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 Commis 00069344		2 Total pages	filed: 18
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR The Honorable	FIRST Morgan D.		MI	Date Received	CALLY FILED
	NICKNAME	LAST Meyer		SUFFIX	02/05/2024	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS	ADDRESS / PO BOX; APT 3838 Oak Lawn Avenue Suite 400	/ SUITE#; CIT	ГҮ;	ZIP CODE	Date Hand-delivered	d or Date Postmarked Amount
Change of Address	Dallas, TX 75219				Date Processed Date Imaged	
5 CAMPAIGN TREASURER NAME	MS / MRS / MR Mr.	FIRST Jeff		MI		
	NICKNAME	LAST Staubach		SUFFIX		
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO 8343 Douglas Ave., Ste. 1 Dallas, TX 75225		APT	T / SUITE #; CIT	Y; S	TATE; ZIP CODE
7 CAMPAIGN TREASURER PHONE	AREA CODE PHON (214) 438-6177	IE NUMBER	EXTENSION			
8 REPORT TYPE	January 15	30th day before		Runoff Exceeded modified reporting limit	appointment (o	campaign treasurer officeholder only) outach C/OH-FR)
9 PERIOD COVERED	Month Day Year 01/01/2024	ті	HROUGH	Month Day 01/25/20		
10 ELECTION	ELECTION DATE Month Day Year 03/05/2024		Primary General	ELECTION TYPE Runoff Special	Other	
11 OFFICE	OFFICE HELD (if any) State Representative Dist	rict 108 Dallas		12 OFFICE SOUGH State Represe	HT (if known) ntative District 10	08
		GO ⁻	TO PAGE 2			

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

2 of 18

13 C / OH NAME	Meyer, Morgan D. (The Honorable) 14 Filer ID 00069344					nmission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	FROM candidate / officeholder. These expenditures may have been made without the candidate's or office POLITICAL consent. Candidates and officeholders are required to report this information only if they receive no					
Additional Pages	COMMITTEE TYPE	COMMITTEE NAM	IE			
	GENERAL					
		COMMITTEE ADD	RESS			
	SPECIFIC					
		COMMITTEE CAM	PAIGN TREASURER NAME			
		COMMITTEE CAM	IPAIGN TREASURER ADDRES	SS		
16 CONTRIBUTION TOTALS			ONTRIBUTIONS (OTHER THA CONTRIBUTIONS MADE ELE		5,	0.00
		CAL CONTRIBUTION PLEDGES, LOANS,	NS OR GUARANTEES OF LOANS	5)	\$	43,015.00
EXPENDITURE TOTALS	3. TOTAL UNITEM	IZED POLITICAL EX	KPENDITURES		\$	0.00
	4. TOTAL POLITIC	CAL EXPENDITURE	S		\$	50,596.60
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE		IS MAINTAINED AS OF THE L	AST DAY OF THE	\$	465,168.29
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR		LL OUTSTANDING LOANS AS	OF THE LAST DAY	\$	0.00
17 AFFIDAVIT			I swear, or affirm, under penalt true and correct and includes a under Title 15, Election Code.			
			The Hono	rable Morgan D. Me	eyer	
			Signature of	Candidate or Officeh	older	
AFFIX NO	TARY STAMP / SEAL AB	OVE				
Sworn to and subs	cribed before me, by the s	aid		, this the		day
of	, 20, to co	ertify which, witness	my hand and seal of office.			
Signature of offi	cer administering	Printed name	of officer administering	Title of offic	er administe	ring oath

SUBTOTALS - C/OH

FORM COH **COVER SHEET PG 3**

				3 of 18				
18 FILER NAME19 Filer ID(Ethics Commission Filers)Meyer, Morgan D. (The Honorable)00069344								
20 SCHEDULE S NAME OF SC	SUBTOTA	AL AMOUNT						
1. X S	CHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	17,615.00				
2. X S	CHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	25,400.00				
3. S	CHEDULE B: PLEDGED CONTRIBUTIONS		\$					
4. S	CHEDULE E: LOANS		\$					
5. X S	CHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION:	5	\$	50,404.22				
6. S	CHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$					
7. S	CHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$					
8. X S	CHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	192.38				
9. S	CHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$					
10. S	CHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$					
11. S	CHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	DNS	\$					
	CHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS OF FILER	RETURNED	\$	1,012.51				
			•					

	MONET	ARY POLITICAL CO	SCHEDULE A1				
	The Instru	ction Guide explains how to	complete this forr	n.	1	Total pages Schedule A1: Sch: 1/3 Rpt: 4/18	
2	FILER NAME Meyer, Morg	an D. (The Honorable)			3	Filer ID (Ethics Commission 00069344	n Filers)
4	Date 01/22/2024	Full name of contributor Ballard, PatriciaContributor address; City; State;			7	Amount of Contribution (\$)	\$100.00
_	Deignaignal	Dallas, TX 75205	lo.	Francis or (Coo Instructions			
8	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions)		
	Date 01/22/2024					Amount of Contribution (\$)	\$250.00
		Dallas, TX 75214					
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)			
	Date 01/13/2024	Full name of contributor out-of-state PAC (ID#:) Casselberry, Craig Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$250.00
		Austin, TX 78732					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date 01/21/2024	Full name of contributor Edwards, Charles Contributor address; City; State; Dallas, TX 75205	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$100.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Date Full name of contributor out-of-state PAC (ID#:) 01/09/2024 Hooper, Dan Contributor address; City; State; Zip Code Dallas, TX 75205					Amount of Contribution (\$)	\$50.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
			I				

	MONET	ARY POLITICAL CO	SCHEDULE A1				
	The Instru	ction Guide explains how to	complete this form	n.	1	Total pages Schedule A1: Sch: 2/3 Rpt: 5/18	
2	FILER NAME Meyer, Morg	an D. (The Honorable)			3	Filer ID (Ethics Commission 00069344	on Filers)
4	Date 01/17/2024	5 Full name of contributor	out-of-state PAC (ID#:; Zip Code		7	Amount of Contribution (\$)	\$1,000.00
		Dallas, TX 75229					
8	Principal occu Consultant	pation / Job title (See Instructions)	9	Employer (See Instructions Self	5)		
	Date 01/14/2024					Amount of Contribution (\$)	\$15.00
	Dallas, TX 75229 Principal occupation / Job title (See Instructions) Employer (See Instructions)						
	Employer (See instructions)						
	Date 01/09/2024	Full name of contributor out-of-state PAC (ID#:) Moor, Malinda Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$50.00
		Dallas, TX 75230					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 01/09/2024	Full name of contributor Popolo, Joe Contributor address; City; State Dallas, TX 75225	out-of-state PAC (ID#:; Zip Code)		Amount of Contribution (\$)	\$1,000.00
	Principal occupation / Job title (See Instructions) CEO Employer (See Instructions) Charles & Potomac Ca					I	
	Date 01/22/2024	Full name of contributor Schuhmacher, Clint Contributor address; City; State Dallas, TX 75231	out-of-state PAC (ID#:; Zip Code			Amount of Contribution (\$)	\$300.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
			I_				

	MONET	ARY POLITICAL CONTRIBUTIO		SCHEDULE A1			
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 3/3 Rpt: 6/18		
2	FILER NAME Meyer, Morg	an D. (The Honorable)		3	Filer ID (Ethics Commission Filers) 00069344		
4	Date 01/10/2024	 Full name of contributor		7	Amount of Contribution (\$) \$500.00		
	Delin sin al a sau	Dallas, TX 75214	O Frankrije (Ostalastica)				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)			
	Date Full name of contributor out-of-state PAC (ID#:) 01/08/2024 Susser, Sam Contributor address; City; State; Zip Code				Amount of Contribution (\$) \$2,500.00		
		Dallas, TX 75220	Employer (See Instructions	_			
	Chairman &	pation / Job title (See Instructions) CEO	5)				
	Date Full name of contributor out-of-state PAC (ID#:) 101/17/2024 Texas Trial Lawyers Association PAC Contributor address; City; State; Zip Code				Amount of Contribution (\$) \$10,000.00		
	Principal occu	Austin, TX 78701 pation / Job title (See Instructions)	Employer (See Instructions	;) 			
				,			
	Date 01/22/2024	Full name of contributor out-of-state PAC (ID#:_ Union Pacific Corporation Fund for Effective Gov Contributor address; City; State; Zip Code Washington, DC 20004	vernment		Amount of Contribution (\$) \$1,500.00		
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)			

NON-MONETARY (IN-KIND) POLITICAL SCHEDULE A2 **CONTRIBUTIONS** 1 Total pages Schedule A2: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 7/18 3 Filer ID (Ethics Commission Filers) FILER NAME Meyer, Morgan D. (The Honorable) 00069344 \$ TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS Full name of contributor In-kind contribution out-of-state PAC (ID#: Amount of contribution (\$) description 01/25/2024 Dade Phelan Campaign \$12,700.00 | Campaign Polling 7 Contributor address; City; State; Zip Code Austin, TX 78763 Check if travel outside of Texas. Complete Schedule T. 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) 11 Employer (FOR NON-JUDICIAL) (See instructions) 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) Date Full name of contributor out-of-state PAC (ID#: Amount of In-kind contribution contribution (\$) description 01/17/2024 Texans for Lawsuit Reform PAC \$12,700.00 | Campaign Polling Contributor address; City; State; Zip Code Austin, TX 78701 Check if travel outside of Texas. Complete Schedule T. Employer (FOR NON-JUDICIAL) Principal occupation / Job title (FOR NON-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 contributor's spouse (if any) (FOR JUDICIAL) If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

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	Committee Le	t/Awards/Memorials Expens gal Services ne Instruction Guide ex	Salaries/V	Vages	/Contract Labor		Travel Out of Dis	strict category not listed above)
1 -	Total pages Cabadula E4:						2	Filor ID	(Ethios Commission Filers)
1 1	Total pages Schedule F1: Sch: 1/9 Rpt: 8/18		n D. (The Honorab	le)			3	Filer ID 00069344	(Ethics Commission Filers)
4 [Date	Payee name							
C	01/02/2024	AT&T							
6 <i>A</i>	Amount (\$)	Payee address;	City;	State; Zip Co	de				
	\$65.63	208 S. Akard	Street						
		Dallas, TX 75	202						
8	PURPOSE	a) Category (See (Categories listed at the top of	this schedule)	(b)	Description			
	OF EXPENDITURE		ad/Rental Expense						plete Schedule T.
	LAI LINDITORE					Check if Austin,			
						apartment	cna	irge, interne	et for officeholder's Austin
						арантын			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Office	holder name	Office sou	ght			Office h	eld
	experientare to benefit 6/61								
	Date	Payee name							
C	01/23/2024	Adobe							
P	Amount (\$)	Payee address;	City;	State; Zip Co	de				
	\$25.97	345 Park Ave	nue						
		San Jose, CA	95110						
	PURPOSE OF		Categories listed at the top of		(b)	Description			
	EXPENDITURE	Office Overhe	ad/Rental Expense	!		=		de of Texas. Com officeholder living	plete Schedule T.
						ш			re for campaign
	Complete ONLY if direct	Candidate/Office	holder name	Office sou	l ight			Office he	eld
е	expenditure to benefit C/OI								
	Date	Payee name							
	01/18/2024	Allyn Political							
	Amount (\$)	Payee address;	City;	State; Zip Co	nde				
′	\$5,000.00		vn Avenue #400	- Lip 00					
	ψ3,000.00	JOJO Oak Lav	vii / Wellue #400						
		Dallas, TX 752	219						
	PURPOSE	a) Category (See (Categories listed at the top of	this schedule)	(b)	Description			
	OF	Consulting Ex					outsio	de of Texas. Com	plete Schedule T.
	EXPENDITURE	J	•			ш		officeholder living	g expense
						Consulting fe	е		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Office	holder name	Office sou	ght			Office he	eld
	Apenditure to beliefit C/OI								

SCHEDULE F1

Advertising Expense Ever
Accounting/Banking Fees
Consulting Expense Food
Contributions/ Donations Made By - Gift/

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			Legal Services	Expense	Salaries/W		e /Contract Labor		OTHER (enter	a category not listed above)	
	Credit Card Payment			The Instruction G	uide explains h	now to cor	mple	ete this form.				
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	(Ethics Commission File	ers)
	Sch: 2/9 Rpt: 9/18		Meyer, Morç	gan D. (The Ho	norable)					00069344		
4	Date	5	Payee name									
	01/18/2024		Allyn Politica	al								
6	Amount (\$)	7	Payee addres	ss; City;	State;	Zip Co	de					
	\$5,000.00		3838 Oak L	awn Avenue #4	100							
			Dallas, TX 7	'5219								
8	PURPOSE	(a)		ee Categories listed at t	N 4 4 41-1 11-	-11-1	(b)	Description				
ľ	OF	(",	Consulting E		ine top of this sche	eaule)	(~)		outsi	de of Texas. Cor	nplete Schedule T.	
	EXPENDITURE		• • • • • • • • • • • • • • • • • • •	pooo				Check if Austin,	, TX,	officeholder livin	g expense	
								Consulting fe	е			
9	Complete ONLY if direct expenditure to benefit C/OH		Candidate/Offic	ceholder name	0	ffice sou	ght			Office h	eld	
	experialitire to beliefit C/OI											
	Date		Payee name									
	01/18/2024		Allyn Politica	al								
	Amount (\$)		Payee addres	ss; City;	State;	Zip Co	de					
	\$11,626.05		3838 Oak La	awn Avenue #4	100							
			Dallas, TX 7	'5219								
	PURPOSE	(a)	Category (Se	ee Categories listed at t	the top of this sche	edule)	(b)	Description				
	OF EXPENDITURE		Advertising					=			nplete Schedule T.	
								—		officeholder livin	g expense	
								Printing camp	Jait	jii sigiis		
-	Complete ONLY if direct	<u> </u>		ceholder name	0	ffice soug	aht			Office h	eld	
	expenditure to benefit C/O		Janarate/Onic	ceriolaer riame	O	mee sout	giit			Office II	Cid	
_	Date		Davisa nama									
	01/18/2024		Payee name Allyn Politica	al								
_					Ctata:	7in Co	do					
	Amount (\$) \$3,591.25		Payee addres	ss;		Zip Co	ue					
	Ψ3,391.23		3030 Oak L	awii Avenue #4	.00							
			Dallac TV 3	7E210								
		_	Dallas, TX 7				<i>a</i> >					
	PURPOSE OF	(a) 		ee Categories listed at t	the top of this sche	edule)	(b)	Description Check if travel of	nutsi	de of Texas Cor	nplete Schedule T.	
	EXPENDITURE		Event Exper	ise						officeholder livin		
									itin	g, postage f	or invite for campaig	jn
								fundraiser				
	Complete ONLY if direct		Candidate/Offic	ceholder name	0	ffice sou	ght			Office h	eld	
	expenditure to benefit C/OI	Н										

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica Credit Card Payment	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: 3/9 Rpt: 10/18	Meyer, Morgan D. (The Honorable) 00069344
4	Date	5 Payee name
	01/18/2024	Allyn Political
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$17,161.25	3838 Oak Lawn Avenue #400
		Dallas, TX 75219
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Creative, printing, postage for campaign mailer
		Croadvo, printing, poolage for earripaign mailer
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	01/17/2024	Byers, Jenna
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,700.00	2610 Allen Street
		Apt. 1508
		Dallas, TX 75204
	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 earripaight services
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	01/02/2024	Constant Contact
	Amount (\$)	Payee address; City; State; Zip Code
	\$288.89	1601 Trapelo Road
		Watham, MA 02451
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		☐ Check if Austin, TX, officeholder living expense E-newsletter account for campaign
		E-newsietter account for campaign
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

	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: 4/9 Rpt: 11/18	Meyer, Morgan D. (The Honorable) 00069344
4	Date	5 Payee name
	01/25/2024	Event Brite
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$35.00	535 Mission Street
		San Francisco, CA 94105
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 the Institute for Policy
		Innovation Monthly Meeting
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	01/08/2024	Extra Space Storage
	Amount (\$)	Payee address; City; State; Zip Code
	\$217.00	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
		Gampaign clorage anno
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
H	Date	Payee name
	01/11/2024	Extra Space Storage
-	Amount (\$)	Payee address; City; State; Zip Code
	\$230.00	4920 McKinney Avenue
	Ψ230.00	4020 Michinicy Avenue
		Dallas, TX 75204
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Campaign storage units
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	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 Co

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: 5/9 Rpt: 12/18	Meyer, Morgan D. (The Honorable) 00069344
4	Date	5 Payee name
	01/19/2024	Extra Space Storage
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$332.00	4920 McKinney Avenue
	1	
		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
	1	Campaign storage units
	!	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	Н
	Date	Payee name
	01/02/2024	Google Suite
	Amount (\$)	Payee address; City; State; Zip Code
	\$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 Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	!	Online office support software for campaign
	!	
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OH	
F	Date	Payee name
	01/02/2024	Jack Boles Parking
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,212.40	8150 Brookriver Dr
	!	
	!	Dallas, TX 75247
	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.
	<u> </u>	Check if Austin, TX, officeholder living expense Parking service for campaign event
	!	I diving service for earipaigh event
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

SCHEDULE F1

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 6/9 Rpt: 13/18	Meyer, Morgan D. (The Honorable) 00069344
4	Date	5 Payee name
	01/09/2024	Marquess, Ryan
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$750.00	1506 Ridgemont Drive
		Austin, TX 78723
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.
		Contract labor for campaign services
		Contract labor for earlipaign services
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
\vdash	Data	Para a same
	Date	Payee name
	01/23/2024	Open Phone
	Amount (\$)	Payee address; City; State; Zip Code
	\$10.00	149 New Montgomery Street
		San Francisco, CA 94105
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
		Compaign phane subservition
		Campaign phone subscription
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	
_	_	
	Date	Payee name
	01/16/2024	QT Outside
	Amount (\$)	Payee address; City; State; Zip Code
	\$39.18	3181 Lemmon Ave
		Dallas, TX 75204
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
	ZAI ZIAZITORZ	Check if Austin, TX, officeholder living expense
		Gas for campaign related travel
_	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

Advertising Expense Accounting/Banking

Event Expense Fees

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		xpens Wages	e /Contract Labor		Travel in District Travel Out of District OTHER (enter a category not listed above)			
1	Total pages Schedule F1:			7		Filer ID (Ethics Commission Filers)			
	Sch: 7/9 Rpt: 14/18	Meyer, Morgan D. (The Honorable)				00069344			
4	Date	Payee name							
	01/16/2024	Robinson, Shelby							
6	Amount (\$)	7 Payee address; City; State; Zip Co	ode						
	\$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					
	EXPENDITURE	Salaries/Wages/Contract Labor				e 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 sou	ıght			Office held			
	Date	Payee name							
	01/11/2024	USPS							
	Amount (\$)	Payee address; City; State; Zip Code							
\$8.85 2825 Oak Lawn Ave									
		Dallas, TX 75219							
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description					
OF EXPENDITURE		Advertising Expense		=		e of Texas. Complete Schedule T.			
			ш	Austin, TX, officeholder living expense of campaign materials					
				g 0. 0am	12.00				
	Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought H				Office held			
	Date	Payee name							
	01/16/2024	USPS							
	Amount (\$)	Payee address; City; State; Zip Co	ode						
	\$66.00	2825 Oak Lawn Ave							
Dallas, TX 75219									
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description					
	OF EXPENDITURE	Advertising Expense		ш		e of Texas. Complete Schedule T.			
				Check if Austin, The Mailing of cam		officeholder living expense ian materials			
				aming or carr	.pu	aga materiale			
	Complete ONLY if direct	Candidate/Officeholder name Office sou	<u>l</u> ıght			Office held			
	expenditure to benefit C/OI	2	J -						

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Event Expense Loan Repayment/Reimbu

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political 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 Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)

	Credit Card Payment	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: 8/9 Rpt: 15/18	Meyer, Morgan D. (The Honorable) 00069344								
4	Date	5 Payee name								
	01/23/2024	USPS								
6	Amount (\$)	7 Payee address; City; State; Zip Code								
	\$100.00	2825 Oak Lawn Ave								
		Dallas, TX 75219								
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.									
		Check if Austin, TX, officeholder living expense Mailing of campaign materials								
		mailing of campaign materials								
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held								
	expenditure to benefit C/OI									
H	Date	Payee name								
	01/25/2024	USPS								
	Amount (\$)	Payee address; City; State; Zip Code								
	\$18.50									
	,									
		Dallas, TX 75219								
-										
	OF	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T.								
	EXPENDITURE	Check if Austin, TX, officeholder living expense								
		Mailing of campaign materials								
	Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH									
	Date	Payee name								
	01/04/2024	Wat, Nicholas								
	Amount (\$) Payee address; City; State; Zip Code									
	\$750.00 2829 Reunion Blvd									
	Austin, TX 78737									
	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								
H	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

Credit Card Payment		Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.					OTHER (enter a category not listed above)						
1 Total pages Schedule F1: 2								_	E'' 15	(Filtre Occurrence Filtre)			
1	Sch: 9/9 Rpt: 16/18	2		an D. (The Hono	rahle)			3	Filer ID 00069344	(Ethics Commission Filers)			
_		 -		Tan D. (The Hono									
4	Date	5	Payee name										
	01/02/2024	Youtube TV											
6	Amount (\$)	7	Payee addres		State; Zip Co	ode							
	\$95.24		149 New Mo	ntgomery Street									
			San Bruno, 0	CA 94066									
8	PURPOSE	(a)	Category (Se	e Categories listed at the	top of this schedule)	(b)	Description						
OF EXPENDITURE		Office Overhead/Rental Expense				Check if travel outside of Texas. Complete Schedule T.							
EXPENDITORE				Check if Austin, TX, officeholder living expense									
							apartment	tellation charge, internet for officeholder's Austin					
_		L				<u> </u>	арантон						
9	Complete ONLY if direct expenditure to benefit C/Ol		Candidate/Offic	enolder name	Office sou	ught			Office h	ela			
		_											
	Date		Payee name										
	01/02/2024		Zoom										
	Amount (\$)		Payee addres	s; City;	State; Zip Co	ode							
	\$17.05		55 Almaden	Blvd									
			Floor 6										
			San Jose, C	A 95113									
	PURPOSE	(a)	Category (Se	e 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						
							Campaign 20	JUII	i account				
	Complete ONLY if direct	<u> </u>	Candidate/Offic	eholder name	Office sou	ıaht			Office h	old			
	expenditure to benefit C/Ol		Janalaate/Onic	cholder hame	Office 300	agrit			Office fi	ciu			
\vdash													

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/Political Committe

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

Candidate/Officeholder/Politica			laries/Wages/Cont		THER (enter a category no	ot listed above)				
	The Instr	ruction Guide explains how	to complete th	nis form.						
1 Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethics C	Commission Filers)				
Sch: 1/1 Rpt: 17/18	Meyer, Morgan D. (The Honorable)			00069344					
4 CREDIT CARD	Name of finar	ncial institution		OF UNITEMIZED						
ISSUER	JPMorga	an Chase		DITURES ED TO A CREDIT	\$					
			CARD							
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issuer	r Paid					
	\$128.25	01/12/2024								
7 PAYEE	(a) Payee name	_	(b) Payee a		City,	State, Zip Code				
	Sevy's Grill	8201 Preston Road								
	Jevy 5 Orm									
2 PURPOSE OF	(a) Cotogony		Dallas, TX 75225							
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of	of this schedule)	(b) Description Food and beverage during campaign meeting to discuss campaign issues							
X Political	Food/Beverage Exper	ıse								
Non-Political	/									
	(c) Check if travel outside of Candidate/Officeholder	of Texas. Complete Schedule T.	e sought	Check if Austin, TX,	Office held	e 				
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate, Officeriolae,		e sought		Office ficia					
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issuer	r Paid					
	\$64.13	01/23/2024								
PAYEE	(a) Payee name		(b) Payee address; City, State, Zip Code							
	Ramble Room	6565 Hillc	rest Rd Suite 15	50						
	Ramble Room									
	() 0-1		Dallas, TX							
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of	of this schedule)	(b) Description Food and beverage during campaign meeting to discuss							
X Political	Food/Beverage Exper	nse	campaign issues							
Non-Political	(a) Charle if traval autoida	of Texas. Complete Schedule T.	. Check if Austin, TX, officeholder living expense							
Complete ONLY if direct	(c) Check if travel outside of Candidate/Officeholder	· · · · · · · · · · · · · · · · · · ·	ce sought Office held							
expenditure to benefit C/OH			o ooug		Cinec neig					
<u>'</u>	1									
l										

INTEREST, CREDITS, GAINS, REFUNDS, AND SCHEDULE K **CONTRIBUTIONS RETURNED TO FILER** Total pages Schedule K: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 18/18 2 FILER NAME Filer ID (Ethics Commission Filers) Meyer, Morgan D. (The Honorable) 00069344 8 Amount (\$) Date 5 Name of person from whom amount is received 01/02/2024 Gables Republic Square \$882.56 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 Refund for officeholder apartment in Austin Amount (\$) Date Name of person from whom amount is received 01/02/2024 Specs \$129.95 Address of person from whom amount is received; City; State; Zip Code Dallas, TX 75225 Purpose for which amount is received Check if political contribution returned to filer Returned items after campaign event