JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH COVER SHEET PG 1

The JC/OH Instruction	Guide explains how to co	mplete this form.	1 Filer ID (Ethics Comm 00065943	,	2 Total pages	filed: 16
3 CANDIDATE /	MS / MRS / MR	FIRST		MI		USE ONLY
OFFICEHOLDER NAME	The Honorable	Amy C.			Date Received	
					ELECTRONI	CALLY FILED
	NICKNAME	LAST		SUFFIX	07/14/2024	
	NORNAME	Meachum		50111X		
4 CANDIDATE / OFFICEHOLDER MAILING	ADDRESS / PO BOX; A	PT / SUITE #; CI ⁻	TY;	ZIP CODE	Date Hand-delivered	d or Date Postmarked
ADDRESS	REDACTED PER 2	54.0313, GOV'T (CODE		Receipt #	Amount
Change of Address					Date Processed	
					Date Imaged	
5 CAMPAIGN	MS / MRS / MR	FIRST			MI	
TREASURER NAME	Mr.	Dan				
	NICKNAME	LAST Richards			SUFFIX	
		Richards				
6 CAMPAIGN TREASURER	STREET ADDRESS (NO I	PO BOX PLEASE);	AP	T / SUITE #; CITY;	S	TATE; ZIP CODE
ADDRESS	REDACTED PER 2	54 0313 COVT	CODE			
(Residence or Business)	KEDACTED FER Z	54.0515, 60710	CODE			
7 CAMPAIGN	AREA CODE PH	ONE NUMBER	EXTENSION			
TREASURER PHONE	(512) 476-0005					
8 REPORT TYPE	January 15	30th day befor	e election	Runoff		campaign treasurer fficeholder only)
	X July 15	8th day before		Exceeded modified		Attach C/OH-FR)
	X July 15			reporting limit		
9 PERIOD	Month Day Yea			Month Day	Year	
COVERED	01/01/2024	TI	HROUGH	06/30/202	4	
10 ELECTION	ELECTION DATE	1		ELECTION TYPE		
	Month Day Yea	ν Πι	Primary	Runoff	Other	
			General			
			Concia	Special		
11 OFFICE	OFFICE HELD (if any)	ł		12 OFFICE SOUGHT	(if known)	
	District Judge District 2	01 Travis		District Judge Di	strict 201	
			TO PAGE 2			
Forms provided by Te	exas Ethics Commission	www.e	thics.state.tx.u	s	Vers	sion V4.1.0.d378aba0

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH COVER SHEET PG 2 2 of 16

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13 C / OH NAME	13 C / OH NAME Meachum, Amy C. (The Honorable) 14 Filer ID 00065943							
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or po These expenditures may have been d officeholders are required to report	n made without the candidate's or of	ficeholder's kn	owledge or			
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME						
	GENERAL							
	COMMITTEE ADDRESS							
	SPECIFIC							
	COMMITTEE CAMPAIGN TREASURER ADDRESS							
16 CONTRIBUTION TOTALS	^{5,} \$	0.00						
				\$	0.00			
EXPENDITURE		PLEDGES, LOANS, OR GUARANT IZED POLITICAL EXPENDITURES	,		0.00			
TOTALS				\$	0.00			
	4. TOTAL POLIT	ICAL EXPENDITURES		\$	5,416.51			
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINEI ERIOD	D AS OF THE LAST DAY OF THE	\$	71,730.58			
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	AL AMOUNT OF ALL OUTSTANDI TING PERIOD	NG LOANS AS OF THE LAST DAY	\$	0.00			
17 AFFIDAVIT								
			n, under penalty of perjury, that the t and includes all information require Election Code.					
			The Honorable Amy C. Mea	chum				
			Signature of Candidate or Office					
AFFIX NO	TARY STAMP / SEAL AB	OVE						
Sworn to and subso	cribed before me, by the s	aid	, this the		day			
		ertify which, witness my hand and se						
Signature of offic	cer administering oath	Printed name of officer admin	istering oath Title of off	icer administer	ing oath			
Forms provided by Te	xas Ethics Commissior	www.ethics.state.tx	.us	Version V4	1.1.0.d378aba0			

FORM JC/OH COVER SHEET PG 3

3	of	16
0	01	тc

	8 FILER NAME19 Filer ID(Eth 00065943Meachum, Amy C. (The Honorable)00065943						
20 SCHEDUL NAME OF	SUBTOTAL AMOUNT						
1.	\$						
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$				
3.	SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)		\$				
4.	SCHEDULE E(J): LOANS (JUDICIAL)		\$				
5. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	S	\$ 3,882.64				
6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$				
7.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$				
8. X	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$ 1,533.87				
9.	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$				
10.	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$				
11.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIO	SNC	\$				
12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F TO FILER	RETURNED	\$				

SUBTOTALS - JC/OH

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

	EXPENDITURE CATEGORIES FOR BOX 8(a)						
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains 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 F1:		3 Filer ID (Ethics Commission Filers)				
-	Sch: 1/3 Rpt: 4/16	Meachum, Amy C. (The Honorable)	00065943				
4	Date 01/08/2024	Payee name Chase Card Services					
6	Amount (\$) \$609.82	Payee address; City; State; Zip Code PO Box 15123 Wilmington, DE 19850-5123					
8	PURPOSE OF EXPENDITURE		l outside of Texas. Complete Schedule T. n, TX, officeholder living expense credit Card Payment				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held				
	Date	Payee name					
	02/07/2024	Chase Card Services					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$109.82	PO Box 15123 Wilmington, DE 19850-5123					
	PURPOSE OF EXPENDITURE		l outside of Texas. Complete Schedule T. n, TX, officeholder living expense Predit Card Payment				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held				
	Date	Payee name					
	03/07/2024	Chase Card Services					
	Amount (\$) \$109.84	Payee address;City;State;Zip CodePO Box 15123					
		Wilmington, DE 19850-5123					
	PURPOSE OF EXPENDITURE		l outside of Texas. Complete Schedule T. n, TX, officeholder living expense credit Card Payment				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held				

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

	EXPENDITURE CATEGORIES FOR BOX 8(a)						
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimburse Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contract Lal	ense Transportation Equipment & Related Expense Travel in District Travel Out of District OOTHER (enter a category not listed above)				
1	Total pages Schedule F1:		3 Filer ID (Ethics Commission Filers)				
-	Sch: 2/3 Rpt: 5/16	Meachum, Amy C. (The Honorable)	00065943				
4	Date 04/09/2024	Payee name Chase Card Services					
6	Amount (\$) \$314.06	Payee address; City; State; Zip Code PO Box 15123 Wilmington, DE 19850-5123 Vilmington, DE 19850-5123					
8	PURPOSE OF EXPENDITURE		on f travel outside of Texas. Complete Schedule T. f Austin, TX, officeholder living expense gn Credit Card Payment				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held				
	Date	Payee name					
	05/07/2024	Chase Card Services					
	Amount (\$) \$119.67	Payee address; City; State; Zip Code PO Box 15123					
		Wilmington, DE 19850-5123					
	PURPOSE OF EXPENDITURE		on f travel outside of Texas. Complete Schedule T. f Austin, TX, officeholder living expense gn Credit Card Payment				
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held				
	Date	Payee name					
	06/07/2024	Chase Card Services					
	Amount (\$) \$119.43	Payee address; City; State; Zip Code PO Box 15123					
		Wilmington, DE 19850-5123					
	PURPOSE OF EXPENDITURE		on f travel outside of Texas. Complete Schedule T. f Austin, TX, officeholder living expense gn Credit Card Payment				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held				

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		EXPENDITURE CATE Event Expense Fees Food/Beverage Expense Gitl/Awards/Memorials Expense Legal Services The Instruction Guide expla	Loan Repayn Office Overha Polling Exper Printing Expe Salaries/Wag	nent/Reimbursement ead/Rental Expense ase nse es/Contract Labor		Travel in District Travel Out of Dis	quipment & Related Expense
1	Total pages Schedule F1:	2 FILER NAM	Ξ			3	Filer ID	(Ethics Commission Filers)
	Sch: 3/3 Rpt: 6/16		Amy C. (The Honorable)			00065943	``````````````````````````````````````
4	Date 03/22/2024	5 Payee name Travis Cou	nty Democratic Party			1		
6	Amount (\$) \$2,500.00	 Payee addre 1311 East Austin, TX 	6th Street Suite B	tate; Zip Code				
8	PURPOSE OF EXPENDITURE	Contributio	ee Categories listed at the top of thi ns/Donations Made By Officeholder/Political Co	, , ,	Check if Austin	i, TX, d	officeholder living	olete Schedule T. expense) sponsor TCDP
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		iceholder name	Office sough	t		Office he	ld

		ENDITURE CATEGORIE		.,			
Advertising Expense Accounting/Banking Consulting Expense	Event Expe Fees Food/Povo	0	oan Repayment/R Iffice Overhead/Re olling Expense	ental Expense Tra	ilicitation/Fundraising Expense ansportation Equipment & Related Expense avel in District		
Contributions/ Donations Made By Candidate/Officeholder/Politica	/ - Gift/Awards	s/Memorials Expense P	rinting Expense alaries/Wages/Co	Tra	avel Out of District FHER (enter a category not listed above)		
	5	ruction Guide explains how	-				
1 Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethics Commission Filers)		
Sch: 1/10 Rpt: 7/16	Meachum, Amy C.	(The Honorable)			00065943		
4 CREDIT CARD	Name of finar	ncial institution		OF UNITEMIZED			
ISSUER	Ch	ase		DITURES GED TO A CREDIT	\$		
6 PAYMENT	(a) Amount Charged	(b) Date of Charge		Credit Card Issuer	Paid		
	\$48.46	01/01/2024	02/07/20	24			
7 PAYEE	(a) Payee name		(b) Payee		City, State, Zip Code		
	Google		1600 Am	phitheatre Parkw	yay		
8 PURPOSE OF	(a) Category		(b) Descrip	View, CA 94043	· · · · · · · · · · · · · · · · · · ·		
EXPENDITURE	(See Categories listed at the top	of this schedule)	· /		and G-Suite from Google		
X Political	Office Overhead/Rent	tal Expense		P			
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.			officeholder living expense		
9 Complete <u>ONLY</u> if direct	Candidate/Officeholder	•	ce sought		Office held		
expenditure to benefit C/OH			Ū				
PAYMENT	(a) Amount Charged	(b) Date of Charge		Credit Card Issuer	r Paid		
	\$48.48	02/01/2024	03/07/20	24			
PAYEE	(a) Payee name		(b) Payee		City, State, Zip Code		
	Google		1600 Amphitheatre Parkway				
				Mountain View, CA 94043			
PURPOSE OF	(a) Category		(b) Descrip	-			
EXPENDITURE	(See Categories listed at the top	,	Campaign phone number and G-Suite from Google				
X Political	Office Overhead/Rent	tal Expense			J. J		
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.	1	Check if Austin, TX,	officeholder living expense		
Complete <u>ONLY</u> if direct	Candidate/Officeholder	name Offi	ce sought		Office held		
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) 05/07/20	Credit Card Issue	r Paid		
	\$46.05	04/01/2024	05/07/20	24			
PAYEE	(a) Payee name		(b) Payee		City, State, Zip Code		
	Google		1600 Am	phitheatre Parkw	/ay		
			Mountain	View, CA 94043	3		
PURPOSE OF	(a) Category		(b) Descrip				
EXPENDITURE	(See Categories listed at the top	,	. , .		and G-Suite from Google		
X Political	Office Overhead/Rent	lai Expense					
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.	1	Check if Austin, TX,	officeholder living expense		
Complete <u>ONLY</u> if direct	Candidate/Officeholder		ce sought	<u> </u>	Office held		
expenditure to benefit C/OH							

	EXPI	ENDITURE CATEGORI	IES FOR BOX 10(a)				
Advertising Expense Accounting/Banking	Fees			Solicitation/Fundraising Expense Transportation Equipment & Related Expense			
Consulting Expense Contributions/ Donations Made By	- Gift/Award	ls/Memorials Expense	Printing Expense	Travel in District Travel Out of District			
Candidate/Officeholder/Politica	5		Salaries/Wages/Contract Labor ow to complete this form.	OTHER (enter a category not listed above)			
1 Total pages Schedule F4:				3 Filer ID (Ethics Commission Filers)			
Sch: 2/10 Rpt: 8/16	Meachum, Amy C.	(The Honorable)		00065943			
4 CREDIT CARD		ncial institution	5 TOTAL OF UNITEMIZED				
ISSUER		revious	EXPENDITURES	\$			
	300 p	Tevious	CHARGED TO A CRED	IT			
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issu	ier Paid			
	\$48.24	05/01/2024	06/07/2024				
7 PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code			
	Google		1600 Amphitheatre Park	xway			
	Coogio			40			
8 PURPOSE OF	(a) Category		(b) Description	43			
EXPENDITURE	(See Categories listed at the top	of this schedule)	., .	er and G-Suite from Google			
X Political	Office Overhead/Rent	tal Expense					
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule		X, officeholder living expense			
9 Complete <u>ONLY</u> if direct	Candidate/Officeholder		fice sought	Office held			
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issu	ier Paid			
	\$48.24	06/01/2024					
PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code			
	Google		1600 Amphitheatre Park	1600 Amphitheatre Parkway			
	Coogle			Mountain View, CA 04042			
	(a) Catagony		(b) Description	43			
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	., .	Campaign phone number and G-Suite from Google			
X Political	Office Overhead/Ren	tal Expense	Campaign phone number and C-Suite norm Coogle				
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule		X, officeholder living expense			
Complete <u>ONLY</u> if direct	Candidate/Officeholder	•	fice sought	Office held			
expenditure to benefit C/OH			0				
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issu	ier Paid			
	\$46.05	06/01/2024					
PAYEE	(a) Payee name	•	(b) Payee address;	City, State, Zip Code			
	Google		1600 Amphitheatre Park	way			
	Coogie			10			
	(a) Catagony		(b) Description	43			
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	., .	er and G-Suite from Google			
X Political	Office Overhead/Rent	tal Expense					
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule		X, officeholder living expense			
Complete <u>ONLY</u> if direct	Candidate/Officeholder		fice sought	Office held			
expenditure to benefit C/OH		-	J.				
	l						

		EXPE	ENDITURE CATEGORIE	S FOR BOX 10(a)				
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	- Gift/Award	rage Expense P s/Memorials Expense P	oan Repayment/Reimbur ffice Overhead/Rental Ex olling Expense rinting Expense alaries/Wages/Contract I	xpense Tra Tra Tra	icitation/Fundraising I Insportation Equipment Ivel in District Ivel Out of District HER (enter a categor	nt & Related I	
	Candidate/Onicenoiden/Politica	5	ruction Guide explains how	0			y not iisteu ai	JUVE)
1	Total pages Schedule F4:	2 FILER NAME	-	-		3 Filer ID (Ethio	s Commiss	sion Filers)
	Sch: 3/10 Rpt: 9/16	Meachum, Amy C.	(The Honorable)			00065943		
4	CREDIT CARD	Name of final	ncial institution	5 TOTAL OF U				
	ISSUER	see pi	revious	EXPENDITU CHARGED 1 CARD	IRES TO A CREDIT	\$		
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Cred	dit Card Issuer	Paid		
		\$10.00	01/17/2024	03/07/2024				
7	PAYEE	(a) Payee name	•	(b) Payee addre	ess;	City,	State,	Zip Code
		Action Network		1900 L St. NV	V #900			
		ACIION NELWORK						
_				Washington,	DC 20036			
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description	or campaign (email distributi	on	
	X Political	Fees		Wonany ice it	or campaign		011	
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.		book if Austin TX	officeholder living exp	0000	
9	Complete ONLY if direct	Candidate/Officeholder	•	ce sought		Office held	chise	
-	xpenditure to benefit C/OH			<u> </u>				
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Crea	dit Card Issuer	Paid		
		\$10.00	02/17/2024	04/09/2024				
	PAYEE	(a) Payee name	L	(b) Payee addre	ess;	City,	State,	Zip Code
		Action Network		1900 L St. NV	V #900			
		ACTION NETWORK						
		(a) Catagony		Washington,	DC 20036			
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description	or campaign (email distributi	on	
	X Political	Fees		working lee k	or campaign		011	
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.		heck if Austin, TX, o	officeholder living exp	ense	
-	Complete ONLY if direct	Candidate/Officeholder		ce sought	,	Office held		
e	xpenditure to benefit C/OH							
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Cred	dit Card Issuer	Paid		
		\$10.00	04/17/2024	06/07/2024				
	PAYEE	(a) Payee name		(b) Payee addre		City,	State,	Zip Code
		Action Network		1900 L St. NV	N #900			
				Washington,	DC 20036			
-	PURPOSE OF	(a) Category		(b) Description	2020000			
	EXPENDITURE	(See Categories listed at the top	of this schedule)		or campaign (email distributi	on	
	X Political	Fees			-			
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.	 □ ⊂	heck if Austin, TX, o	officeholder living exp	ense	
	Complete <u>ONLY</u> if direct	Candidate/Officeholder	name Offi	ce sought		Office held		
e	xpenditure to benefit C/OH							

	EXP	ENDITURE CATEGOR	RIES FOR BOX	10(a)				
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	y - Fees Food/Bev Gift/Award	Fees Off Food/Beverage Expense Po Gift/Awards/Memorials Expense Pri		fice Overhead/Rental Expense Tran Illing Expense Trav inting Expense Trav		olicitation/Fundraising Expense ransportation Equipment & Related Expense ravel in District ravel Out of District THER (enter a category not listed above)		
	The Ins	truction Guide explains I	how to complete	his form.				
1 Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethics	Commiss	ion Filers)	
Sch: 4/10 Rpt: 10/16	Meachum, Amy C.	(The Honorable)			00065943			
4 CREDIT CARD	Name of fina	ancial institution		OF UNITEMIZED				
ISSUER	see p	previous		DITURES ED TO A CREDIT	\$			
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issue	r Paid			
	\$10.00	05/17/2024						
7 PAYEE	(a) Payee name		(b) Payee	address;	City,	State,	Zip Code	
	Action Network		1900 L S	t. NW #900				
	ACIION NELWORK							
			(b) Descrip	on, DC 20036				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	o of this schedule)			email distribution	ı		
X Political	Fees		Nonany I	ee for ouripuigh				
Non-Political		of Toyon, Complete Schedule		Chook if Austin TX	officeholder living expen	<u></u>		
)ffice sought		Office held	se		
expenditure to benefit C/OH								
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issue	r Paid			
	\$12.98	01/22/2024	03/07/20	24				
PAYEE	(a) Payee name	1	(b) Payee	address;	City,	State,	Zip Code	
	Hewlett Packard		6280 Am	6280 America Center Drive				
			San Jose	, CA 95002				
PURPOSE OF	(a) Category		(b) Descrip					
	(See Categories listed at the top Printing Expense	of this schedule)	Ink for ca	Ink for campaign printer				
X Political								
Non-Political		e of Texas. Complete Schedule		Check if Austin, TX,	officeholder living expen	se		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholde	r name C	Office sought		Office held			
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issue	r Paid			
	\$15.14	04/22/2024	06/07/20					
	φ13.14	04/22/2024						
PAYEE	(a) Payee name		(b) Payee	address;	City,	State,	Zip Code	
			6280 Am	erica Center Driv	/e			
	Hewlett Packard							
			San Jose	, CA 95002				
PURPOSE OF	(a) Category (See Categories listed at the top	of this schodulo)	(b) Descrip					
	Printing Expense		Ink for ca	mpaign printer				
X Political								
Non-Political		e of Texas. Complete Schedule		Check if Austin, TX,	officeholder living expen	se		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholde	r name C	Office sought		Office held			

		EXPE	ENDITURE CATEGOR	RIES FOR BOX 10(a)					
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	- Gift/Awards I Committee Legal Serv	rage Expense s/Memorials Expense ices	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor	Tra Tra Tra	icitation/Fundraising Expense nsportation Equipment & Related E vel in District vel Out of District HER (enter a category not listed at			
	T		ruction Guide explains r	now to complete this form.			· · · = = 1 · · · · · ·		
1	Total pages Schedule F4:		(T)			3 Filer ID (Ethics Commiss	lion Filers)		
_	Sch: 5/10 Rpt: 11/16	Meachum, Amy C.				00065943			
4	CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEM EXPENDITURES CHARGED TO A CF CARD		\$			
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card	Issuer	Paid			
•		\$15.14	06/22/2024	(0) 2 40(0) 0.041 044 4					
7	PAYEE	(a) Payee name	I	(b) Payee address;		City, State,	Zip Code		
				6280 America Cente	er Drive	е			
		Hewlett Packard							
				San Jose, CA 95002	2				
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schodula)	(b) Description					
		Printing Expense	of this schedule)	Ink for campaign prir	nter				
	X Political	5							
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	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card	Issuer	Paid			
		\$170.46	06/10/2024						
	PAYEE	(a) Payee name		(b) Payee address;		City, State,	Zip Code		
		Zoom Video Comm	unications Inc	55 Almaden Blvd., 6	55 Almaden Blvd., 6th Floor				
					San Jaco, CA 0E112				
		(a) Catagony		San Jose, CA 95113	3				
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e	xpenditure to benefit C/OH								
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card	Issuer	Paid			
		\$200.00	06/07/2024						
	PAYEE	(a) Payee name		(b) Payee address;		City, State,	Zip Code		
		Austin Bar Associat	tion	816 Congress Avenu	ue, Su	ite 700			
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				Austin, TX 78701					
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Sch: 6/10 Rpt: 12/16 Meachum, Amy C. (The Honorable) 00065943 4 CREDIT CARD ISSUER Name of financial institution see previous 5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT \$ 6 PAYMENT (a) Amount Charged S38.38 (b) Date of Charge 01/01/2024 (c) Date(s) Credit Card Issuer Paid 02/07/2024 \$ 7 PAYEE (a) Payee name Google (b) Date of this schedule) Office Overhead/Rental Expense (b) Payee address; City, State, Zip Co 1600 Amphitheatre Parkway 8 PURPOSE OF EXPENDITURE Sependiture to benefit C/OH (a) Category (see Category (see Category fice of this schedule) Office Overhead/Rental Expense (b) Date of this schedule) Office Overhead/Rental Expense (b) Date of this schedule) Office Sought (c) Date(s) Credit Card Issuer Paid 03/07/2024 9 Complete QNLY if direct expenditure to benefit C/OH (a) Amount Charged S38.38 (b) Date of Charge 02/01/2024 (c) Date(s) Credit Card Issuer Paid 03/07/2024 PAYEE (a) Payee name Google (b) Date of Charge 02/01/2024 (b) Date; City, State, Zip Co 1600 Amphitheatre Parkway Mountain View, CA 94043 PAYEE (a) Payee name Google (b) Date of Charge 02/01/2024 (b) Date; Citek if Austin, Tx, differender living expense PAYEE (a) Payee name Google (b) Date of Charge 02/01/2024 (b) Date; Credit Card Issuer Paid 03/07/2024 PAYEE (a) Amoun							
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Google Mountain View, CA 94043 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Campaign phone number and G-Suite from Google Non-Political (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held PAYMENT (a) Amount Charged \$48.48 (b) Date of Charge 03/01/2024 (c) Date(s) Credit Card Issuer Paid 04/09/2024	PAYEE	(a) Payee name	(b) Payee addres	ss;	City, State, Zip Code		
PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Campaign phone number and G-Suite from Google Non-Political (c) Check if travel outside of Texas. Complete Schedule T. Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held PAYMENT (a) Amount Charged \$48.48 (b) Date of Charge 03/01/2024 (c) Date(s) Credit Card Issuer Paid 04/09/2024				1600 Amphithe	eatre Parkw	ay	
PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Campaign phone number and G-Suite from Google Non-Political (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held PAYMENT (a) Amount Charged \$48.48 (b) Date of Charge 03/01/2024 (c) Date(s) Credit Card Issuer Paid 04/09/2024		Google					
EXPENDITURE (See Categories listed at the top of this schedule) Office Overhead/Rental Expense Campaign phone number and G-Suite from Google Non-Political (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held PAYMENT (a) Amount Charged \$48.48 (b) Date of Charge 03/01/2024 (c) Date(s) Credit Card Issuer Paid 04/09/2024				Mountain View	, CA 94043		
X Political Office Overhead/Rental Expense Campaign phone number and G-Suite non Google Non-Political (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held PAYMENT (a) Amount Charged (b) Date of Charge (c) Date(s) Credit Card Issuer Paid 04/09/2024							
X Political Image: Complete on the system of the syst			,	Campaign pho	ne number	and G-Suite from Google	
Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held PAYMENT (a) Amount Charged (b) Date of Charge (c) Date(s) Credit Card Issuer Paid \$48.48 03/01/2024 04/09/2024	X Political						
expenditure to benefit C/OH PAYMENT (a) Amount Charged \$48.48 (b) Date of Charge 03/01/2024 (c) Date(s) Credit Card Issuer Paid 04/09/2024	Non-Political	(C) Check if travel outside	eck if travel outside of Texas. Complete Schedule T.		eck if Austin, TX,	officeholder living expense	
PAYMENT (a) Amount Charged (b) Date of Charge (c) Date(s) Credit Card Issuer Paid \$48.48 03/01/2024 04/09/2024	Complete ONLY if direct	name Of	ice sought		Office held		
\$48.48 03/01/2024 04/09/2024	expenditure to benefit C/OH						
\$48.48 03/01/2024	PAYMENT	(a) Amount Charged	(b) Date of Charge		t Card Issuer	Paid	
		\$48.48	03/01/2024	04/09/2024			
PAYEE (a) Payee name (b) Payee address; City, State, Zip Co	PAYEE	(a) Payee name Google		(b) Payee address; City, State, Zip Cod			
1600 Amphitheatre Parkway				1600 Amphitheatre Parkway			
Google							
Mountain View, CA 94043							
PURPOSE OF (a) Category (b) Description							
		(See Categories listed at the top of this schedule) Office Overhead/Rental Expense		Campaign phone number and G-Suite from Google		and G-Suite from Google	
	X Political						
X Political	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T		eck if Austin, TX,	officeholder living expense	
	Complete ONLY if direct	Candidate/Officeholder	name Of	ice sought		Office held	
X Political Non-Political (c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense							

		D	SCHEDULE F4				
	EXPE	IES FOR BOX 10(a)					
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	Event Expense Loa Fees Offi Food/Beverage Expense Pol Gift/Awards/Memorials Expense Prir		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 Inst	ruction Guide explains h	ow to complete this form.				
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics Commission Filers)			
Sch: 7/10 Rpt: 13/16	Meachum, Amy C.	(The Honorable)		00065943			
4 CREDIT CARD	Name of final	ncial institution	5 TOTAL OF UNITEM	ZED			
ISSUER	see p	revious	EXPENDITURES CHARGED TO A CR CARD	REDIT \$			
6 PAYMENT (a) Amount Charged (b) Date of Charge			(c) Date(s) Credit Card	Issuer Paid			
	\$42.60	03/01/2024	04/09/2024				
7 PAYEE	(a) Payee name	•	(b) Payee address;	City, State, Zip Co			
			1600 Amphitheatre F	Parkway			
	Google						
			Mountain View, CA 9	94043			
8 PURPOSE OF	(a) Category		(b) Description				
EXPENDITURE	(See Categories listed at the top		Campaign phone nu	mber and G-Suite from Google			
X Political	Office Overhead/Rent	lai Experise					
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T. Check if Aus	tin, TX, officeholder living expense			
9 Complete <u>ONLY</u> if direct	Candidate/Officeholder	name O	ffice sought	Office held			
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card	Issuer Paid			
	\$48.48	04/01/2024	05/07/2024				
PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Co			
			1600 Amphitheatre F				
	Google		····				
			Mountain View, CA 9	94043			
PURPOSE OF	(a) Category		(b) Description				
EXPENDITURE	(See Categories listed at the top		Campaign phone nu	mber and G-Suite from Google			
X Political	Office Overhead/Rent	lai Expense					
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T. Check if Aus	tin, TX, officeholder living expense			
Complete ONLY if direct Candidate/Officeholder name			ffice sought	Office held			
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card	Issuer Paid			
	\$46.05	05/01/2024	06/07/2024				
PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Coo			
			1600 Amphitheatre Parkway				
	Google						
			Mountain View, CA 94043				
PURPOSE OF	(a) Category		(b) Description				
EXPENDITURE (See Categories listed at the top of this schedule) Office Overhead/Rental Expense			Campaign phone number and G-Suite from Google				
X Political		ui Lapense					
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	T. Check if Aus	tin, TX, officeholder living expense			
Complete ONLY if direct	Candidate/Officeholder		ffice sought	Office held			
expenditure to benefit C/OH							

	Accounting/Banking Fees Offi Consulting Expense Food/Beverage Expense Pol			Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Transportation Equipment & Related Expense Travel in District							
	Contributions/ Donations Made By Candidate/Officeholder/Politica		rinting Expense alaries/Wages/Co	ntract Labor O	avel Out of District THER (enter a category	not listed at	oove)				
			The Instruction Guide explains how to complete this form.								
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (Ethics	s Commiss	ion Filers)			
	Sch: 8/10 Rpt: 14/16	Meachum, Amy C.	(The Honorable)			00065943					
4	CREDIT CARD ISSUER	Name of fina see p	EXPEN	OF UNITEMIZED DITURES GED TO A CREDIT	\$						
6	PAYMENT	(a) Amount Charged \$10.00	(b) Date of Charge 03/17/2024	(c) Date(s) 05/07/20	Credit Card Issue 24	r Paid					
7	PAYEE	(a) Payee name		(b) Payee	address;	City,	State,	Zip Code			
				1900 L S	t. NW #900						
		Action Network									
				-	Washington, DC 20036						
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Descrip		omoil diotributio					
	X Political	Fees		Monuny	ee for campaign)[]				
	Non-Political	(C) Check if travel outside of Texas. Complete Schedule T.			Check if Austin, TX,	officeholder living expe	nse				
			ce sought		Office held						
expenditure to benefit C/OH											
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s)	Credit Card Issue	r Paid					
		\$10.00	06/17/2024								
	PAYEE	(a) Payee name	1	(b) Payee	address;	City,	State,	Zip Code			
		Action Notwork		1900 L S	t. NW #900						
	Action Network										
					Washington, DC 20036						
PURPOSE OF (a) Category EXPENDITURE (See Categories listed at the top of this schedule)			(b) Descrip								
	X Political			Monthly fee for campaign email distribution							
	Non-Political (C) Check if travel outside of Texas. Complete Schedule T.			•	Check if Austin, TX,	officeholder living expe	nse				
			ce sought		Office held						
e	xpenditure to benefit C/OH										
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) 04/09/20	Credit Card Issue	r Paid					
		\$12.98	02/22/2024	04/09/20	24						
	PAYEE	(a) Payee name		(b) Payee address;		City,	State,	Zip Code			
	Howlett Deckard		6280 America Center Drive								
		Hewlett Packard									
				San Jose, CA 95002							
	PURPOSE OF EXPENDITURE				(b) Description						
	_	Printing Expense		INK for ca	mpaign printer						
	X Political										
	Non-Political		of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living expe	nse				
e	Complete <u>ONLY</u> if direct xpenditure to benefit C/OH	Candidate/Officeholder name Office sought				Office held					

		EXPE	RIES FOR BOX 10(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 Tra Polling Expense Tra Printing Expense Tra		olicitation/Fundraising Expense ransportation Equipment & Related Expense ravel in District ravel Out of District THER (enter a category not listed above)				
		The Inst	ruction Guide explains	how to complete this form.						
1 Tota	al pages Schedule F4:	2 FILER NAME			3	Filer ID (Ethic	s Commiss	ion Filers)		
Sch	n: 9/10 Rpt: 15/16	Meachum, Amy C.	00065943							
	EDIT CARD	Name of final	5 TOTAL OF UNITEMIZ							
ISS	UER	see pi	EXPENDITURES CHARGED TO A CRI CARD	EDIT						
6 PA	YMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card I	ssuer P	Paid				
		\$15.14	03/22/2024	05/07/2024						
7 PA	YEE	(a) Payee name		(b) Payee address;		City,	State,	Zip Code		
				6280 America Center	Drive					
		Hewlett Packard								
				San Jose, CA 95002						
	RPOSE OF PENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description						
		Printing Expense	Ink for campaign print	ter						
X	X Political									
	Non-Political (c) Check if travel outside of Texas. Complete Schedule T. Complete ONLY if direct Candidate/Officeholder name Office					ficeholder living expe	ense			
	nplete <u>ONLY</u> if direct	Candidate/Officeholder	name C	Office sought		Office held				
•	YMENT	(a) Amount Charged	(c) Date(s) Credit Card I	ssuer P	Paid					
		\$15.14	(b) Date of Charge 05/23/2024							
PA	YEE	(a) Payee name		(b) Payee address;		City,	State.	Zip Code		
				6280 America Center	Drive	0.0)	otato,	p 0000		
		Hewlett Packard								
				San Jose, CA 95002						
PURPOSE OF (a) Category				(b) Description						
EXPENDITURE (See Categories listed at the top of this schedule) X Political			Ink for campaign print	ter						
	Non-Political (c) Check if travel outside of Texas. Complete Schedule T.			e T. Check if Austi	in, TX, off	ficeholder living expe	ense			
Con	nplete <u>ONLY</u> if direct	Candidate/Officeholder	name C	Office sought		Office held				
expen	expenditure to benefit C/OH									
PA	YMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card I 04/09/2024	ssuer P	Paid				
		\$200.00 03/04/2024		04/03/2024						
PAYEE		(a) Payee name USPS -Chimney Corners Station		(b) Payee address;		City,	State,	Zip Code		
				3575 Far West Blvd.						
		(a) Category		Austin, TX 78731						
	RPOSE OF PENDITURE	(a) Category (See Categories listed at the top		(b) Description Campaign PO Box rental						
X	-	Office Overhead/Rent			indi					
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule	e T. Check if Austi	in, TX, off	ficeholder living expe	ense			
Con	nplete <u>ONLY</u> if direct	Candidate/Officeholder	name C	Office sought		Office held				
expen	diture to benefit C/OH									

		EXPE	NDITURE CATEGOR	IES FOR BOX 10(a)				
	Advertising Expense Accounting/Banking Consulting Expense		age Expense	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense	Tra Tra	icitation/Fundraisi Insportation Equip Ivel in District	ment & Related I	Expense
	Contributions/ Donations Made By Candidate/Officeholder/Politica		/Memorials Expense ces	Printing Expense Salaries/Wages/Contract Labor		vel Out of District HER (enter a cate		oove)
		The Instru	uction Guide explains h	low to complete this form.				
1	Total pages Schedule F4:	2 FILER NAME				3 Filer ID (E	thics Commiss	sion Filers)
	Sch: 10/10 Rpt: 16/16	Meachum, Amy C. (The Honorable)			00065943		
4	CREDIT CARD	Name of finan	cial institution	5 TOTAL OF UNITED		•		
	ISSUER	see pro	evious	EXPENDITURES CHARGED TO A C CARD		\$		
6	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card	d Issuer	Paid		
Ŭ	.,	.,	.,		4 100401	- ala		
		\$200.00	06/07/2024					
7	PAYEE	(a) Payee name		(b) Payee address;		City,	State,	Zip Code
				816 Congress Aver	าue. Su		,	
		Austin Bar Associati	ion		,			
				Austin, TX 78701				
8	PURPOSE OF	(a) Category		(b) Description				
	EXPENDITURE	(See Categories listed at the top of Contributions/Donation		Contribution to the	Austin I	Bar Associa	tion	
	X Political	Candidate/Officeholde		e				
	Non-Political	(c) Check if travel outside o	f Texas. Complete Schedule	T. Check if A	ustin, TX, d	officeholder living	expense	
9	Complete ONLY if direct	Candidate/Officeholder	name O	ffice sought		Office held		
e	xpenditure to benefit C/OH							
	PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Care	d Issuer	Paid		
		\$69.00	06/09/2024					
	PAYEE	(a) Payee name		(b) Payee address;		City,	State,	Zip Code
	=			3600 Presidential B	livid	City,	State,	
		ABIA			iva.			
				Austin, TX 78719				
	PURPOSE OF	(a) Category (See Categories listed at the top of	of this askadula)	(b) Description				
		Fees	or this schedule)	Parking Fee				
	X Political							
	Non-Political	(C) Check if travel outside o	f Texas. Complete Schedule		ustin, TX, d	officeholder living	expense	
	Complete ONLY if direct	Candidate/Officeholder	name O	ffice sought		Office held		
e	xpenditure to benefit C/OH							