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 Commi 00069344		2 Total pages fil	ed: 70		
3 CANDIDATE /	MS / MRS / MR	FIRST		MI	OFFICE U	JSE ONLY		
OFFICEHOLDER NAME	The Honorable	Morgan D.			Date Received ELECTRONICA	ALLY FILED		
	NICKNAME	LAST Meyer		SUFFIX	^{···} 01/16/2024			
4 CANDIDATE /	ADDRESS / PO BOX; APT	/ SUITE #; CIT	Υ;	ZIP CODE	Date Hand-delivered o	r 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 ⁻	Γ / SUITE #; CITY	; STA	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	X January 15	30th day before	election	Runoff	15th day after car appointment (office			
	July 15	8th day before 6	election	Exceeded modified reporting limit	Final Report (Atta	ach C/OH-FR)		
9 PERIOD COVERED	Month Day Year 07/01/2023	TH	IROUGH	Month Day 12/31/202	Year 23			
10 ELECTION	ELECTION DATE			ELECTION TYPE				
LEECTION	Month Day Year	I IXIP	rimary	Runoff	Other			
	03/05/2024				Ш			
			eneral	Special				
11 OFFICE	OFFICE HELD (if any)			12 OFFICE SOUGH				
	State Representative Distr	rict 108 Dallas		State Represen	tative District 108			
	•			•				
	GO TO PAGE 2							

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

2 of 170

13 C / OH NAME	Meyer, Morgan D. (T	he Honorable)	14 Filer ID 00069344	(Ethics Commission Filers
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditual expenditual expenditual expenditures may have been made without a difficeholders are required to report this information	the candidate's or office	eholder's knowledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		
	X GENERAL	Texans for Opportunity & Prosperity PAC		
		COMMITTEE ADDRESS		
	SPECIFIC	1108 Lacava		
		Ste. 110-265		
		Austin, TX 78701		
		COMMITTEE CAMPAIGN TREASURER NAME		
		Gantt, Charles		
		COMMITTEE CAMPAIGN TREASURER ADDRES	SS	
		1108 Lacava		
		Ste. 110-265		
		Austin, TX 78701		
16 CONTRIBUTION TOTALS	N PLEDGES, LOANS, CTRONICALLY)	\$ 0.0		
	5)	\$ 249,788.8		
EXPENDITURE TOTALS	3. TOTAL UNITEM		\$ 0.0	
	4. TOTAL POLITIC	CAL EXPENDITURES		\$ 104,077.
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE L RIOD	AST DAY OF THE	\$ 495,562.2
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	PAL AMOUNT OF ALL OUTSTANDING LOANS AS ITING PERIOD	OF THE LAST DAY	\$ 0.0
17 AFFIDAVIT		I swear, or affirm, under penalty true and correct and includes a under Title 15, Election Code.		
		The Honor	rable Morgan D. Mey	yer
			Candidate or Officeho	
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 office.		
Signature of offi	cer administering	Printed name of officer administering	Title of office	r administering oath
Signature or one	oo. dammistoring	. Timed hame of officer duffillistering	Thic of office	. commiscing oan

SUBTOTALS - C/OH

FORM C/OH COVER SHEET PG 3

				3 of 170
18 FILER NAME Meyer, Morga	n D. (The Honorable)	19 Filer ID 00069344	(Ethics Com	mission Filers)
20 SCHEDULE SU NAME OF SCH			SUBTO	TAL AMOUNT
1. X SC	CHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	223,155.00
2. X SC	CHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	26,633.83
3. SC	CHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4. SC	CHEDULE E: LOANS		\$	
5. X SC	CHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	6	\$	85,795.14
6. SC	CHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7. SC	CHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
8. X SC	HEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	9,141.28
9. X SC	CHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	9,141.28
10. SC	CHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$	
11. SC	CHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	DNS	\$	
	CHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS FOR PILER	RETURNED	\$	802.98
			-	

	MONET	ARY POLITICAL CONTRIBUTI	ON	IS		SCHEDUI	LE A1
	The Instru	ction Guide explains how to complete this	for	m.	1	Total pages Schedule A1: Sch: 1/29 Rpt: 4/170	
2	FILER NAME Meyer, Morg	an D. (The Honorable)			3	Filer ID (Ethics Commission 00069344	on Filers)
4	Date 11/29/2023	 Full name of contributor)	7	Amount of Contribution (\$)	\$5,000.00
		Dallas, TX 75205					
8	Principal occu Retired	pation / Job title (See Instructions)	9	Employer (See Instructions Retired	5)		
	Date 12/04/2023	Full name of contributor	#:)		Amount of Contribution (\$)	\$600.00
	Principal occu	DALLAS, TX 75225 pation / Job title (See Instructions)		Employer (See Instructions	 s)		
	Date 12/19/2023	Full name of contributor out-of-state PAC (ID: Allen Boone Humphries Robinson LLP Contributor address; City; State; Zip Code Houston, TX 77027)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u>l</u> s)		
	Date 12/12/2023	Full name of contributor out-of-state PAC (ID: Allen, Marcus Contributor address; City; State; Zip Code Dallas, TX 75225)	•	Amount of Contribution (\$)	\$1,000.00
	Principal occu Physician	pation / Job title (See Instructions)		Employer (See Instructions Retina Institute of Texas			
	Date 10/10/2023	Full name of contributor out-of-state PAC (ID: Apartment Association of Greater Dallas Contributor address; City; State; Zip Code Irving, TX 75038)	•	Amount of Contribution (\$)	\$1,250.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		

	MONET	ARY POLITICAL (CONTRIBUTIO	ONS		SCHEDUI	E A1
	The Instru	ction Guide explains hov	to complete this f	orm.	1	Total pages Schedule A1: Sch: 2/29 Rpt: 5/170	
2	FILER NAME Meyer, Morg	an D. (The Honorable)			3	Filer ID (Ethics Commission 00069344	on Filers)
4	Date 10/10/2023	5 Full name of contributor Associated General Cont6 Contributor address; City; S)	7	Amount of Contribution (\$)	\$1,500.00
_		Austin, TX 78768					
8	Principal occu	pation / Job title (See Instructions	3)	9 Employer (See Instructions	i)		
	Date 12/04/2023	Full name of contributor BP North America Emplo Contributor address; City; S Houston, TX 77079		(200060103		Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions	s)	Employer (See Instructions	5)		
	Date 11/15/2023	Full name of contributor Beck III, Henry Contributor address; City; S	out-of-state PAC (ID#:_			Amount of Contribution (\$)	\$2,500.00
	Principal occu	Dallas, TX 75201 pation / Job title (See Instructions	(5)	Employer (See Instructions	:)		
	Executive Ch	,	,	The Beck Group	,		
	Date 12/15/2023	Full name of contributor Ben E. Keith Company Te Contributor address; City; S Fort Worth, TX 76102				Amount of Contribution (\$)	\$5,000.00
	Principal occu	pation / Job title (See Instructions	s)	Employer (See Instructions	5)		
	Date 12/07/2023	Full name of contributor Bohnsack, James Contributor address; City; S Dallas, TX 75225	out-of-state PAC (ID#:_			Amount of Contribution (\$)	\$250.00
	Principal occu	pation / Job title (See Instructions	s)	Employer (See Instructions)		

	MONET	ARY POLITICAL C	CONTRIBUTIO	N	S		SCHEDUL	E A1
	The Instru	ction Guide explains how	to complete this fo	rr	m.	1	Total pages Schedule A1: Sch: 3/29 Rpt: 6/170	
2	FILER NAME Meyer, Morg	an D. (The Honorable)				3	Filer ID (Ethics Commission 00069344	on Filers)
4	Date 12/15/2023	5 Full name of contributor Boone, Michael6 Contributor address; City; St	out-of-state PAC (ID#: ate; Zip Code)	7	Amount of Contribution (\$)	\$1,000.00
_	Deinainal assu	Dallas, TX 75205		_	Franksian (Caalinatuustiana	<u></u>		
8	Senior Coun	pation / Job title (See Instructions sel	(1)	9	Employer (See Instructions Haynes and Boone, LLF			
	Date 12/06/2023	Full name of contributor Boston, Talmage Contributor address; City; St					Amount of Contribution (\$)	\$500.00
		Dallas, TX 75205						
	Principal occu	pation / Job title (See Instructions	(i)		Employer (See Instructions	5)		
	Date 12/13/2023	Full name of contributor Bradford, Steven Contributor address; City; St	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$500.00
		Dallas, TX 75225						
	Principal occu	pation / Job title (See Instructions	(1)		Employer (See Instructions	s)		
	Date 12/15/2023	Full name of contributor Brooks, Gary Contributor address; City; St Dallas, TX 75205					Amount of Contribution (\$)	\$1,000.00
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions Retired	5)		
	Date 12/09/2023	Full name of contributor Burtner, Keith Contributor address; City; St Dallas, TX 75205	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$100.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
			l					

	MONET	ARY POLITICAL CONTRIBUT	TIONS		SCHEDUI	LE A1
	The Instru	ction Guide explains how to complete thi	s form.	1	Total pages Schedule A1: Sch: 4/29 Rpt: 7/170	
2	FILER NAME Meyer, Morg	an D. (The Honorable)		3	Filer ID (Ethics Commission 00069344	on Filers)
4	Date 12/09/2023	 Full name of contributor	D#:)	7	Amount of Contribution (\$)	\$100.00
		Dallas, TX 75205				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Date 12/04/2023	Full name of contributor X out-of-state PAC (II CVS Health PAC Contributor address; City; State; Zip Code	D#: C00384818)		Amount of Contribution (\$)	\$1,500.00
	Deinsinal assu	Washington, DC 20004	Franksian (Cookastinastinastinas	<u>-/</u>		
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	S)		
	Date 12/14/2023	Full name of contributor out-of-state PAC (II Callison, Glenn Contributor address; City; State; Zip Code	D#:)		Amount of Contribution (\$)	\$500.00
		Plano, TX 75093				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 12/21/2023	Full name of contributor out-of-state PAC (II Carona, Sr., John Contributor address; City; State; Zip Code Dallas, TX 75205	D#:)		Amount of Contribution (\$)	\$5,000.00
	Principal occu President &	pation / Job title (See Instructions)	Employer (See Instructions Associa	s)		
	Date 12/10/2023	Full name of contributor out-of-state PAC (If Chantilis, Samuel Contributor address; City; State; Zip Code Dallas, TX 75205	D#:)		Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
			-			

	MONET	ARY POLITICAL (CONTRIBUTIO	ONS		SCHEDULE A1
	The Instru	ction Guide explains how	to complete this f	orm.	1	Total pages Schedule A1: Sch: 5/29 Rpt: 8/170
2	FILER NAME Meyer, Morg	an D. (The Honorable)			3	Filer ID (Ethics Commission Filers) 00069344
4	Date 12/28/2023	5 Full name of contributor Choctaw Nation of Oklaho6 Contributor address; City; St		_	7	Amount of Contribution (\$) \$2,500.00
		Durant, OK 74702				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	s)	
	Date 12/22/2023	Full name of contributor Clay Cooley Investments, Contributor address; City; St			•	Amount of Contribution (\$) \$10,000.00
	Principal occu	Irving, TX 75015 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> s)	
	Date 12/11/2023	Full name of contributor Coffee, Jr., Roy Contributor address; City; St			•	Amount of Contribution (\$) \$1,000.00
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions Retired	<u>I</u> S)	
	Date 11/30/2023	Full name of contributor Collins-Bratton, Calvert Contributor address; City; St Dallas, TX 75229			•	Amount of Contribution (\$) \$250.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)	
	Date 12/15/2023	Full name of contributor Cooper, Kathleen Contributor address; City; St Dallas, TX 75230	out-of-state PAC (ID#:_		•	Amount of Contribution (\$) \$500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)	

	MONET	ARY POLITICAL (CONTRIBUTIO	ONS		SCHEDUI	LE A1
	The Instru	ction Guide explains hov	to complete this fo	orm.	1	Total pages Schedule A1: Sch: 6/29 Rpt: 9/170	
2	FILER NAME Meyer, Morg	an D. (The Honorable)			3	Filer ID (Ethics Commission 00069344	on Filers)
4	Date 10/10/2023	5 Full name of contributorDallas Police Officer PAC6 Contributor address; City; S			7	Amount of Contribution (\$)	\$1,000.00
_		Dallas, TX 75215	·		Ĺ		
8	Principal occu	pation / Job title (See Instructions	s) 	9 Employer (See Instructions	s)		
	Date 12/28/2023	Full name of contributor David L. Cook Campaign Contributor address; City; S				Amount of Contribution (\$)	\$1,000.00
	Principal occu	Mansfield, TX 76063 pation / Job title (See Instructions	s)	Employer (See Instructions	 s)		
	Date 12/01/2023	Full name of contributor Dedman, Jr., Robert Contributor address; City; S Dallas, TX 75225	out-of-state PAC (ID#:_			Amount of Contribution (\$)	\$5,000.00
	Principal occu President	pation / Job title (See Instructions	s)	Employer (See Instructions	<u>I</u> S)		
	Date 12/12/2023	Full name of contributor Dona, Anthony Contributor address; City; S Dallas, TX 75205				Amount of Contribution (\$)	\$2,500.00
	Principal occu Real Estate	pation / Job title (See Instructions Executive	s)	Employer (See Instructions Greystar	5)		
	Date 12/04/2023	Full name of contributor Dorazil, Robert Contributor address; City; S Dallas, TX 75205	out-of-state PAC (ID#:_			Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions	5)	Employer (See Instructions	5)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 7/29 Rpt: 10/170	
2	FILER NAME Meyer, Morg	an D. (The Honorable)		3	Filer ID (Ethics Commission 00069344	on Filers)
4	Date 12/02/2023	 Full name of contributor)	7	Amount of Contribution (\$)	\$100.00
8	Principal occu	Dallas, TX 75205 pation / Job title (See Instructions)	9 Employer (See Instructions	(;		
_	Date	Full name of contributor out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	12/29/2023	Dunlap, John Contributor address; City; State; Zip Code				\$100.00
	Principal occu	Dallas, TX 75225 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
				,		
	Date 12/29/2023	Full name of contributor out-of-state PAC (ID#:) Durst, Timothy Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$500.00
		Dallas, TX 75209				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	i)		
	Date 12/07/2023	Full name of contributor out-of-state PAC (ID#:_ Edrington, Jack Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$500.00
	Principal occu	Dallas, TX 75225 pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 10/10/2023	Full name of contributor \(\times\) out-of-state PAC (ID#: \(\textit{Q}\) Employees of Raytheon Technologies Corporati Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1,000.00
	Principal occu	Arlington, VA 22209 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		

	MONET	ARY POLITICAL CO	NTRIBUTIO	NS		SCHEDUI	LE A1
	The Instru	ction Guide explains how to	complete this fo	orm.	1	Total pages Schedule A1: Sch: 8/29 Rpt: 11/170	
2	FILER NAME Meyer, Morg	an D. (The Honorable)			3	Filer ID (Ethics Commission 00069344	on Filers)
4	Date 12/21/2023	5 Full name of contributorEye-PAC of the Texas Ophth6 Contributor address; City; State	-		7	Amount of Contribution (\$)	\$1,000.00
		Austin, TX 78701	<u>, </u>				
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instructions	5)		
	Date 10/30/2023	Full name of contributor X Ford Motor Company Civic A Contributor address; City; State Dearborn, MI 48126		00046474		Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> 5)		
	Date 12/21/2023	Full name of contributor Foxworth, Walter Contributor address; City; State Dallas, TX 75230	out-of-state PAC (ID#:; Zip Code			Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u>		
	Consultant			Lumbermen's Association	on (of Texas	
	Date 10/05/2023	Full name of contributor Friends of UT - Dallas PAC Contributor address; City; State Dallas, TX 75240)		Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 10/10/2023	Full name of contributor Friends of the University PAG Contributor address; City; State Austin, TX 78763				Amount of Contribution (\$)	\$2,500.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
			l				

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 9/29 Rpt: 12/170	
2	FILER NAME Meyer, Morg	an D. (The Honorable)		3	Filer ID (Ethics Commission 00069344	n Filers)
4	Date 10/10/2023	 Full name of contributor out-of-state PAC (ID#: Funds Available for Involved Reporters Contributor address; City; State; Zip Code 		7	Amount of Contribution (\$)	\$500.00
Ω	Principal occu	Athens, TX 75751 pation / Job title (See Instructions)	9 Employer (See Instructions			
0	Principal occu	oalion / Job title (See instructions)	9 Employer (See instructions	>)		
	Date 12/05/2023	Full name of contributor out-of-state PAC (ID#: Gale, Karin Contributor address; City; State; Zip Code		•	Amount of Contribution (\$)	\$500.00
		Dallas, TX 75225				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	S)		
	Date 12/15/2023	Full name of contributor out-of-state PAC (ID#: Galloway, B Contributor address; City; State; Zip Code		•	Amount of Contribution (\$)	\$250.00
		Dallas, TX 75225				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 12/15/2023	Contributor address; City; State; Zip Code		•	Amount of Contribution (\$)	\$500.00
	Principal occu	Dallas, TX 75254 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> s)		
	Date 12/22/2023	Full name of contributor out-of-state PAC (ID#: Glatstein, David Contributor address; City; State; Zip Code Frisco, TX 75034		•	Amount of Contribution (\$)	\$100.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> S)		
			1			

	MONET	ARY POLITICAL CONTRIB		SCHEDUI	LE A1		
	The Instruc	ction Guide explains how to complete	this forr	n.	1	Total pages Schedule A1: Sch: 10/29 Rpt: 13/170	
2	FILER NAME Meyer, Morg	an D. (The Honorable)			3	Filer ID (Ethics Commission 00069344	on Filers)
4	Date 12/29/2023	 Full name of contributor out-of-state PA Goff, Travis Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$)	\$1,000.00
•	Dringing Lagge	Fort Worth, TX 76102	lo.	Employer (Coa Instructions			
8	Finance	pation / Job title (See Instructions)	9	Employer (See Instructions Goff Capital, Inc.)		
	Date 12/15/2023	Full name of contributor out-of-state PA Goggans, JD Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$100.00
	Principal occu	Dallas, TX 75214 pation / Job title (See Instructions)		Employer (See Instructions			
	i illicipai occu	oution 7 300 title (See mandellons)		Employer (See instructions	')		
	Date 11/28/2023	Full name of contributor out-of-state PA Goodman, John Contributor address; City; State; Zip Code	AC (ID#:)		Amount of Contribution (\$)	\$500.00
		Dallas, TX 75225					
	Principal occu	oation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 10/05/2023	Full name of contributor out-of-state PAHMWK LLC Contributor address; City; State; Zip Code Austin, TX 78701)		Amount of Contribution (\$)	\$250.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 12/15/2023	Full name of contributor x out-of-state PA HNTB Holdings Ltd. PAC Contributor address; City; State; Zip Code Kansas City, MO 64105	AC (ID#: <u>C00</u>	386029		Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	()		

	MONET	ARY POLITICAL C		SCHEDULE A1			
	The Instru	ction Guide explains how t	o complete this for	m.	1	Total pages Schedule A1: Sch: 11/29 Rpt: 14/170	
2	FILER NAME Meyer, Morg	an D. (The Honorable)			3	Filer ID (Ethics Commission 00069344	on Filers)
4	Date 10/10/2023	5 Full name of contributor	Halliburton Company PAC Contributor address; City; State; Zip Code				\$1,000.00
Ω	Principal occu	Houston, TX 77072 pation / Job title (See Instructions)	ام	Employer (See Instructions			
0	r illicipai occu	pation / Job title (See Instructions)	3	Employer (See instructions	')		
	Date 12/11/2023	Full name of contributor Hanna, Steve Contributor address; City; Stat)		Amount of Contribution (\$)	\$250.00
		Dallas, TX 75205					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 12/11/2023	Full name of contributor Harris, David Contributor address; City; Stat	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$500.00
		Dallas, TX 75225					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u>		
	Date 12/11/2023	Full name of contributor Hobson, H. Lee Contributor address; City; Stat Dallas, TX 75219)		Amount of Contribution (\$)	\$2,500.00
	Principal occu Managing Pa	pation / Job title (See Instructions) artner		Employer (See Instructions Highside Capital Manag		ent	
	Date 10/06/2023	Full name of contributor HomePAC of Texas Contributor address; City; Stat Austin, TX 78701	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$1,500.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	()		
			L				

	MONET	ARY POLITICAL CO		SCHEDUI	E A1		
	The Instruc	ction Guide explains how to	o complete this forn	n.	1	Total pages Schedule A1: Sch: 12/29 Rpt: 15/170	
2	FILER NAME Meyer, Morg	an D. (The Honorable)			3	Filer ID (Ethics Commission 00069344	on Filers)
4	Date 12/15/2023	Full name of contributor out-of-state PAC (ID#:) Hunt, Nancy Ann Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$5,000.00
_	Delicalizado a	Dallas, TX 75201		Faralana (One batantia			
8	Retired	pation / Job title (See Instructions)		Employer (See Instructions Retired)		
	Date 12/15/2023	Full name of contributor Hunt, Ray Contributor address; City; State	out-of-state PAC (ID#: e; Zip Code			Amount of Contribution (\$)	\$5,000.00
	Dringinal accu	Dallas, TX 75201		Employer (See Instructions			
	Principal occupation / Job title (See Instructions) Executive Chairman Employer (See Instructions) Hunt Consolidated, Inc.)			
	Date 12/01/2023	Full name of contributor Isenberg, Lori Contributor address; City; State	out-of-state PAC (ID#:e; Zip Code			Amount of Contribution (\$)	\$500.00
		Dallas, TX 75225					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date 12/04/2023	Full name of contributor JES Holding LLC - Texas De Contributor address; City; State Columbus, MO 65203				Amount of Contribution (\$)	\$2,500.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date 12/01/2023	Full name of contributor Jackson, John Michael Contributor address; City; State Dallas, TX 75225	out-of-state PAC (ID#: e; Zip Code			Amount of Contribution (\$)	\$250.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
			1				

	MONET	ARY POLITICAL CO		SCHEDUI	E A1		
	The Instru	ction Guide explains how to	o complete this for	n.	1	Total pages Schedule A1: Sch: 13/29 Rpt: 16/170	
2	FILER NAME Meyer, Morg	an D. (The Honorable)			3	Filer ID (Ethics Commission 00069344	on Filers)
4	Date 12/04/2023	6 Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$500.00
		Dallas, TX 75205					
8	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions	()		
	Date 10/10/2023	Full name of contributor Leiser, Tom Contributor address; City; State	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$1,000.00
	Principal occu	Dallas, TX 75225 pation / Job title (See Instructions)		Employer (See Instructions			
	Commercial			Bandera Ventures	')		
	Date 12/01/2023	Full name of contributor Leslie, Thomas Contributor address; City; State	out-of-state PAC (ID#:e; Zip Code)		Amount of Contribution (\$)	\$500.00
		Dallas, TX 75209					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date 10/10/2023	Full name of contributor Linebarger Goggan Blair & S Contributor address; City; State Austin, TX 78760)		Amount of Contribution (\$)	\$2,500.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	()		
	Date 10/10/2023	Full name of contributor Locke Lord LLP Contributor address; City; State Dallas, TX 75201	out-of-state PAC (ID#:e; Zip Code			Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
			1				

	MONET	ARY POLITICAL CONTRIBUTIO		SCHEDULE A1		
	The Instruc	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 14/29 Rpt: 17/170	
2	FILER NAME Meyer, Morg	an D. (The Honorable)		3	Filer ID (Ethics Commission 00069344	n Filers)
4	Date 12/28/2023	 Full name of contributor		7	Amount of Contribution (\$)	\$500.00
0	Principal occu	Austin, TX 78701 pation / Job title (See Instructions)	Employer (See Instructions	·,		
0	Principal occu	oalion / Job title (See instructions)	e Employer (See instructions	·)		
	Date 12/05/2023	Full name of contributor out-of-state PAC (ID#: Longhofer, Matt Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$500.00
		Dallas, TX 75225				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 12/28/2023	Full name of contributor out-of-state PAC (ID#:_Longwell, Harry Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$500.00
		Dallas, TX 75220				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	;)		
	Date 08/20/2023	Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$500.00
	Principal occu	Dallas, TX 75206 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> ;)		
	Date 12/15/2023	Full name of contributor out-of-state PAC (ID#:_Lundy, Peggy Contributor address; City; State; Zip Code Dallas, TX 75218)		Amount of Contribution (\$)	\$50.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> 5)		

	MONET	ARY POLITICAL CONTRIBU		SCHEDU	ULE A1		
	The Instru	ction Guide explains how to complete th	is fo	rm.	1	Total pages Schedule A1: Sch: 15/29 Rpt: 18/170	
2	FILER NAME	D (The Heavenhle)			3	Filer ID (Ethics Commission	on Filers)
	meyer, morg	an D. (The Honorable)			L	00069344	
4	Date 12/29/2023	Full name of contributor	ID#:		7	Amount of Contribution (\$)	\$1,000.00
		Dallas, TX 75230					
8	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions	s)		
	Private Inves	stments		Self Employed			
	Date	Full name of contributor	ID#:)	Т	Amount of Contribution (\$)	
	12/01/2023	Manning, Sam				.,	\$100.00
					ł		
		Continuation address, City, State, 21p Code					
		Dallas, TX 75219					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date	Full name of contributor	ID#:)	Π	Amount of Contribution (\$)	
	12/29/2023	McCoy, Medford		,		`,	\$50.00
		Contributor address; City; State; Zip Code					
		Dallas, TX 75205					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date	Full name of contributor out-of-state PAC (ID#:)	Π	Amount of Contribution (\$)	
	12/07/2023	McCoy, Medford					\$100.00
		Dallas TV 75205					
	Principal occu	Dallas, TX 75205 pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> s)		
	Dete	Full pages of contributor	· · · · · · · ·	00005040	_	Associated Contribution (ft)	
	Date	Full name of contributor X out-of-state PAC (ID#: <u>CC</u>)0225342)		Amount of Contribution (\$)	фE00 00
	10/10/2023	McGuire Woods Federal PAC Fund					\$500.00
		Contributor address; City; State; Zip Code					
		Richmond, VA 23219					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		

	MONET	ARY POLITICAL C		SCHEDUI	CHEDULE A1		
	The Instru	ction Guide explains how t	to complete this fo	rm.	1	Total pages Schedule A1: Sch: 16/29 Rpt: 19/170	
2	FILER NAME Meyer, Morg	an D. (The Honorable)			3	Filer ID (Ethics Commission 00069344	on Filers)
4	Date 07/17/2023	 Full name of contributor McGuire Woods Federal PA Contributor address; City; State 			7	Amount of Contribution (\$)	\$500.00
_		Richmond, VA 23219					
8	Principal occu	pation / Job title (See Instructions)	!	9 Employer (See Instructions	5)		
	Date 10/10/2023	Full name of contributor Metropolitan Anesthesia PA Contributor address; City; Stat)		Amount of Contribution (\$)	\$1,000.00
	Deinsinal assu	Dallas, TX 75219		Frankston (Cookstants)	_		
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 12/11/2023	Full name of contributor [Millard, Jr., William Contributor address; City; Stat	out-of-state PAC (ID#: e; Zip Code			Amount of Contribution (\$)	\$300.00
		Dallas, TX 75225					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	i)		
	Date 10/10/2023	Full name of contributor Mitchell, James Contributor address; City; Stat Dallas, TX 75225)		Amount of Contribution (\$)	\$5,000.00
	Principal occu Attorney	pation / Job title (See Instructions)		Employer (See Instructions Payne Mitchell Law Gro			
	Date 10/05/2023	Full name of contributor Moak Casey PAC Contributor address; City; State Austin, TX 78746	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	()		
			l				

	MONEI	ARY POLITICAL CONTRIBUTIO		SCHEDUL	■ A1	
	The Instru	ction Guide explains how to complete this fo	orm.		Total pages Schedule A1: Sch: 17/29 Rpt: 20/170	
2	FILER NAME Meyer, Morg	an D. (The Honorable)		- 1	Filer ID (Ethics Commission 00069344	n Filers)
4	Date 11/28/2023	 Full name of contributor		7	Amount of Contribution (\$)	\$2,500.00
8	Principal occu Attorney	Dallas, TX 75205 pation / Job title (See Instructions)	Employer (See Instructions Frost Brown Todd LLP			
	Date 12/27/2023	Full name of contributor out-of-state PAC (ID#: Moyers, James A. Contributor address; City; State; Zip Code Dallas, TX 75219			Amount of Contribution (\$)	\$25.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	ns)		
	Date 12/11/2023	Full name of contributor out-of-state PAC (ID#:			Amount of Contribution (\$)	\$1,000.00
	Principal occu Real Estate	Dallas, TX 75205 pation / Job title (See Instructions)	Employer (See Instructions	ns)		
	Date 10/10/2023	Full name of contributor			Amount of Contribution (\$)	\$250.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	ns)		
	Date 11/07/2023	Full name of contributor X out-of-state PAC (ID#: CINABIP PAC Contributor address; City; State; Zip Code Cranford, NJ 07016	00283135		Amount of Contribution (\$)	\$250.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	ns)		

	MONET	ARY POLITICAL (SCHEDULE A1				
	The Instru	ction Guide explains hov	to complete this f	orm.	1	Total pages Schedule A1: Sch: 18/29 Rpt: 21/170	
2	FILER NAME Meyer, Morg	an D. (The Honorable)			3	Filer ID (Ethics Commission 00069344	on Filers)
4	Date 12/04/2023	5 Full name of contributor NCHA's Texas Events PA6 Contributor address; City; S)	7	Amount of Contribution (\$)	\$2,500.00
8	Principal occu	Fort Worth, TX 76107 pation / Job title (See Instructions	2)	9 Employer (See Instructions	-, 		
_	Date	Full name of contributor	out-of-state PAC (ID#:_)	<u>''</u>	Amount of Contribution (\$)	
	12/15/2023	Nau, III, John Contributor address; City; S	tate; Zip Code				\$5,000.00
	Principal occu	Houston, TX 77219 pation / Job title (See Instructions	2)	Employer (See Instructions	.) 		
	Chairman &) 	Silver Eagle Beverages	,		
	Date 12/14/2023	Full name of contributor out-of-state PAC (ID#:) Nettune, Alex Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$500.00
		Dallas, TX 75205					
	Principal occu	pation / Job title (See Instructions	5)	Employer (See Instructions	5)		
	Date 12/01/2023	Full name of contributor Neumann, David Contributor address; City; S	out-of-state PAC (ID#:_			Amount of Contribution (\$)	\$100.00
	Principal occu	Dallas, TX 75230 pation / Job title (See Instructions	s)	Employer (See Instructions	 - s)		
	Date 12/03/2023	Full name of contributor Neumann, David Contributor address; City; S	out-of-state PAC (ID#:_			Amount of Contribution (\$)	\$500.00
	Principal occu	Dallas, TX 75230 pation / Job title (See Instructions	s)	Employer (See Instructions) i)		

	MONET	ARY POLITICAL C	NS 	SCHEDULE A1			
	The Instru	ction Guide explains how	to complete this fo	rm.	1	Total pages Schedule A1: Sch: 19/29 Rpt: 22/170	
2	FILER NAME Meyer, Morg	an D. (The Honorable)			3	Filer ID (Ethics Commission 00069344	on Filers)
4	Date 12/29/2023						\$50.00
		Dallas, TX 75206					
8	Principal occu	pation / Job title (See Instructions)	g	Employer (See Instructions	s)		
	Date 11/28/2023	Full name of contributor Oncor State PAC Contributor address; City; State	out-of-state PAC (ID#: te; Zip Code)	•	Amount of Contribution (\$)	\$2,500.00
	Dringing Lagge	Dallas, TX 75202		Frankrija (Can kastu stiena	<u></u>		
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 12/06/2023	Full name of contributor Oneacre, Lee Contributor address; City; Star	out-of-state PAC (ID#: te; Zip Code)	•	Amount of Contribution (\$)	\$150.00
		Dallas, TX 75230					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	s)		
	Date 11/29/2023	Full name of contributor Osborne, David L. Contributor address; City; Star Dallas, TX 75243	out-of-state PAC (ID#: te; Zip Code		•	Amount of Contribution (\$)	\$1,000.00
	Principal occu President/Cl	pation / Job title (See Instructions) EO		Employer (See Instructions United Chester Industrie	-	Inc.	
	Date 12/05/2023	Full name of contributor Ozanne, Linda Contributor address; City; Star Dallas, TX 75206	out-of-state PAC (ID#:)	•	Amount of Contribution (\$)	\$1,000.00
	Principal occu Financial Se	pation / Job title (See Instructions)		Employer (See Instructions Probity Advisors, Inc.	5)		

MONET	ARY POLITICAL C	NS		SCHEDUI	E A1	
The Instruc	ction Guide explains how	to complete this fo	orm.	1	Total pages Schedule A1: Sch: 20/29 Rpt: 23/170	
2 FILER NAME Meyer, Morg	an D. (The Honorable)			3	Filer ID (Ethics Commission 00069344	on Filers)
4 Date 10/10/2023		PAC of The Independent Insurance Agents of Texas Contributor address; City; State; Zip Code				\$250.00
8 Principal occu	Austin, TX 78768 pation / Job title (See Instructions)		9 Employer (See Instructions)		
Date 12/07/2023	Full name of contributor Pasierb, Clarice Contributor address; City; Sta	out-of-state PAC (ID#:_ te; Zip Code			Amount of Contribution (\$)	\$100.00
Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
Date 11/20/2023	Full name of contributor Payne, William Contributor address; City; Sta	out-of-state PAC (ID#:_			Amount of Contribution (\$)	\$5,000.00
Principal occu	Dallas, TX 75219 pation / Job title (See Instructions)		Employer (See Instructions Druid Hills Capital)		
Date 11/27/2023	Full name of contributor Perot, Jr., Ross Contributor address; City; Sta	out-of-state PAC (ID#: te; Zip Code)		Amount of Contribution (\$)	\$5,000.00
Principal occu Chairman	Dallas, TX 75219 pation / Job title (See Instructions)		Employer (See Instructions The Perot Companies)		
Date 11/29/2023	Full name of contributor Popolo, Joe Contributor address; City; Sta	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$5,000.00
Principal occu CEO	pation / Job title (See Instructions)		Employer (See Instructions Charles & Potomac Cap		, LLC	
		-				

	MONET	ARY POLITICAL (SCHEDULE A1			
	The Instru	ction Guide explains hov	to complete this fo	orm.	1	Total pages Schedule A1: Sch: 21/29 Rpt: 24/170	
2	FILER NAME Meyer, Morg	an D. (The Honorable)			3	Filer ID (Ethics Commission 00069344	on Filers)
4	Date 11/16/2023	5 Full name of contributor Robinson, Shelby6 Contributor address; City; S	out-of-state PAC (ID#:_		7	Amount of Contribution (\$)	\$5.00
_		Niceville, FL 32578			L		
8	Principal occu	pation / Job title (See Instructions	3)	9 Employer (See Instructions	s)		
	Date 11/21/2023	Full name of contributor Robinson, Shelby Contributor address; City; S				Amount of Contribution (\$)	\$5.00
	Principal occu	Niceville, FL 32578 pation / Job title (See Instructions	s)	Employer (See Instructions	 s)		
	Date 11/29/2023	Full name of contributor Robuck, Joel Contributor address; City; S	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$2,500.00
		Dallas, TX 75205	` I		Ĺ		
	Retired	pation / Job title (See Instructions	5)	Employer (See Instructions Retired	S)		
	Date 12/11/2023	Full name of contributor Rogers, Stephen Contributor address; City; S Dallas, TX 75201				Amount of Contribution (\$)	\$1,000.00
	•	pation / Job title (See Instructions Real Estate Investment	5)	Employer (See Instructions Self	s)		
	Date 12/15/2023	Full name of contributor Roughneen, Cherie Contributor address; City; S Dallas, TX 75205				Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions	s)	Employer (See Instructions	s)		

	MONET	ARY POLITICAL (S		SCHEDULE A1			
	The Instru	ction Guide explains hov	v to complete this fo	rn	n.	1	Total pages Schedule A1: Sch: 22/29 Rpt: 25/170	
2	FILER NAME Meyer, Morg	an D. (The Honorable)				3	Filer ID (Ethics Commissi 00069344	on Filers)
4	Date 12/15/2023	5 Full name of contributor Rowling, Robert6 Contributor address; City; S	out-of-state PAC (ID#: tate; Zip Code)	7	Amount of Contribution (\$)	\$25,000.00
		Dallas, TX 75219						
8	Principal occu Owner	pation / Job title (See Instruction	s) 9		Employer (See Instructions TRT Holdings	5)		
	Pate Full name of contributor out-of-state PAC (ID#:) Rowling, Travis Contributor address; City; State; Zip Code					•	Amount of Contribution (\$)	\$10,000.00
	Dringing occur	Dallas, TX 75205			Employer (See Instructions	<u></u>		
	President President	pation / Job title (See Instruction	5)		Employer (See Instructions TRT Holdings	s)		
	Date 10/06/2023						Amount of Contribution (\$)	\$500.00
		Austin, TX 78749						
	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 (\$)	\$1,000.00
	Principal occu Credit Sales	pation / Job title (See Instruction	s)		Employer (See Instructions Wetlands Management,		P	
	Date 12/15/2023						Amount of Contribution (\$)	\$2,500.00
	Principal occu President	pation / Job title (See Instruction	Employer (See Instructions Sewell Automotive Com		nies			
						-		

	MONET	ARY POLITICAL (SCHEDUI	SCHEDULE A1		
	The Instru	ction Guide explains hov	v to complete this fo	orm.	1	Total pages Schedule A1: Sch: 23/29 Rpt: 26/170	
2	FILER NAME Meyer, Morg	an D. (The Honorable)			3	Filer ID (Ethics Commission 00069344	on Filers)
4	Date 10/10/2023	5 Full name of contributor Shapiro Linn Strategic Co6 Contributor address; City; S)	7	Amount of Contribution (\$)	\$500.00
_		Austin, TX 78734	, ,		<u> </u>		
8	Principal occu	pation / Job title (See Instruction:	5)	9 Employer (See Instructions	S)		
	Date 12/09/2023					Amount of Contribution (\$)	\$500.00
		Dallas, TX 75225					
	Principal occu	pation / Job title (See Instruction:	s)	Employer (See Instructions	S)		
	Date 12/15/2023	Full name of contributor out-of-state PAC (ID#:) Simmons, Annette Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$1,000.00
		Dallas, TX 75206					
	Principal occu Retired	pation / Job title (See Instruction	s)	Employer (See Instructions Retired	s)		
	Date Full name of contributor out-of-state PAC (ID#:) 10/05/2023 Smith, Robert Contributor address; City; State; Zip Code Dallas, TX 75230				•	Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instruction	5)	Employer (See Instructions	5)		
	Date 12/19/2023	Full name of contributor out-of-state PAC (ID#:) Smith, Troy Contributor address; City; State; Zip Code Dallas, TX 75225				Amount of Contribution (\$)	\$50.00
	Principal occu	pation / Job title (See Instruction	5)	Employer (See Instructions	5)		

	MONET	ARY POLITICAL (ONS		SCHEDULE A1		
	The Instru	ction Guide explains hov	to complete this f	orm.	1		
2	FILER NAME Meyer, Morg	an D. (The Honorable)			3	Filer ID (Ethics Commission 00069344	on Filers)
4	Date 12/13/2023	5 Full name of contributor Solomon Jr., Charles6 Contributor address; City; S	out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	\$500.00
		Dallas, TX 75205					
8	Principal occu	pation / Job title (See Instructions	8)	9 Employer (See Instructions	5)		
	Date 10/10/2023	Full name of contributor Southwest Airlines Co. Fr Contributor address; City; S		Amount of Contribution (\$)	\$1,500.00		
	Principal occu	Dallas, TX 75235 pation / Job title (See Instructions	2)	Employer (See Instructions	s) 		
	i ilicipai occu	pation / Job title (See Instructions	3)				
	Date 12/15/2023	Full name of contributor out-of-state PAC (ID#:) Spackman, Thomas Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$1,000.00
		Dallas, TX 75225					
	Principal occu Attorney	pation / Job title (See Instructions	s)	Employer (See Instructions Mexcap	s) 		
	Date Full name of contributor out-of-state PAC (ID#:) 12/11/2023 Stalnaker, David Contributor address; City; State; Zip Code Dallas, TX 75225					Amount of Contribution (\$)	\$2,500.00
	Principal occu Wealth Mana	pation / Job title (See Instructions ager	5)	Employer (See Instructions Symmetry Capital Advis		LLC	
	Date 12/29/2023	Full name of contributor Stern, Andy Contributor address; City; S Dallas, TX 75248			Amount of Contribution (\$)	\$100.00	
	Principal occu	pation / Job title (See Instructions	5)	Employer (See Instructions	5)		

	MONET	ARY POLITICAL CONTR		SCHEDULE A1			
	The Instru	ction Guide explains how to comp	olete this forr	n.	1	Total pages Schedule A1: Sch: 25/29 Rpt: 28/170	
2	FILER NAME Meyer, Morg	an D. (The Honorable)			3	Filer ID (Ethics Commission 00069344	on Filers)
4	Date 10/06/2023	 Full name of contributor out-of-s Stewart, Thomas Contributor address; City; State; Zip Co 			7	Amount of Contribution (\$)	\$1,000.00
_		Dallas, TX 75225			_		
8	Self			Employer (See Instructions Self	5)		
	Date 12/01/2023	Full name of contributor out-of-state PAC (ID#:) Swords, John Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$1,000.00
	Deinsinal sass	Dallas, TX 75205		Employer (See Instructions	<u></u>		
	Principal occupation / Job title (See Instructions) CPA Employer (See Instructions) Self						
	Date Full name of contributor out-of-state PAC (ID#:					Amount of Contribution (\$)	\$2,500.00
		Dallas, TX 78768					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date Full name of contributor out-of-state PAC (ID#:) 12/12/2023 Teleki, Kristian Contributor address; City; State; Zip Code Argyle, TX 76226					Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 11/30/2023	Full name of contributor out-of-state PAC (ID#:) Terry, Mike Contributor address; City; State; Zip Code Dallas, TX 75244				Amount of Contribution (\$)	\$2,500.00
	Principal occu President	pation / Job title (See Instructions)		Employer (See Instructions M. Terry Enterprises	5)		
			•				

	MONET	ARY POLITICAL CONTRIBUTIO		SCHEDULE A1		
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 26/29 Rpt: 29/170	
2	FILER NAME Meyer, Morg	an D. (The Honorable)		3	Filer ID (Ethics Commission 00069344	on Filers)
4	Date 10/10/2023	 Full name of contributor		7	Amount of Contribution (\$)	\$1,500.00
_	Daine in all access	Austin, TX 78701	O Familia de Constantina	_		
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 10/10/2023	Full name of contributor out-of-state PAC (ID#: Texas Instruments Incorporated PAC Contributor address; City; State; Zip Code		Amount of Contribution (\$)	\$1,000.00	
	Principal occu	Dallas, TX 75243 pation / Job title (See Instructions)	Employer (See Instructions	., 		
	r inicipal occu	pation / Job title (See instructions)	Employer (See instructions	,		
	Date Full name of contributor out-of-state PAC (ID#:) 12/20/2023 Texas Insurance Professionals PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$5,000.00	
		Houston, TX 77066				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date Full name of contributor out-of-state PAC (ID#:) 10/10/2023 Texas Medical Association PAC Contributor address; City; State; Zip Code Austin, TX 78701				Amount of Contribution (\$)	\$250.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 10/06/2023	Full name of contributor out-of-state PAC (ID#:_ Texas Society of Anesthesiologists PAC Contributor address; City; State; Zip Code Austin, TX 78701			Amount of Contribution (\$)	\$1,500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		

	MONET	ARY POLITICAL (ONS		SCHEDULE A1		
	The Instru	ction Guide explains hov	to complete this fo	orm.	1	Total pages Schedule A1: Sch: 27/29 Rpt: 30/170	
2	FILER NAME Meyer, Morg	gan D. (The Honorable)			3	Filer ID (Ethics Commission 00069344	on Filers)
4	Date 10/10/2023	5 Full name of contributorTexas State Association of Contributor address; City; S	-	Committee	7	Amount of Contribution (\$)	\$1,000.00
8	Principal occu	Austin, TX 78701 pation / Job title (See Instructions	s)	9 Employer (See Instructions	<u> </u>		
	Date 10/10/2023	Full name of contributor Texas Trial Lawyers Asso Contributor address; City; S Austin, TX 78701		Amount of Contribution (\$)	\$5,000.00		
	Principal occu	pation / Job title (See Instructions	Employer (See Instructions	i)			
	Date 12/04/2023	Full name of contributor				Amount of Contribution (\$)	\$2,500.00
	Principal occu	Ada, OK 74820 pation / Job title (See Instructions	5)	Employer (See Instructions	5)		
	Date Full name of contributor out-of-state PAC (ID#: 10/05/2023 The Herrera Law Firm Contributor address; City; State; Zip Code					Amount of Contribution (\$)	\$1,000.00
	Principal occu	San Antonio, TX 78207 pation / Job title (See Instructions	5)	Employer (See Instructions	5)		
	Date 12/14/2023	Full name of contributor out-of-state PAC (ID#:) Tibbals, Mike Contributor address; City; State; Zip Code Dallas, TX 75251				Amount of Contribution (\$)	\$1,000.00
	Principal occu Attorney	pation / Job title (See Instructions	5)	Employer (See Instructions FMD)		

	MONET	ARY POLITICAL (SCHEDULE A1				
	The Instru	ction Guide explains how	v to complete this fo	ori	m.	1	Total pages Schedule A1: Sch: 28/29 Rpt: 31/170	
2	FILER NAME Meyer, Morg	an D. (The Honorable)				3	Filer ID (Ethics Commission 00069344	on Filers)
4	Date 12/29/2023	5 Full name of contributor Tiffany, Jr., Bill6 Contributor address; City; S	out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	\$1,000.00
_		Dallas, TX 75225	, 1	_	5 1 (0 1 1 1	<u></u>		
8	CEO	pation / Job title (See Instruction	5)	9	Employer (See Instructions Avix Aero	5)		
	Date 10/10/2023	10/10/2023 Vistra Employee PAC of Vistra Corp. Contributor address; City; State; Zip Code					Amount of Contribution (\$)	\$3,500.00
	Principal occu	Irving, TX 75039 pation / Job title (See Instruction	s)		Employer (See Instructions	 ;)		
						_		
	Date Full name of contributor out-of-state PAC (ID#:) 12/06/2023 Walter, Jeffrey Contributor address; City; State; Zip Code					Amount of Contribution (\$)	\$500.00	
	Dringing aggr	Dallas, TX 75225 pation / Job title (See Instruction	o) I		Employer (Cool patruations	<u></u>		
	Fillicipal occu	pation / 300 title (See instruction	5)		Employer (See Instructions) 		
	Date Full name of contributor out-of-state PAC (ID#:) 08/17/2023 Weathers, Rachel Contributor address; City; State; Zip Code Dallas, TX 75229						Amount of Contribution (\$)	\$20.00
	Principal occu	pation / Job title (See Instruction	s)		Employer (See Instructions	<u>l </u>		
	Date 12/12/2023	Full name of contributor out-of-state PAC (ID#:) Webb, Crayton Contributor address; City; State; Zip Code Dallas, TX 75209					Amount of Contribution (\$)	\$1,000.00
	Principal occu Public Relati	pation / Job title (See Instruction ons	s)		Employer (See Instructions Sunwest PR	5)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDULE A1		
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 29/29 Rpt: 32/170		
2	FILER NAME Meyer, Morg	an D. (The Honorable)		3	Filer ID (Ethics Commission 00069344	on Filers)	
4	Date 12/15/2023	 Full name of contributor)	7	Amount of Contribution (\$)	\$2,500.00	
_		Dallas, TX 75219					
8	Principal occu CEO	pation / Job title (See Instructions)	9 Employer (See Instructions Commit Partnership)			
	Date 07/20/2023	Full name of contributor out-of-state PAC (ID#:_ Williamson, Betty Contributor address; City; State; Zip Code		Amount of Contribution (\$)	\$500.00		
	Principal occu	Dallas, TX 75225 pation / Job title (See Instructions)	Employer (See Instructions)			
		paner, cos ano (cos menastro)		,			
Date Full name of contributor out-of-state PAC (ID#:) 12/12/2023 Williamson, Betty Contributor address; City; State; Zip Code					Amount of Contribution (\$)	\$500.00	
		Dallas, TX 75225					
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)			
	Date 12/13/2023	Full name of contributor out-of-state PAC (ID#:_ Witten, Ron Contributor address; City; State; Zip Code Dallas, TX 75225			Amount of Contribution (\$)	\$500.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)			

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instru	iction Guide explains how to complete this f	orm.	1 Total pages Schedule A2: Sch: 1/2 Rpt: 33/170					
2 FILER NAME			3 Filer ID (Ethics Commission Filers)					
	gan D. (The Honorable)		00069344					
4 TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	UTIONS	\$					
5 Date	6 Full name of contributor ut-of-state PAC (ID#:)	8 Amount of 9 In-kind contribution					
09/12/2023	Associated Republicans of Texas Campaign Fu	nd	contribution (\$) description					
	7 Contributor address; City; State; Zip Code		\$2,000.00 In Kind Campaign Expenditure: Campaign Digital Advertising					
	Austin, TX 78701		Check if travel outside of Texas. Complete Schedule T.					
10 Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON						
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contributor's job title	(FOR JUDICIAL) (See instructions)					
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)					
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)							
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of In-kind contribution					
10/03/2023	Associated Republicans of Texas Campaign Ful	nd	contribution (\$) description					
	Contributor address; City; State; Zip Code		\$1,000.00 In Kind Campaign					
			Expenditure: Campaign Digital Advertising					
	Austin, TX 78701		Check if travel outside of Texas. Complete Schedule T.					
Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON						
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title (FOR JUDICIAL) (See instructions)						
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contributor's spouse (if any) (FOR JUDICIAL)						
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)							
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of In-kind contribution					
09/27/2023	Dade Phelan Campaign		contribution (\$) description					
	Contributor address; City; State; Zip Code		\$18,500.00 Polling					
	, ,, ,							
			į į					
	Austin, TX 78763		Check if travel outside of Texas. Complete Schedule T.					
Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	I-JUDICIAL) (See instructions)					
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)					
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)					
المديدالمفسوم الأ	in a shild law firm of neverther (if any) (FOR HIDIOLES)							
IT CONTRIBUTOR	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)							

NON-MONETARY (IN-KIND) POLITICAL SCHEDULE A2 **CONTRIBUTIONS** 1 Total pages Schedule A2: The Instruction Guide explains how to complete this form. Sch: 2/2 Rpt: 34/170 FILER NAME 3 Filer ID (Ethics Commission Filers) Meyer, Morgan D. (The Honorable) 00069344 \$ TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS Full name of contributor 9 In-kind contribution out-of-state PAC (ID#: Amount of contribution (\$) description 10/06/2023 Francis, Jim \$5,133.83 Catering and valet for 7 Contributor address; City; State; Zip Code campaign fundraising event. Dallas, TX 75205 Check if travel outside of Texas. Complete Schedule T. 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) (See instructions) 11 Employer (FOR NON-JUDICIAL) Retired Retired 12 Contributor's principal occupation (FOR JUDICIAL) 13 Contributor's job title (FOR JUDICIAL) 14 Contributor's employer/law firm (FOR JUDICIAL) 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL) 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

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

	Candidate/Officeholder/Politica			Git/Awards/Memorials Legal Services	s Expense	Salaries/W		e /Contract Labor		OTHER (enter a	strict category not listed ab	ove)
	Credit Card Payment			The Instruction G	uide explains h	now to cor	mple	te this form.				
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	(Ethics Commissi	on Filers)
	Sch: 1/76 Rpt: 35/170		Meyer, Morç	gan D. (The Ho	norable)					00069344		
4	Date	5	Payee name									
	08/15/2023		7-Eleven									
6	Amount (\$)	7	Payee addres	ss; City;	State;	Zip Co	de					
	\$11.61		5000 W Slau	ughter Ln.								
			Austin, TX 7	8749								
8	PURPOSE	(a)	Category (so	e Categories listed at	the top of this scho	odulo)	(b)	Description				
	OF	 ` ´		e categories listed at nead/Rental Ex		edule)	` '		outsi	de of Texas. Com	plete Schedule T.	
	EXPENDITURE				•			—		officeholder living	g expense	
								Supplies for C	Cap	oitol Office		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Offic	ceholder name	0	office sou	ght			Office he	eld	
	Date		Payee name									
	10/10/2023		7-Eleven									
	Amount (\$)		Payee addres		State;	Zip Co	de					
	\$3.74		408 W 15th	St.								
			Austin, TX 7	8701								
	PURPOSE OF	(a)		e Categories listed at		edule)	(b)	Description				
	EXPENDITURE		Office Overh	nead/Rental Ex	pense			=		de of Texas. Com officeholder living	plete Schedule T.	
								Supplies for C			у схренас	
									Ċ			
	Complete ONLY if direct		Candidate/Offic	ceholder name	0	office sou	ght			Office he	eld	
	expenditure to benefit C/OI	Н										
	Date		Payee name									
	09/08/2023		AGI Renter	Insurance								
	Amount (\$)		Payee addres	ss; City;	State;	Zip Co	de					
	\$19.84		401 Guadalı	upe Street								
			Austin, TX 7	8701								
	PURPOSE	(a)	Category (Se	e Categories listed at	the top of this sche	edule)	(b)	Description				
	OF EXPENDITURE	` `		nead/Rental Ex		, , , , ,		Check if travel of			plete Schedule T.	
	EXPENDITORE									officeholder living		
								apartment	ran	ce for office	holder's Austin	
_	Complete ONLY if direct	Ļ	Condidate /Offi	abaldar		office assist	ab+	1		Office	ald	
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Offic	enoluer name	O	office sou	ynt			Office he	eiu	
	•											

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	al Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)	
Ļ		The Instruction Guide explains how to complete this form.	_
1	Total pages Schedule F1:		
	Sch: 2/76 Rpt: 36/170	Meyer, Morgan D. (The Honorable) 00069344	_
4	Date	5 Payee name	
	10/10/2023	AGI Renter Insurance	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$19.84	401 Guadalupe Street	
		Austin, TX 78701	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	_
	OF EXPENDITURE	Office Overhead/Rental Expense	
		X Check if Austin, TX, officeholder living expense	
		Renter's insurance for officeholder's Austin apartment	
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
	CAPERIOLORE TO DETICITE C/OI		
	Date	Payee name	
	11/16/2023	AGI Renters Insurance	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$123.64	401 Guadalupe Street	ſ
		Austin, TX 78701	
	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	
		Rental insurance payment for officeholder's apartment in Austin	
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	4
	expenditure to benefit C/OI	- · · · · · · · · · · · · · · · · · · ·	
H	Date	Davida nama	=
	Date 08/02/2023	Payee name ACL Pontors Incurance	ſ
		AGI Renters Insurance	_
	Amount (\$)	Payee address; City; State; Zip Code	ſ
	\$29.68	401 Guadalupe Street	
		Austin, TX 78701	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Office Overhead/Rental Expense	
	-	X Check if Austin, TX, officeholder living expense	
		Apartment insurance for officeholder's Austin apartment	
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	\dashv
	expenditure to benefit C/OI		
			\dashv

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

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

	Candidate/Officeholder/Politica	Committee Legal Services Salaries/Wages/Contra	ract Labor OTHER (enter a category not listed above)
	Credit Card Payment	The Instruction Guide explains how to complete thi	is form.
1	Total pages Schedule F1:	FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 3/76 Rpt: 37/170	Meyer, Morgan D. (The Honorable)	00069344
4	Date	Payee name	<u>'</u>
	09/05/2023	AT&T	
6	Amount (\$)	Payee address; City; State; Zip Code	
Ŭ	\$65.63	208 S. Akard Street	
	400.00	200 0.7 0 0	
		Dallas TV 7F202	
		Dallas, TX 75202	
8	PURPOSE OF	a) Category (See Categories listed at the top of this schedule) (b) Desc	•
	EXPENDITURE	emee evermeda/rteritai Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
			ernet for officeholder's Austin apartment
			•
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
-	expenditure to benefit C/OI	g	
	Date	Province marginal	
	10/02/2023	Payee name 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) Desc	•
	EXPENDITURE	Onice Overnedd/Nerital Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		, <u> </u>	ernet for officeholder's Austin apartment
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	,	
	Date	Dayon nama	
	11/01/2023	Payee name AT&T	
	Amount (\$) \$65.63	Payee address; City; State; Zip Code	
	Φ05.03	208 S. Akard Street	
		D. II TV 75000	
		Dallas, TX 75202	
	PURPOSE OF	a) Category (See Categories listed at the top of this schedule) (b) Desc	
	EXPENDITURE	Office Overficad/Nerital Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
			ernet for officeholder's Austin apartment
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI		

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

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

	Candidate/Officeholder/Politica Credit Card Payment	l 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: 4/76 Rpt: 38/170	Meyer, Morgan D. (The Honorable)	00069344
4	Date	5 Payee name	
	12/04/2023	AT&T	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$65.63	208 S. Akard Street	
		Dallas, TX 75202	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Chies o vernodari territar Experies	outside of Texas. Complete Schedule T.
			TX, officeholder living expense ficeholder's Austin apartment
		internet for or	ncenoider's Austin apartment
<u>_</u>	Complete ONLY if alice -t	Candidata/Officeholder name	Office hold
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
H	Date	Payee name	
	07/24/2023	Adobe	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$25.97	345 Park Avenue	
	φ23.97	343 Faik Avellue	
		San Jose, CA 95110	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Onice Overneau/Nerital Expense	outside of Texas. Complete Schedule T.
			TX, officeholder living expense
		Of liftle office s	support software for campaign
_	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O		Office field
	Date	Payee name	
	08/22/2023	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	Onice Overhead/Nerital Expense	outside of Texas. Complete Schedule T.
	ZA ZADITORZ		TX, officeholder living expense
		Online office s	support software for campaign
	Commission ONE V. C. P.	Condidate Office holder no	Office heald
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
<u> </u>	ms provided by Texas E	thice Commission www.athice state ty us	Version V2 5 1 0hfcfh67

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: 5/76 Rpt: 39/170	Meyer, Morgan D. (The Honorable) 00069344
4 Date	5 Payee name
09/22/2023	Adobe
6 Amount (\$) \$25.97	7 Payee address; City; State; Zip Code 345 Park Avenue San Jose, CA 95110
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
	Online office support software for campaign
Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
Date	Payee name
10/23/2023	Adobe
Amount (\$) \$25.97	Payee address; City; State; Zip Code 345 Park Avenue
	San Jose, CA 95110
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/O	Candidate/Officeholder name Office sought Office held
Date 11/22/2023	Payee name Adobe
Amount (\$)	Payee address; City; State; Zip Code
\$25.97	345 Park Avenue
	San Jose, CA 95110
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/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 -Event Expense Fees

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

Candidate/Officeholder/Politic 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: 6/76 Rpt: 40/170	Meyer, Morgan D. (The Honorable) 00069344
4 Date	5 Payee name
12/22/2023	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 Austin, TX, officeholder living expense
	Online office support software for campaign
O Complete Chillian III	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H
,	
Date	Payee name
10/19/2023	Allyn Media
Amount (\$)	Payee address; City; State; Zip Code
\$62.88	3838 Oak Lawn Avenue
	#400
	Dallas, TX 75219
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
	Mileage for campaign photoshoot
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	Н
Date	Payee name
10/04/2023	Amazon
Amount (\$)	Payee address; City; State; Zip Code
\$23.79	410 Terry Ave. North
	Seattle, WA 98109
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	Supplies for campaign event
0 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
2	

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

Credit Card Payment	The Instruction Guide explains how to co	plete this form.	
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Eth	ics Commission Filers)
Sch: 7/76 Rpt: 41/170	Meyer, Morgan D. (The Honorable)	00069344	
4 Date	5 Payee name	·	
12/12/2023	Amazon		
6 Amount (\$)	7 Payee address; City; State; Zip Co	e	
\$13.24	410 Terry Ave. North		
	Seattle, WA 98109		
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	b) Description	
EXPENDITURE	Event Expense	Check if travel outside of Texas. Complete S Check if Austin, TX, officeholder living expen	
		Supplies for campaign event	
9 Complete ONLY if direct	Candidate/Officeholder name Office sou	ht Office held	
expenditure to benefit C/O	4		
Date	Payee name		
12/18/2023	Amazon		
Amount (\$)	Payee address; City; State; Zip Co	e	
\$34.60	410 Terry Ave. North		
	Seattle, WA 98109		
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 S Check if Austin, TX, officeholder living expen	
		Thank you gift for campaign supp	
Complete ONLY if direct	Candidate/Officeholder name Office sou	ht Office held	
expenditure to benefit C/OI	1		
Date	Payee name		
12/18/2023	Amazon		
Amount (\$)	Payee address; City; State; Zip Co	e	
\$34.60	410 Terry Ave. North		
	Seattle, WA 98109		
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 S Check if Austin, TX, officeholder living expen	
		Thank you gift for campaign supp	
Complete ONLY if direct	Candidate/Officeholder name Office sou	ht 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	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 8/76 Rpt: 42/170	Meyer, Morgan D. (The Honorable) 00069344
4	Date	5 Payee name
	12/18/2023	Amazon
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$34.60	410 Terry Ave. North
		Seattle, WA 98109
8	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
		Thank you gift for campaign supporter
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OH	1
	Date	Payee name
	12/18/2023	Amazon
	Amount (\$)	Payee address; City; State; Zip Code
	\$34.60	410 Terry Ave. North
		Seattle, WA 98109
	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
		Thank you gift for campaign supporter
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OF	
	Date	Payee name
	12/18/2023	Amazon
	Amount (\$)	Payee address; City; State; Zip Code
	\$34.60	410 Terry Ave. North
		Seattle, WA 98109
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Gift/Awards/Memorials Expense
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		Thank you gift for campaign supporter
	Complete ONLY if direct	Candidate/Officeholder name Office cought Office hold
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Event Expense Loan Repayment/Reimbu

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

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: 9/76 Rpt: 43/170	Meyer, Morgan D. (The Honorable) 00069344
4	Date	5 Payee name
	12/18/2023	Amazon
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$76.23	410 Terry Ave. North
		Seattle, WA 98109
8	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
		Thank you gift for campaign supporter
		That it you git for our pargit outperforce.
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Date	Payee name
	12/21/2023	Amazon
	Amount (\$)	Payee address; City; State; Zip Code
	\$8.65	410 Terry Ave. North
	Ψ0.00	120 Tony / Nor Moral
		Seattle, WA 98109
	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 Thank you gift for campaign supporter
		Thank you git for our pargit supporter
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	· ·
-	Date	Payee name
	12/21/2023	Amazon
	Amount (\$)	Payee address; City; State; Zip Code
	\$8.65	410 Terry Ave. North
	Ψ0.00	410 Tony / Wei Word
		Seattle, WA 98109
	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
		Thank you gift for campaign supporter
	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 Com

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 Calcadula F1.	
1	Total pages Schedule F1:	
	Sch: 10/76 Rpt:	Meyer, Morgan D. (The Honorable) 00069344
4	Date	5 Payee name
	12/21/2023	Amazon
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$34.60	410 Terry Ave. North
	7000	120 1011) 7.1101 1101 1101
		0
		Seattle, WA 98109
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
		Thank you gift for campaign supporter
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experientare to benefit 6/61	
	Date	Payee name
	08/07/2023	Amazon
	Amount (\$)	Payee address; City; State; Zip Code
	\$48.70	410 Terry Ave. North
		,
		Seattle, WA 98109
		la.
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Taxos, Complete Schedule T
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Table for officeholder's Austin apartment
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
_		
	Date	Payee name
	08/31/2023	Baylor Scott and White Parking Services
	Amount (\$)	Payee address; City; State; Zip Code
	\$3.00	3500 Gaston Ave
		Dallas, TX 75246
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Fees Categories listed at the top of this scriedule) Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Parking pass for legislative recap
	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 Conditate/Officebolder/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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filer	rs)
	Sch: 11/76 Rpt:	Meyer, Morgan D. (The Honorable) 00069344	
4	Date	5 Payee name	
	07/19/2023	Byers, Jenna	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$1,700.00	2610 Allen Street	
		Apt. 1508	
		Dallas, TX 75204	
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Toyon Complete Schedule Toyon Complete S	
	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 expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held	
	Date	Payee name	
	08/16/2023	Byers, Jenna	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$1,700.00	2610 Allen Street	
		Apt. 1508	
		Dallas, TX 75204	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Salaries/M/ages/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 expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H	
	Date	Payee name	
	09/18/2023	Byers, Jenna	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$1,700.00	2610 Allen Street	
		Apt. 1508	
	DUDDOCE	Dallas, TX 75204	
	PURPOSE 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	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI	H	

SCHEDULE F1

vertising Expense Event Expense Loan Repayment/Reimbu

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

Fees Office Overhead/fr
Food/Beverage Expense Polling Expense
Gitt/Awards/Memorials Expense Printing Expense
Legal Services Salaries/Wages/C

Loan Repayment/Reimbursement S
Office Overhead/Rental Expense T
Polling Expense T
Printing Expense T
Solarise/Magas/Contract Lobor

	Candidate/Officeholder/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	
	Sch: 12/76 Rpt:	Meyer, Morgan D. (The Honorable) 00069344
4	Date	5 Payee name
	10/20/2023	Byers, Jenna
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,700.00	2610 Allen Street
		Apt. 1508
		Dallas, TX 75204
8	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. Check if Austin, TX, officeholder living expense
		Contract labor for campaign services
		Sometic last last last last last last last last
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	11/16/2023	Byers, Jenna
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,700.00	4118 Normandy Ave
		Dallas, TX 75205
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
		Check if Austin, TX, officeholder living expense 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/Ol	· · · · · · · · · · · · · · · · · · ·
	Date	Payee name
	12/18/2023	Byers, Jenna
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,700.00	4118 Normandy Ave
	, ,	
		Dallas, TX 75205
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
	EXI ENDITORE	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/O	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

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: 13/76 Rpt:	Meyer, Morgan D. (The Honorable) 00069344
4	Date	5 Payee name
	09/12/2023	CVS Pharmacy
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$7.56	8200 TX-45
		Austin, TX 78739
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
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1
	Date	Payee name
	07/19/2023	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
	LAI LINDITORE	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/O	
	Date	Payso nama
	08/21/2023	Payee name Canva
	Amount (\$)	Payee address; City; State; Zip Code
	\$12.99	75 East Santa Clara Street
	412.00	16 Last Santa Statu Stroot
		San Jose, CA 95113
	PURPOSE	In.
	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
		Online office support software for campaign
	Complete ONLY if direct expenditure to benefit C/Ol	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 Gitt/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

	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: 14/76 Rpt:	Meyer, Morgan D. (The Honorable)		00069344
4	Date	5 Payee name		<u> </u>
	09/19/2023	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
3	expenditure to benefit C/OI		grit	Office field
	Date	Davis same		
	10/19/2023	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 sou	ght	Office held
	expenditure to benefit C/OI	1		
	Date	Payee name		
	11/20/2023	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 VALUE	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

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Food/Beverage Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

	Candidate/Officeholder/Politica Credit Card Payment		mmittee	Legal Services	·		/ages	/Contract Labor			ER (enter	a category not listed	above)
L		_		The Instruction G	ulue explains i	ilow to col	iiipid	te this form.	_				
1	Total pages Schedule F1:	2	FILER NAM						3	File		(Ethics Commis	ssion Filers)
l	Sch: 15/76 Rpt:		Meyer, Mo	rgan D. (The Ho	norable)					000	69344		
4	Date	5	Payee name)									
l	12/19/2023		Canva										
ڇا	Amount (\$)	7	Payee addre	ess; City;	Stato:	Zip Co	do						
ľ	• •	l'			·	Zip Co	ue						
l	\$12.99		75 East Sa	nta Clara Street									
l													
l			San Jose,	CA 95113									
8	PURPOSE	(a)	Category (s	See Categories listed at	the ten of this sch	odulo)	(b)	Description					
l	OF	l`		rhead/Rental Ex		edule)	` '	_ :	outsi	ide of	Гехаs. Cor	nplete Schedule T.	
l	EXPENDITURE			incaa/renai Ex	perioe			Check if Austin	, TX	, office	holder livin	ig expense	
l								Online office	sup	ppor	t softwa	are for campai	gn
l													
9	Complete ONLY if direct		Candidate/Off	ficeholder name	C	Office sou	ght				Office h	ield	
l	expenditure to benefit C/O	Н											
H	Date	Г	Payee name	<u> </u>									
l	09/15/2023		Capitol Gri										
L		L											
l	Amount (\$)		Payee addre		State;	Zip Co	de						
l	\$8.61		1400 Cong	ress Ave.									
			Austin, TX	78701									
⊢	PURPOSE	(a)	Catagony	See Categories listed at		1	(h)	Description					
l	OF	(")		rage Expense	tne top of this sch	edule)	(2)	_	outsi	ide of	Гехаs. Cor	nplete Schedule T.	
l	EXPENDITURE		1 OOU/Deve	rage Expense				Check if Austin					
l								Office Lunch	for	Cap	itol sta	ff	
l													
┢	Complete ONLY if direct		Candidate/Off	ficeholder name	C	Office sou	aht				Office h	eld	
l	expenditure to benefit C/O	Н				,	•						
⊨		_											
l	Date		Payee name										
	11/13/2023		Capitol Gri	II.									
	Amount (\$)		Payee addre	ess; City;	State;	Zip Co	de						
l	\$25.39		1400 Cong	ress Ave.									
l													
l			Austin, TX	78701									
┡	BURDOOF	_					<i>a</i> \						
l	PURPOSE OF	(a)		See Categories listed at	the top of this sche	edule)	(a)	Description	otoi	:do of -	Favos Car	malata Cabadula T	
l	EXPENDITURE		Food/Beve	rage Expense				Check if Austin				nplete Schedule T.	
l								Office Lunch					
l								Office Editori	101	Oup	ntoi Sta		
\vdash	0 1: 0::::::::::	_	0 11 1 15 15 15		=		1.1				O.W. :		
l	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Off	ficeholder name	C	Office sou	ght				Office h	ield	
L	onponuntare to beliefit 6/01	•											
		_				_			_	_			
l													
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

	Credit Card Payment	The Instruction Guide explains how to complete this	s form.
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 16/76 Rpt:	Meyer, Morgan D. (The Honorable)	00069344
4	Date	5 Payee name	
	12/19/2023	Cebolla Fine Flowers	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$146.14	4415 Lovers Lane	
		Dallas, TX 75225	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Descri	ription
	OF EXPENDITURE	Only Wards/Memorials Expense	neck if travel outside of Texas. Complete Schedule T.
		,	neck if Austin, TX, officeholder living expense
		Inan	nk you gift for campaign supporter
_	2 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2		200
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	09/22/2023	Cebolla Flowers	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$162.38	4415 Lovers Ln	
		Dallas, TX 75225	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Descri	•
	OF EXPENDITURE	Only Wards/McHoridis Expense I	neck if travel outside of Texas. Complete Schedule T. neck if Austin, TX, officeholder living expense
		l —	nk you gift for campaign supporter
		That	in you git for earnpaight supporter
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O		Office field
			
	Date	Payee name	
	10/12/2023	Cebolla Flowers	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$162.38	4415 Lovers Ln	
		Dallas, TX 75225	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Descri	ription
	OF EXPENDITURE	Only Wards/McHoridis Expense I	neck if travel outside of Texas. Complete Schedule T.
			neck if Austin, TX, officeholder living expense
		Inan	nk you gift for campaign supporter
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held
	experialitate to benefit 6/01	''	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		F F C mittee L	Event Expense Fees Food/Beverage Exp Gift/Awards/Memor Legal Services		Office Ove Polling Ex Printing E Salaries/V	erhead pense xpens Vages	e /Contract Labor		Transportation E Travel in District Travel Out of Dis	
_	T-t-l C-blul- E4:	٦ -							1_	Elland ID	(Ethica Canadianian Eilana)
1	Total pages Schedule F1: Sch: 17/76 Rpt:	l		an D. (The H	Honorable)				3	Filer ID 00069344	(Ethics Commission Filers)
4	Date	5 F	Payee name						_		
	12/05/2023	ı	Cebolla Flow	vers							
6	Amount (\$) \$173.20	4	Payee address 1415 Lovers Dallas, TX 79	Ln	State	e; Zip Co	ode				
8	PURPOSE OF EXPENDITURE			Categories listed Memorials E	at the top of this sch xpense	hedule)	(b)	Check if Austin	, TX,	officeholder living	nplete Schedule T. g expense g of a campaign
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Offic	eholder name	(Office sou	ight			Office he	eld
	Date	l	Payee name								
	07/17/2023			ain Health/L							
	Amount (\$)	l	Payee address			e; Zip Co	ode				
	\$1,000.00		2200 W. Moo Dallas, TX 7!	ckingbird Lai	ne						
_	PURPOSE	_					(h)	Description			
	OF EXPENDITURE		Contributions	s/Donations	at the top of this sch Made By Political Comn		(5)	Check if Austin	, TX,	officeholder living	nplete Schedule T. g expense or Center for BrainHealth
	Complete ONLY if direct expenditure to benefit C/O		andidate/Offic	eholder name	. (Office sou	ight			Office he	eld
	Date 09/15/2023	ı	Payee name Chick Fil A								
	Amount (\$) \$27.74	5		n Luther King		e; Zip Co	ode				
			Austin, TX 78								
	PURPOSE OF EXPENDITURE			e Categories listed age Expense	at the top of this sch	hedule)	(b)		, TX,	officeholder living	
	Complete ONLY if direct expenditure to benefit C/O		andidate/Offic	eholder name	. (Office sou	ight			Office he	eld

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: 18/76 Rpt:	Meyer, Morgan D. (The Honorable) 00069344
4	Date	5 Payee name
	11/09/2023	Chick Fil A
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$39.15	503 W Martin Luther King Jr Blvd.
		Austin, TX 78701
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) 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
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
F	Date	Payee name
	09/13/2023	Chilantro BBQ
H	Amount (\$)	Payee address; City; State; Zip Code
	\$58.60	1201 Barbara Jordan Blvd.
		Suite 1460
		Austin, TX 78723
┢	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Food/Beverage Expense
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Office Lunch for Capitol staff
L	2	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	12/26/2023	Cipollina
Г	Amount (\$)	Payee address; City; State; Zip Code
	\$126.63	1213 W Lynn St.
		Austin, TX 78703
I	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) 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
		Since Earlor for Suprior Stari
\vdash	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 -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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
_	Total manage Calcadula F1.	
	Total pages Schedule F1:	
	Sch: 19/76 Rpt:	Meyer, Morgan D. (The Honorable) 00069344
4	Date	5 Payee name
	07/11/2023	City of Austin
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$21.39	4815 Mueller Blvd
	,	
		Auglia TV 70700
		Austin, TX 78723
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense
		\times \t
		Offilities for officeriolider's apartment in Austin
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experience to benefit of or	'
	Date	Payee name
	07/11/2023	City of Austin
	Amount (\$)	Payee address; City; State; Zip Code
	\$93.91	4815 Mueller Blvd
		Austin TV 70700
		Austin, TX 78723
	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
		X Check if Austin, TX, officeholder living expense Utilities for officeholder's Austin apartment
		Office for officerolaer's Austin apartment
_	Complete ONLY if direct	Condidate/Officeholder name Office county Office hold
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	<u> </u>	
	Date	Payee name
	10/30/2023	City of Austin
	Amount (\$)	Payee address; City; State; Zip Code
	\$666.54	4815 Mueller Blvd
		Austin, TX 78723
		To.
	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. X Check if Austin, TX, officeholder living expense
		Utilities for officeholder's Austin apartment
		Samuel 15. Sinosing aparament
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	•	

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,

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	
	Sch: 20/76 Rpt:	Meyer, Morgan D. (The Honorable) 00069344
4	Date	5 Payee name
	12/11/2023	City of Austin
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$129.44	4815 Mueller Blvd
		Austin, TX 78723
8	PURPOSE	
Ū	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
		Utilities for officeholder's Austin apartment
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	07/03/2023	Constant Contact
	Amount (\$)	Payee address; City; State; Zip Code
	\$288.89	1601 Trapelo Road
		Watham, MA 02451
	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
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	expenditure to benefit or of	<u>'</u>
	Date	Payee name
	08/02/2023	Constant Contact
	Amount (\$)	Payee address; City; State; Zip Code
	\$288.89	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.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		E-newsletter account for campaign
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	CAPETIGITATE TO DETICITE C/OI	'

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

Credit Card Payment	The Instruction Guide explains how to co	omplete this form.
1 Total pages Schedule F1	L: 2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 21/76 Rpt:	Meyer, Morgan D. (The Honorable)	00069344
4 Date	5 Payee name	-
09/05/2023	Constant Contact	
6 Amount (\$)	7 Payee address; City; State; Zip Co	ode
\$288.89	9 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 <u>ONLY</u> if direct expenditure to benefit C/		ught Office held
experientare to benefit of	O11	
Date	Payee name	
10/02/2023	Constant Contact	
Amount (\$)	Payee address; City; State; Zip Co	ode
\$288.89	1601 Trapelo Road	
	Watham, MA 02451	
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
Complete ONLY if direct expenditure to benefit C/		ught Office held
Date	Payee name	
11/02/2023	Constant Contact	
Amount (\$)	Payee address; City; State; Zip Co	ode
\$288.89	9 1601 Trapelo Road	
	Watham, MA 02451	
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
Complete ONLY if direct expenditure to benefit C/		ught Office held
experialitie to belieff C/		

SCHEDULE F1

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

	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: 22/76 Rpt:	Meyer, Morgan D. (The Honorable) 00069344
4	Date	5 Payee name
	12/04/2023	Constant Contact
6	Amount (\$) \$288.89	7 Payee address; City; State; Zip Code 1601 Trapelo Road Watham, MA 02451
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense
	LAFENDITORE	Check if Austin, TX, officeholder living expense E-newsletter account for campaign
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	11/15/2023	Costco
	Amount (\$)	Payee address; City; State; Zip Code
	\$68.71	4301 W William Cannon Dr.
		Building A, Suite 100
		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 Austin, TX, officeholder living expense Supplies for Capitol Office
		Supplies for Capitor Office
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	12/18/2023	Dallas County Republican Party
	Amount (\$)	Payee address; City; State; Zip Code
	\$750.00	11617 N. Central Expwy
		Suite 240
L		Dallas, TX 75243
	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 Filing fee
		Filling lee
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

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
Leaal Services Salaries/Waacs/Contract Labor

	Candidate/Officeholder/Politica Credit Card Payment	Il 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: 23/76 Rpt:	Meyer, Morgan D. (The Honorable) 00069344
4	Date	5 Payee name
	07/05/2023	Dollar Tree
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$5.41	5334 Ross Ave
		Unit 700
		Dallas, TX 75206
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Supplies for campaign event
		Supplies for earnpaign event
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/Ol	-
	Date	Payee name
	08/14/2023	El Alma Cafe
	Amount (\$)	Payee address; City; State; Zip Code
	\$241.68	1025 Barton Springs Rd.
		Austin, TX 78704
	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
		Cilide Earlor for Supremotality
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1
	Date	Payee name
	07/21/2023	El Patio
	Amount (\$)	Payee address; City; State; Zip Code
	\$121.62	2938 Guadalupe St.
		Austin, TX 78705
	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.
	2/11/2/10/12	Check if Austin, TX, officeholder living expense
		Office Lunch for Capitol staff
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
1	expenditure to benefit C/O	· · · · · · · · · · · · · · · · · · ·
\vdash		
ı		

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/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: 24/76 Rpt:	Meyer, Morgan D. (The Honorable) 00069344
4	Date	5 Payee name
	09/07/2023	Elizabeth Street Cafe
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$118.96	1501 S 1st St.
		Austin, TX 78704
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) 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
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/Ol	
	Date	Payee name
	07/31/2023	Equest
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,000.00	P.O. Box 171779
		Dallas, TX 75217
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Sponsorship for annual event
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	experiditure to beriefit C/O	
	Date	Payee name
	10/06/2023	Eternity Flowers
	Amount (\$)	Payee address; City; State; Zip Code
	\$176.08	2 Otter Lodge Place
		Woodlands, TX 77382
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Cift/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
		Sympathy gift for the passing of a campaign
		supporter
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	experientare to benefit C/O	<u>'</u>

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

	Candidate/Officeholder/Politica Credit Card Payment		OTHER (enter a category not listed above)
	Credit Card Payment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:		3 Filer ID (Ethics Commission Filers)
	Sch: 25/76 Rpt:	Meyer, Morgan D. (The Honorable)	00069344
4	Date	5 Payee name	
	09/08/2023	Etsy	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$481.16	117 Adams St.	
		Brookyln, NY 11201	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF		outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin,	TX, officeholder living expense
		Gift for Comm	nittee Members
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	09/06/2023	Event Brite	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$216.50	535 Mission Street	
		8th foor	
		San Francisco, CA 94105	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Contributions/Donations Made By	outside of Texas. Complete Schedule T.
		Canadato/Cinconolaci/i Cintota Committee	TX, officeholder living expense for annual event
		Эропзотэтір і	ioi ainidai event
_	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O		O mee neid
-	Date	Dayon nama	
	12/26/2023	Payee name Event Brite	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$80.00	535 Mission Street	
	Ψ00.00	8th foor	
		San Francisco, CA 94105	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	outside of Texas. Complete Schedule T.
	EXPENDITURE	1 003	TX, officeholder living expense
		1 —	staff member to event in district
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	DH .	
1			

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

	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: 26/76 Rpt:	Meyer, Morgan D. (The Honorable) 00069344
4	Date	5 Payee name
	11/09/2023	Extra Space Storage
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$217.00	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
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Campaign storage units
_		
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	11/15/2023	Extra Space Storage
	Amount (\$)	Payee address; City; State; Zip Code
	\$230.00	4920 McKinney Ave
		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
		Campaign storage units
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	- · · · · · · · · · · · · · · · · · · ·
	Date	Payee name
	12/08/2023	Extra Space Storage
		· · · · ·
	Amount (\$) \$217.00	Payee address; City; State; Zip Code 4920 McKinney Ave
	ΨΖ17.00	4920 MCNIMEY AVE
		Dollar TV 75204
		Dallas, TX 75204
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Pental Eynense (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/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 (Contract Labor,

	Credit Card Payment	The Instruction Guide explains how to complete this form.							
1	Total pages Schedule F1:	<u> </u>							
	Sch: 27/76 Rpt:	Meyer, Morgan D. (The Honorable)							
4	Date	5 Payee name							
	12/11/2023	Extra Space Storage							
6	Amount (\$)	Payee address; City; State; Zip Code							
	\$230.00	4920 McKinney Ave							
		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							
J	expenditure to benefit C/O								
_	Date	Davies same							
	07/10/2023	Payee name Evtra Space Storage							
		Extra Space Storage							
	Amount (\$)	Payee address; City; State; Zip Code							
	\$168.00	1000 E. 50th Street							
		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 Storage unit for officeholder in Austin							
		Storage unit for officeriolaer in Austin							
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held							
	expenditure to benefit C/O	y							
_	Data								
	Date 07/11/2023	Payee name							
		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							
	Operation ONLY if allowed	Our did at 10% as hald a manus							
	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/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: 28/76 Rpt:	Meyer, Morgan D. (The Honorable) 00069344
4	Date	5 Payee name
	07/19/2023	Extra Space Storage
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$332.00	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 expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	07/28/2023	Extra Space Storage
		<u> </u>
	Amount (\$) \$331.00	
	φ331.00	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/Ol	· · · · · · · · · · · · · · · · · · ·
	Date	Payee name
	08/08/2023	Extra Space Storage
	Amount (\$)	Payee address; City; State; Zip Code
	\$168.00	1000 E. 50th Street
		Austin, TX 78751
	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
		\[\text{X} \] Check if Austin, TX, officeholder living expense \] Storage unit for officeholder in Austin
		Storage unit for officeriolider in Adstill
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Operations 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 Salaries/Wages/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: 29/76 Rpt:	Meyer, Morgan D. (The Honorable) 00069344
4	Date	5 Payee name
	08/11/2023	Extra Space Storage
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$230.00	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.
		Compaign storage units
		Campaign storage units
L		
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	08/21/2023	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 EXPENDITURE	Office Overhead/Rental Expense
		Check if Austin, TX, officeholder living expense
		Campaign storage units
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	08/28/2023	Extra Space Storage
	Amount (\$)	Payee address; City; State; Zip Code
	\$331.00	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 expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experience to beliefft C/OI	•
1		

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	
1	Total pages Sabadula F1:	<u> </u>
_	Total pages Schedule F1: Sch: 30/76 Rpt:	2 FILER NAME Meyer, Morgan D. (The Honorable) 3 Filer ID (Ethics Commission Filers) 00069344
4	Date	5 Payee name
	09/08/2023	Extra Space Storage
6	Amount (\$) \$168.00	7 Payee address; City; State; Zip Code 1000 E. 50th Street
		Austin, TX 78751
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense
		X Check if Austin, TX, officeholder living expense Storage unit for officeholder in Austin
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	09/11/2023	Extra Space Storage
	Amount (\$)	Payee address; City; State; Zip Code
	\$230.00	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
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	09/19/2023	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
	LAI LIIDITORE	Check if Austin, TX, officeholder living expense
		Campaign storage units
_		
	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 -

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: 31/76 Rpt:	Meyer, Morgan D. (The Honorable) 00069344
4	Date	5 Payee name
	09/28/2023	Extra Space Storage
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$382.00	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
		Sumpaigh storage units
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
\vdash	Date	Payee name
	10/10/2023	Extra Space Storage
		·
	Amount (\$)	Payee address; City; State; Zip Code
	\$217.00	1000 E. 50th Street
		Austin, TX 78751
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
		X Check if Austin, TX, officeholder living expense
		Storage unit for officeholder in Austin
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Data	
	Date	Payee name
	10/11/2023	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
		Campaigh 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 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

	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: 32/76 Rpt:	Meyer, Morgan D. (The Honorable) 00069344					
4	Date	5 Payee name					
l	10/19/2023	Extra Space Storage					
6	Amount (\$)	7 Payee address; City; State; Zip Code					
	\$332.00	4920 McKinney Avenue					
l							
l		Dallas, TX 75204					
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.					
l	EXPENDITURE	Check if Austin, TX, officeholder living expense					
l		Campaign storage units					
L							
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held					
L	experientare to benefit 6/61						
l	Date	Payee name					
l	10/30/2023	Extra Space Storage					
Г	Amount (\$)	Payee address; City; State; Zip Code					
l	\$382.00	4920 McKinney Avenue					
l							
l		Dallas, TX 75204					
Г	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
l	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.					
l	LXI LINDITORL	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/Ol						
⊨	Date	Davida warea					
l	11/20/2023	Payee name Extra Space Storage					
┝							
l	Amount (\$) \$332.00	Payee address; City; State; Zip Code 4920 McKinney Avenue					
l	φ332.00	4920 MCNITTLEY Avenue					
l		Dallag TV 75004					
L		Dallas, TX 75204					
l	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Office Overhead/Pental Expanse Check if travel outside of Texas. Complete Schedule T.					
l	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense					
l		Campaign storage units					
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held					
	expenditure to benefit C/O	1					

SCHEDULE F1

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

EXPENDITURE CATEGORIES FOR BOX 8(a) 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

	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: 33/76 Rpt:	Meyer, Morgan D. (The Honorable) 00069344					
4	Date	5 Payee name					
	11/28/2023	Extra Space Storage					
6	Amount (\$)	7 Payee address; City; State; Zip Code					
	\$382.00	4920 McKinney Avenue					
		Dallas, TX 75204					
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					
		Campaign storage units					
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held					
	expenditure to benefit C/OI	1					
	Date	Payee name					
	12/19/2023	Extra Space Storage					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$332.00	4920 McKinney Avenue					
		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	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					
	12/28/2023	Extra Space Storage					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$382.00	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 expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held					
	sponditare to benefit 6/01	•					

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

	Credit Card Payment	The Instruction Guide explains how to complete this form).
1	Total pages Schedule F1: Sch: 34/76 Rpt:	2 FILER NAME Meyer, Morgan D. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00069344
4	Date 12/15/2023	5 Payee name Exxon	
6	Amount (\$) \$51.73	7 Payee address; City; State; Zip Code 214 Melodie Dr. West, TX 76691	
8	PURPOSE OF EXPENDITURE	Check if	n travel outside of Texas. Complete Schedule T. Austin, TX, officeholder living expense spense for campaign staff for travel to Dallas
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	Date 11/20/2023	Payee name Facebook	
	Amount (\$) \$99.97	Payee address; City; State; Zip Code 1 Hacker Way Menlo Park, CA 94025	
	PURPOSE OF EXPENDITURE	Check if	n travel outside of Texas. Complete Schedule T. Austin, TX, officeholder living expense edia political advertising
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	Date 08/09/2023	Payee name Fairmont Hotel	
	Amount (\$) \$19.00	Payee address; City; State; Zip Code 1717 N Akard St Dallas, TX 75201	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees (b) Descriptio Check if I	n travel outside of Texas. Complete Schedule T. Austin, TX, officeholder living expense Pass for event
	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 Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

	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 File	ers)	
	Sch: 35/76 Rpt:	Meyer, Morgan D. (The Honorable)			00069344			
4	Date	5 Payee name						
	12/13/2023	Fairmont Hotel						
6	Amount (\$)	7 Payee address; City; State; Zip Code						
	\$20.80	1717 N Akard St						
		Dallas, TX 75201						
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description					
	OF EXPENDITURE	Fees			de of Texas. Com	plete Schedule T.		
	EXPENDITURE	Check if Austin, TX, officeholder living expense						
			Parking p	ass for	event			
_	0 1: 0.11.7.7.1.				055			
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought			Office he	eld		
	·							
	Date	Payee name						
	12/13/2023	Fastsigns						
	Amount (\$)	Payee address; City; State; Zip Code						
	\$103.37	2629 Oaklawn Ave						
		Dallas, TX 75219						
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description	1				
	OF EXPENDITURE	Advertising Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense					
			Sign for c			j expense		
			G.gc. c		g 010			
	Complete ONLY if direct	Candidate/Officeholder name Office sought			Office he	eld		
	expenditure to benefit C/OI							
	Date	Payee name						
	07/03/2023	FedEx						
	Amount (\$)	Payee address; City; State; Zip Code						
	\$41.86	5011 W Slaughter Ln.						
	Ψ-1.00	Jorr W Jidagiller Ell.						
		Austin, TX 78749						
	DUDDOOF							
	PURPOSE OF	,	Description		de of Texas. Com	plete Schedule T.		
	EXPENDITURE	Advertising Expense			officeholder living	•		
			Mailing of	Camp	aign Materia	als		
	Complete ONLY if direct	Candidate/Officeholder name Office sought			Office he	eld		
	expenditure to benefit C/OI	1						

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

Candidate/Officenoider/Poli Credit Card Payment	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F. Sch: 36/76 Rpt:	2 FILER NAME Meyer, Morgan D. (The Honorable) 3 Filer ID (Ethics Commission Filers) 00069344
4 Date	5 Payee name
11/13/2023	Fedex
6 Amount (\$) \$12.8	7 Payee address; City; State; Zip Code 3905 Oak Lawn Ave
	Dallas, TX 75219
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description 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.	
Date	Payee name
07/19/2023	Figueiras, Elizabeth
Amount (\$) \$750.0	Payee address; City; State; Zip Code 4330 Bull Creek Road 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 Co	· · · · · · · · · · · · · · · · · · ·
Date 07/13/2023	Payee name Flower Child
Amount (\$) \$92.2	Payee address; City; State; Zip Code 500 W 2nd St. Suite 133 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 ONLY if direct expenditure to benefit C.	

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		mmittee	Legal Services		laries/Wa		e /Contract Labor		OTHER (enter	istrict a category not listed a	above)
	Credit Card Payment			The Instruction G	uide explains how	to con	nple	te this form.				
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	(Ethics Commis	sion Filers)
	Sch: 37/76 Rpt:		Meyer, Mor	gan D. (The Ho	norable)					00069344		
4 Date 5 Payee name												
	08/02/2023		Gables Rep	ublic Square								
6	Amount (\$)	7	Payee addres	ss; City;	State; Z	ip Cod	de					
	\$505.00		401 Guadal	upe Street								
			Austin, TX 7	8701								
8	PURPOSE	(a)				. 1	(h)	Description				
ľ	OF	(۳)		e Categories listed at t nead/Rental Ex		e) ''	(5)	:	outsi	de of Texas. Cor	nplete Schedule T.	
	EXPENDITURE		Office Overi	icaa/itciitai Ex	perise			<u> </u>		officeholder livin		
								Rent/utiliities	for	officeholde	r's Austin apa	rtment
9	Complete ONLY if direct		Candidate/Offic	ceholder name	Offic	e soug	ght			Office h	eld	
	expenditure to benefit C/OI	н										
	Date		Payee name									
	08/04/2023		Gables Rep	ublic Square								
	Amount (\$)		Payee addres	ss; City;	State; Z	ip Coc	de					
\$1,004.95 401 Guadalupe Street												
			Austin, TX 7	8701								
	PURPOSE	(a)	Category (Se	e Categories listed at t	he top of this schedule	e) ((b)	Description				
	OF EXPENDITURE			nead/Rental Exp				=			nplete Schedule T.	
	EXI ENDITORE					Check if Austin, TX, officeholder living expense Rent/utiliities for officeholder's Austin apartment						
								Renvuillilles	101	onicenoide	ers Austin apa	ımenı
	Complete ONL V if direct	<u> </u>	Condidate/Offi	nobolder neme	Offic		,b+			Office h	ald	
	Complete ONLY if direct expenditure to benefit C/OI		Januluale/Onic	ceholder name	Onic	e soug	JIIL			Office i	eiu	
		1										
	Date		Payee name	ublic Caucro								
	08/07/2023			ublic Square								
	Amount (\$)		Payee addres		State; Z	ip Coc	de					
	\$2,130.92		401 Guadal	upe Street								
			Austin, TX 7	'8701 ————————————————————————————————————								
	PURPOSE OF	(a)		e Categories listed at t		e) ((b)	Description				
	EXPENDITURE		Office Overl	nead/Rental Exp	pense			ш		de of Texas. Cor officeholder livin	nplete Schedule T.	
								ш			r's Austin apar	tment
									٠.		a i i i i i i i i i i i i i i i i i i i	- ···•
	Complete ONLY if direct		Candidate/Offic	ceholder name	Offic	e soug	ht			Office h	eld	
	expenditure to benefit C/O				20	9	, -					
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		Legal Services The Instruction Guide 6	Salaries/V	Wages	/Contract Labor		OTHER (enter a	category not listed above)	
1	Total pages Schedule F1:	2 FILER NAM	 E				3	Filer ID	(Ethics Commission I	-ilers)
	Sch: 38/76 Rpt:		rgan D. (The Honora	ble)				00069344	`	·
4	Date	5 Payee name)							
	09/05/2023	Gables Re	public Square							
6	Amount (\$)	7 Payee addre	ess; City;	State; Zip Co	ode					
	\$248.95	401 Guada	llupe Street							
		Austin, TX	78701							
8	PURPOSE OF		See Categories listed at the top		(b)	Description				
	EXPENDITURE	Office Over	rhead/Rental Expens	se		므		de of Texas. Com officeholder living		
									's Austin apartmer	nt
						Trong diminos i		0111001101001	o / taotii / apartiiioi	
9	Complete ONLY if direct expenditure to benefit C/Oh		ficeholder name	Office sou	<u>l</u> ıght			Office he	eld	
	Date	Payee name	<u> </u>							
	09/05/2023	Gables Re	public Square							
	Amount (\$)	Payee addre	ess; City;	State; Zip Co	ode					
	\$2,639.95	401 Guada	lupe Street	•						
	, —, · · · · ·									
		Austin, TX	78701							
	PURPOSE	(a) Category (S	See Categories listed at the top	of this schedule)	(b)	Description				
	OF EXPENDITURE	Office Over	rhead/Rental Expens	se				de of Texas. Com		
						X Check if Austin, TX, officeholder living expense Rent/utilities for officeholder's Austin apartment				
						Renvullilles	IUI	onicendiaei	5 Austin apartinei	ıı
	Complete ONLY if direct		ficeholder name	Office sou	l ught			Office he	eld	
	expenditure to benefit C/OI									
	Date	Payee name			_		_			
	10/02/2023	Gables Re	public Square							
	Amount (\$)	Payee addre	ess; City;	State; Zip Co	ode					
	\$2,659.38	401 Guada	llupe Street							
		Austin, TX	78701							
	PURPOSE	(a) Category (S	See Categories listed at the top	of this schedule)	(b)	Description				
	OF EXPENDITURE	Office Over	rhead/Rental Expens	se				de of Texas. Com		
								officeholder living	rexpense 's Austin apartmer	nt.
						rverigatilities i	ıUı	oniceriolaei	3 Austin apartinei	ι.
_	Complete ONLY if direct	Candidata/O#	ficeholder name	Office sou	labt			Office he	nid	
	Complete ONLY if direct expenditure to benefit C/O		icendidei name	Office Soc	ıgıll			Office ne	iu	

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

Contributions/ Donations Mad Candidate/Officeholder/Po Credit Card Payment	
1 Total pages Schedule F	1: 2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 39/76 Rpt:	Meyer, Morgan D. (The Honorable)
4 Date	5 Payee name
11/02/2023	Gables Republic Square
6 Amount (\$) \$989.5	7 Payee address; City; State; Zip Code 401 Guadalupe Street
	Austin, TX 78701
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.
	X Check if Austin, TX, officeholder living expense
	Rent/utilities for officeholder's Austin apartment
9 Complete ONLY if direct	
expenditure to benefit (7OH
Date	Payee name
11/16/2023	Gables Republic Square
Amount (\$)	Payee address; City; State; Zip Code
\$2,638.2	8 401 Guadalupe Street
	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
	Rent/utilities for officeholder's Austin apartment
Complete <u>ONLY</u> if direct expenditure to benefit C	
Date	Payee name
12/05/2023	Gables Republic Square
Amount (\$)	Payee address; City; State; Zip Code
\$1,629.7	401 Guadalupe Street
	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
	Rent/utilities for officeholder's Austin apartment
	Terroganiaes for officeriolaers / Austin apartificiti
Complete ONLY if direct	
expenditure to benefit (/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 Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

Credit Card Payment	The Instruction Guide explains how to o	omplete this form	1.
1 Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission File
Sch: 40/76 Rpt:	Meyer, Morgan D. (The Honorable)		00069344
4 Date	5 Payee name		•
08/30/2023	Galaxy Cafe		
6 Amount (\$)	7 Payee address; City; State; Zip C	ode	
\$72.34	1000 West Lynn		
	Austin, TX 78703		
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description	n
OF EXPENDITURE	Food/Beverage Expense	Check if	travel outside of Texas. Complete Schedule T.
EXI ENDITORE			Austin, TX, officeholder living expense
		Office Lt	ınch for Capitol staff
9 Complete ONLY if direct	Candidate/Officeholder name Office so	ught	Office held
expenditure to benefit C/O		iugrit	Office field
Doto	T 2		
Date 07/03/2023	Payee name Google Suite		
	, and the second		
Amount (\$)	Payee address; City; State; Zip C	ode	
\$63.96	1600 Ampitheatre 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		travel outside of Texas. Complete Schedule T. Austin, TX, officeholder living expense
			ffice support software for campaign
			.,
Complete ONLY if direct	Candidate/Officeholder name Office so	ught	Office held
expenditure to benefit C/O	H		
Date	Payee name		
08/02/2023	Google Suite		
Amount (\$)	Payee address; City; State; Zip C	code	
\$63.96	1600 Ampitheatre Parkway		
	Mountain View, CA 94043		
PURPOSE		(b) Description	an
OF	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense		travel outside of Texas. Complete Schedule T.
EXPENDITURE			Austin, TX, officeholder living expense
		Online o	ffice support software for campaign
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office so	ught	Office held
experience to benefit 6/0	··		

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica		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: 41/76 Rpt:	Meyer, Morgan D. (The Honorable)	00069344
4	Date	5 Payee name	
	09/05/2023	Google Suite	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$63.96	1600 Ampitheatre Parkway	
		, ,	
		Mountain View, CA 94043	
8	PURPOSE		
Ü	OF	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	outside of Texas. Complete Schedule T.
	EXPENDITURE	emice everneda/remail Expense	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/OI	1	
	Date	Payee name	
	10/02/2023	Google Suite	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$63.96	1600 Ampitheatre 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	outside of Texas. Complete Schedule T.
	EX. ENDITORE		TX, officeholder living expense support software for campaign
		Offilite office :	support software for campaign
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	diludate/Oniceriolder name Onice sought	Office field
	Data	Development	
	Date 11/02/2023	Payee name Google Suite	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$63.96	1600 Ampitheatre Parkway	
		M	
		Mountain View, CA 94043	
	PURPOSE OF	(a) Category (see Categories listed at the top of this schedule) (b) Description Check if travel of	outside of Texas. Complete Schedule T.
	EXPENDITURE	Office Overficad/Nertial Experise	TX, officeholder living expense
			support software for campaign
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	1	

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

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

Legal Services Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME Filer ID (Ethics Commission Filers) 00069344 Sch: 42/76 Rpt: Meyer, Morgan D. (The Honorable) 4 Date Payee name 12/04/2023 Google Suite 6 Amount (\$) Payee address; City; State; Zip Code \$63.96 1600 Ampitheatre Parkway Mountain View, CA 94043 8 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Office Overhead/Rental Expense **EXPENDITURE** 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/OH Date Payee name 07/03/2023 H-E-B Amount (\$) Payee address; City; State; Zip Code \$65.34 7901 US-290 Austin, TX 78736 **PURPOSE** (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 Capitol Office Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 07/10/2023 H-E-B Amount (\$) Payee address; City: State; Zip Code \$29.44 5800 W Slaughter Ln. Austin, TX 78749 **PURPOSE** (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 Capitol Office Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

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	Total pages Schedule F1:	2 FILER NAM	E				3	Filer ID	(Ethics Commission I	Filers)
	Sch: 43/76 Rpt:	Meyer, Mo	rgan D. (The Honor	able)				00069344		
4	Date	5 Payee name	е							
	07/10/2023	H-E-B								
6	Amount (\$)	7 Payee addr	ess; City;	State; Zip C	ode					
	\$42.56	5800 W SI	aughter Ln.							
		Austin, TX	78749							
8	PURPOSE OF	I	See Categories listed at the to		(b)	Description				
	EXPENDITURE	Office Ove	rhead/Rental Expen	ise		_		ide of Texas. Com , officeholder living		
						Supplies for (, олронов	
						• •				
9	Complete ONLY if direct expenditure to benefit C/O		ficeholder name	Office so	ught			Office he	eld	
F	Date	Payee name	e.							
	08/22/2023	H-E-B								
⊢	Amount (\$)	Payee addr	ess; City;	State; Zip C	ode					
	\$90.74	6900 Brod		State, Zip C	ouc					
	ψ90.74	0900 Biod	ie Lii.							
		Austin, TX	78745							
	PURPOSE	(a) Category (See Categories listed at the to	p of this schedule)	(b)	Description				
	OF EXPENDITURE	Office Ove	rhead/Rental Expen	ise				ide of Texas. Com		
						Supplies for (, officeholder living	expense	
						Supplies for C	υα	ontoi Onice		
	Complete ONLY if direct expenditure to benefit C/Ol		ficeholder name	Office so	<u>l</u> ught			Office he	eld	
⊨	Dete									
	Date	Payee nam	e							
L	08/29/2023	H-E-B								
	Amount (\$)	Payee addr		State; Zip C	ode					
	\$44.85	2301 S Co	ngress Ave.							
		Austin, TX	78704							
	PURPOSE	(a) Category (See Categories listed at the to	p of this schedule)	(b)	Description				
l	OF EXPENDITURE	Office Ove	rhead/Rental Expen	ise				ide of Texas. Com		
	EXI ENDITORE					_		, officeholder living	expense	
						Supplies for 0	Ca	опо Опісе		
\vdash	Computate ONE V if allow	Compliate to (C)	tion land ou versers	Ott:				0461	stat	
	Complete ONLY if direct expenditure to benefit C/O		ficeholder name	Office so	ugnt			Office he	eiu	
L										
_										

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

Credit Card Layment	The Instruction Guide explains how to co	mplete this form.		
1 Total pages Schedule F1:	2 FILER NAME	3	Filer ID	(Ethics Commission Filers)
Sch: 44/76 Rpt:	Meyer, Morgan D. (The Honorable)		00069344	
4 Date	5 Payee name			
09/06/2023	H-E-B			
6 Amount (\$)	7 Payee address; City; State; Zip Co	de		
\$52.04	6900 Brodie Ln.			
	Austin, TX 78745			
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
OF	Office Overhead/Rental Expense		side of Texas. Comp	lete Schedule T.
EXPENDITURE	·		X, officeholder living	expense
		Supplies for Ca	ipitol Office	
		• .	- m	
9 Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sou H	ght	Office hel	d
Date	Payee name			
09/12/2023	H-E-B			
Amount (\$)	Payee address; City; State; Zip Co	de		
\$75.80	2652 Lake Austin Blvd.			
	Austin, TX 78703			
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
OF EXPENDITURE	Office Overhead/Rental Expense		side of Texas. Comp X, officeholder living (
		Supplies for Ca		expense
Complete ONLY if direct	Candidate/Officeholder name Office sou	ght	Office hel	d
expenditure to benefit C/O				
Date	Payee name			
09/14/2023	H-E-B			
Amount (\$)	Payee address; City; State; Zip Co	ıde		
\$33.71	7901 US-290			
7002				
	Austin, TX 78736			
PURPOSE		(b) Description		
OF	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description Check if travel outs	side of Texas. Comp	lete Schedule T.
EXPENDITURE	Office Overhead/Refital Expense	<u> </u>	X, officeholder living	
		Supplies for Ca	pitol Office	
Complete ONLY if direct	Candidate/Officeholder name Office sou	ght	Office hel	d
expenditure to benefit C/O	H			

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/Officen Credit Card Payment		The Instruction Guide explains how to co	-	ete this form.		OTHER (enter a	category not listed	above)
1 Total pages Sche	edule F1:	2 FILER NAME		[3	3	Filer ID	(Ethics Commi	ssion Filers)
Sch: 45/76 I	Rpt:	Meyer, Morgan D. (The Honorable)				00069344		
4 Date		5 Payee name		•				
10/23/2023		H-E-B						
6 Amount (\$)	\$73.15	7 Payee address; City; State; Zip Co 5800 W Slaughter Ln. Austin, TX 78749	ode					
8 PURPOSE			(b)	Description				
OF EXPENDITURE	:	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(10)	Description Check if travel ou Check if Austin, 7 Supplies for C	TX,	officeholder living	plete Schedule T. g expense	
9 Complete ONLY expenditure to be		Candidate/Officeholder name Office soul	ught			Office he	eld	
Date		Payee name						
10/30/2023		H-E-B						
Amount (\$)	\$40.28	Payee address; City; State; Zip Co 12225 US-290	ode					
		Austin, TX 78737						
PURPOSE OF EXPENDITURE	:	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b)	Description Check if travel ou Check if Austin, 7 Supplies for Ca	TX,	officeholder living	plete Schedule T. g expense	
Complete ONLY expenditure to be		Candidate/Officeholder name Office soul	ught			Office he	eld	
Date		Payee name						
07/03/2023		Haymaker						
Amount (\$)	\$100.37	Payee address; City; State; Zip Co 2310 Manor Rd.	ode					
		Austin, TX 78722						
PURPOSE OF EXPENDITURE	:	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	(b)	Description Check if travel or Check if Austin, 7 Office Lunch for	TX,	officeholder living		
Complete ONLY expenditure to be		Candidate/Officeholder name Office sou	<u>I</u> ught			Office he	eld	

SCHEDULE F1

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Fees Food/Beverage Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Travel Out of District OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2 FILED NAME	3 Filer ID (Ethics Commission Filers)
-	Sch: 46/76 Rpt:	Meyer, Morgan D. (The Honorable)	00069344
4	Date	5 Payee name	•
	08/02/2023	Hotels.com	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$440.16	5400 LBJ Freeway	
		Ste. 500	
		Dallas, TX 75240	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
ľ	OF		outside of Texas. Complete Schedule T.
	EXPENDITURE	Travel Out of District	, TX, officeholder living expense
		Lodging for o	fficeholder while traveling for
		officeholder o	luties
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	08/10/2023	Hotels.com	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$220.08	5400 LBJ Freeway	
		Ste. 500	
		Dallas, TX 75240	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	autoida of Taura Committee Cabadula T
	EXPENDITURE	Thavel Out of District	outside of Texas. Complete Schedule T. , TX, officeholder living expense
		I	fficeholder while traveling for
		officeholder o	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	07/03/2023	Hudson House	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$45.97	4448 Lovers Ave	
		Dallas, TX 75225	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	1 000/Develage Expense	outside of Texas. Complete Schedule T.
		l	, TX, officeholder living expense verage during mtg to discuss campaign
		issues	verage during mig to discuss campaign
_	Complete ONLY if direct	Candidate/Officeholder name	Office hold
	Complete <u>ONLY</u> 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 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: 47/76 Rpt:	Meyer, Morgan D. (The Honorable) 00069344
4	Date	5 Payee name
	07/03/2023	Jimmy John's
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$67.52	601 W Martin Luther King Jr Blvd.
		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 Eurion for Supitor stain
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/OI	
⊨	Date	Payso nama
	07/17/2023	Payee name Jimmy John's
L		
	Amount (\$)	Payee address; City; State; Zip Code
	\$49.62	601 W Martin Luther King Jr Blvd.
		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
┝	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
⊨	Date	
	Date	Payee name
	09/27/2023	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) Description
	OF EXPENDITURE	Solicitation/Fundraising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Contribution form fees for campaign website
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	Complete ONLY if direct 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 Comn

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services 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: 48/76 Rpt:	Meyer, Morgan D. (The Honorable) 00069344
4	Date	5 Payee name
	10/27/2023	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
		Contribution form fees for eampling website
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
-	Date	Dougo nomo
	11/27/2023	Payee name
		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) Description
	OF EXPENDITURE	Solicitation/Fundraising Expense
		Contribution form foos for compaign website
		Contribution form fees for campaign website
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Data	
	Date 12/27/2023	Payee name
		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) Description
	OF EXPENDITURE	Solicitation/Fundraising Expense
		Contribution form foos for compaign website
		Contribution form fees for campaign website
	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
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

orean oard rayment	The Instruction Guide explains how to c	omplete this form.		
1 Total pages Schedule F1	: 2 FILER NAME		3 Filer ID (Et	nics Commission Filers)
Sch: 49/76 Rpt:	Meyer, Morgan D. (The Honorable)		00069344	
4 Date	5 Payee name			
12/15/2023	Law Offices of Kevin C. Stewart			
6 Amount (\$)	7 Payee address; City; State; Zip C	ode		
\$625.00	6801 Yaupon Drive			
	Austin, TX 78759			
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
OF	Legal Services		utside of Texas. Complete	Schedule T.
EXPENDITURE		. –	TX, officeholder living expe	
		Campaign fina	ance and ethics co	nsulting
9 Complete <u>ONLY</u> if direct expenditure to benefit C/	Candidate/Officeholder name Office so	ught	Office held	
experiulture to beliefit C/	On .			
Date	Payee name			
07/26/2023	Law Offices of Kevin C. Stewart			
Amount (\$)	Payee address; City; State; Zip C	ode		
\$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		utside of Texas. Complete	Schedule T.
EXPENDITORE			TX, officeholder living expe	
		Campaign fina	ance and ethics co	nsuiting
Complete ONII V if direct	Candidate/Officeholder name	l colot	Office heald	
Complete ONLY if direct expenditure to benefit C/	Candidate/Officeholder name Office so OH	agnı	Office held	
Date	Payee name			
09/25/2023	Law Offices of Kevin C. Stewart			
Amount (\$)	Payee address; City; State; Zip C	ode		
\$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	I <u>Ш</u>	utside of Texas. Complete	
		_	TX, officeholder living expe	
		Campaign illia	ance and editics co	mounting
Complete ONLY if direct	Candidate/Officeholder name Office so	laht	Office held	
expenditure to benefit C/		agrit	Office field	
•				

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	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: 50/76 Rpt:	Meyer, Morgan D. (The Honorable) 00069344
4	Date	5 Payee name
	09/26/2023	Marquess, Ryan
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$70.51	1506 Ridgemont Drive
		Austin, TX 78723
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
		Contract labor for campaign convices
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Date	Davies same
		Payee name Marguage Dyon
	10/31/2023	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
		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	
_	Data	
	Date	Payee name
	12/13/2023	Maudie's Cafe
	Amount (\$)	Payee address; City; State; Zip Code
	\$72.35	2608 W 7th St.
		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
	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

EXPENDITURE CATEGORIES FOR BOX 8(a) 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

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: 51/76 Rpt:	Meyer, Morgan D. (The Honorable)		00069344	
4 Date	5 Payee name		•	
08/14/2023	Meek, Aaron			
6 Amount (\$)	7 Payee address; City; State; Zip Co	ode		
\$400.00	1404 Straus Rd.			
	Cedar Hill, TX 75104			
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
OF	Salaries/Wages/Contract Labor		el outside of Texas. Con	pplete Schedule T.
EXPENDITURE	, and the second	. —	tin, TX, officeholder living	
		Contract lab	oor for campaign	services
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sou	ught	Office h	eld
Date	Payee name			
12/26/2023	Microsoft Office			
Amount (\$)	Payee address; City; State; Zip Co	ode		
\$108.24	One Microsoft Way			
	Redmond, WA 98052			
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
OF EXPENDITURE	Office Overhead/Rental Expense		el outside of Texas. Con	
		. —	tin, TX, officeholder living	
		Campaign	Microsoft Office	Account
Complete ONLY if direct	Candidate/Officeholder name Office sou	laht	Office h	old
expenditure to benefit C/O		agni	Office II	Ciu
Data				
Date 10/25/2023	Payee name Minted			
Amount (\$)	Payee address; City; State; Zip Co	ode		
\$6,531.70	747 Front St			
	Suite 200			
	San Francisco, CA 94111			
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description		
OF EXPENDITURE	Advertising Expense	│	el outside of Texas. Con	•
		. —	tin, TX, officeholder living Cards for Campa	
		S.IIISIIIIAS C	Jai do Tor Odilipo	a
Complete ONLY if direct	Candidate/Officeholder name Office sou	<u>l</u>	Office h	eld
expenditure to benefit C/O		agrit	Office II	OIQ .

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		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: 52/76 Rpt:	Meyer, Morgan D. (The Honorable)	00069344		
4	Date	5 Payee name			
	09/06/2023	Mockingbird PTA			
6	Amount (\$)	7 Payee address; City; State; Zip Code			
ľ	\$250.00	6356 Saratoga Circle			
	Ψ200.00	ooo caratoga cirole			
		Dollar TV 75014			
		Dallas, TX 75214			
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	EXPENDITURE	Gontabations/Bonations Made By	outside of Texas. Complete Schedule T. , TX, officeholder living expense		
			of Mockingbird Carnival		
			3		
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held		
	expenditure to benefit C/OI		Since neid		
_	Date	Davies manua			
	08/25/2023	Payee name Modern Market			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$105.31	401 Congress Ave.			
		Austin, TX 78701			
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	EXPENDITURE	T 000/Beverage Expense	outside of Texas. Complete Schedule T. , TX, officeholder living expense		
		l — l —	for Capitol staff		
			.o. Capitol ctall		
	Complete ONLY if direct Candidate/Officeholder name Office sought Office held				
	expenditure to benefit C/OI				
-	Date	Davies name			
	11/16/2023	Payee name Modern Market			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$76.39	401 Congress Ave.			
		Austin, TX 78701			
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	EXPENDITURE	1 000/Develage Expense	outside of Texas. Complete Schedule T. , TX, officeholder living expense		
		l	for Capitol staff		
\vdash	Complete ONLY 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

	Candidate/Officeholder/Politica Credit Card Payment	d 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: 53/76 Rpt:	Meyer, Morgan D. (The Honorable) 00069344		
4	Date	5 Payee name		
	08/03/2023	New Friends New Life		
6	Amount (\$)	7 Payee address; City; State; Zip Code		
	\$1,000.00	P.O. Box 192378		
		Dallas, TX 75219		
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		
		Tickets to event in district for Officeholder		
		Tioned to event in district for emberiolists		
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
L	expenditure to benefit C/OI			
	Date	Payee name		
	08/14/2023	Night and Day Moving		
	Amount (\$)	Payee address; City; State; Zip Code		
	\$400.00	401 Guadalupe St		
		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		
		Moving expense for officeholder's apartment in		
		Austin		
┝	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
	expenditure to benefit C/OH			
H	Date	Payee name		
	10/11/2023	Nordstrom		
H	Amount (\$)	Payee address; City; State; Zip Code		
	\$99.59	2901 S Capital of Texas Hwy.		
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
		Austin, TX 78746		
Г	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
l	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.		
	2/11/2/10/12	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	· · · · · · · · · · · · · · · · · · ·		
\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 Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officenoider/Politica	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 54/76 Rpt:	Meyer, Morgan D. (The Honorable) 00069344
4	Date	5 Payee name
	08/16/2023	North Texas Crime Commission
6	Amount (\$) \$35.00	7 Payee address; City; State; Zip Code P.O. Box 601723
		Dallas, TX 75360
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
		Ticket for one staff member to event in district
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	10/17/2023	North Texas Crime Commission
	Amount (\$)	Payee address; City; State; Zip Code
	\$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 Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Ticket for one staff member to event in district
		Hoket for one stail member to event in district
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	10/03/2023	Office Depot
	Amount (\$)	Payee address; City; State; Zip Code
	\$46.10	5111 Greenville Ave
		Dallas, TX 75206
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		Supplies for campaign event
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/Ol	

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Office helder (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

	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: 55/76 Rpt:	Meyer, Morgan D. (The Honorable) 00069344		
4	Date	5 Payee name		
	09/29/2023	Office Max		
6	Amount (\$)	7 Payee address; City; State; Zip Code		
	\$78.35	2415 N Haskell Ave		
		Dallas, TX 75204		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.		
		Check if Austin, TX, officeholder living expense Supplies for campaign event		
		Supplies for earripting revent		
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
ľ	expenditure to benefit C/OI	the state of the s		
F	Date	Payee name		
	10/06/2023	Office Max		
┝	Amount (\$)	Payee address; City; State; Zip Code		
	\$9.19	2415 N Haskell Ave		
	Φ9.19	2413 N Haskeli Ave		
		Dallas, TX 75204		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.		
		Check if Austin, TX, officeholder living expense Supplies for campaign event		
		Supplies for earripaight event		
⊢	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
	expenditure to benefit C/OH			
⊨	Data	Development		
	Date 12/13/2023	Payee name Office Max		
	Amount (\$)	Payee address; City; State; Zip Code		
	\$92.21	2415 N Haskell Ave		
		Dallas, TX 75204		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.		
		Check if Austin, TX, officeholder living expense		
		Supplies for campaign event		
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
	expenditure to benefit C/OI	· · · · · · · · · · · · · · · · · · ·		
\vdash				
L				

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

Credit C	ard Payment	The Instruction Guid	le explains how to compl	ete this form.		
1 Total pa	ages Schedule F1:	2 FILER NAME		3	Filer ID	(Ethics Commission Filers)
Sch	h: 56/76 Rpt:	Meyer, Morgan D. (The Hono	rable)		00069344	
4 Date		5 Payee name		•		
10/23/2	2023	Open Phone				
6 Amount	t (\$)	7 Payee address; City;	State; Zip Code			
	\$10.00	149 New Montgomery Street				
		San Francisco, CA 94105				
8 PUF	RPOSE	(a) Category (See Categories listed at the	top of this schedule) (b)	Description		
	OF NDITURE	Office Overhead/Rental Expe		Check if travel outs		
LXI L	NUTTORE			Check if Austin, TX		
				Campaign phon	e subscriptio	וונ
0 Comple	ete ONLY if direct	Candidate/Officeholder name	Office cought		Office he	nid
	liture to benefit C/O		Office sought		Office file	eiu
		1				
Date	2022	Payee name				
11/24/2		Open Phone				
Amount	• •	Payee address; City;	State; Zip Code			
	\$10.00	149 New Montgomery Street				
		San Francisco, CA 94105				
	RPOSE OF	(a) Category (See Categories listed at the	' '	Description		
	NDITURE	Office Overhead/Rental Expe	nse	Check if travel outs Check if Austin, TX		
				Campaign phon		
					•	
Comple	ete ONLY if direct	Candidate/Officeholder name	Office sought		Office he	eld
expend	liture to benefit C/O	H				
Date		Payee name				
12/26/2	2023	Open Phone				
Amount	t (\$)	Payee address; City;	State; Zip Code			
	\$10.00	149 New Montgomery Street				
		San Francisco, CA 94105				
DUI	RPOSE			Description		
	OF	(a) Category (See Categories listed at the Office Overhead/Rental Expe	' '	Description Check if travel outs	ide of Texas. Com	plete Schedule T.
EXPE	NDITURE	Office Overfiead/Nerital Expe	lise	Check if Austin, TX		•
				Campaign phon	e subscription	on
	ete ONLY if direct	Candidate/Officeholder name	Office sought		Office he	eld
expend	liture to benefit C/O	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 (Contract Labor

	Credit Card Payment	The Instruction Guide explains how to complete this form.		
1	Total pages Schedule F1:	<u> </u>		
	Sch: 57/76 Rpt:	Meyer, Morgan D. (The Honorable) 00069344		
4	Date	5 Payee name		
	07/24/2023	Open Phone		
6	Amount (\$)	7 Payee address; City; State; Zip Code		
	\$10.00	149 New Montgomery Street		
		San Bruno, CA 94066		
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 phone subscription		
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
	expenditure to benefit C/OI			
_	Date	Payee name		
	08/23/2023	Open Phone		
		<u> </u>		
	Amount (\$) \$10.00	Payee address; City; State; Zip Code		
	\$10.00	149 New Montgomery Street		
		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		
		Campaign phone subscription		
	Complete ONLY if direct Candidate/Officeholder name Office sought Office held			
	expenditure to benefit C/O			
-	Date	Payee name		
	09/25/2023	Open Phone		
	Amount (\$)	Payee address; City; State; Zip Code		
	\$10.00	149 New Montgomery Street		
	φ10.00	149 New Montgomery Street		
		San Bruno, CA 94066		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
	OF	Office Overhead/Rental Expense Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.		
	EXPENDITURE	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	1		

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

	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: 58/76 Rpt:	Meyer, Morgan D. (The Honorable)	00069344	
4	Date	5 Payee name		
	10/20/2023	PF Changs		
6	Amount (\$)	7 Payee address; City; State; Zip Code		
	\$126.95	201 San Jacinto Blvd.		
		Austin, TX 78701		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
	OF EXPENDITURE	1 Toda/Beverage Expense	utside of Texas. Complete Schedule T.	
		,	TX, officeholder living expense	
		Office Edition (for Capitol staff	
_	0 1: 0 1: 0		055	
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought OH	Office held	
	Date	Payee name		
	12/04/2023	Park Cities Republican Women		
	Amount (\$)	Payee address; City; State; Zip Code		
	\$425.00	25 Highland Park Village		
		Dallas, TX 75205		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
	OF EXPENDITURE	1 CCC	utside of Texas. Complete Schedule T.	
		1 -	TX, officeholder living expense Christmas event in district	
		TWO tickets to	Christinas event in district	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought OH	Office held	
		1		
	Date	Payee name		
	08/02/2023	Park Cities Republican Women		
	Amount (\$)	Payee address; City; State; Zip Code		
	\$275.00	25 Highland Park Village		
		#100-840		
		Dallas, TX 75205		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
	OF		utside of Texas. Complete Schedule T.	
	EXPENDITURE		TX, officeholder living expense	
		Annual Memb	ership Dues	
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held	
	expenditure to benefit C/OI)H		

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	l 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: 59/76 Rpt:	Meyer, Morgan D. (The Honorable) 00069344
4	Date	5 Payee name
	08/02/2023	Park Cities Republican Women
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$275.00	25 Highland Park Village
		#100-840
		Dallas, TX 75205
8	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.
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		Annual Membership Dues
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/OI	
H	Date	Payee name
	11/21/2023	Red Maple Catering
	Amount (\$)	Payee address; City; State; Zip Code
	\$2,810.62	6269 FM 2931
	Ψ2,010.02	0203 I W 2301
		Aubrey, TX 76227
	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.
		Catering for campaign event
		Catering for earnpaign event
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	12/18/2023	Red Maple Catering
	Amount (\$)	Payee address; City; State; Zip Code
	\$3,320.39	6269 FM 2931
		Aubrey, TX 76227
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense
	ZA ZADITORZ	Check if Austin, TX, officeholder living expense
		Catering for campaign event
	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 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	Il 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: 60/76 Rpt:	Meyer, Morgan D. (The Honorable) 00069344		
4	Date	5 Payee name		
	07/17/2023	Robinson, Shelby		
6	Amount (\$)	7 Payee address; City; State; Zip Code		
	\$2,000.00	PSC 41 Box 92		
		APO, AE 09464		
8	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.		
		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		
"	expenditure to benefit C/O			
⊨	Date	Dougo nama		
	07/28/2023	Payee name Robinson, Shelby		
L				
	Amount (\$)	Payee address; City; State; Zip Code		
	\$5,000.00	PSC 41 Box 92		
		APO, AE 09464		
	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.		
		Check if Austin, TX, officeholder living expense 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/OH			
⊨	Date	Davis same		
	08/04/2023	Payee name Robinson, Shelby		
L				
	Amount (\$)	Payee address; City; State; Zip Code		
	\$2,000.00	PSC 41 Box 92		
		APO, AE 09464		
	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		
		Contract labor for campaign services		
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
I	expenditure to benefit C/Ol	· · · · · · · · · · · · · · · · · · ·		
\vdash				
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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

	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: 61/76 Rpt:	Meyer, Morgan D. (The Honorable) 00069344			
4	Date	5 Payee name			
	09/13/2023	Robinson, Shelby			
6	Amount (\$)	7 Payee address; City; State; Zip Code			
	\$2,000.00	PSC 41 Box 92			
		APO, AE 09464			
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Taylor Camplete 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			
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held			
	experialture to beriefft C/Oi	1			
	Date	Payee name			
	10/16/2023	Robinson, Shelby			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$2,000.00	PSC 41 Box 92			
		APO, AE 09464			
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor 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 expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held			
	·				
	Date	Payee name			
	11/14/2023	Robinson, Shelby			
	Amount (\$) \$2,000.00	Payee address; City; State; Zip Code PSC 41 Box 92			
	Ψ2,000.00	1 30 41 80% 32			
		APO, AE 09464			
	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			
L	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held			
	expenditure to benefit C/OI				
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	Il 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: 62/76 Rpt:	Meyer, Morgan D. (The Honorable) 00069344	
4	Date	5 Payee name	
	12/19/2023	Robinson, Shelby	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$2,000.00	PSC 41 Box 92	
		APO, AE 09464	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Salaries/Wages/Contract Labor	
		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	
	expenditure to benefit C/OI		
F	Date	Payee name	
	12/13/2023	SPECS	
H	Amount (\$)	Payee address; City; State; Zip Code	
	\$280.82	8123 Preston Rd	
	4200.02	0120 T 100101T Nd	
		Dallas, TX 75225	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense	
		Wine for campaign event	
⊢	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OH		
F	Date	Payee name	
	07/05/2023	Shell Station	
H	Amount (\$)	Payee address; City; State; Zip Code	
	\$8.99	3128 McKinney Ave	
	Ψ0.33	Unit A	
		Dallas, TX 75204	
1	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Water for campaign event	
Н	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI	1	
\vdash			
ı			

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense

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 Salaries/Wages/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to comp	lete this form.
1	Total pages Schedule F1: Sch: 63/76 Rpt:	2 FILER NAME Meyer, Morgan D. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00069344
4	Date 12/14/2023	5 Payee name Sigels	·
6	Amount (\$) \$126.78	7 Payee address; City; State; Zip Code 3209 N Fitzhugh Ave	
8	PURPOSE OF EXPENDITURE	Dallas, TX 75204 (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Wine for campaign event
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	t Office held
	Date 12/18/2023	Payee name Starbucks	
	Amount (\$) \$10.09	Payee address; City; State; Zip Code 2800 Oak Lawn Ave. Dallas, TX 75219	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description 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 expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held
	Date 08/03/2023	Payee name Swedish Hill Bakery	
	Amount (\$) \$100.23	Payee address; City; State; Zip Code 1120 W 6th St.	
		Austin, TX 78703	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense	Description 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 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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1: Sch: 64/76 Rpt:	2 FILER NAME Meyer, Morgan D. (The Honorable) 3 Filer ID (Ethics Commission Filers) 00069344
4	Date 09/12/2023	5 Payee name Swedish Hill Bakery
6	Amount (\$) \$72.90	7 Payee address; City; State; Zip Code 1120 W 6th St. Austin, TX 78703
8	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
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date 07/31/2023	Payee name TFRW
	Amount (\$) \$500.00	Payee address; City; State; Zip Code 13740 N. Highway 183 Suite J4 Austin, TX 78750
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Convention Sponsorship
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date 10/27/2023	Payee name Target
	Amount (\$) \$6.38	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 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

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		Legal Services The Instruction Guide	Salaries	Wages	s/Contract Labor		OTHER (enter a	category not listed abo	ve)
1	Total pages Schedule F1:	2 FILER NA	ME				3	Filer ID	(Ethics Commission	n Filers)
	Sch: 65/76 Rpt:	Meyer, M	lorgan D. (The Hono	rable)				00069344		
4	Date	5 Payee nai	me							
	11/16/2023	Target								
6	Amount (\$)	7 Payee add	dress; City;	State; Zip C	ode					
	\$15.78	5300 S N	ЛоРас Ехру.							
		Austin, T	X 78749							
8	PURPOSE OF	1	(See Categories listed at the t		(b)	Description				
	EXPENDITURE	Office O	/erhead/Rental Expe	nse		_		ide of Texas. Com , officeholder living		
						Supplies for (,,	
							·			
9	Complete ONLY if direct expenditure to benefit C/OI		Officeholder name	Office so	ught			Office he	eld	
┕		<u> </u>								
	Date	Payee nai	me							
L	10/26/2023	USPS								
	Amount (\$)	Payee add	•	State; Zip C	ode					
	\$5.01	111 E 17	th St.							
		Austin, T	X 78701							
	PURPOSE OF	(a) Category	(See Categories listed at the t	op of this schedule)	(b)	Description				
	EXPENDITURE	Advertisi	ng Expense					ide of Texas. Com , officeholder living		
						Mailing of Ca				
						J		J		
Н	Complete ONLY if direct	Candidate/	Officeholder name	Office so	ught			Office he	eld	
	expenditure to benefit C/OI	Н								
	Date	Payee nai	me							
	12/19/2023	Uber Eat	S							
Г	Amount (\$)	Payee add	dress; City;	State; Zip C	ode					
	\$14.20	1455 Ma	rket St. Ste 400							
		San Frar	ncisco, CA 94103							
	PURPOSE OF		(See Categories listed at the t	op of this schedule)	(b)	Description				
	EXPENDITURE	Food/Be	verage Expense			ш		ide of Texas. Com , officeholder living		
						Food for cam				
						. 553 101 04111	γu	.g otan mot		
\vdash	Complete ONLY if direct	Candidate/	Officeholder name	Office so	<u>l</u> ught			Office he	eld	
	expenditure to benefit C/OI				J -					
\vdash										
Ļ										

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

	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: 66/76 Rpt:	Meyer, Morgan D. (The Honorable)	00069344
4	Date	5 Payee name	
	12/19/2023	Uber Eats	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$94.73	1455 Market St. Ste 400	
		San Francisco, CA 94103	
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.
	LA LIBITORE	,	n, TX, officeholder living expense
		Podu foi can	npaign staff meal train
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
5	expenditure to benefit C/O		Office field
_	Date	Davies name	
	07/24/2023	Payee name United States Postal Service	
	Amount (\$)	Payee address; City; State; Zip Code 2825 Oak Lawn Ave	
	\$39.60	2825 Oak Lawii Ave	
		D. II. T. V. T. C.	
		Dallas, TX 75219	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Navertioning Expense	l outside of Texas. Complete Schedule T. n, TX, officeholder living expense
		l —	impaign materials
			. 0
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	H	
	Date	Payee name	
	08/29/2023	United States Postal Service	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$13.20	2825 Oak Lawn Ave	
		Dallas, TX 75219	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF		outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin	n, TX, officeholder living expense
		Mailing of ca	impaign materials
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought H	Office held

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

	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: 67/76 Rpt:	Meyer, Morgan D. (The Honorable)	00069344
4	Date	5 Payee name	
	11/09/2023	United States Postal Service	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$28.75	2825 Oak Lawn Ave	
		Dallas, TX 75219	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	That critising Expense	outside of Texas. Complete Schedule T.
		l	, TX, officeholder living expense mpaign materials
		Walling of Sal	npagn materials
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
ľ	expenditure to benefit C/OI		0.1133 1.13.13
_	Date	Payee name	
	12/11/2023	United States Postal Service	
	Amount (\$)	Payee address; City; State; Zip Code	_
	\$1,260.00	401 Tom Landry Hwy	
	+-,	401 Tolli Zanary Tilly	
		Dallas, TX 75260	
	PURPOSE		
	OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel of the control of the contr	outside of Texas. Complete Schedule T.
	EXPENDITURE	Advertising Expense	, TX, officeholder living expense
		Postage for c	ampaign mail piece
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	1	
	Date	Payee name	
	12/13/2023	United States Postal Service	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$58.50	401 Tom Landry Ave	
		Dallas, TX 75260	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Advertising Expense	outside of Texas. Complete Schedule T.
	LAI LINDITORE	l	, TX, officeholder living expense
		Postage for c	ampaign mail piece
	Complete ONL V if direct	Candidate/Officeholder name Office sought	Office held
	Complete ONLY if direct expenditure to benefit C/OI	•	Office field
	·		

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	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 68/76 Rpt:	Meyer, Morgan D. (The Honorable) 00069344
4	Date	5 Payee name
	12/07/2023	University Park Civic Foundation
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$500.00	3800 University Blvd
		University Park, TX 75205
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
		Candidate/Officeholder/Political Committee
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	09/06/2023	Walton's Fancy & Staple
	Amount (\$)	Payee address; City; State; Zip Code
	\$94.31	609 W 6th 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.
	EXPENDITORE	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/Ol	S
	Date	Power name
	10/13/2023	Payee name Walton's Fancy & Staple
	Amount (\$)	Payee address; City; State; Zip Code
	\$73.72	609 W 6th St.
	Ψ13.12	003 W diff St.
		Austin, TX 78701
	PURPOSE	Tu.
	OF	(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.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Office Lunch for Capitol staff
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Orange to bonom O/O	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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: 69/76 Rpt:	Meyer, Morgan D. (The Honorable) 00069344
4	Date	5 Payee name
	12/06/2023	Walton's Fancy & Staple
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$36.98	609 W 6th 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
		Office Euron for Capitor staff
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/OI	
F	Date	Payee name
	12/06/2023	Walton's Fancy & Staple
	Amount (\$)	Payee address; City; State; Zip Code
	\$77.04	609 W 6th 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
		Cinice Euron for Suprior stain
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
F	Date	Payee name
	07/18/2023	Wat, Nicholas
H	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 EXPENDITURE	Salaries/Wages/Contract Labor
	2/11/2/10/12	Check if Austin, TX, officeholder living expense
		Contract labor for campaign services
\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 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: 70/76 Rpt:	Meyer, Morgan D. (The Honorable) 00069344
4	Date	5 Payee name
	10/10/2023	Wat, Nicholas
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$750.00	2829 Reunion Blvd
		Austin, TX 78737
8	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. 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	4
_	Date	Payee name
	10/10/2023	Which Wich
	Amount (\$)	Payee address; City; State; Zip Code
	\$60.30	247 W 3rd 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
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	07/31/2023	Youtube TV
	Amount (\$)	Payee address; City; State; Zip Code
	\$79.01	149 New Montgomery Street
		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. X Check if Austin, TX, officeholder living expense
		Youtube TV service charge for officeholder's Austin
		apartment
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1

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	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: 71/76 Rpt:	Meyer, Morgan D. (The Honorable) 00069344
4	Date	5 Payee name
	07/31/2023	Youtube TV
6	Amount (\$) \$95.24	7 Payee address; City; State; Zip Code 149 New Montgomery Street
		San Bruno, CA 94066
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
		Youtube TV service charge for officeholder's Austin apartment
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	08/29/2023	Youtube TV
	Amount (\$)	Payee address; City; State; Zip Code
	\$79.01	149 New Montgomery Street
		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
		X Check if Austin, TX, officeholder living expense Youtube TV service charge for officeholder's Austin
		apartment apartment
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	08/30/2023	Youtube TV
	Amount (\$)	Payee address; City; State; Zip Code
	\$95.24	149 New Montgomery Street
		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
		X Check if Austin, TX, officeholder living expense Youtube TV service charge for officeholder's Austin
		apartment
	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

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)	_
1	Sch: 72/76 Rpt:	Meyer, Morgan D. (The Honorable) 00069344	
4	Date	5 Payee name	
	09/29/2023	Youtube TV	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$79.01	149 New Montgomery Street	
		San Bruno, CA 94066	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	\neg
	OF	Office Overhead/Rental Expense	
	EXPENDITURE	Check if Austin, TX, officeholder living expense	
		Youtube TV service charge for officeholder's Austin	
		apartment	
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
			_
	Date	Payee name	
	10/02/2023	Youtube TV	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$95.24	149 New Montgomery Street	
		g ,	
		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.	
		X Check if Austin, TX, officeholder living expense	
		Youtube TV service charge for officeholder's Austin apartment	
		apartinent	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
H	Date	Dayaa nama	=
		Payee name Voutube TV	
	10/30/2023	Youtube TV	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$79.01	149 New Montgomery Street	
		San Bruno, CA 94066	
	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	
		Youtube TV service charge for officeholder's Austin apartment	
		αμαιτιποτιτ	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI	1	
			_

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 Git/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:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 73/76 Rpt:	Meyer, Morgan D. (The Honorable) 00069344
4	Date	5 Payee name
	10/30/2023	Youtube TV
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$95.24	149 New Montgomery Street
		San Bruno, CA 94066
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 Youtube TV service charge for officeholder's Austin
		apartment
Ļ	Operation ONLY if allowed	Occalidate 10ff calculation and a contract of the contract of
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	11/30/2023	Youtube TV
	Amount (\$)	Payee address; City; State; Zip Code
	\$95.24	149 New Montgomery Street
	,	
		San Bruno, CA 94066
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
		X Check if Austin, TX, officeholder living expense
		Youtube TV service charge for officeholder's Austin apartment
	2 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	' '
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	- cxportantaro to portoni e/o.	
	Date	Payee name
	07/05/2023	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	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 ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1
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 Lenal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries (Contract Labor

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	· · · · · · · · · · · · · · · · · · ·
	Sch: 74/76 Rpt:	Meyer, Morgan D. (The Honorable) 00069344
4	Date	5 Payee name
	08/07/2023	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
	EXI ENDITORE	Compaign Zoom account
		Campaign Zoom account
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
3	expenditure to benefit C/O	
_	Date	Payee name
	09/05/2023	Zoom
	Amount (\$)	Payee address; City; State; Zip Code
	\$17.05	55 Almaden Blvd
	Ψ11.03	Floor 6
		San Jose, CA 95113
	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 Zoom account
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	10/05/2023	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	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

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

	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: 75/76 Rpt:	Meyer, Morgan D. (The Honorable) 00069344			
4	Date	5 Payee name			
	07/03/2023	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.			
		Check if Austin, TX, officeholder living expense Campaign Zoom account			
		Campaigh 200m account			
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held			
9	expenditure to benefit C/O				
H	Date	Payee name			
	08/01/2023	Zoom			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$17.05	55 Almaden Blvd			
	,	Floor 6			
		San Jose, CA 95113			
	DUDDOGE				
	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 Zoom account			
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held			
	expenditure to benefit C/OI	1			
	Date	Payee name			
	09/01/2023	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 Check if travel outside of Texas. Complete Schedule T.			
	LAFENDITORE	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				
ı					

POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

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

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

The Instruction Guide explains how to complete this form.						
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)				
Sch: 76/76 Rpt:	Meyer, Morgan D. (The Honorable)	00069344				
4 Date	5 Payee name	<u>'</u>				
10/02/2023	Zoom					
6 Amount (\$)	7 Payee address; City; State; Zip C	Code				
\$17.05	55 Almaden Blvd					
	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.				
EXI ENDITORE		Check if Austin, TX, officeholder living expense				
		Campaign Zoom account				
9 Complete ONLY if direct	Candidate/Officeholder name Office so	ught Office held				
expenditure to benefit C/O		dgiit Office field				
Date	Payron namo					
11/01/2023	Payee name Zoom					
		rada				
Amount (\$) \$17.05	Payee address; City; State; Zip C 55 Almaden Blvd	oue				
Φ17.05	33 Alinauen Bivu					
	Con loca CA 0F112					
	San Jose, CA 95113	[n]				
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description Check if travel outside of Texas. Complete Schedule T.				
EXPENDITURE	Office Overhead/Rental Expense	Check if Austin, TX, officeholder living expense				
		Campaign Zoom account				
Complete ONLY if direct	Candidate/Officeholder name Office so	ught Office held				
expenditure to benefit C/O	л 					
Date	Payee name					
12/01/2023	Zoom					
Amount (\$)	Payee address; City; State; Zip C	Code				
\$17.05	\$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	Check if travel outside of Texas. Complete Schedule T.				
-		Check if Austin, TX, officeholder living expense Campaign Zoom account				
		Sampaign 200m account				
Complete ONLY if direct	Candidate/Officeholder name Office so	ught Office held				
expenditure to benefit C/O		-9				
		V : V0 5 4 0 1 (fl 0)				

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: 1/56 Rpt: Meyer, Morgan D. (The Honorable) 00069344 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 5 Date Payee name 08/09/2023 7-Eleven Amount (\$) Payee address; City; State; Zip Code \$3.88 22017 Kuykendahl Spring, TX 77379 **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 activities 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 11/18/2023 7-Eleven Amount (\$) Payee address; City; State; Zip Code \$4.10 21735 N IH-35 West, TX 76692 **TYPE OF** Non-Political Χ Political **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description

EXPENDITURE

Complete ONLY if direct

expenditure to benefit C/OH

Food/Beverage Expense

Candidate/Officeholder name

Check if travel outside of Texas. Complete Schedule T.

Food and beverage while traveling for officeholder

Office held

Check if Austin, TX, officeholder living expense

activities

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 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: 2/56 Rpt: Meyer, Morgan D. (The Honorable) 00069344 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 5 Date Payee name 08/16/2023 AC Hotels by Marriott Amount (\$) Payee address; State; Zip Code City; \$451.45 723 Main Street Houston, TX 77002 **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 activities 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 09/17/2023 Aloft Element Austin Downtown Amount (\$) Payee address; City; State; Zip Code \$134.69 621 Congress 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. Travel Out of District **EXPENDITURE** Check if Austin, TX, officeholder living expense Lodging for officeholder for activities

Forms provided by Texas Ethics Commission

Complete ONLY if direct

expenditure to benefit C/OH

Candidate/Officeholder name

www.ethics.state.tx.us

Office sought

Version V3.5.1.0bfcfb67

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: 3/56 Rpt: Meyer, Morgan D. (The Honorable) 00069344 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 5 Date Payee name 11/09/2023 Arby's Amount (\$) Payee address; City; State; Zip Code \$11.14 110 North Head Street Belton, TX 76513 **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 activities 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 12/06/2023 **Arbys** Amount (\$) Payee address; City; State; Zip Code \$10.27 110 N. Head Street

Non-Political

Office sought

(b) Description

activities

Check if travel outside of Texas. Complete Schedule T.

Food and beverage while traveling for officeholder

Office held

Check if Austin, TX, officeholder living expense

Forms provided by Texas Ethics Commission

TYPE OF

PURPOSE

EXPENDITURE

Complete ONLY if direct

expenditure to benefit C/OH

Belton, TX 76513

Political

Food/Beverage Expense

Candidate/Officeholder name

(a) Category (See Categories listed at the top of this schedule)

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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: 4/56 Rpt: Meyer, Morgan D. (The Honorable) 00069344 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 5 Date Payee name 10/16/2023 Austin Bergstrom Itl Airport Paradies Lagardere Amount (\$) Payee address; City; State; Zip Code \$17.07 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 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 10/16/2023 Austin Bergstrom Itl Airport Paradies Lagardere Amount (\$) Payee address; City; State; Zip Code \$38.88 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 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: 5/56 Rpt: Meyer, Morgan D. (The Honorable) 00069344 \$ TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD 5 Date Payee name 09/06/2023 Bob's Steak and Chop House Amount (\$) Payee address; State; Zip Code City; \$501.10 301 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 OF Check if travel outside of Texas. Complete Schedule T. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Food and beverage during meeting to discuss officeholder issues Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 08/16/2023 **Brasas** Payee address: Amount (\$) City; State; Zip Code \$43.30 705 Main Street Houston, TX 77004 **TYPE OF** Non-Political Х Political **EXPENDITURE**

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: 6/56 Rpt: Meyer, Morgan D. (The Honorable) 00069344 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 5 Date Payee name 10/26/2023 **CEFCO** Amount (\$) Payee address; State; Zip Code City; \$4.10 11810 N. IH 35 Jarrell, TX 76537 **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 activities 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 10/30/2023 **CEFCO** Payee address: Amount (\$) City; State; Zip Code \$3.89 912 E. Central Avenue Belton, TX 76513 **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 activities 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: 7/56 Rpt: Meyer, Morgan D. (The Honorable) 00069344 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 5 Date Payee name 08/01/2023 Cantina Laredo Love Field Airport Amount (\$) Payee address; City; State; Zip Code \$52.60 808 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 and beverage while traveling for officeholder issues 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 08/22/2023 Cantina Laredo Love Field Airport Amount (\$) Payee address; City; State; Zip Code \$32.79 808 Herb Kelleher Way Dallas, TX 75235 **TYPE OF** Non-Political Χ Political **EXPENDITURE**

(b) Description

issues

Office sought

Check if travel outside of Texas. Complete Schedule T.

Food and beverage while traveling for officeholder

Office held

Check if Austin, TX, officeholder living expense

PURPOSE

EXPENDITURE

Complete ONLY if direct

expenditure to benefit C/OH

(a) Category (See Categories listed at the top of this schedule)

Food/Beverage Expense

Candidate/Officeholder name

EXPENDITURES MADE BY CREDIT CARD SCHEDULE F4 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Solicitation/Fundraising Expense Transportation Equipment & Related Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Advertising Expense Accounting/Banking Event Expense Fees Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Political Committee Food/Beverage Expense Polling Expense Travel in District Travel Out of District OTHER (enter a category not listed above) Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form. 1 Total pages Schedule F4: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 8/56 Rpt: Meyer, Morgan D. (The Honorable) 00069344 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 6 Payee name Date

	09/10/2023	Cantina Laredo Love Field Airport		
7	Amount (\$) \$26.62	8 Payee address; City; 808 Herb Kelleher Way Dallas, TX 75235	State; Zip Co	de
9	TYPE OF EXPENDITURE	X Political	Non-Pol	ical
10	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of Food/Beverage Expense	f this schedule)	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Food and beverage while traveling for officeholder issues
11	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name H	Office sou	ght Office held
	Date 10/11/2023	Payee name Cantina Laredo Love Field Airpo	rt	
	Amount (\$) \$26.62	Payee address; City; 8008 Herb Kelleher Way Dallas, TX 75235	State; Zip Co	de
	TYPE OF EXPENDITURE	X Political	Non-Pol	ical
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of Food/Beverage Expense	f this schedule)	(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Food and beverage while traveling for officeholder activities
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name H	Office sou	ght Office held

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	al Committee Legal Services	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Dlains how to complete this form.	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
1 Total pages Schedule F4:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
Sch: 9/56 Rpt:	Meyer, Morgan D. (The Honorable	e)	00069344
4 TOTAL OF UNITEMIZ	ZED EXPENDITURES CHARGED	TO A CREDIT CARD	\$
5 Date 11/17/2023	6 Payee name Casino El Camino		
7 Amount (\$) \$118.00	517 E. 6th Street	State; Zip Code	
9 TYPE OF EXPENDITURE	Austin, TX 78701	Non-Political	
		(4) -	
10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of Food/Beverage Expense	Check if trave	l outside of Texas. Complete Schedule T. in, TX, officeholder living expense everage during mtg to discuss issues
11 Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sought	Office held
Date	Payee name		
08/10/2023	Cefco		
Amount (\$) \$4.10	Payee address; City; 11810 N IH 35 Jarrell, TX 76537	State; Zip Code	
TYPE OF EXPENDITURE	X Political	Non-Political	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of Food/Beverage Expense	Check if trave	ol outside of Texas. Complete Schedule T. in, TX, officeholder living expense everage while traveling for officeholder
Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name H	Office sought	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: 10/56 Rpt: Meyer, Morgan D. (The Honorable) 00069344 \$ TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD 5 Date Payee name 11/16/2023 Chick-Fil-A Dallas Love Field Airport Amount (\$) Payee address; City; State; Zip Code \$12.10 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 and beverage while traveling for officeholder activities 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 12/05/2023 East Food Park Austin Airport Amount (\$) Payee address; City; State; Zip Code \$5.17 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 while traveling for officeholder activities 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: 11/56 Rpt: Meyer, Morgan D. (The Honorable) 00069344 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ Date 5 Payee name 09/03/2023 Hotel ZaZa Amount (\$) Payee address; State; Zip Code City; \$448.70 400 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. Travel Out of District **EXPENDITURE** Check if Austin, TX, officeholder living expense Lodging for officeholder activities 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 10/11/2023 Hotel ZaZa Amount (\$) Payee address; City; State; Zip Code \$35.44 400 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. Travel Out of District **EXPENDITURE** Check if Austin, TX, officeholder living expense Lodging cost for officeholder activities 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: 12/56 Rpt: Meyer, Morgan D. (The Honorable) 00069344 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 5 Date Payee name 11/06/2023 Hotel ZaZa Amount (\$) Payee address; State; Zip Code City; \$88.01 400 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. Travel Out of District **EXPENDITURE** Check if Austin, TX, officeholder living expense Lodging for campaign activities 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 12/01/2023 Hotel ZaZa Amount (\$) Payee address; City; State; Zip Code \$368.83 400 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. Travel Out of District **EXPENDITURE** Check if Austin, TX, officeholder living expense Lodging for campaign activities 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: 13/56 Rpt: Meyer, Morgan D. (The Honorable) 00069344 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 5 Date Payee name 08/15/2023 Hotel Zaza Amount (\$) Payee address; State; Zip Code City; \$87.57 400 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. Travel Out of District **EXPENDITURE** Check if Austin, TX, officeholder living expense Lodging for officeholder for activities 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 10/18/2023 **Hudson News Stand** Amount (\$) Payee address; City; State; Zip Code \$4.21 7655 Lemmon 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 activities 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: 14/56 Rpt: Meyer, Morgan D. (The Honorable) 00069344 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ Payee name 5 Date 08/01/2023 **Hudson News** Amount (\$) Payee address; City; State; Zip Code \$9.18 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 and beverage while traveling for officeholder activities 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 11/10/2023 Irene's Amount (\$) Payee address; City; State; Zip Code \$67.91 506 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 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: 15/56 Rpt: Meyer, Morgan D. (The Honorable) 00069344 \$ TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD 5 Date Payee name 10/24/2023 J. Carvers Austin Amount (\$) Payee address; State; Zip Code City; \$218.71 509 Rio Grande 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 during mtg to discuss officeholder issues 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 09/17/2023 JW Marriott Austin Amount (\$) Payee address; City; State; Zip Code \$412.83 110 E. 2nd Street Austin, TX 78701

Non-Political

Office sought

(b) Description

Check if travel outside of Texas. Complete Schedule T.

Office held

Check if Austin, TX, officeholder living expense Lodging for officeholder activities

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TYPE OF

PURPOSE

EXPENDITURE

Complete ONLY if direct

expenditure to benefit C/OH

Х

Travel Out of District

Candidate/Officeholder name

Political

(a) Category (See Categories listed at the top of this schedule)

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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: 16/56 Rpt: Meyer, Morgan D. (The Honorable) 00069344 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ Payee name 5 Date 09/17/2023 JW Marriott Austin Amount (\$) Payee address; State; Zip Code 110 E. 2nd Street \$412.83 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 activities 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 08/16/2023 JW Marroitt Houston Downtown Amount (\$) Payee address; City; State; Zip Code \$70.62 806 Main Street Houston, TX 77002 **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 for activities 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: 17/56 Rpt: Meyer, Morgan D. (The Honorable) 00069344 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 5 Date Payee name 10/30/2023 Jimmy Johns Amount (\$) Payee address; State; Zip Code City; \$10.60 203A North IH 35 Round Rock, TX 78681 **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 activities 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 11/13/2023 Jimmy Johns Payee address; Amount (\$) City; State; Zip Code \$5.40 203A North IH 35 Round Rock, TX 78681 **TYPE OF** Non-Political Χ Political **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description

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EXPENDITURE

Complete ONLY if direct

expenditure to benefit C/OH

Food/Beverage Expense

Candidate/Officeholder name

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Check if travel outside of Texas. Complete Schedule T.

Food and beverage while traveling for officeholder

Office held

Check if Austin, TX, officeholder living expense

activities

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: 18/56 Rpt: Meyer, Morgan D. (The Honorable) 00069344 \$ TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD Payee name 5 Date 10/23/2023 Lavaca Street Bar Amount (\$) Payee address; State; Zip Code City; \$56.16 405 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 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 11/11/2023 McDonalds Amount (\$) Payee address; City; State; Zip Code \$8.30 1601 E. 6th Street Belton, TX 76513 **TYPE OF** Non-Political Х Political **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description

EXPENDITURE

Complete ONLY if direct

expenditure to benefit C/OH

Food/Beverage Expense

Candidate/Officeholder name

Check if travel outside of Texas. Complete Schedule T.

Food and beverage while traveling for officeholder

Office held

Check if Austin, TX, officeholder living expense

activities

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: 19/56 Rpt: Meyer, Morgan D. (The Honorable) 00069344 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 5 Date Payee name 11/15/2023 McDonalds Amount (\$) Payee address; State; Zip Code City; \$4.21 1504 Corsicana Hwy Hillsboro, TX 76645 **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 activities 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 08/28/2023 North Italia Amount (\$) Payee address; City; State; Zip Code \$87.61 500 W. 2nd Street Suite 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 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: 20/56 Rpt: Meyer, Morgan D. (The Honorable) 00069344 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 5 Date Payee name 09/15/2023 North Italia Amount (\$) Payee address; City; State; Zip Code \$137.99 500 W. 2nd Street Suite 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 during meeting to dicuss officeholder issues 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 11/04/2023 Omni PGA Frisco Amount (\$) Payee address; City; State; Zip Code \$478.93 4341 PGA Pkwy Frisco, TX 75034 **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

Forms provided by Texas Ethics Commission

EXPENDITURE

Complete ONLY if direct

expenditure to benefit C/OH

Candidate/Officeholder name

www.ethics.state.tx.us

Office sought

Version V3.5.1.0bfcfb67

Check if Austin, TX, officeholder living expense Lodging for campaign activities

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: 21/56 Rpt: Meyer, Morgan D. (The Honorable) 00069344 \$ TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD 5 Date Payee name 10/19/2023 Paradies Lagardere Austin Airport Amount (\$) Payee address; City; State; Zip Code \$6.48 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 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 activities Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name Paradies Lagardere Austin Bergstrom Intl Airport 08/03/2023 Amount (\$) Payee address; City; State; Zip Code \$18.57 3600 Presidential Blvd

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: 22/56 Rpt: Meyer, Morgan D. (The Honorable) 00069344 \$ TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD 5 Date Payee name 09/08/2023 Paradies Lagardere Austin Bergstrom Intl Airport Amount (\$) Payee address; City; State; Zip Code \$82.29 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 while traveling for officeholder issues 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 08/18/2023 Pilot Amount (\$) Payee address; City; State; Zip Code \$14.03 2605 W. Commerce Buffalo, TX 75831 **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 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: 23/56 Rpt: Meyer, Morgan D. (The Honorable) 00069344 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 5 Date Payee name 10/31/2023 Pilot Amount (\$) Payee address; State; Zip Code City; \$12.86 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 activities 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 Fees	Loan Repayment/Reimbursement Office Overhead/Rental Expense	Solicitation/Fundraising Expense Transportation Equipment & Related Expense		
Consulting Expense Contributions/ Donations Made By	Food/Beverage Expense Gift/Awards/Memorials Expense	Polling Expense Printing Expense	Travel in District Travel Out of District		
Calluldate/Officeriolder/Politica	Candidate/Officeholder/Political 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 F4:	2 FILER NAME	·	3 Filer ID (Ethics Commission Filers)		
Sch: 24/56 Rpt:	Meyer, Morgan D. (The Honorable)		00069344		
4 TOTAL OF UNITEMIZ	ZED EXPENDITURES CHARGED	TO A CREDIT CARD	\$		
5 Date 11/02/2023	6 Payee name Pilot				
7 Amount (\$)		tate; Zip Code			
\$5.28	8055 South I-35	•			
	Robinson, TX 76706				
9 TYPE OF EXPENDITURE	X Political	Non-Political			
10 PURPOSE OF	(a) Category (See Categories listed at the top of thi	_ ·			
EXPENDITURE	Food/Beverage Expense		l outside of Texas. Complete Schedule T. n, TX, officeholder living expense		
		Food and be	everage while traveling for officeholder		
		activities			
11 Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sought	Office held		
Date	Payee name				
07/13/2023	Polvo's Downtown Mexican Restau	rant			
Amount (\$)	Payee address; City; Si	tate; Zip Code			
\$85.63	360 Nueces Street				
	Augtin TV 70701				
TYPE OF	Austin, TX 78701	_			
EXPENDITURE	X Political	Non-Political			
PURPOSE OF	(a) Category (See Categories listed at the top of thi	l <u> </u>			
EXPENDITURE	Food/Beverage Expense		l outside of Texas. Complete Schedule T. n, TX, officeholder living expense		
			everage during mtg to discuss		
		officeholder	issues		
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sought	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: 25/56 Rpt: Meyer, Morgan D. (The Honorable) 00069344 \$ TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD Date Payee name 5 08/09/2023 Potbelly Sandwhich Shop Amount (\$) Payee address; State; Zip Code \$8.97 6700 Spring Stuebner Road Spring, TX 77389 **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 issues 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 11/13/2023 Qi Austin Payee address: Amount (\$) City; State; Zip Code \$123.38 835 W. 6th Street Austin, TX 78703 **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 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: 26/56 Rpt: Meyer, Morgan D. (The Honorable) 00069344 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 5 Date Payee name 12/01/2023 Qi Austin Amount (\$) Payee address; State; Zip Code City; \$320.62 835 W. 6th Street Austin, TX 78703 **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 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 08/01/2023 Quattro Gatti Payee address: Amount (\$) City; State; Zip Code \$111.64 908 Congress 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 during meeting to dicuss 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: 27/56 Rpt: Meyer, Morgan D. (The Honorable) 00069344 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 5 Date Payee name 09/10/2023 Ranch 616 Amount (\$) Payee address; State; Zip Code City; 616 Nueces Street \$134.75 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 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 11/27/2023 Schlotskys Payee address: Amount (\$) City; State; Zip Code \$12.22 1012 E. 3rd Avenue Belton, TX 76513 **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 activities 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: 28/56 Rpt: Meyer, Morgan D. (The Honorable) 00069344 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 5 Date Payee name 08/15/2023 Shell Amount (\$) Payee address; State; Zip Code City; \$9.37 105 College West, TX 76691 **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 issues 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 08/31/2023 Shell Amount (\$) Payee address; City; State; Zip Code \$9.27 105 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 issues

Forms provided by Texas Ethics Commission

Complete ONLY if direct

expenditure to benefit C/OH

Candidate/Officeholder name

www.ethics.state.tx.us

Office sought

Version V3.5.1.0bfcfb67

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: 29/56 Rpt: Meyer, Morgan D. (The Honorable) 00069344 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 5 Date Payee name 11/01/2023 Shell Amount (\$) Payee address; State; Zip Code City; \$8.84 105 N. College West, TX 76691 **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 activities 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 11/08/2023 Shell Amount (\$) Payee address; City; State; Zip Code \$13.29 105 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 activities 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: 30/56 Rpt: Meyer, Morgan D. (The Honorable) 00069344 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ Date Payee name 11/28/2023 Shell Amount (\$) Payee address; State; Zip Code City; \$8.65 105 N. College West, TX 76691 **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 activities Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 07/27/2023 Southwest Airlines

5 10 11 Complete ONLY if direct Amount (\$) Payee address; City; State; Zip Code \$397.97 2702 Love Field Drive Dallas, TX 75235 **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 Flight to/from Austin 08/01 and 08/02 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 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: 31/56 Rpt: Meyer, Morgan D. (The Honorable) 00069344 \$ TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD Payee name 5 Date 08/03/2023 Southwest Airlines Amount (\$) Payee address; State; Zip Code \$198.98 2702 Love Field Drive 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. Travel Out of District **EXPENDITURE** Check if Austin, TX, officeholder living expense Changed flight to return home on thurs 08/03 from Austin 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 07/05/2023 Stephen F. Austin Royal Sonesta Hotel Amount (\$) Payee address; City; State; Zip Code \$512.53 701 Congress 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. Travel Out of District **EXPENDITURE** Check if Austin, TX, officeholder living expense Food and beverage 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: 32/56 Rpt: Meyer, Morgan D. (The Honorable) 00069344 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 5 Date Payee name 07/10/2023 Stephen F. Austin Royal Sonesta Hotel Amount (\$) Payee address; City; State; Zip Code \$1,005.44 701 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 for activities 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 08/01/2023 Stephen F. Austin Royal Sonesta Hotel Amount (\$) Payee address; City; State; Zip Code \$63.30 701 Congress 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. Travel Out of District **EXPENDITURE** Check if Austin, TX, officeholder living expense Food and beverage during stay for officeholder activities 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: 33/56 Rpt: Meyer, Morgan D. (The Honorable) 00069344 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 5 Date Payee name 07/14/2023 Subway Amount (\$) Payee address; City; State; Zip Code \$5.64 600 A.W. Loop 340 Ste. 102 Bellmead, TX 76705 **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. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Food and beverage while traveling for officeholder activities 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 08/10/2023 Subway Amount (\$) Payee address; City; State; Zip Code \$6.27 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 while traveling for 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: 34/56 Rpt: Meyer, Morgan D. (The Honorable) 00069344 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 5 Date Payee name 10/26/2023 Subway Amount (\$) Payee address; State; Zip Code City; \$6.27 11810 N IH-35 Jarrell, TX 76537 **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 activities 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 11/28/2023 Subway Payee address: Amount (\$) City; State; Zip Code \$6.92 209 S. George Kacir Drive 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.

EXPENDITURE

Complete ONLY if direct

expenditure to benefit C/OH

Food/Beverage Expense

Candidate/Officeholder name

Check if Austin, TX, officeholder living expense

activities

Office sought

Food and beverage while traveling for officeholder

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: 35/56 Rpt: Meyer, Morgan D. (The Honorable) 00069344 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 5 Date Payee name 08/09/2023 Sunoco Amount (\$) Payee address; State; Zip Code City; \$3.99 101 N. IH-45 & HWY 21 Madisonville, TX 77864 **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. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Food and beverage while traveling for officeholder activities 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 11/07/2023 The Grove Downtown Austin Amount (\$) Payee address; City; State; Zip Code \$339.84 800 W. 6th 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 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: 36/56 Rpt: Meyer, Morgan D. (The Honorable) 00069344 \$ TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD Payee name 5 Date 07/10/2023 The Neighborhood Bar Amount (\$) Payee address; State; Zip Code \$76.52 701 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. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Food and beverage during mtg to discuss officeholder issues 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 08/09/2023 The Roaring Fork Amount (\$) Payee address; City; State; Zip Code \$86.53 701 Congress 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. Food/Beverage Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Food and beverage 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: 37/56 Rpt: Meyer, Morgan D. (The Honorable) 00069344 \$ TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD Payee name 5 Date 10/23/2023 Turf N Surf Po Boy Lavaca Amount (\$) Payee address; State; Zip Code \$59.13 407 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 during mtg to discuss officeholder issues 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name Turf N Surf Po Boy Lavaca 11/01/2023 Amount (\$) Payee address; State; Zip Code \$41.53 407 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 during mtg to discuss

Complete ONLY if direct

expenditure to benefit C/OH

Candidate/Officeholder name

Office sought

officeholder issues

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: 38/56 Rpt: Meyer, Morgan D. (The Honorable) 00069344 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 5 Date Payee name 07/12/2023 Uber Amount (\$) Payee address; City; State; Zip Code \$9.46 1455 Market Street Ste. 400 San Fransico, 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 07/13/2023 Uber Amount (\$) Payee address; City; State; Zip Code \$10.50 1455 Market Street Ste. 400 San Fransico, 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

expenditure to benefit C/OH

Candidate/Officeholder name

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 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: 39/56 Rpt: Meyer, Morgan D. (The Honorable) 00069344 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 5 Date Payee name 08/02/2023 Uber Amount (\$) Payee address; City; State; Zip Code \$9.96 1455 Market Street 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 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 08/26/2023 Uber Amount (\$) Payee address; City; State; Zip Code \$28.17 1455 Market Street 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 event in Dallas

Forms provided by Texas Ethics Commission

Complete ONLY if direct

expenditure to benefit C/OH

Candidate/Officeholder name

www.ethics.state.tx.us

Office sought

Version V3.5.1.0bfcfb67

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: 40/56 Rpt: Meyer, Morgan D. (The Honorable) 00069344 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 5 Date Payee name 09/02/2023 Uber Amount (\$) Payee address; City; State; Zip Code \$28.08 1455 Market Street 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 09/08/2023 Uber Amount (\$) Payee address; City; State; Zip Code \$22.97 1455 Market Street Ste. 400

Non-Political

Office sought

(b) Description

Check if travel outside of Texas. Complete Schedule T.

Office held

Check if Austin, TX, officeholder living expense
Uber from LoveField to home in Dallas

TYPE OF

PURPOSE

EXPENDITURE

Complete ONLY if direct

expenditure to benefit C/OH

San Francisco, CA 94103

Candidate/Officeholder name

Х

Travel In District

Political

(a) Category (See Categories listed at the top of this schedule)

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: 41/56 Rpt: Meyer, Morgan D. (The Honorable) 00069344 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 5 Date Payee name 09/10/2023 Uber Amount (\$) Payee address; City; State; Zip Code \$8.97 1455 Market Street 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 within Dallas for campaign event 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 09/10/2023 Uber Amount (\$) Payee address; City; State; Zip Code \$29.97 1455 Market Street Ste. 400 San Francisco, CA 94103 **TYPE OF** Non-Political Political Χ **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 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: 42/56 Rpt: Meyer, Morgan D. (The Honorable) 00069344 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 5 Date Payee name 09/11/2023 Uber Amount (\$) Payee address; City; State; Zip Code \$9.91 1455 Market Street 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 09/15/2023 Uber Amount (\$) Payee address; City; State; Zip Code \$10.93 1455 Market Street 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: 43/56 Rpt: Meyer, Morgan D. (The Honorable) 00069344 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ Date 5 Payee name 09/16/2023 Uber Amount (\$) Payee address; City; State; Zip Code \$28.40 1455 Market Street 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 09/16/2023 Uber Amount (\$) Payee address; City; State; Zip Code \$52.81 1455 Market Street 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: 44/56 Rpt: Meyer, Morgan D. (The Honorable) 00069344 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 5 Date Payee name 09/18/2023 Uber Amount (\$) Payee address; City; State; Zip Code \$31.90 1455 Market Street 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 Austin airport 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 10/05/2023 Uber Amount (\$) Payee address; City; State; Zip Code \$14.70 1455 Market Street 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 event in Dallas to home 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: 45/56 Rpt: Meyer, Morgan D. (The Honorable) 00069344 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ Date Payee name 10/08/2023 Uber Amount (\$) Payee address; City; State; Zip Code \$26.99 1455 Market Street 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 10/08/2023 Uber Amount (\$) Payee address; City; State; Zip Code \$12.95 1455 Market Street Ste. 400 San Francisco, CA 94103 **TYPE OF** Non-Political Political Χ **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: 46/56 Rpt: Meyer, Morgan D. (The Honorable) 00069344 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ Date Payee name 10/08/2023 Uber Amount (\$) Payee address; City; State; Zip Code \$11.47 1455 Market Street 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 event in Austin to Capitol 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 10/11/2023 Uber Amount (\$) Payee address; City; State; Zip Code \$31.98 1455 Market Street Ste. 400 San Francisco, CA 94103 **TYPE OF** Non-Political Political Χ **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: 47/56 Rpt: Meyer, Morgan D. (The Honorable) 00069344 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ Date Payee name 10/12/2023 Uber Amount (\$) Payee address; City; State; Zip Code \$30.94 1455 Market Street 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 10/12/2023 Uber Amount (\$) Payee address; City; State; Zip Code \$30.94 1455 Market Street 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: 48/56 Rpt: Meyer, Morgan D. (The Honorable) 00069344 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ Date Payee name 10/16/2023 Uber Amount (\$) Payee address; City; State; Zip Code \$29.00 1455 Market Street 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 10/18/2023 Uber Amount (\$) Payee address; City; State; Zip Code \$33.94 1455 Market Street Ste. 400 San Francisco, CA 94103 **TYPE OF** Non-Political Political Χ **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: 49/56 Rpt: Meyer, Morgan D. (The Honorable) 00069344 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ Date Payee name 10/19/2023 Uber Amount (\$) Payee address; City; State; Zip Code \$62.96 1455 Market Street 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 11/14/2023 Uber Amount (\$) Payee address; City; State; Zip Code \$7.10 1455 Market Street Ste. 400 San Francisco, CA 94103 **TYPE OF** Non-Political Political Χ **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: 50/56 Rpt: Meyer, Morgan D. (The Honorable) 00069344 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 5 Date Payee name 11/16/2023 Uber Amount (\$) Payee address; City; State; Zip Code \$13.98 1455 Market Street 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 11/16/2023 Uber Amount (\$) Payee address; City; State; Zip Code \$36.92 1455 Market Street 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 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: 51/56 Rpt: Meyer, Morgan D. (The Honorable) 00069344 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 5 Date Payee name 11/17/2023 Uber Amount (\$) Payee address; City; State; Zip Code \$8.22 1455 Market Street 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 11/17/2023 Uber Amount (\$) Payee address; City; State; Zip Code \$14.50 1455 Market Street Ste. 400 San Francisco, CA 94103 **TYPE OF** Non-Political Political Χ **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: 52/56 Rpt: Meyer, Morgan D. (The Honorable) 00069344 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 5 Date Payee name 11/17/2023 Uber Amount (\$) Payee address; City; State; Zip Code \$20.11 1455 Market Street 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 11/18/2023 Uber Amount (\$) Payee address; City; State; Zip Code \$24.92 1455 Market Street 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 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: 53/56 Rpt: Meyer, Morgan D. (The Honorable) 00069344 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 5 Date Payee name 11/27/2023 Uber Amount (\$) Payee address; City; State; Zip Code \$6.81 1455 Market Street 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 event to Austin apartment 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 11/27/2023 Uber Amount (\$) Payee address; City; State; Zip Code \$5.95 1455 Market Street 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

expenditure to benefit C/OH

Candidate/Officeholder name

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 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: 54/56 Rpt: Meyer, Morgan D. (The Honorable) 00069344 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 5 Date Payee name 12/01/2023 Uber Amount (\$) Payee address; City; State; Zip Code \$20.05 1455 Market Street 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 12/01/2023 Uber Amount (\$) Payee address; City; State; Zip Code \$6.94 1455 Market Street 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 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: 55/56 Rpt: Meyer, Morgan D. (The Honorable) 00069344 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD \$ 5 Date Payee name 12/01/2023 Uber Amount (\$) Payee address; City; State; Zip Code \$30.91 1455 Market Street 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 12/05/2023 Uber Amount (\$) Payee address; City; State; Zip Code \$23.94 1455 Market Street 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 LoveField to home 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 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: 56/56 Rpt: Meyer, Morgan D. (The Honorable) 00069344 \$ TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD Payee name 5 Date 09/19/2023 West Food Park Austin Bergstrom Intl 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 while traveling for officeholder issues 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Payee name Date 10/23/2023 Whataburger Amount (\$) Payee address; City; State; Zip Code \$10.92 307 N. IH 35 Belton, TX 76513 **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.

EXPENDITURE

Complete ONLY if direct

expenditure to benefit C/OH

Food/Beverage Expense

Candidate/Officeholder name

Check if Austin, TX, officeholder living expense

activities

Office sought

Food and beverage while traveling for officeholder

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Gift/Awards/Memorials Expense Legal Services The Instruction Guide explai		Wages/Contract Labor	Travel Out of District OTHER (enter a category not listed above)					
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1	Total pages Schedule G:	2 FILER NAM			3 Filer ID (Ethics Commission Filers)						
	Sch: 1/3 Rpt: 167/170	Meyer, Mo	rgan D. (The Honorable)			00069344					
4	Date	5 Payee name	<u> </u>								
	08/31/2023	Master Ca	rd								
6	Amount (\$)										
٠	\$198.17	7 Payee address; City; State; Zip Code 2000 Purchase Street									
	Φ190.17	2000 Puici	iase sileet								
	X Reimbursement from political contributions intended	Purchase,	NY 10577								
8	PURPOSE	(a) Category (s	See Categories listed at the top of this	schedule)	(b) Description	Check if travel outside of Texas. Complete Schedule T.					
	OF EXPENDITURE	Credit Card	d Payment			Check if Austin, TX, officeholder living expense					
	EXPENDITURE				Credit card payn	nent for expenditures reported in F4					
9	expenditure to benefit	L Candidate/Office	cholder name		Office sought	Office held					
	C/OH										
	Date	Payee name									
	11/30/2023	Master Ca									
	Amount (\$)		Payee address; City; State; Zip Code								
	\$478.93	2000 Purci	nase Street								
	Reimbursement from political contributions intended	Purchase,	NY 10577								
	PURPOSE	Category (s	See Categories listed at the top of this	schedule)	Description	Check if travel outside of Texas. Complete Schedule T.					
OF EXPENDITURE		Credit Card Payment			Check if Austin, TX, officeholder living expense						
LAFLINDITORL			,			Credit card payment for expenditures reported in F4					
	Complete ONLY if direct	Candidate/Office	eholder name		Office sought	Office held					
expenditure to benefit					ŭ						
	C/OH										
	Date	Payee name	<u> </u>								
	07/31/2023	Visa									
Amount (\$) Payee address; City; State; Zip Code \$2,103.69 900 Metro Center Blvd.											
	\$2,103.69	900 Metro	Center Bivu.								
	Reimbursement from political contributions intended	Foster City	, CA 94404								
	PURPOSE	Category (s	See Categories listed at the top of this	schedule)	Description	Check if travel outside of Texas. Complete Schedule T.					
	OF EXPENDITURE	Credit Card	d Payment		[Check if Austin, TX, officeholder living expense					
	EXPENDITURE		•		Credit card payn	nent for expenditures reported in F4					
						-					
	Complete ONLY if direct expenditure to benefit C/OH	<u>I</u> Candidate/Office	cholder name		Office sought	Office held					

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

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/Politica Credit Card Payment		· · · · · · · · · · · · · · · · · · ·			Travel in District Travel Out of District r OTHER (enter a category not listed above)			
L	Creak Sara r aymont		The Instruction Guide explains	how to co	omplete this form.	_			
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4	Date	5 Payee name)						
	08/31/2023	Visa							
6	Amount (\$)	7 Payee address; City; State; Zip Code							
	\$1,213.98	900 Metro Center Blvd.							
	Reimbursement from								
	X political contributions intended								
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			_	eck if Austin, TX, officeholder living expense		
					Credit card paym	nent	for expenditures reported in F4		
9	Complete ONLY if direct expenditure to benefit	Candidate/Office	holder name		Office sought		Office held		
	expenditure to benefit C/OH								
H	Date	Payee name	1						
	09/30/2023	Visa	•						
	Amount (\$)	Payee addre	ess; City; State	· Zin Co	ode				
	\$2,537.37	1	Payee address; City; State; Zip Code 900 Metro Center Blvd.						
	X Reimbursement from political contributions intended	Easter City	CA 04404						
_			, CA 94404		l periode -	7 ~:			
PURPOSE OF			See Categories listed at the top of this sch	nedule)	Description	=	neck if travel outside of Texas. Complete Schedule T. neck if Austin, TX, officeholder living expense		
EXPENDITURE		Credit Card Payment		Credit card payment for expenditures reported in F4					
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\vdash	Complete ONLY if direct	L Candidate/Office	holder name		Office sought		Office held		
expenditure to benefit									
L	C/OH								
	Date	Payee name							
L	10/31/2023	Visa							
	Amount (\$) Payee address; City; State; Zip Code								
\$797.21 900 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	_	eck if travel outside of Texas. Complete Schedule T.		
	OF EXPENDITURE	Credit Card	l Payment		□	_	eck if Austin, TX, officeholder living expense		
					Credit card paym	nent	for expenditures reported in F4		
	Complete <u>ONLY</u> if direct expenditure to benefit	Candidate/Office	holder name		Office sought		Office held		
	C/OH								

POLITICAL EXPENDITURES FROM PERSONAL FUNDS 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 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) Credit Card Payment The Instruction Guide explains how to complete this form. Filer ID Total pages Schedule G: FILER NAME (Ethics Commission Filers) Sch: 3/3 Rpt: 169/170 Meyer, Morgan D. (The Honorable) 00069344 Date Payee name 11/30/2023 Visa 6 Amount (\$) Payee address; City; State; Zip Code \$1,025.20 900 Metro Center Blvd. Reimbursement from political contributions Х intended Foster City, CA 94404 **PURPOSE** Check if travel outside of Texas. Complete Schedule T. 8 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if Austin, TX, officeholder living expense Credit Card Payment **EXPENDITURE** Credit card payment for expenditures reported in F4 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 12/31/2023 Visa Amount (\$) Payee address; City; State; Zip Code \$786.73 900 Metro Center Blvd. Reimbursement from political contributions Χ Foster City, CA 94404 intended **PURPOSE** Check if travel outside of Texas. Complete Schedule T. Category (See Categories listed at the top of this schedule) Description OF Check if Austin, TX, officeholder living expense Credit Card Payment **EXPENDITURE** Credit card payment for expenditures reported in F4 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 V3.5.1.0bfcfb67

INTEREST, CREDITS, GAINS, REFUNDS, AND SCHEDULE K **CONTRIBUTIONS RETURNED TO FILER** 1 Total pages Schedule K: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 170/170 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Meyer, Morgan D. (The Honorable) 00069344 5 Name of person from whom amount is received 8 Amount (\$) 07/27/2023 \$802.98 Gables Republic Square 6 Address of person from whom amount is received; City; State; Zip Code Atlanta, GA 30326 Purpose for which amount is received Check if political contribution returned to filer Deposit Refund