Austin, TX, officeholder living expense Uber for officeholder from apartment to Austin airport Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

# EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Travel Out of District Gift/Awards/Memorials Expense Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 46/68 Rpt: Meyer, Morgan D. (The Honorable) 00069344 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 5 Date Payee name 03/13/2023 Uber Amount (\$) Payee address; City; State; Zip Code \$19.55 1455 Market St. Ste 400 San Francisco, CA 94103 **TYPE OF** Political Non-Political Х **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Travel Out of District **EXPENDITURE** Check if Austin, TX, officeholder living expense Uber for officeholder from apartment to event in Austin 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 03/22/2023 Uber Amount (\$) Payee address; City; State; Zip Code \$7.49 1455 Market St. Ste 400 San Francisco, CA 94103 **TYPE OF** Non-Political Political Х **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Travel Out of District **EXPENDITURE** Check if Austin, TX, officeholder living expense Uber form Capitol to Austin apartment Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

#### EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Travel Out of District Gift/Awards/Memorials Expense Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 47/68 Rpt: Meyer, Morgan D. (The Honorable) 00069344 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 5 Date Payee name 03/27/2023 Uber Amount (\$) Payee address; City; State; Zip Code \$22.17 1455 Market St. Ste 400 San Francisco, CA 94103 **TYPE OF** Political Non-Political Х **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Travel In District **EXPENDITURE** Check if Austin, TX, officeholder living expense Uber from Love Field Airport to home - travel for officeholder duties 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 03/27/2023 Uber Amount (\$) Payee address; City; State; Zip Code \$25.14 1455 Market St. Ste 400 San Francisco, CA 94103 **TYPE OF** Non-Political Political Х **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Travel Out of District **EXPENDITURE** Check if Austin, TX, officeholder living expense Uber from Capitol to Austin airport Complete ONLY if direct Candidate/Officeholder name Office sought Office held

expenditure to benefit C/OH

# EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Travel Out of District Gift/Awards/Memorials Expense Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 48/68 Rpt: Meyer, Morgan D. (The Honorable) 00069344 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ Date 5 Payee name 03/28/2023 Uber Amount (\$) Payee address; City; State; Zip Code \$31.17 1455 Market St. Ste 400 San Francisco, CA 94103 **TYPE OF** Political Non-Political Х **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Travel Out of District **EXPENDITURE** Check if Austin, TX, officeholder living expense Uber from Austin airport to Austin apartment 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 03/28/2023 Uber Amount (\$) Payee address; City; State; Zip Code \$16.87 1455 Market St. Ste 400 San Francisco, CA 94103 **TYPE OF** Non-Political Political Х **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Travel In District **EXPENDITURE** Check if Austin, TX, officeholder living expense Uber from home to Love Field Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

# EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Travel Out of District Gift/Awards/Memorials Expense Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 49/68 Rpt: Meyer, Morgan D. (The Honorable) 00069344 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ Date 5 Payee name 03/30/2023 Uber Amount (\$) Payee address; City; State; Zip Code \$33.75 1455 Market St. Ste 400 San Francisco, CA 94103 **TYPE OF** Political Non-Political Х **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Travel Out of District **EXPENDITURE** Check if Austin, TX, officeholder living expense Uber from Capitol to Austin airport 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 03/30/2023 Uber Amount (\$) Payee address; City; State; Zip Code \$26.75 1455 Market St. Ste 400 San Francisco, CA 94103 **TYPE OF** Non-Political Political Х **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Travel Out of District **EXPENDITURE** Check if Austin, TX, officeholder living expense Uber from Austin airport to Capitol Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

# EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Travel Out of District Gift/Awards/Memorials Expense Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 50/68 Rpt: Meyer, Morgan D. (The Honorable) 00069344 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 5 Date Payee name 04/02/2023 Uber Amount (\$) Payee address; City; State; Zip Code \$30.24 1455 Market St. Ste 400 San Francisco, CA 94103 **TYPE OF** Political Non-Political Х **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Travel Out of District **EXPENDITURE** Check if Austin, TX, officeholder living expense Uber from airport to Capitol in Austin 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 04/02/2023 Uber Amount (\$) Payee address; City; State; Zip Code \$16.47 1455 Market St. Ste 400 San Francisco, CA 94103 **TYPE OF** Non-Political Political Х **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Travel In District **EXPENDITURE** Check if Austin, TX, officeholder living expense Uber from home to Love Field - travel for officeholder duties Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

### EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Travel Out of District Gift/Awards/Memorials Expense Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 51/68 Rpt: Meyer, Morgan D. (The Honorable) 00069344 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 5 Date Payee name 04/06/2023 Uber Amount (\$) Payee address; City; State; Zip Code \$18.12 1455 Market St. Ste 400 San Francisco, CA 94103 **TYPE OF** Political Non-Political Х **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Travel In District **EXPENDITURE** Check if Austin, TX, officeholder living expense Uber from Love Field Airport to home - travel for officeholder duties 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 04/07/2023 Uber Amount (\$) Payee address; City; State; Zip Code \$24.63 1455 Market St. Ste 400 San Francisco, CA 94103 **TYPE OF** Non-Political Political Х **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Travel Out of District **EXPENDITURE** Check if Austin, TX, officeholder living expense Uber from Austin apartment to Austin airport Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

### EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Travel Out of District Gift/Awards/Memorials Expense Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 52/68 Rpt: Meyer, Morgan D. (The Honorable) 00069344 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 5 Date Payee name 04/11/2023 Uber Amount (\$) Payee address; City; State; Zip Code \$24.39 1455 Market St. Ste 400 San Francisco, CA 94103 **TYPE OF** Political Non-Political Х **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Travel Out of District **EXPENDITURE** Check if Austin, TX, officeholder living expense Uber from Capitol to event in Austin 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 04/15/2023 Uber Amount (\$) Payee address; City; State; Zip Code \$27.67 1455 Market St. Ste 400 San Francisco, CA 94103 **TYPE OF** Non-Political Political Х **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Travel Out of District **EXPENDITURE** Check if Austin, TX, officeholder living expense Uber for officeholder to event Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

## EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Travel Out of District Gift/Awards/Memorials Expense Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 53/68 Rpt: Meyer, Morgan D. (The Honorable) 00069344 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 5 Date Payee name 04/16/2023 Uber Amount (\$) Payee address; City; State; Zip Code \$25.49 1455 Market St. Ste 400 San Francisco, CA 94103 **TYPE OF** Political Non-Political Х **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Travel Out of District **EXPENDITURE** Check if Austin, TX, officeholder living expense Uber from Austin airport to Austin apartment 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 04/21/2023 Uber Amount (\$) Payee address; City; State; Zip Code \$29.59 1455 Market St. Ste 400 San Francisco, CA 94103 **TYPE OF** Non-Political Political Х **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Travel Out of District **EXPENDITURE** Check if Austin, TX, officeholder living expense Uber from Austin apartment to Austin airport Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

### EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Travel Out of District Gift/Awards/Memorials Expense Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 54/68 Rpt: Meyer, Morgan D. (The Honorable) 00069344 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 5 Date Payee name 04/23/2023 Uber Amount (\$) Payee address; City; State; Zip Code \$24.98 1455 Market St. Ste 400 San Francisco, CA 94103 **TYPE OF** Political Non-Political Х **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Travel Out of District **EXPENDITURE** Check if Austin, TX, officeholder living expense Uber from Austin airport to Presidential Blvd in Austin 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 04/30/2023 Uber Amount (\$) Payee address; City; State; Zip Code \$22.05 1455 Market St. Ste 400 San Francisco, CA 94103 **TYPE OF** Non-Political Political Х **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Travel Out of District **EXPENDITURE** Check if Austin, TX, officeholder living expense Uber from Capitol to Austin Airport Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

# EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Travel Out of District Gift/Awards/Memorials Expense Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 55/68 Rpt: Meyer, Morgan D. (The Honorable) 00069344 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ Date 5 Payee name 05/03/2023 Uber Amount (\$) Payee address; City; State; Zip Code \$9.10 1455 Market St. Ste 400 San Francisco, CA 94103 **TYPE OF** Political Non-Political Х **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Travel Out of District **EXPENDITURE** Check if Austin, TX, officeholder living expense Uber from Austin apartmentto event in Austin 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 05/05/2023 Uber Amount (\$) Payee address; City; State; Zip Code \$6.70 1455 Market St. Ste 400 San Francisco, CA 94103 **TYPE OF** Non-Political Political Х **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Travel Out of District **EXPENDITURE** Check if Austin, TX, officeholder living expense Uber from Austin apartment to event in Austin Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

# EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Travel Out of District Gift/Awards/Memorials Expense Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 56/68 Rpt: Meyer, Morgan D. (The Honorable) 00069344 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ Date 5 Payee name 05/07/2023 Uber Amount (\$) Payee address; City; State; Zip Code \$28.20 1455 Market St. Ste 400 San Francisco, CA 94103 **TYPE OF** Political Non-Political Х **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Travel Out of District **EXPENDITURE** Check if Austin, TX, officeholder living expense Uber from Austin airport to Austin apartment 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 05/08/2023 Uber Amount (\$) Payee address; City; State; Zip Code \$23.47 1455 Market St. Ste 400 San Francisco, CA 94103 **TYPE OF** Non-Political Political Х **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Travel Out of District **EXPENDITURE** Check if Austin, TX, officeholder living expense Uber from Austin apartment to event in Austin Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

# EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Travel Out of District Gift/Awards/Memorials Expense Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 57/68 Rpt: Meyer, Morgan D. (The Honorable) 00069344 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 5 Date Payee name 05/08/2023 Uber Amount (\$) Payee address; City; State; Zip Code \$31.28 1455 Market St. Ste 400 San Francisco, CA 94103 **TYPE OF** Political Non-Political Х **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Travel Out of District **EXPENDITURE** Check if Austin, TX, officeholder living expense Uber to event in Austin 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 05/08/2023 Uber Amount (\$) Payee address; City; State; Zip Code \$34.24 1455 Market St. Ste 400 San Francisco, CA 94103 **TYPE OF** Non-Political Political Х **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Travel Out of District **EXPENDITURE** Check if Austin, TX, officeholder living expense Uber to event in Austin Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

# EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor Travel Out of District OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 58/68 Rpt: Meyer, Morgan D. (The Honorable) 00069344 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 5 Date Payee name 05/11/2023 Uber Amount (\$) Payee address; City; State; Zip Code \$8.49 1455 Market St. Ste 400 San Francisco, CA 94103 **TYPE OF** Political Non-Political Х **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Travel Out of District **EXPENDITURE** Check if Austin, TX, officeholder living expense Uber from Capitol to apartment in Austin 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 05/13/2023 Uber Amount (\$) Payee address; City; State; Zip Code \$10.86 1455 Market St. Ste 400 San Francisco, CA 94103 **TYPE OF** Non-Political Political Х **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Travel Out of District **EXPENDITURE** Check if Austin, TX, officeholder living expense Uber from event to Austin apartment Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

# EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Travel Out of District Gift/Awards/Memorials Expense Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 59/68 Rpt: Meyer, Morgan D. (The Honorable) 00069344 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 5 Date Payee name 05/13/2023 Uber Amount (\$) Payee address; City; State; Zip Code \$33.44 1455 Market St. Ste 400 San Francisco, CA 94103 **TYPE OF** Political Non-Political Х **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Travel Out of District **EXPENDITURE** Check if Austin, TX, officeholder living expense Uber to event in Austin 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 05/13/2023 Uber Amount (\$) Payee address; City; State; Zip Code \$23.85 1455 Market St. Ste 400 San Francisco, CA 94103 **TYPE OF** Non-Political Political Х **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Travel Out of District **EXPENDITURE** Check if Austin, TX, officeholder living expense Uber from event to Austin apartment Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

## EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Travel Out of District Gift/Awards/Memorials Expense Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 60/68 Rpt: Meyer, Morgan D. (The Honorable) 00069344 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 5 Date Payee name 05/20/2023 Uber Amount (\$) Payee address; City; State; Zip Code \$23.46 1455 Market St. Ste 400 San Francisco, CA 94103 **TYPE OF** Political Non-Political Х **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Travel Out of District **EXPENDITURE** Check if Austin, TX, officeholder living expense Uber from Austin apartment to Austin airport 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 05/22/2023 Uber Amount (\$) Payee address; City; State; Zip Code \$21.37 1455 Market St. Ste 400 San Francisco, CA 94103 **TYPE OF** Non-Political Political Х **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Travel Out of District **EXPENDITURE** Check if Austin, TX, officeholder living expense Uber from Austin airport to Austin apartment Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

### EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Travel Out of District Gift/Awards/Memorials Expense Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 61/68 Rpt: Meyer, Morgan D. (The Honorable) 00069344 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ Date 5 Payee name 05/24/2023 Uber Amount (\$) Payee address; City; State; Zip Code \$8.49 1455 Market St. Ste 400 San Francisco, CA 94103 **TYPE OF** Political Non-Political Х **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Travel Out of District **EXPENDITURE** Check if Austin, TX, officeholder living expense Uber from Austin apartment to event in Austin 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 05/24/2023 Uber Amount (\$) Payee address; City; State; Zip Code \$7.72 1455 Market St. Ste 400 San Francisco, CA 94103 **TYPE OF** Non-Political Political Х **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Travel Out of District **EXPENDITURE** Check if Austin, TX, officeholder living expense Uber from different events in Austin Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

# EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Travel Out of District Gift/Awards/Memorials Expense Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 62/68 Rpt: Meyer, Morgan D. (The Honorable) 00069344 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ Date 5 Payee name 05/25/2023 Uber Amount (\$) Payee address; City; State; Zip Code \$23.25 1455 Market St. Ste 400 San Francisco, CA 94103 **TYPE OF** Political Non-Political Х **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Travel Out of District **EXPENDITURE** Check if Austin, TX, officeholder living expense Uber from Capitol to event in Austin 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 05/29/2023 Uber Amount (\$) Payee address; City; State; Zip Code \$13.55 1455 Market St. Ste 400 San Francisco, CA 94103 **TYPE OF** Non-Political Political Х **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Travel Out of District **EXPENDITURE** Check if Austin, TX, officeholder living expense Uber from Capitol to event in Austin Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

# EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Travel Out of District Gift/Awards/Memorials Expense Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 63/68 Rpt: Meyer, Morgan D. (The Honorable) 00069344 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 5 Date Payee name 05/31/2023 Uber Amount (\$) Payee address; City; State; Zip Code \$27.32 1455 Market St. Ste 400 San Francisco, CA 94103 **TYPE OF** Political Non-Political Х **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Travel Out of District **EXPENDITURE** Check if Austin, TX, officeholder living expense Uber from Austin apartment to Austin airport 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 06/01/2023 Uber Amount (\$) Payee address; City; State; Zip Code \$27.18 1455 Market St. Ste 400 San Francisco, CA 94103 **TYPE OF** Non-Political Political Х **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Travel Out of District **EXPENDITURE** Check if Austin, TX, officeholder living expense Uber from Austin airport to Austin apt Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

# EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Travel Out of District Gift/Awards/Memorials Expense Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 64/68 Rpt: Meyer, Morgan D. (The Honorable) 00069344 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 5 Date Payee name 06/23/2023 Uber Amount (\$) Payee address; City; State; Zip Code \$29.89 1455 Market St. Ste 400 San Francisco, CA 94103 **TYPE OF** Political Non-Political Х **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Travel Out of District **EXPENDITURE** Check if Austin, TX, officeholder living expense Uber to event in Austin 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 06/30/2023 Uber Amount (\$) Payee address; City; State; Zip Code \$23.15 1455 Market St. Ste 400 San Francisco, CA 94103 **TYPE OF** Non-Political Political Х **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Travel In District **EXPENDITURE** Check if Austin, TX, officeholder living expense Uber to event in Dallas Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

### EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Travel Out of District Gift/Awards/Memorials Expense Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 65/68 Rpt: Meyer, Morgan D. (The Honorable) 00069344 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 5 Date Payee name 03/13/2023 Upstairs at Caroline Amount (\$) Payee address; State; Zip Code \$200.01 621 Congress Ave, Ste 201 Austin, TX 78701 TYPE OF Non-Political Х Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Food for officeholder during mtg to discuss officeholder issues 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 03/14/2023 **Upstairs at Caroline** Amount (\$) Payee address; City; State; Zip Code \$72.18 621 Congress Ave, Ste. 201 Austin, TX 78701 **TYPE OF** Non-Political Χ Political **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Food and beverage at meeting to discuss officeholder issues Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

#### EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Travel Out of District Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 66/68 Rpt: Meyer, Morgan D. (The Honorable) 00069344 \$ TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD Payee name 5 Date 04/07/2023 West Food Park Austin Airport Amount (\$) Payee address; City; State; Zip Code \$21.63 3600 Presidential Blvd Austin, TX 78719 **TYPE OF** Non-Political Х Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Food and beverage for officeholder while traveling for officeholder business 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 04/28/2023 West Food Park Austin Airport Amount (\$) Payee address; City; State; Zip Code \$21.63 3600 Presidential Blvd Austin, TX 78719 **TYPE OF** Non-Political Χ Political **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Food and beverage for officeholder while traveling for officeholder business Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

#### EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Travel Out of District Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 67/68 Rpt: Meyer, Morgan D. (The Honorable) 00069344 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 5 Date Payee name 02/03/2023 Whataburger Amount (\$) Payee address; City; State; Zip Code \$10.60 115 N. General Bruce Drive Temple, TX 76504 **TYPE OF** Non-Political Х Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Food for officeholder while traveling for officeholder business 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 06/22/2023 Whataburger Payee address: Amount (\$) City; State; Zip Code \$17.19 1402 Corsicana Hwy Hillsboro, TX 76645 **TYPE OF** Non-Political Х Political **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Food and beverage while traveling for officeholder duties Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

Forms provided by Texas Ethics Commission

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Version V3.5.1.a18ea2ca

#### EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Travel Out of District Legal Services OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 68/68 Rpt: Meyer, Morgan D. (The Honorable) 00069344 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ Date 5 Payee name 06/24/2023 Whataburger Amount (\$) Payee address; City; State; Zip Code \$29.74 115 N. General Bruce Drive Temple, TX 76504 **TYPE OF** Non-Political Х Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Food and beverage while traveling for officeholder duties 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 04/11/2023 Wu Chow Amount (\$) Payee address; City; State; Zip Code \$136.39 500 W. 5th Street Suite 168 Austin, TX 78701 **TYPE OF** Non-Political Χ Political **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Food and beverage for meeting to discuss officeholder issues Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

# SCHEDULE G

# **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense Accounting/Banking

Event Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense

Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment			Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Food/Beverage Expense Polling Expense Salaries/Wages/Contract Labor			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 FILER NAM	Ē			3	Filer ID	(Ethics Commission Filers)		
	Sch: 1/4 Rpt: 163/166	Meyer, Moi	rgan D. (The Honorable)				000693	44		
4	Date	5 Payee name	<u> </u>			<u> </u>				
ľ	01/31/2023	l	Mastercard							
6	Amount (\$)	7 Payee addre	ess; City; State	Zip Co	ode					
	\$110.64	2000 Purch	nase Street							
	Reimbursement from									
	X political contributions intended	Purchase,	NY 10577							
8	PURPOSE	(a) Category (s	See Categories listed at the top of this sch	edule)	(b) Description	Che	eck if travel	outside of Texas. Complete Schedule T.		
	OF EXPENDITURE	Credit Card	dit Card Payment Check if Austin, TX, officeholder living expense							
	LXI LINDITORL				Credit card paym	nent	for expe	enditures reported in F4		
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Office	holder name		Office sought			Office held		
	C/O11									
	Date	Payee name								
	02/28/2023	Mastercard								
	Amount (\$)	Payee address; City; State; Zip Code								
	\$102.79	2000 Purchase Street								
	Reimbursement from									
	x political contributions intended	Purchase,	NY 10577							
	PURPOSE	Category (s	See Categories listed at the top of this sch	edule)	Description	Che	eck if travel	outside of Texas. Complete Schedule T.		
OF EXPENDITURE		Credit Card Payment				Che	eck if Austin	n, TX, officeholder living expense		
	LAFENDITORE				Credit card paym	nent	for expe	enditures reported in F4		
	Complete ONLY if direct	Candidate/Office	holder name		Office sought			Office held		
	expenditure to benefit									
	C/OH									
	Date	Payee name								
	03/31/2023	Mastercard	[							
	Amount (\$)	Payee addre	ess; City; State	Zip Co	ode					
	\$417.36	2000 Purch								
	X Reimbursement from political contributions intended	Purchase,	NY 10577							
	PURPOSE	Category (S	See Categories listed at the top of this sch	edule)	Description	=		outside of Texas. Complete Schedule T.		
	OF EXPENDITURE	Credit Card	l Payment			Che	eck if Austin	n, TX, officeholder living expense		
	EXI ENDITORE				Credit card paym	nent	for expe	enditures reported in F4		
	expenditure to benefit	Candidate/Office	holder name		Office sought			Office held		
L	C/OH									

# SCHEDULE G

# **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment			Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explain		xpense Wages/Contract Labor		Travel in District Travel Out of District OTHER (enter a category not listed above)		
1	Total pages Schedule G:	2 FILER NAM	E			3	Filer ID (Ethics Commission Filers)		
	Sch: 2/4 Rpt: 164/166	Meyer, Mo	rgan D. (The Honorable)				00069344		
4	Date	5 Payee name	9						
	04/30/2023	Mastercard	t						
6	Amount (\$)	7 Payee addre	ess; City; Stat	e; Zip Co	ode				
	\$344.09	2000 Purcl	hase Street						
	Reimbursement from political contributions intended	Purchase,	NY 10577						
8	PURPOSE	(a) Category (s	See Categories listed at the top of this s	chedule)	(b) Description	Ch	neck if travel outside of Texas. Complete Schedule T.		
	OF EXPENDITURE	Credit Card	d Payment			_	heck if Austin, TX, officeholder living expense		
					Credit card paym	nent	t for expenditures reported in F4		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Office	eholder name		Office sought		Office held		
	Date	Payee name	9						
	05/31/2023	Mastercard	t						
	Amount (\$)	Payee addre	address; City; State; Zip Code						
	\$250.83	2000 Purcl	hase Street						
	X Reimbursement from political contributions intended	Purchase,	NY 10577						
	PURPOSE OF	Category (	See Categories listed at the top of this s	chedule)	Description	=	neck if travel outside of Texas. Complete Schedule T.		
	EXPENDITURE	Credit Card	d Payment		L	_	heck if Austin, TX, officeholder living expense		
					Credit card payir	ient	t for expenditures reported in F4		
	Complete ONLY if direct expenditure to benefit C/OH	   Candidate/Office	eholder name		Office sought		Office held		
	Date	Payee name	9						
	06/30/2023	Mastercard	t						
	Amount (\$)	Payee addre	ess; City; Stat	e; Zip Co	ode				
	\$80.70	2000 Purcl	hase Street						
	X Reimbursement from political contributions intended	Purchase,	NY 10577						
	PURPOSE	Category (s	See Categories listed at the top of this s	chedule)	Description	_	neck if travel outside of Texas. Complete Schedule T.		
	OF EXPENDITURE	Credit Card	d Payment		L	_	heck if Austin, TX, officeholder living expense		
					Credit card paym	nent	t for expenditures reported in F4		
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Office	eholder name		Office sought		Office held		

# SCHEDULE G

# **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense Accounting/Banking

Event Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica				kpense Expense	Travel in District Travel Out of District				
	Credit Card Payment		The Instruction Guide explains	how to co	omplete this form.					
1	Total pages Schedule G: Sch: 3/4 Rpt: 165/166	2 FILER NAMI Mever, Mor	gan D. (The Honorable)			ı	Filer ID 0006934	(Ethics Commission Filers)		
1	Date	5 Payee name	<u> </u>						_	
4	01/31/2023	Visa								
6	Amount (\$)	<b>7</b> Payee addre	ss; City; State	; Zip Co	ode					
	\$1,317.50	900 Metro	Center Blvd.							
	Reimbursement from political contributions intended	Foster City	, CA 94404							
8	PURPOSE	(a) Category (s	ee Categories listed at the top of this sch	nedule)	(b) Description	Che	ck if travel o	utside of Texas. Complete Schedule T	_	
	OF EXPENDITURE	Credit Card	l Payment			Che	ck if Austin,	TX, officeholder living expense		
	LAI ENDITORE				Credit card paym	nent 1	for exper	nditures reported in F4		
9	expenditure to benefit	Candidate/Office	Candidate/Officeholder name Office sought Office held						_	
	C/OH									
	Date	Payee name							_	
	02/28/2023	Visa								
	Amount (\$)	Payee address; City; State; Zip Code								
	\$668.48	900 Metro Center Blvd.								
	Reimbursement from									
	X political contributions intended	Foster City	, CA 94404							
	PURPOSE	Category (s	ee Categories listed at the top of this sch	nedule)	Description	_		utside of Texas. Complete Schedule T	_	
OF EXPENDITURE		Credit Card Payment					Check if Austin, TX, officeholder living expense			
					Credit card paym	nent i	for exper	nditures reported in F4		
		Candidate/Office	holder name		Office sought			Office held	_	
	expenditure to benefit C/OH									
									_	
	Date	Payee name								
	03/31/2023	Visa								
	Amount (\$)	Payee addre	ess; City; State	; Zip Co	ode					
	\$580.98	900 Metro	Center Blvd.							
	Reimbursement from political contributions intended	Foster City	, CA 94404							
	PURPOSE	Category (S	ee Categories listed at the top of this sch	nedule)	Description	Che	ck if travel o	utside of Texas. Complete Schedule T	_	
	OF EXPENDITURE	Credit Card	l Payment			Che	ck if Austin,	TX, officeholder living expense		
					Credit card paym	nent 1	for exper	nditures reported in F4		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	L Candidate/Office	holder name		Office sought			Office held		

# SCHEDULE G

# **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense

Event Expense

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Commi Credit Card Payment			Fees Office Overnead/Rental Expense Food/Beverage Expense Polling Expense Polling Expense Printing Expense Printing Expense Salaries/Wages/Contract Labor		Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)				
	Cicuit Caiu Fayillelli		The Instruction Guide explains	how to co	omplete this form.				
1	Total pages Schedule G:	2 FILER NAM	E			3	Filer ID (Ethics Commission Filers)		
	Sch: 4/4 Rpt: 166/166	Meyer, Mo	rgan D. (The Honorable)				00069344		
4	Date	<b>5</b> Payee name	<u> </u>						
	04/30/2023	Visa							
6	Amount (\$)	7 Payee addre	ess; City; State	; Zip Co	ode				
	\$1,337.10 900 Metro Center Blvd.								
	Reimbursement from								
	X political contributions intended	Foster City	, CA 94404						
8	PURPOSE OF		See Categories listed at the top of this sch	nedule)	(b) Description	=	neck if travel outside of Texas. Complete Schedule T.		
	EXPENDITURE	Credit Card	d Payment		L		neck if Austin, TX, officeholder living expense		
					Credit card paym	nent	for expenditures reported in F4		
9	expenditure to benefit	Candidate/Office	holder name		Office sought		Office held		
	C/OH								
	Date	Payee name							
	05/31/2023	Visa							
	Amount (\$)	Payee address; City; State; Zip Code							
	\$1,096.74	900 Metro Center Blvd.							
	Reimbursement from								
	X political contributions intended	Foster City	, CA 94404						
	PURPOSE	Category (s	See Categories listed at the top of this sch	nedule)	Description	Ch	neck if travel outside of Texas. Complete Schedule T.		
OF EVDENDITUBE		Credit Card	•	,		Ch	neck if Austin, TX, officeholder living expense		
	EXPENDITURE		-		Credit card paym	nent	for expenditures reported in F4		
	Complete ONLY if direct	Candidate/Office	holder name		Office sought		Office held		
	expenditure to benefit C/OH								
L									
	Date	Payee name							
	06/30/2023	Visa							
	Amount (\$)	Payee addre	ess; City; State	; Zip Co	ode				
	\$1,761.11	900 Metro	Center Blvd.						
	Reimbursement from								
	X political contributions intended	Foster City	, CA 94404						
	PURPOSE	Category (S	See Categories listed at the top of this sch	nedule)	Description	_	neck if travel outside of Texas. Complete Schedule T.		
	OF EXPENDITURE	Credit Card	l Payment			_	neck if Austin, TX, officeholder living expense		
					Credit card paym	nent	for expenditures reported in F4		
	expenditure to benefit	Candidate/Office	holder name		Office sought		Office held		
	C/OH								