# 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 filed: 78
3 CANDIDATE /	MS / MRS / MR	FIRST		MI	OFFICE USE ONLY
OFFICEHOLDER NAME	The Honorable	Morgan D.			Date Received
					ELECTRONICALLY FILED
	NICKNAME	LAST		SUFFIX	01/15/2025
		Meyer		33.1.11	
4 CANDIDATE /	ADDRESS / PO BOX; APT		۸٠	ZIP CODE	Date Hand-delivered or Date Postmarked
OFFICEHOLDER	3838 Oak Lawn Avenue	700112 11, 011	',	211 0002	
MAILING ADDRESS	Suite 400				Receipt # Amount
Change of Address	Dallas, TX 75219				
	Banas, 17(10210				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 DI EVSE).	ΛD	T / SUITE #; CITY;	STATE; ZIP CODE
TREASURER	8343 Douglas Ave., Ste. 1		AF	1730HE#, CHT,	, STATE, ZIF CODE
ADDRESS	bougids / We., etc. 1				
(Residence or Business)	Dallas, TX 75225				
7 CAMPAIGN TREASURER		NE NUMBER E	EXTENSION		
PHONE	(214) 438-6177				
8 REPORT					
TYPE	X January 15	30th day before	election	Runoff	15th day after campaign treasurer appointment (officeholder only)
	July 15	8th day before	election $\square$	Exceeded modified	Final Report (Attach C/OH-FR)
				reporting limit	
9 PERIOD	Month Day Year			Month Day	Year
COVERED	10/27/2024	T⊢	IROUGH	12/31/202	24
10 ELECTION	ELECTION DATE		rimary	ELECTION TYPE	Cothor
	Month Day Year 03/03/2026	X P	ninary	Runoff	Other
	00/00/2020	□G	eneral	Special	
44 055105	OFFICE LIEUS (%			140 055105 000505	F ('tt
11 OFFICE	OFFICE HELD (if any) State Representative Distr	rict 108 Dallac		12 OFFICE SOUGHT	Γ (if known) tative District 108
	State Representative Disti	net 100 Danas		State Represent	tative District 100
		GO T	O PAGE 2		
		55 1	JI AUL Z		

# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

# FORM C/OH COVER SHEET PG 2

2 of 78

13 C / OH NAME	Meyer, Morgan D. (Tl	ne Honorable)	<b>14</b> Filer ID (00069344	Ethics Commission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	olitical contributions accepted or political ex These expenditures may have been made u officeholders are required to report this info	without the candidate's or office	holder's knowledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		
ш°	GENERAL			
		COMMITTEE ADDRESS		
	SPECIFIC			
		COMMITTEE CAMPAIGN TREASURER N	IAME	
		COMMITTEE CAMPAIGN TREASURER A	NDDRESS	
16 CONTRIBUTION TOTALS		ZED POLITICAL CONTRIBUTIONS (OTHE ES OF LOANS, OR CONTRIBUTIONS MAI		\$ 0.00
		AL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF	LOANS)	<b>\$</b> 159,051.92
EXPENDITURE TOTALS				
	4. TOTAL POLITIC		<b>\$</b> 148,604.76	
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF RIOD	THE LAST DAY OF THE	<b>\$</b> 155,974.30
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOATING PERIOD	ANS AS OF THE LAST DAY	\$ 0.00
<b>17</b> AFFIDAVIT			r penalty of perjury, that the acculudes all information required to Code.	
		The	Honorable Morgan D. Mey	er
		Sign	ature of Candidate or Officehol	der
AFFIX NO	TARY STAMP / SEAL ABO	DVE		
Sworn to and subs	cribed before me, by the s	aid	, this the	day
of	, 20, to ce	rtify which, witness my hand and seal of off	ice.	
Signature of office	cer administering	Printed name of officer administering	Title of officer	administering oath

### **SUBTOTALS - C/OH**

### FORM COH **COVER SHEET PG 3**

				3 of 78
18 FILER NAME Meyer, Morg	gan D. (The Honorable)	<b>19</b> Filer ID 00069344	(Ethics Comn	nission Filers)
20 SCHEDULE S	SUBTOTALS		SUBTO	TAL AMOUNT
1. X S	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	100,349.94
2. X S	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	58,701.98
3. S	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4. S	SCHEDULE E: LOANS		\$	
5. X S	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION:	S	\$	140,135.53
6. S	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7. S	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
8. X S	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	3,955.39
9. X S	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	4,513.84
10. S	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$	
11. S	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	
	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS I TO FILER	RETURNED	\$	512.45

	MONET	ARY POLITICAL CONTRIBUTIO	Ν	IS		SCHEDULE A1	
	The Instru	ction Guide explains how to complete this fo	ori	m.	1	Total pages Schedule A1: Sch: 1/14 Rpt: 4/78	=
2	FILER NAME Meyer, Morg	an D. (The Honorable)			3	Filer ID (Ethics Commission Filers) 00069344	_
4	Date 12/05/2024	<ul> <li>Full name of contributor</li></ul>			7	Amount of Contribution (\$) \$5,000.00	)
		Irving, TX 75038					
8	Principal occu CEO	pation / Job title (See Instructions)	9	Employer (See Instructions Cottonwood Financial	5)		
	Date 12/09/2024	Full name of contributor out-of-state PAC (ID#:_Allen Boone Humphries Robinson LLP  Contributor address; City; State; Zip Code		)		Amount of Contribution (\$) \$1,000.00	)
	Deinsinal assu	Houston, TX 77027		Franks on (Cook bathwetic no	<u></u>		_
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 11/12/2024	Full name of contributor 🗵 out-of-state PAC (ID#: C American Homes 4 Rent TRS, LLC PAC Contributor address; City; State; Zip Code	000	)		Amount of Contribution (\$) \$2,500.00	<del>-</del> )
	Principal occu	Las Vegas, NV 89119 pation / Job title (See Instructions)		Employer (See Instructions	-, 		_
	i iliopai occa			Employer (Geo mondouers	',		
	Date 12/11/2024	Full name of contributor 🗵 out-of-state PAC (ID#: C BP North America Employee PAC Contributor address; City; State; Zip Code Houston, TX 77079	000	0060103 )		Amount of Contribution (\$) \$500.00	<del>-</del>
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> ;)		_
	Date 12/12/2024	Full name of contributor out-of-state PAC (ID#:_ Barnes & Thornburg LLP Texas PAC Contributor address; City; State; Zip Code Indianapolis, IN 46204				Amount of Contribution (\$) \$500.00	<b>-</b>
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		-
							_

	MONET	ARY POLITICAL CONTRIBUT	IONS		SCHEDUI	LE <b>A1</b>
	The Instru	ction Guide explains how to complete this	s form.	1	Total pages Schedule A1: Sch: 2/14 Rpt: 5/78	
2	FILER NAME Meyer, Morg	an D. (The Honorable)		1	Filer ID (Ethics Commission 00069344	on Filers)
4	Date 10/28/2024	<ul> <li>Full name of contributor</li></ul>		7	Amount of Contribution (\$)	\$1,000.00
_	Deignaignal	Amarillo, TX 79106	D. Familiana (Con Instruction			
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	is)		
	Date 11/01/2024	Full name of contributor out-of-state PAC (ID Bennett, Montgomery  Contributor address; City; State; Zip Code	#:		Amount of Contribution (\$)	\$2,500.00
	Drincinal occu	Dallas, TX 75254 pation / Job title (See Instructions)	Employer (See Instructions	)e)		
	CEO	oduon7 300 title (See matrictions)	Ashford	13)		
	Date 10/28/2024	Full name of contributor	)		Amount of Contribution (\$)	\$350.00
		Dallas, TX 75205				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	ıs)		
	Date 12/05/2024	Full name of contributor out-of-state PAC (ID CRAFTPAC  Contributor address; City; State; Zip Code  Austin, TX 78766	#:)		Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	is)		
	Date 10/29/2024	Full name of contributor	#: <u>C00148031</u> )		Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	is)		
			•			

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUI	LE <b>A1</b>
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 3/14 Rpt: 6/78	
2	FILER NAME Meyer, Morg	gan D. (The Honorable)		3	Filer ID (Ethics Commission 00069344	on Filers)
4	Date 11/14/2024	5 Full name of contributor out-of-state PAC (ID#:_ Charter Communications, Inc Texas PAC  6 Contributor address; City; State; Zip Code	)	7	Amount of Contribution (\$)	\$1,500.00
_	Deignaignal annu	Austin, TX 78701	O Familia var (Can Instructions			
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	)		
	Date 12/13/2024	Full name of contributor out-of-state PAC (ID#:_ Commit to Students PAC  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$1,000.00
	Principal occu	Dallas, TX 75247 pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 10/28/2024	Full name of contributor out-of-state PAC (ID#:_ Compton, William Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$100.00
	Principal occu	Dallas, TX 75201 pation / Job title (See Instructions)	Employer (See Instructions			
	Fillicipal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 12/13/2024	Full name of contributor out-of-state PAC (ID#:_ Congress Avenue Partners, LLC Contributor address; City; State; Zip Code  Austin, TX 78701	)		Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 12/11/2024	Full name of contributor out-of-state PAC (ID#:_ Cumiskey, Jane Contributor address; City; State; Zip Code  Dallas, TX 75205	)		Amount of Contribution (\$)	\$100.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 4/14 Rpt: 7/78	
2	FILER NAME Meyer, Morg	jan D. (The Honorable)		3	Filer ID (Ethics Commission 00069344	on Filers)
4	Date 10/28/2024	<ul> <li>Full name of contributor</li></ul>		7	Amount of Contribution (\$)	\$10,000.00
_	Deinsinal	Austin, TX 78763	O Frankrije (Construction			
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)	)		
	Date 11/08/2024	Full name of contributor out-of-state PAC (ID#:_ Edwards, Charles  Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$200.00
	Principal occu	Dallas, TX 75205 pation / Job title (See Instructions)	Employer (See Instructions	)		
	•					
	Date 12/12/2024	Full name of contributor	)		Amount of Contribution (\$)	\$1,000.00
		St. Louis, MO 63105				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 11/15/2024	Full name of contributor out-of-state PAC (ID#:_FOMCPAC Contributor address; City; State; Zip Code Dallas, TX 75230	)		Amount of Contribution (\$)	\$4,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 10/28/2024	Full name of contributor out-of-state PAC (ID#:_ Gary Vandeaver Campaign Fund Contributor address; City; State; Zip Code  New Boston, TX 75570			Amount of Contribution (\$)	\$774.98
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		

	MONET	ARY POLITICAL CONT	TRIBUTION	S		SCHEDUI	E A1
	The Instru	ction Guide explains how to co	mplete this forn	1.	1	Total pages Schedule A1: Sch: 5/14 Rpt: 8/78	
2	FILER NAME Meyer, Morg	an D. (The Honorable)			3	Filer ID (Ethics Commission 00069344	on Filers)
4	Date 10/31/2024	<ul> <li>Full name of contributor  out-out-out-out-out-out-out-out-out-out-</li></ul>	of-state PAC (ID#:	)	7	Amount of Contribution (\$)	\$1,000.00
•	Dringing Lagge	Dallas, TX 75229	lo-	Employer (Coo Instructions			
8	Retired	pation / Job title (See Instructions)		Employer (See Instructions Retired	)		
	Date 12/14/2024	Full name of contributor out-out-out-out-out-out-out-out-out-out-	of-state PAC (ID#:			Amount of Contribution (\$)	\$300.00
		Edmond, OK 73034					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	)		
	Date 12/13/2024	General Motors Company PAC  Contributor address; City; State; Zip	of-state PAC (ID#: <u>C000</u>	)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	Washington, DC 20001 pation / Job title (See Instructions)		Employer (See Instructions	)		
	Date 11/01/2024	Full name of contributor out-out-out-out-out-out-out-out-out-out-	of-state PAC (ID#:	)		Amount of Contribution (\$)	\$2,500.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	)		
	Date 11/07/2024	Gunn, Annalisa	of-state PAC (ID#:	)		Amount of Contribution (\$)	\$2,000.00
	Principal occu Managemen	pation / Job title (See Instructions)		Employer (See Instructions Elite Level Management			
			I				

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUI	E A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 6/14 Rpt: 9/78	
2	FILER NAME Meyer, Morg	jan D. (The Honorable)		3	Filer ID (Ethics Commission 00069344	on Filers)
4	Date 11/13/2024	5 Full name of contributor out-of-state PAC (ID#:_ HCA Texas Good Government Fund  6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$500.00
_	Deinainal agai	Dallas, TX 75240	O Franks or (Cas Instructions			
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	)		
	Date 12/14/2024	Full name of contributor out-of-state PAC (ID#:_ Hartnett, Will Contributor address; City; State; Zip Code  Dallas, TX 75201			Amount of Contribution (\$)	\$250.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 10/28/2024	Full name of contributor out-of-state PAC (ID#:_ Hein, Tillman  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$250.00
	Deinainal agai	Dallas, TX 75220	Facularia (Coo la atrustia a			
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 12/13/2024	Full name of contributor out-of-state PAC (ID#:_Holland and Knight Texas PAC  Contributor address; City; State; Zip Code  Dallas, TX 75201	)		Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 11/13/2024	Full name of contributor out-of-state PAC (ID#:_ HomePAC of Texas  Contributor address; City; State; Zip Code  Austin, TX 78701			Amount of Contribution (\$)	\$2,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
		·				

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E <b>A1</b>
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 7/14 Rpt: 10/78	
2	FILER NAME Meyer, Morg	jan D. (The Honorable)		3	Filer ID (Ethics Commissio 00069344	n Filers)
4	Date 11/14/2024	Full name of contributor		7	Amount of Contribution (\$)	\$250.00
_		Houston, TX 77219				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	)		
	Date 12/09/2024	Full name of contributor out-of-state PAC (ID#:_ INDEPAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$500.00
	Principal occu	Austin, TX 78750 pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 12/11/2024	Full name of contributor out-of-state PAC (ID#: Incline 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	)		
	Date 12/12/2024	Full name of contributor out-of-state PAC (ID#:_ Junker, Ed  Contributor address; City; State; Zip Code  Dallas, TX 75229			Amount of Contribution (\$)	\$50.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 10/28/2024	Full name of contributor out-of-state PAC (ID#:_ Leach for Texas  Contributor address; City; State; Zip Code  Plano, TX 75086			Amount of Contribution (\$)	\$774.98
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		

	MONEI	ARY POLITICAL C	ONTRIBUTION	NS		SCHEDUI	LE A1
	The Instruc	ction Guide explains how	to complete this for	·m.	1	Total pages Schedule A1: Sch: 8/14 Rpt: 11/78	
2	FILER NAME	D (The Hereauthle)			3	Filer ID (Ethics Commission	on Filers)
_		an D. (The Honorable)			L	00069344	
4	Date 12/09/2024	<ul><li>5 Full name of contributor</li><li>Mai, Kurt</li><li>6 Contributor address; City; Sta</li></ul>	out-of-state PAC (ID#: atte; Zip Code	)	7	Amount of Contribution (\$)	\$1,000.00
		Dallas, TX 75225					
8		pation / Job title (See Instructions)	9	Employer (See Instructions	<b>(</b> )		
	Oil Producer			Mai Oil Operations, Inc.			
	Date 12/09/2024	Full name of contributor  Malcolmson, Ken  Contributor address; City; Sta	out-of-state PAC (ID#:ate; Zip Code	)		Amount of Contribution (\$)	\$250.00
		Dallas, TX 75205					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 11/07/2024	Full name of contributor  Matt Shaheen Campaign  Contributor address; City; Sta	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$774.98
		Prosper, TX 75078					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 10/28/2024	Full name of contributor Miers, Harriet Contributor address; City; Sta	out-of-state PAC (ID#:ate; Zip Code	)		Amount of Contribution (\$)	\$1,000.00
	Principal occu Attorney	pation / Job title (See Instructions)		Employer (See Instructions Locke Lord LLP	)		
	Date 12/04/2024	Full name of contributor  Moak Casey PAC  Contributor address; City; Sta	out-of-state PAC (ID#:ate; Zip Code	)		Amount of Contribution (\$)	\$500.00
	Drive in all account	Austin, TX 78701	1	Empleyor (Coo Instructions			
	- ппырагосси	pation / Job title (See Instructions)		Employer (See Instructions	·)		

	MONET	ARY POLITICAL CONTRIBUTION	DNS		SCHEDU	LE <b>A1</b>
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 9/14 Rpt: 12/78	
2	FILER NAME Meyer, Morg	an D. (The Honorable)		3	Filer ID (Ethics Commission 00069344	on Filers)
4	Date 10/31/2024	5 Full name of contributor out-of-state PAC (ID#:_ NFIB Texas PAC  6 Contributor address; City; State; Zip Code	)	7	Amount of Contribution (\$)	\$500.00
_	Daine in all a con-	Washington, DC 20004				
8	Рппсіраї осси	pation / Job title (See Instructions)	9 Employer (See Instructions	)		
	Date 12/11/2024	Full name of contributor out-of-state PAC (ID#:_ North Texas Automobile Dealers PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$2,500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 11/12/2024	Full name of contributor out-of-state PAC (ID#:_ Oncor Texas State PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$2,500.00
	Point in all and	Dallas, TX 75202	England (Contraction)			
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 11/01/2024	Full name of contributor out-of-state PAC (ID#:_Pace, Carmen  Contributor address; City; State; Zip Code  Washington, DC 20010			Amount of Contribution (\$)	\$25.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 12/10/2024	Full name of contributor out-of-state PAC (ID#:_ Payne, William Contributor address; City; State; Zip Code  Dallas, TX 75219	)		Amount of Contribution (\$)	\$10,000.00
	Principal occu Investor	pation / Job title (See Instructions)	Employer (See Instructions Druid Hills Capital	)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUI	LE <b>A1</b>
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 10/14 Rpt: 13/78	
2	FILER NAME Meyer, Morg	an D. (The Honorable)		3	Filer ID (Ethics Commission 00069344	on Filers)
4	Date 12/11/2024	<ul> <li>Full name of contributor</li></ul>	)	7	Amount of Contribution (\$)	\$2,000.00
_		Wyonmissing, PA 19610				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	)		
	Date 12/09/2024	Full name of contributor out-of-state PAC (ID#:_ Red Rock Texas PAC Contributor address; City; State; Zip Code		Amount of Contribution (\$)	\$500.00	
	Principal occu	Austin, TX 78701 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	· ····o.pa ooda	paner, cos ano (cos menastro)				
	Date Full name of contributor out-of-state PAC (ID#:				Amount of Contribution (\$)	\$250.00
		Columbus, OH 43235				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date Full name of contributor out-of-state PAC (ID#:)  12/09/2024 Steinhart, Ronald  Contributor address; City; State; Zip Code  Dallas, TX 75230		)		Amount of Contribution (\$)	\$1,000.00
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions Retired	)		
	Date 12/09/2024	Full name of contributor out-of-state PAC (ID#:_ Swartz, Robert Contributor address; City; State; Zip Code Dallas, TX 75229	)		Amount of Contribution (\$)	\$100.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		

	MONET	ARY POLITICAL CONTR	RIBUTION	S		SCHEDUI	_E <b>A1</b>	
	The Instru	ction Guide explains how to com	plete this forn	1.	1	Total pages Schedule A1: Sch: 11/14 Rpt: 14/78		
2	FILER NAME Meyer, Morg	an D. (The Honorable)			3	Filer ID (Ethics Commission 00069344	on Filers)	
4	Date 12/04/2024	<ul> <li>Full name of contributor  out-of-s         TALAPAC</li> <li>Contributor address; City; State; Zip Co</li> </ul>			7	Amount of Contribution (\$)	\$1,500.00	
		Austin, TX 78759						
8	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions	)			
	Date 12/13/2024	Full name of contributor out-of-s TNLA PAC Contributor address; City; State; Zip Co	state PAC (ID#:	)		Amount of Contribution (\$)	\$1,000.00	
	Dringing oggu	Cedar Park, TX 78613	Employer (See Instructions					
	Pilicipai occu	pation / Job title (See Instructions)		Employer (See Instructions	)			
	Date 11/25/2024	Full name of contributor out-of-s TREPAC Contributor address; City; State; Zip Co		Amount of Contribution (\$)	\$5,000.00			
		Austin, TX 78768						
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	)			
	Date 12/11/2024	Full name of contributor out-of-s Texas Association Staffing PAC Contributor address; City; State; Zip Co Austin, TX 78701				Amount of Contribution (\$)	\$1,000.00	
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	)			
	Date 12/04/2024	Full name of contributor out-of-s Texas Association of Health Plans F Contributor address; City; State; Zip Co Austin, TX 78701		)		Amount of Contribution (\$)	\$1,000.00	
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	)			

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUI	LE <b>A1</b>
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 12/14 Rpt: 15/78	
2	FILER NAME Meyer, Morg	gan D. (The Honorable)		3	Filer ID (Ethics Commission 00069344	on Filers)
4	Date 10/28/2024	Full name of contributor		7	Amount of Contribution (\$)	\$500.00
_		Austin, TX 78701				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	)		
	Date 12/13/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Dairymen PAC  Contributor address; City; State; Zip Code		Amount of Contribution (\$)	\$1,000.00	
	Principal occu	Austin, TX 78711 spation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 10/31/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Economic Development Council PAC Contributor address; City; State; Zip Code		Amount of Contribution (\$)	\$1,500.00	
	Principal occu	Austin, TX 78701  upation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 12/09/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Food & Fuel Association PAC Contributor address; City; State; Zip Code  Austin, TX 78701			Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 12/13/2024	Full name of contributor out-of-state PAC (ID#:_ Texas McDonald's Operations Association PAC Contributor address; City; State; Zip Code  Athens, TX 75751	, Inc.		Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		

	MONET	ARY POLITICAL (	CONTRIBUTIO	ONS	<b>5</b>		SCHEDUI	LE A1	
	The Instru	ction Guide explains hov	to complete this fo	orm.		1	Total pages Schedule A1: Sch: 13/14 Rpt: 16/78		
2	FILER NAME Meyer, Morg	an D. (The Honorable)				3	Filer ID (Ethics Commission 00069344	on Filers)	
4	Date 11/07/2024	<ul><li>5 Full name of contributor</li><li>Texas Restaurant Associa</li><li>6 Contributor address; City; S</li></ul>			)	7	Amount of Contribution (\$)	\$1,500.00	
		Austin, TX 78767							
8	Principal occu	pation / Job title (See Instructions	5)	9 ⊟	mployer (See Instructions	5)			
	Date 11/13/2024	Full name of contributor Texas Sands PAC Contributor address; City; S	out-of-state PAC (ID#:_		)		Amount of Contribution (\$)	\$4,000.00	
	Principal occu	Austin, TX 78701 pation / Job title (See Instructions	5)	l E	mployer (See Instructions	<u> </u>			
		panerry cos ano (coo menacaon	-7		p.oyo. (eee meadone	,			
	Date 12/13/2024	Full name of contributor					Amount of Contribution (\$)	\$5,000.00	
		Austin, TX 78701							
	Principal occu	pation / Job title (See Instructions	s) 		mployer (See Instructions	5)			
	Date 10/29/2024	Full name of contributor Texas and Southwestern Contributor address; City; S Fort Worth, TX 76185					Amount of Contribution (\$)	\$2,000.00	
	Principal occu	pation / Job title (See Instructions	s)	E	mployer (See Instructions	5)			
	Date 12/13/2024	Full name of contributor x out-of-state PAC (ID#: C00284885  The Home Depot PAC  Contributor address; City; State; Zip Code  Washington, DC 20004					Amount of Contribution (\$)	\$1,000.00	
	Principal occu	pation / Job title (See Instructions	s)	Е	mployer (See Instructions	5)			
				<u> </u>					

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E <b>A1</b>
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 14/14 Rpt: 17/78	
2	FILER NAME Meyer, Morg	gan D. (The Honorable)		3	Filer ID (Ethics Commission 00069344	n Filers)
4	Date 11/14/2024	<ul> <li>Full name of contributor  x out-of-state PAC (ID#:_</li> <li>Wells Fargo &amp; Co Employee PAC</li> <li>Contributor address; City; State; Zip Code</li> </ul>	C00034595 )	7	Amount of Contribution (\$)	\$1,000.00
_		Washington, DC 20006	la = 1 (0 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 12/09/2024	Full name of contributor out-of-state PAC (ID#:_ Williamson, Marsha Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$50.00
	Dringing agg	Dallas, TX 75225  pation / Job title (See Instructions)	Employer (See Instructions	<u>, ,                                  </u>		
	Fillicipal occu	pation 7 300 title (See instructions)	Employer (See instructions	·)		
	Date 11/15/2024	Full name of contributor out-of-state PAC (ID#:_ Zachry Corporation PAC Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$1,000.00
		San Antonio, TX 78265		<u> </u>		
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		

#### NON-MONETARY (IN-KIND) POLITICAL SCHEDULE A2 **CONTRIBUTIONS** 1 Total pages Schedule A2: The Instruction Guide explains how to complete this form. Sch: 1/5 Rpt: 18/78 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 Date out-of-state PAC (ID#: Amount of contribution (\$) description 11/04/2024 Associated Republicans of Texas Campaign Fund \$2,996.00 i Texting 7 Contributor address; City; State; Zip Code Austin, TX 78701 Check if travel outside of Texas. Complete Schedule T. 11 Employer (FOR NON-JUDICIAL) (See instructions) 13 Contributor's job title (FOR JUDICIAL) (See instructions) 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)

10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) 12 Contributor's principal occupation (FOR JUDICIAL) 14 Contributor's employer/law firm (FOR JUDICIAL) 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL) Date Full name of contributor Amount of In-kind contribution out-of-state PAC (ID#: contribution (\$) description 11/01/2024 Greg Abbott Campaign \$6,383.90 | Texting Contributor address; City; State; Zip Code Austin, TX 78767 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) Date Full name of contributor In-kind contribution Amount of out-of-state PAC (ID#: contribution (\$) description 11/01/2024 Greg Abbott Campaign \$228.00 i Travel Contributor address; City; State; Zip Code Austin, TX 78767 Check if travel outside of Texas. Complete Schedule T. Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Employer (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)

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

### SCHEDULE A2

The Instru	ection Guide explains how to complete this f	form.	1 Total pages Schedule A2: Sch: 2/5 Rpt: 19/78
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
	gan D. (The Honorable)		00069344
4 TOTAL OF	International Contributor		\$
5 Date		)	8 Amount of 9 In-kind contribution contribution (\$) description
11/06/2024	or og 7 to bott our pargri		\$382.80   Texting
	Contributor address; City; State; Zip Code		
	Austin, TX 78767		Check if travel outside of Texas. Complete Schedule T.
10 Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON	I-JUDICIAL) (See instructions)
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)
40 16	in a hild law form of a second of (form) (FOD HIDIOIAL)		
16 if contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
Data	Full name of contributor		Amount of In-kind contribution
11/06/2024		)	contribution (\$) description
			\$87.59 Travel
	, , , , , , , , , , , , , , , , , , ,		į
			_ ;
Dringing Loop		Employer (FOR NON	Check if travel outside of Texas. Complete Schedule T.
Principal occi	upation / Job title (FOR NON-JODICIAL) (See instructions)	Employer (FOR NON	J-JUDICIAL) (See instructions)
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)
Contributor's	employer/law firm (FOR TUDICIAL)	Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)
Continuator 3	employemaw iiiii (i ei ( obbieii L)	Law IIIII of Contribute	or a spouse (if any) (if any objective)
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)	1	
Date	Full name of contributor  ut-of-state PAC (ID#:	)	Amount of In-kind contribution
11/07/2024	Texas Defense PAC		contribution (\$) description \$21,162.80   Canvassing
	Contributor address; City; State; Zip Code		, , , , , , , , , , , , , , , , , , ,
			į į
	Austin, TX 78768		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 contribute	or's spouse (if any) (FOR JUDICIAL)
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
5511.11501.01			

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

### SCHEDULE A2

The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A2:
			Sch: 3/5 Rpt: 20/78
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
11/07/2024	Texas Defense PAC		contribution (\$) description \$1,892.81   Canvassing
	7 Contributor address; City; State; Zip Code		41,032.011 Carry assing
			i i
	Auctin TV 70760		
10 Dringing age	Austin, TX 78768	11 Employer (EOD NON	Check if travel outside of Texas. Complete Schedule T.
10 Principal occi	upation / 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) (See instructions)
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm of contributo	or's spouse (if any) (FOR JUDICIAL)
16 If contributor i	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
11/04/2024	Texas Defense PAC		contribution (\$) description
	Contributor address; City; State; Zip Code		\$9,644.76   Canvassing
			ļ
	Austin, TX 78768		Check if travel outside of Texas. Complete Schedule T.
Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (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 contribute	or's spouse (if any) (FOR JUDICIAL)
If contributor i	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
Date	Full name of contributor  ut-of-state PAC (ID#:	)	Amount of In-kind contribution contribution (\$) description
11/04/2024	Texas Defense PAC		contribution (\$) description \$10,017.95 Canvassing
	Contributor address; City; State; Zip Code		t to the second
			<u> </u>
	Augtin TV 70760		
Deignainal	Austin, TX 78768	Franksias (FOR NON	Check if travel outside of Texas. Complete Schedule T.
нисіраі осс <b>і</b>	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	I-JUDICIAL) (See instructions)
Contributoria	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)
Continuators	principal occupation (i ON JODICIAL)	Continuator 5 job title	(I OI JODIOIAL) (See instituctions)
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)
Continuators	employeman initi (i Oit OODIOIAL)	Law iiiii oi coiiiibutt	
If contributor i	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)	l	
ii continutori	is a sima, law little of parenday (il ally) (il of voolicine)		

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

### SCHEDULE A2

The Instru	ction Guide explains how to complete this f	form.	1 Total pages Schedule A2: Sch: 4/5 Rpt: 21/78
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Meyer, Mor	gan D. (The Honorable)		00069344
4 TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	UTIONS	\$
<b>5</b> Date	6 Full name of contributor out-of-state PAC (ID#:	)	8 Amount of 9 In-kind contribution contribution (\$) description
11/04/2024	TOXAG BOIOTIOG 1710		• \$2,284.84   Canvassing
	7 Contributor address; City; State; Zip Code		
	Austin, TX 78768		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)
44 Octobelle de de	and a collection (FOR TURION)	45 Landing of a satisficat	ode areas (fram.) (FOD JUDIOIAL)
14 Contributors	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
11/04/2024	Texas Defense PAC		contribution (\$) description
	Contributor address; City; State; Zip Code		\$2,373.18   Canvassing
	Austin, TX 78768		_ ;
Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	Check if travel outside of Texas. Complete Schedule T.  JUDICIAL) (See instructions)
i inicipal cool	spanon, cos une (i excitent cos les, i.e.,	Employer (Fortiter)	(4002)611(12)
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)
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
ii contributor	is a clinia, law initi of parent(s) (ii arry) (i or coblonie)		
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of In-kind contribution
10/29/2024	Texas Defense PAC		contribution (\$) description
	Contributor address; City; State; Zip Code		s799.901Canvassing
			ļ
	Austin, TX 78768		
Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	Check if travel outside of Texas. Complete Schedule T.  J-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)
, ,			
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: 5/5 Rpt: 22/78 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Meyer, Morgan D. (The Honorable) 00069344 \$ TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS 9 In-kind contribution 6 Full name of contributor out-of-state PAC (ID#: Amount of contribution (\$) description 10/29/2024 Texas Defense PAC \$447.45 Canvassing 7 Contributor address; City; State; Zip Code Austin, TX 78768 Check if travel outside of Texas. Complete Schedule T. (See instructions) 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) 11 Employer (FOR NON-JUDICIAL) 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)

### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	<b>,</b>
	Sch: 1/45 Rpt: 23/78	Meyer, Morgan D. (The Honorable) 00069344
4	Date	5 Payee name
	11/05/2024	7-Eleven
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$12.00	6881 Greenville Ave
		Dallas, TX 75231
8	PURPOSE	
٠	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
		Food and drink for staff while conducting campaign
		activities
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	11/21/2024	AGI Renters Insurance
	Amount (\$)	Payee address; City; State; Zip Code
	\$36.84	1401 Lakeway Drive
		#1401A
		Lewisville, TX 75057
	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	X Check if Austin, TX, officeholder living expense
		Renter's Insurance for officeholder's Austin apartment
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
		•
	Date	Payee name
	12/30/2024	AT&T Direct TV
	Amount (\$)	Payee address; City; State; Zip Code
	\$124.46	1212 Corporate Dr
		#567
		Irving, TX 75038
	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.
	2/11/2/10/12	X Check if Austin, TX, officeholder living expense
		Service charge for office holder's apartment
	Complete ONLY if direct	Candidate/Officeholder name Office county Office hold
	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

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Food/Beverage Expense Gift/Awards/Memorials Ex Legal Services The Instruction Guid	pense F	-	nse es/Contract Labor	7	ravel in District ravel Out of Dis DTHER (enter a				
1	Total pages Schedule F1:	2 FILFR NAN					3 F	iler ID	(Ethics Commission Filers)			
	Sch: 2/45 Rpt: 24/78		organ D. (The Hono	rable)			1	00069344				
4	Date	<b>5</b> Payee nam	ne				•					
	12/13/2024	AT&T										
6	Amount (\$)	7 Payee add	ress; City;	State;	Zip Code	!						
	\$20.00	208 S. Ak		,								
		Dallas, TX	( 75202									
8	PURPOSE	(a) Category	(See Categories listed at the t	top of this sched	ule) (b	) Description						
	OF EXPENDITURE		erhead/Rental Expe						plete Schedule T.			
						X Check if Austin						
						internet servi		Jenoiuer S	Austin apartment			
_	0 1. 0											
9	Complete ONLY if direct expenditure to benefit C/OI		ifficeholder name	Off	fice sough	Ţ		Office he	<del>2</del> 10			
	Date	Payee nam	е									
	11/14/2024	Adobe										
	Amount (\$)	Payee add	ress; City;	State;	Zip Code	!						
	\$24.89	345 Park	Avenue									
		San Jose,	, CA 95110									
	PURPOSE	(a) Category	(See Categories listed at the t	top of this sched	ule) (b	<b>)</b> Description						
	OF EXPENDITURE	Office Ove	erhead/Rental Expe	nse					plete Schedule T.			
						ш		ficeholder living	re for campaign			
						Jimile Unice	Jupp	ort sortwa	10 101 campaign			
	Complete ONLY if direct	Candidate/∩	officeholder name	Off	fice sough	t		Office he	eld			
	expenditure to benefit C/O		Jonesia namo	011	oougii	-		556 110	-: <del>-:</del>			
_	Data											
	Date 11/21/2024	Payee nam	ie									
	11/21/2024	Adobe										
	Amount (\$)	Payee add		State;	Zip Code	!						
	\$25.97	345 Park .	Avenue									
		San Jose,	, CA 95110									
	PURPOSE	(a) Category	(See Categories listed at the t	top of this sched	ule) (b	<b>)</b> Description						
	OF EXPENDITURE	Office Ove	erhead/Rental Expe	nse					plete Schedule T.			
								ficeholder living	re for campaign			
						Omine onice	Supp	ort SuitWa	ie ioi cailipaigil			
	Complete ONLY if direct	Candidate/O	officeholder name	O#	fice cough	<del>+</del>		Office he	nld			
	Complete ONLY if direct expenditure to benefit C/OH		officeholder name	Off	fice sough	ι		Onice ne	iu			

### 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	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: 3/45 Rpt: 25/78	Meyer, Morgan D. (The Honorable) 00069344
4	Date	5 Payee name
	12/16/2024	Adobe
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$24.89	345 Park Avenue
		San Jose, CA 95110
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Online office support software for campaign
		Offine office support software for campaign
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/OI	
H	Date	
	12/23/2024	Payee name
		Adobe
	Amount (\$)	Payee address; City; State; Zip Code
	\$25.97	345 Park Avenue
		San Jose, CA 95110
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Online office support software for campaign
		Offline office support software for campaign
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
_	Data	Davies warms
	Date	Payee name Allyn Political
	10/29/2024	•
	Amount (\$)	Payee address; City; State; Zip Code
	\$19,407.46	3838 Oak Lawn Avenue
		Ste 400
		Dallas, TX 75219
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Postage for campaign mail piece
		r ostage for campaign man piece
	Commission ONII V if alice at	Candidate/Officeholder name Office sought Office held
	Complete ONLY II airea	
	Complete ONLY if direct expenditure to benefit C/OI	H
		H
		H Total Control of the Control of th

#### 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		mmittee	Legal Services			/ages	/Contract Labor		OTHER (enter	a category not listed above)	
		_		The Instruction Gu	uide explains ho	ow to cor	mple	ete this form.				
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	(Ethics Commission Filers	5)
	Sch: 4/45 Rpt: 26/78		Meyer, Morç	gan D. (The Hor	norable)					00069344		
4	Date	5	Payee name									
	10/29/2024		Allyn Politica	al								
6	Amount (\$)	7	Payee addres	ss; City;	State;	Zip Co	de					
	\$2,137.94		3838 Oak L	awn Avenue								
			Ste 400									
			Dallas, TX 7	'5219								
8	PURPOSE	(a)					(h)	Description				
ľ	OF	(۳)	Advertising	e Categories listed at t	ne top of this sched	lule)	(2)	·	outsi	de of Texas. Cor	nplete Schedule T.	
	EXPENDITURE		Advertising	Lxperise				<b>=</b>		officeholder livin		
								Creative, prin	tinç	g, postage t	for campaign mailer	
9	Complete ONLY if direct		Candidate/Offic	ceholder name	Off	fice sou	ght			Office h	eld	
	expenditure to benefit C/OI	H										
	Date		Payee name									
	10/29/2024		Allyn Politica	al								
	Amount (\$)		Payee addres	ss; City;	State;	Zip Co	de					
	\$4,806.30		3838 Oak L	awn Avenue								
			Ste 400									
			Dallas, TX 7	'5219								
	PURPOSE	(a)	Category (Se	e Categories listed at t	ne top of this sched	lule)	(b)	Description				
	OF EXPENDITURE		Advertising		•			Check if travel of	outsi	de of Texas. Cor	nplete Schedule T.	
	EXPENDITORE							<b>—</b>		officeholder livin		
								Creative, prin	tinç	g, for camp	aign doorhanger	
	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Office	ceholder name	Off	fice sou	ght			Office h	eld	
		_										
	Date		Payee name									
	10/31/2024		Allyn Politica	al								
	Amount (\$)		Payee addres	ss; City;	State;	Zip Co	de					
	\$33,294.81		3838 Oak La	awn Avenue								
			Ste 400									
			Dallas, TX 7	'5219								
	PURPOSE	(a)	Category (Se	e Categories listed at t	ne ton of this sched	lule)	(b)	Description				
	OF	` `	Advertising		10 100 01 11110 001100	)			outsi	de of Texas. Cor	nplete Schedule T.	
	EXPENDITURE		9	•				_		officeholder livin		
								Creative, prin	tinç	g, postage i	for campaign mailer	
	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Office	ceholder name	Off	fice sou	ght			Office h	eld	
	experiulture 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 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	The Instruction Guide explains how to complete this form.					
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)					
	Sch: 5/45 Rpt: 27/78	Meyer, Morgan D. (The Honorable) 00069344					
4	Date	5 Payee name					
	11/01/2024	Allyn Political					
6	Amount (\$)	7 Payee address; City; State; Zip Code					
	\$29,540.50	3838 Oak Lawn Avenue					
		Ste 400					
		Dallas, TX 75219					
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
	OF EXPENDITURE	Advertising Expense					
		Creative, printing, postage for campaign mailer					
		Creative, printing, postage for campaign mailer					
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held					
	expenditure to benefit C/OI	the state of the s					
_	Date	Payee name					
	11/01/2024	Allyn Political					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$5,000.00	3838 Oak Lawn Avenue					
		Ste 400					
		Dallas, TX 75219					
	PURPOSE						
	OF	(a) Category (See Categories listed at the top of this schedule)  Consulting Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.					
	EXPENDITURE	Check if Austin, TX, officeholder living expense					
		Consulting fee					
	Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH						
	experialitate to benefit 6, 5.	7					
	Date	Payee name					
	11/12/2024	Allyn Political					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$180.37	3838 Oak Lawn Avenue					
		Ste 400					
		Dallas, TX 75219					
	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 Food and beverageerage for election night					
		Food and beverageerage for election highli					
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held					
	expenditure to benefit C/O						

### SCHEDULE F1

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

Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services	Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor	Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)
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: 6/45 Rpt: 28/78	Meyer, Morgan D. (The Honorable)		00069344
4 Date	5 Payee name		•
11/19/2024	Amazon		
6 Amount (\$)	7 Payee address; City; State	; Zip Code	
\$86.59	410 Terry Ave N		
	Seattle, WA 98109		
B PURPOSE	(a) Category (See Categories listed at the top of this sch	(b) Description	
OF EXPENDITURE	Office Overhead/Rental Expense		l outside of Texas. Complete Schedule T.
		, <u>–</u>	n, TX, officeholder living expense
		Supplies for	Capitol office
Commission ONII V if dispose	Condidate/Officeledder resea	Define a complet	Office held
9 Complete ONLY if direct expenditure to benefit C/OH		Office sought	Office held
Date	Payee name		
12/12/2024	Amazon		
Amount (\$)	Payee address; City; State	; Zip Code	
\$8.96	410 Terry Ave N		
	Seattle, WA 98109		
PURPOSE	(a) Category (See Categories listed at the top of this sch	(b) Description	
OF	Office Overhead/Rental Expense	′ I — '	outside of Texas. Complete Schedule T.
EXPENDITURE	μ	, <u>–</u>	n, TX, officeholder living expense
		Supplies for	Capitol office
Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Office sought	Office held
Date	Payee name		
12/16/2024	Amazon		
Amount (\$)	Payee address; City; State	; Zip Code	
\$27.59	410 Terry Ave North	, ,	
,			
	Seattle, WA 98109		
PURPOSE	(a) Category (See Categories listed at the top of this sch	(b) Description	
OF	Office Overhead/Rental Expense	′ I <u> </u>	outside of Texas. Complete Schedule T.
EXPENDITURE	Omoc Overnead/Nemai Expense	Check if Austi	n, TX, officeholder living expense
		Supplies for	Capitol office
Complete ONLY if direct		Office sought	Office held
expenditure to benefit C/OF	<u> </u>		
orms provided by Texas E	thics Commission www.ethics.s	state.tx.us	Version V4.1.0.5dd2ace2

#### SCHEDULE F1

Advertising Expense Event Exper
Accounting/Banking Fees
Consulting Expense Food/Bevera
Contributions/ Donations Made By Candidate/Officeholder/Political Committee Legal Service

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

	Candidate/Officeholder/Politica			Legal Services			es/Contract Labor		OTHER (enter a	category not listed above)	
Credit Card Payment  The Instruction Guide explains how to complete this form.											
1	Total pages Schedule F1:	2	FILER NAME					3	Filer ID	(Ethics Commission Filer	s)
	Sch: 7/45 Rpt: 29/78		Meyer, Morç	gan D. (The Hor	norable)				00069344		
4	Date	5	Payee name					_			
	12/16/2024		Amazon								
6	Amount (\$)	7	Payee addres	ss; City;	State; Zip (	Code					
	\$70.88		410 Terry A	ve North							
			Seattle, WA	98109							
8	PURPOSE	(a)		e Categories listed at th	4 445 1 1 1 1 1 1 1 1-	(b)	<b>)</b> Description				
ľ	OF	(",		nead/Rental Exp		(~)		outsi	de of Texas. Com	plete Schedule T.	
	EXPENDITURE						Check if Austin	, TX,	officeholder living	expense	
							Supplies for 0	Cap	oitol office		
9	Complete ONLY if direct expenditure to benefit C/OH		Candidate/Offic	ceholder name	Office so	ought	Ī		Office he	eld	
	experialitire to beliefit C/OI										
	Date		Payee name								
	12/17/2024		Amazon								
	Amount (\$)		Payee addres	ss; City;	State; Zip 0	Code					
	\$73.59		410 Terry A	ve North							
			Seattle, WA	98109							
	PURPOSE	(a)	Category (Se	e Categories listed at th	ne top of this schedule)	(b)	Description				
	OF EXPENDITURE			nead/Rental Exp			<u> </u>		de of Texas. Com		
							Supplies for (		officeholder living	ı expense	
							Supplies for C	σαμ	ntoi onice		
	Complete ONLY if direct	<u> </u>	Candidate/Offic	ceholder name	Office so	l	·		Office he	-jų	
	expenditure to benefit C/O				265 6.	zug	•		000		
-	Date	Т	Payee name								
	12/20/2024		Amazon								
	Amount (\$)		Payee addres	ss; City;	State; Zip (	- Ode					
	\$55.20		410 Terry A	-	State, Zip C	Joue					
	Ψ33.20		410 Telly /	ve riorur							
			Seattle, WA	09100							
	DURROSE	(-)				10.3					
	PURPOSE OF	(a)		e Categories listed at the cad/Rental Exp		(a)	Description  Check if travel	outsi	de of Texas. Com	plete Schedule T.	
	EXPENDITURE		Office Overi	ieau/Reiilai ⊏xț	Jense				officeholder living	•	
							Supplies for 0	Cap	oitol office		
	Complete ONLY if direct		Candidate/Offic	ceholder name	Office so	ought	i		Office he	eld	
L	expenditure to benefit C/OH										
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Offic	ceholder name	Office so	ought		<u></u>		eld	

### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.				
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)				
	Sch: 8/45 Rpt: 30/78	Meyer, Morgan D. (The Honorable) 00069344				
4	Date	5 Payee name				
	11/15/2024	Black's Barbecue				
6	Amount (\$)	7 Payee address; City; State; Zip Code				
	\$101.31	3110 Guadalupe ST				
		Austin, TX 78705				
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 Suprior Stan				
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held				
9	expenditure to benefit C/O					
_	<u> </u>					
	Date	Payee name				
	10/30/2024	Buc-ee's				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$73.89	4155 N General Bruce Dr				
		Temple, TX 76501				
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.				
		Check if Austin, TX, officeholder living expense  Travel expense for campaign staff for travel to Dallas				
		Travel expense for earlipsight stail for travel to Ballas				
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held				
	expenditure to benefit C/O					
	Data					
	Date	Payee name				
	11/08/2024	Buc-ee's				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$51.82	4155 N General Bruce Dr				
		Temple, TX 76501				
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description				
	OF EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.				
	LAFENDITORE	Check if Austin, TX, officeholder living expense				
		Travel expense for campaign staff for travel to Dallas				
	0 1. 0					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held				
	- p					

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

	Credit Card Payment	The Instruction Guide explains how to co	•	ete this form.
1	Total pages Schedule F1:	·		3 Filer ID (Ethics Commission Filers)
	Sch: 9/45 Rpt: 31/78	Meyer, Morgan D. (The Honorable)	00069344	
4	Date	5 Payee name		
	11/01/2024	Bucee"s		
6	Amount (\$)	7 Payee address; City; State; Zip Co	de	
	\$43.91	4156 North General Bruce DR		
		Temple, TX 76501		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE	Travel Out of District		Check if travel outside of Texas. Complete Schedule T.
	LXI LINDITORE			Check if Austin, TX, officeholder living expense
				Travel expense for campaign staff for travel to Dallas
9	Complete ONLY if direct	Candidate/Officeholder name Office sou	aht	Office held
9	expenditure to benefit C/O		ynı	Office field
_	Data	D		
	Date 11/06/2024	Payee name Bucee"s		
			-1-	
	Amount (\$)	Payee address; City; State; Zip Co	ae	
	\$35.10	4156 North General Bruce DR		
		Temple, TX 76501		
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	EXPENDITURE	Travel Out of District		Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
				Travel expense for campaign staff for travel to Dallas
	Complete ONLY if direct	Candidate/Officeholder name Office sou	ght	Office held
	expenditure to benefit C/O	1		
	Date	Payee name		
	11/25/2024	Byers, Jenna		
	Amount (\$)	Payee address; City; State; Zip Co	de	
	\$1,700.00	4118 Normandy Ave.		
		Dallas, TX 75205		
	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	Ç		Check if Austin, TX, officeholder living expense
				Contract labor for campaign services
	2 1 2 2 2 2 2 2 2			
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sou	ght	Office held
		•		

### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Candidate/Officeholder/Polit 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: 10/45 Rpt: 32/78						
4 Date	5 Payee name					
12/17/2024	Byers, Jenna					
6 Amount (\$)	7 Payee address; City; State; Zip Code					
\$1,700.00	4118 Normandy Ave.					
	Dallas, TX 75205					
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 tabor for earnpaign services					
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held					
expenditure to benefit C/						
Date	Payee name					
10/28/2024	CVS Pharmacy					
Amount (\$)	Payee address; City; State; Zip Code					
\$32.82	2 6709 Preston Rd					
	Dallas, TX 75205					
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  Ice for Campaign event					
	ice for Campaign event					
Complete ONLV if direct	Candidate/Officeholder name Office sought Office held					
Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH						
Date	Payee name					
10/31/2024	CVS Pharmacy					
Amount (\$)	Payee address; City; State; Zip Code					
\$19.56	6709 Preston Rd					
	Dallas, TX 75205					
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.					
EXI ENDITORE	Check if Austin, TX, officeholder living expense					
	Ice for Campaign event					
Complete <u>ONLY</u> if direct expenditure to benefit C/	Candidate/Officeholder name Office sought Office held OH					
onponential to portion of or i						

### 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  The Instruction Guide	Salaries/\	Wages	/Contract Labor		OTHER (enter a	category not listed above)	
1	Total pages Schedule F1:	2 FILER NAME					3	Filer ID	(Ethics Commission Filer	s)
	Sch: 11/45 Rpt: 33/78		gan D. (The Hono	rable)				00069344		
4	Date	5 Payee name								
	10/29/2024	Campbell, N	Michael							
6	Amount (\$) \$160.00	7 Payee address 500 Pionee	r Ct.	State; Zip Co	ode					
8	PURPOSE	(a) Category (Se	ee Categories listed at the t	op of this schedule)	(b)	Description				
	OF EXPENDITURE	Event Expe				Check if travel	outsi	de of Texas. Com	plete Schedule T.	
	EXPENDITORE					_		officeholder living		
						Bartending se	ervi	ices for cam	paign event	
9	Complete ONLY if direct expenditure to benefit C/O		ceholder name	Office sou	l ught			Office he	eld	
_	Data									
	Date	Payee name								
	12/05/2024	Capitol Cafe	<u> </u>							
	Amount (\$)	Payee addre	ss; City;	State; Zip Co	ode					
	\$11.33	1001 Congr	ess Ave							
		#180								
		Austin, TX 7	78701							
	PURPOSE	(a) Category (Se	ee Categories listed at the t	op of this schedule)	(b)	Description				
	OF EXPENDITURE	Food/Bever	age Expense			<b>=</b>		de of Texas. Com		
						ш		officeholder living		
						campaign iss			n meeting to discuss	
	Complete ONLY if direct expenditure to benefit C/O		ceholder name	Office sou	ıght			Office he	eld	
	Date	Payee name								
	11/01/2024	Cebolla Fin	e Flowers							
	Amount (\$)	Payee addre	ss; City;	State; Zip Co	ode					
	\$119.02	4415 Lovers	s Lane							
		Dallas, TX 7	75225		•					
	PURPOSE OF		ee Categories listed at the t		(b)	Description				
	EXPENDITURE	Gift/Awards	/Memorials Expen	se				de of Texas. Com		
								officeholder living		
						Flowers for ca	aiii	ραιζιτ δυμμυ	n tei	
	Complete ONLY if direct	Candidate/Offi	ceholder name	Office sou	l Jaht			Office he	eld .	
	expenditure to benefit C/OH									
$\vdash$										
1										

### SCHEDULE F1

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

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)

	Credit Card Payment	The Instruction Guide explains how to complete this form.					
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)				
	Sch: 12/45 Rpt: 34/78	Meyer, Morgan D. (The Honorable)	00069344				
4	Date	5 Payee name					
	11/01/2024	Cebolla Fine Flowers					
6	Amount (\$)	7 Payee address; City; State; Zip Code					
	\$119.02	4415 Lovers Lane					
		Dallas, TX 75225					
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
	OF EXPENDITURE	Citty (Wards/Memorials Expense	outside of Texas. Complete Schedule T. , TX, officeholder living expense				
			ampaign supporter				
			anneagn eapperte.				
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held				
	expenditure to benefit C/O						
_	Date	Payee name					
	11/15/2024	Celebration Restaurant					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$43.18	4503 W Lovers Ln					
	,						
		Dallas, TX 75209					
_	PURPOSE						
	OF		outside of Texas. Complete Schedule T.				
	EXPENDITURE		, TX, officeholder living expense				
		Campaign Lu	nch to discuss campaign matters				
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held				
	experientare to benefit or or	'					
	Date	Payee name					
	10/29/2024	Central Market					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$324.75	4349 Northwest Hwy					
		Dallas, TX 75220					
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
	OF EXPENDITURE	1 00d/Develage Expense	outside of Texas. Complete Schedule T.				
		Food for cam	, TX, officeholder living expense				
		1 ood for earn	paignevent				
H	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held				
	expenditure to benefit C/O	- · · · · · · · · · · · · · · · · · · ·					
I							

### SCHEDULE F1

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

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

	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: 13/45 Rpt: 35/78	Meyer, Morgan D. (The Honorable) 00069344					
4	Date	5 Payee name					
	11/25/2024	Chick Fil A					
6	Amount (\$)	7 Payee address; City; State; Zip Code					
	\$28.46	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					
		Cines Landin for Suprior Stani					
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held					
	expenditure to benefit C/OI	1					
	Date	Payee name					
	11/04/2024	Constant Contact					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$311.28	1601 Trapelo Road					
		Watham, MA 02451					
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.					
		Check if Austin, TX, officeholder living expense  E-newsletter account for campaign					
		E newsletter account for campaign					
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held					
	expenditure to benefit C/OH						
_	Date	Payee name					
	12/02/2024	Constant Contact					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$311.28	1601 Trapelo Road					
	Ψ511.20	1001 Hapelo Rodu					
		Watham, MA 02451					
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
	OF EXPENDITURE	Advertising Expense					
	EXPENDITURE	Check if Austin, TX, officeholder living expense					
		E-newsletter account for campaign					
	0 1 0 0 0 0 0 0						
	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 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	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:	14/45 Rpt: 36/78	Meyer, Morgan D. (The Honorable)		00069344			
4 Date		5 Payee name		<u> </u>			
10/31	/2024	Courtyard by Marriott					
6 Amou	nt (\$)	7 Payee address; City; State; Zip Co	ode				
	\$191.22	4165 Proton DR					
		Addison, TX 75001					
8 PL	JRPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description			
FXPI	OF ENDITURE	Travel In District		Check if travel outside of Texas. Complete Schedule T.			
	LINDITORE			Check if Austin, TX, officeholder living expense			
				Lodging for campaign staff while traveling in district for campaign activities			
9 Comp	lete ONLY if direct	Candidate/Officeholder name Office sou	laht	Office held			
	diture to benefit C/O		igni	Office field			
Data							
Date	12024	Payee name					
	5/2024	DoubleTree					
Amou		Payee address; City; State; Zip Co	ode				
	\$319.51	8250 N Central Expy					
		_					
		Dallas, TX 75206					
PU	JRPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b)	Description			
EXPI	ENDITURE	Travel In District		Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense			
				Lodging for campaign staff while traveling for			
				campaign activities			
	Complete ONLY if direct Candidate/Officeholder name Office sought Office held						
expen	diture to benefit C/O	Н					
Date		Payee name					
11/05	5/2024	Doubletree by Hilton					
Amou	nt (\$)	Payee address; City; State; Zip Co	ode				
	\$322.98	8250 N Central Expressway					
		Dallas, TX 75206					
Pl	JRPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description			
FXPI	OF ENDITURE	Travel In District		Check if travel outside of Texas. Complete Schedule T.			
	LINDITORE			Check if Austin, TX, officeholder living expense  Lodging for campaign staff while traveling in district			
				for campaign activities			
Comp	lete ONLY if direct	Candidate/Officeholder name Office sou	laht	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 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	omple	lete this form.
1	Total pages Schedule F1:	2	FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 15/45 Rpt: 37/78		Meyer, Morgan D. (The Honorable)		00069344
4	Date	5	Payee name		
	12/09/2024		Etsy		
6	Amount (\$)	7	Payee address; City; State; Zip C	ode	
	\$661.41		117 Adams St		
			Brooklyn, NY 11201		
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 officeholder's apartment
9	Complete ONLY if direct	Т_	andidate/Officeholder name Office so	uaht	t Office held
ľ	expenditure to benefit C/O		and all of the second s	agiit	Cince held
_	Date	$\overline{}$	Payee name		
	10/28/2024	1	Extra Space Storage		
	Amount (\$)	₩	Payee address; City; State; Zip C	odo	
	\$440.00	1	4920 McKinney Avenue	oue	
	Φ440.00	'	4920 MCKIIIIley Averide		
			D. II TV 75004		
		₩	Dallas, TX 75204		
	PURPOSE OF		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		andidate/Officeholder name Office so	ught	t Office held
	expenditure to benefit C/OI	Н			
	Date		Payee name		
	11/19/2024		Extra Space Storage		
	Amount (\$)	$\vdash$	Payee address; City; State; Zip C	ode	
	\$360.00		4920 McKinney Avenue		
			Dallas, TX 75204		
	PURPOSE	(a)	Category (See Categories listed at the top of this schedule)	(b)	) Description
	OF EXPENDITURE		Office Overhead/Rental Expense		Check if travel outside of Texas. Complete Schedule T.
	EXI ENDITORE				Check if Austin, TX, officeholder living expense
					Campaign storage units
	Commission ONLL V if dispost	匸	Office as		Office hold
	Complete ONLY if direct expenditure to benefit C/O		andidate/Officeholder name Office so	ugnı	t Office held
	·				

#### SCHEDULE F1

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

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
_	Tatal manus Oct 11 51	1
1	Total pages Schedule F1:	
	Sch: 16/45 Rpt: 38/78	Meyer, Morgan D. (The Honorable) 00069344
4	Date	5 Payee name
	11/29/2024	Extra Space Storage
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$440.00	4920 McKinney Avenue
		Dallac TV 75204
		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
		Campaign storage units
_	Complete ONLY !! -!!	Condidate/Officeholder name
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
L		
	Date	Payee name
	12/19/2024	Extra Space Storage
	Amount (\$)	Payee address; City; State; Zip Code
	\$360.00	4920 McKinney Avenue
		Dallas, TX 75204
_	DUDDOOF	1
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  Office Overhead/Rental Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Office Overhead/Rental Expense  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Campaign storage units
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	• · · · · · · · · · · · · · · · · · · ·
<u> </u>	Data	
	Date	Payee name
	12/30/2024	Extra Space Storage
	Amount (\$)	Payee address; City; State; Zip Code
	\$440.00	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
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Campaign storage units
L		
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1

### SCHEDULE F1

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

l	Credit Card Payment	The Instruction Guide explains how to comp	lete this form.
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 17/45 Rpt: 39/78	Meyer, Morgan D. (The Honorable)	00069344
4	Date	5 Payee name	<b>'</b>
	11/08/2024	Extra Space Storage	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
l	\$258.00	4920 McKinney Avenue	
		Dallas, TX 75204	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b	) Description
	OF EXPENDITURE	Office Overhead/Rental Expense	Check if travel outside of Texas. Complete Schedule T.
			Check if Austin, TX, officeholder living expense  Campaign storage units
			Campaign storage units
9	Complete ONLY if direct	Candidate/Officeholder name Office sough	t Office held
ľ	expenditure to benefit C/O		Cinice field
H	Date	Payee name	
	11/12/2024	Extra Space Storage	
┝	Amount (\$)	Payee address; City; State; Zip Code	
	\$257.00	4920 McKinney Avenue	
	Ψ237.00	4320 McKilliey Avenue	
		Dallac TV 75204	
L	DUDD005	Dallas, TX 75204	
	PURPOSE OF		Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Office Overhead/Rental Expense	Check if Austin, TX, officeholder living expense
			Campaign storage units
L			
l	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sough	t Office held
L	experientare to benefit G/O	'	
l	Date	Payee name	
	12/09/2024	Extra Space Storage	
l	Amount (\$)	Payee address; City; State; Zip Code	
	\$258.00	4920 McKinney Avenue	
		Dallas, TX 75204	
	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.  Check if Austin, TX, officeholder living expense
			Campaign storage units
			Campaign clorage and
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sough	t Office held
	expenditure to benefit C/O		
H			

#### 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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		mmittee	Legal Sen				/ages	se s/Contract Labor ete this form.		Travel Out of OTHER (ente		ict ategory not listed above)
_	Total pages Schedule F1:	1	EU ED NAME							12	Files ID		(Ethics Commission Filers)
1					/The 11000					3	Filer ID		(Luncs Commission Filers)
	Sch: 18/45 Rpt: 40/78		Meyer, Mor	gan D.	(The Hond	orabie)					0006934	4	
4	Date	5	Payee name										
	12/11/2024		Extra Space	e Storag	ge								
6	Amount (\$)	7	Payee addre		City;	State	e; Zip Co	do					
ľ	• * *	ľ			-	State	ε, <b>Ζ</b> ιρ Cυ	ue					
	\$257.00		4920 McKir	iney Av	enue								
			Dallas, TX	75204									
8	PURPOSE	(a)	Category (Se	0-4	!:		la a alcela l	(b)	Description				
	OF	``	Office Over				nedule)	()	_	outs	ide of Texas. C	ompl	ete Schedule T.
	EXPENDITURE		Office Over	i icaa/i (	critai Expe	31130			Check if Austin				
									Campaign st	ora	ge units		
9	Complete ONLY if direct		Candidate/Offi	coholdo	r namo		Office sou	aht			Office	hol	d
9	expenditure to benefit C/OI		zanuluale/Om	cerioide	Паше	,	Office Sou	gni			Office	Hen	u
	· 												
	Date		Payee name										
	12/11/2024		FedEx										
Н	Amount (\$)		Payee addre	ss: (	City;	State	e; Zip Co	de					
	\$12.59		6406 N Inte		•		, ,						
	Ψ12.55			i state i	iwy 33								
			Suite 1210										
			Austin, TX	78752									
	PURPOSE	(a)	Category (Se	ee Categor	ies listed at the	top of this scl	hedule)	(b)	Description				
	OF EXPENDITURE		Office Over				,		Check if travel	outs	ide of Texas. C	ompl	ete Schedule T.
	EXPENDITORE								Check if Austin				
									Mailing of Ca	ımp	oaign mate	erial	S
	Complete ONLY if direct		Candidate/Offi	ceholde	r name	(	Office sou	ght			Office	hel	d
	expenditure to benefit C/OI	Н											
H	Data	Г	D										
	Date		Payee name										
	11/22/2024		Fedex										
	Amount (\$)		Payee addre	ss; (	City;	State	e; Zip Co	de					
	\$77.01		5962 W No	rthwest	Hwy								
			Dallas, TX	75225									
			Dallas, TA	13223									
	PURPOSE OF	(a)	Category (Se	ee Categor	ies listed at the	top of this scl	hedule)	(b)	Description				
	EXPENDITURE		Advertising	Expens	se				ш				ete Schedule T.
									Check if Austin				
									Mailing of Ca	ump	Jaiyn mate	ııal	5
	Complete ONLY if direct		Candidate/Offi	ceholde	r name		Office sou	ght			Office	hel	d
	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 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	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: 19/45 Rpt: 41/78	Meyer, Morgan D. (The Honorable) 00069344
4	Date	5 Payee name
	12/04/2024	Flower Child
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$63.21	500 W 2nd St Suite 133
		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	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/Ol	<del>1</del>
	Date	Payee name
	11/13/2024	Gables Republic Square
Г	Amount (\$)	Payee address; City; State; Zip Code
	\$505.00	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 Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Application for officeholder's Austin apartment
		7 ppilodatori for omooriolasi o ridotini aparamorit
┝	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
F	Date	Payee name
	11/18/2024	Gables Republic Square
Г	Amount (\$)	Payee address; City; State; Zip Code
	\$3,220.92	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 Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Rent for officeholder's Austin apartment
		Refit for officerolaer's Austin apartment
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
H		
Ī		

#### 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: 20/45 Rpt: 42/78	Meyer, Morgan D. (The Honorable) 00069344
4	Date	5 Payee name
	11/04/2024	Google Suite
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$69.08	1600 Ampitheatre Parkway
		Mountain View, CA 94043
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Campaign email system
		Campaign email system
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	the state of the s
⊨	Date	Paraga marra
	12/02/2024	Payee name
L		Google Suite
	Amount (\$)	Payee address; City; State; Zip Code
	\$69.08	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 Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Campaign email system
		Campaign email system
⊢	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
⊨	Data	David waren
	Date 12/02/2024	Payee name  H-E-B
	Amount (\$)	Payee address; City; State; Zip Code
	\$74.76	1801 EAST 51st ST
		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
		Supplies for Capitol office
		Supplies for Suprest office
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
$\vdash$		

#### SCHEDULE F1

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

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

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

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

	Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to comp		,
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 21/45 Rpt: 43/78	Meyer, Morgan D. (The Honorable)		00069344
4	Date	5 Payee name		•
	12/05/2024	H-E-B		
6	Amount (\$)	7 Payee address; City; State; Zip Code	9	
	\$2.58	2701 EAST 7th		
		Austin, TX 78702		
8	PURPOSE OF		)	Description
	EXPENDITURE	Office Overhead/Rental Expense		Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
				Supplies for Capitol office
9	Complete ONLY if direct	Candidate/Officeholder name Office sough	nt	Office held
	expenditure to benefit C/OI	<del>1</del>		
	Date	Payee name		
	11/04/2024	H-E-B		
	Amount (\$)	Payee address; City; State; Zip Code		
	\$70.79	12021 US-290		
		Austin, TX 78737		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	)	Description
	OF EXPENDITURE	Travel Out of District		Check if travel outside of Texas. Complete Schedule T.
	EXI ENDITORE			Check if Austin, TX, officeholder living expense
				Travel expense for campaign staff for travel to Dallas
	Complete ONLY if direct	Candidate/Officeholder name Office sough	nt	Office held
	expenditure to benefit C/OI	9		Cinide Held
	Date	Payee name		
	10/28/2024	Hampton Inn & Suites		
	Amount (\$)	Payee address; City; State; Zip Code	-	
	\$285.02	10370 N Central Expy		
	¥	23330 11 23111131 2149		
		Dallas, TX 75231		
	PURPOSE		)	Description
	OF	Travel In District	,	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE			Check if Austin, TX, officeholder living expense
				Lodging for campaign staff while traveling for campaign activities
	Complete ONLY If allowed	Condidate/Officeholder remains		
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sough	IL	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:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 22/45 Rpt: 44/78	Meyer, Morgan D. (The Honorable) 00069344
4	Date	5 Payee name
	11/01/2024	Hampton Inn & Suites
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$257.97	10370 N Central Expy
		Dallas, TX 75231
8	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.
	E/M EINE. G.	Check if Austin, TX, officeholder living expense
		Lodging for campaign staff while traveling for campaign activities
	2 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	
9	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	11/13/2024	Hilton Austin
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,080.96	500 East Fourth Street
		Austin, TX 78701
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Lodging for officeholder while traveling for
		officeholder activities
_	Operation ONLY if allowed	
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H
	·	
	Date	Payee name
	10/28/2024	Hopdoddy
	Amount (\$)	Payee address; City; State; Zip Code
	\$86.12	6030 Luther Ln
		Dallas, TX 75225
	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  Food and drink for campaign meeting to discuss
		campaign issues
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

#### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/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: 23/45 Rpt: 45/78	Meyer, Morgan D. (The Honorable) 00069344
4	Date	5 Payee name
	11/01/2024	Install Connect
6	Amount (\$) \$440.00	7 Payee address; City; State; Zip Code 505 W State St.
		Garland, TX 75040
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  Installation of campaign signs
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	10/30/2024	Jersey Mike's Subs
	Amount (\$) \$30.61	Payee address; City; State; Zip Code 8411 Preston Rd Suite 118 Dallas, TX 75225
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense Food and beverage for campaign staff while campaigning
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date 11/04/2024	Payee name Jersey Mike's Subs
	Amount (\$) \$61.29	Payee address; City; State; Zip Code 8411 Preston Rd Suite 118 Dallas, TX 75225
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense  (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Food and beverage for campaign staff while campaigning
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 24/45 Rpt: 46/78	Meyer, Morgan D. (The Honorable) 00069344
4	Date	5 Payee name
	10/28/2024	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
		Contribution form fees for campaign website
		Contribution form fees for campaign website
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
$\vdash$	Date	Davies same
		Payee name
	11/27/2024	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.
		Contribution form fees for campaign website
		Continuation form fees for campaign website
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Data	David and the second se
	Date 12/27/2024	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 fees for campaign website
		Continuation 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

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 compl	ete this form.
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 25/45 Rpt: 47/78	Meyer, Morgan D. (The Honorable)	00069344
4	Date	5 Payee name	•
	11/07/2024	LDU Coffee	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$6.25	10720 Preston Rd	
		Dallas, TX 75230	
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.
	EXPENDITURE		Check if Austin, TX, officeholder living expense
			Coffee for campaign staff while poll greeting
_	0 1: 0 1: 0		05.
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	•		
	Date	Payee name	
	11/01/2024	Lone Star Valet	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$935.28	3330 Keller Springs Rd	
		Carrollton, TX 75006	
	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  Valet for campaign event
			valet for campaign event
_	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI		Office field
H	Data		
	Date 11/05/2024	Payee name	
		Meek, Aaron	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$150.00	1404 Straus Rd.	
		Cedar Hill, TX 75104	
	PURPOSE OF	,	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		

### 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: 26/45 Rpt: 48/78	Meyer, Morgan D. (The Honorable) 00069344
4	Date	5 Payee name
	11/14/2024	Meek, Aaron
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$750.00	1404 Straus Rd.
		Cedar Hill, TX 75104
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Contract labor for campaign services
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	H
	Date	Payee name
	11/06/2024	Mi Cocina
	Amount (\$)	Payee address; City; State; Zip Code
	\$782.56	77 Highland Park Village
		Dallas, TX 75205
	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
		Food and beverageerage for election night
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	Н
_	Date	Payee name
	11/20/2024	Minted LLC
	Amount (\$)	Payee address; City; State; Zip Code
	\$3,539.20	747 Front St
	, , , , , , , ,	#200
		San Francisco, CA 94111
	PURPOSE	
	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
		Officeholder Christmas Cards
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	d .

#### SCHEDULE F1

Advertising Expense Event Expense
Accounting/Banking Fees
Consulting Expense Food/Beverage Expensions Properties Made By

Contributions/ Properties

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

	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: 27/45 Rpt: 49/78	Meyer, Morgan D. (The Honorable)  00069344	
4	Date	5 Payee name	
	11/05/2024	MoMo's Pasta	
6	Amount (\$) \$202.38	7 Payee address; City; State; Zip Code 11910 Preston Rd	
		Dallas, TX 75230	
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 Food and drink for campaign meeting to discuss	
		campaign issues	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held H	
	Date	Payee name	
	12/18/2024	Night & Day Moving	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$400.00	211 Alta Vista Dr	
		Bastrop, TX 78602	
	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	
		\[ \times	ł
		Woving services for officeriolider's Austin apartment	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held H	
	Date	Payee name	
	12/05/2024	North Italia	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$90.81	500 W 2nd St	
		#120	
		Austin, TX 78701	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Food/Beverage Expense	
	ZA ZHOHOKZ	Check if Austin, TX, officeholder living expense	
		Office Lunch for Capitol staff	
_	Complete ONLY if direct	Candidate/Officeholder name Office caught	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held H	

### 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/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: 28/45 Rpt: 50/78	Meyer, Morgan D. (The Honorable) 00069344
4	Date	5 Payee name
	10/28/2024	Officemax
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$42.92	2415 N Haskell Ave.
		Dallas, TX 75204
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Supplies for campaign meeting
		определения от от разделения
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	11/01/2024	Old Parkland Hospitality
	Amount (\$)	Payee address; City; State; Zip Code
	\$6,869.82	3819 Maple Avenue
		Dallas, TX 75219
	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  Campaign event venue fee, food and beverageerage
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1
	Date	Payee name
	11/13/2024	OneTaco
	Amount (\$)	Payee address; City; State; Zip Code
	\$62.91	402 Brazos 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/O	

#### SCHEDULE F1

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		
_	Total manage Calculated		
1	Total pages Schedule F1:		
L	Sch: 29/45 Rpt: 51/78	Meyer, Morgan D. (The Honorable) 00069344	
4	Date	5 Payee name	
L	11/25/2024	OpenPhone	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$10.00	149 New Montgomery Street	
		San Francisco, CA 94105	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF	Office Overhead/Rental Expense  Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Check if Austin, TX, officeholder living expense	
		Campaign phone subscription	
L			
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI	H	
	Date	Payee name	
	12/23/2024	OpenPhone	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$10.00	149 New Montgomery Street	
	20		
		San Francisco, CA 94105	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Office Overhead/Rental Expense	
		Campaign phone subscription	
		Campaign phone subscription	
$\vdash$	Complete ONLY if divert	Candidate/Officeholder name Office sought Office held	
	Complete ONLY if direct expenditure to benefit C/OH	•	
_	D :	T _	
	Date	Payee name	
	10/28/2024	Origin Bank	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$15.00	3838 Oak Lawn Ave.	
		Ste 100	
		Nederland, TX 77627	
	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.	
	LAFEINDITURE	Check if Austin, TX, officeholder living expense	
		Bank fees	
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held H	
	Emportation to bottom O/OI		

### SCHEDULE F1

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

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

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

Printing Expense

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	· · · · · · · · · · · · · · · · · · ·
	Sch: 30/45 Rpt: 52/78	Meyer, Morgan D. (The Honorable)
4	Date	5 Payee name
	11/04/2024	Panera Bread
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$40.27	7839 Park LN
		Dallas, TX 75225
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
		Food and drink for campaign meeting to discuss
		campaign issues
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Date	Payee name
	12/17/2024	Peacock Mediterranean Grill
	Amount (\$)	Payee address; City; State; Zip Code
\$184.24		600 W 2nd St
	<b>Q104.24</b>	COO W ZING CO
		Austin, TX 78701
	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
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	<del>-1</del>
	Date	Payee name
	11/01/2024	Penne Pomodoro
	Amount (\$)	Payee address; City; State; Zip Code
	\$128.17	6815 Snider Plaza
		Dallas, TX 75205
	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 Food and drink for campaign meeting to discuss
		campaign issues
_	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: 31/45 Rpt: 53/78	Meyer, Morgan D. (The Honorable) 00069344
4	Date	5 Payee name
	10/31/2024	Preston West Republican Women's Club
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$125.00	6210 White Rose Trail
		Dallas, TX 75248
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description  Check if the unit system of Taylor Complete Schedule T
	EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Annual membership fee
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experialture to beliefit C/Oi	
	Date	Payee name
	10/30/2024	Quick Trip
	Amount (\$)	Payee address; City; State; Zip Code
	\$23.16	3181 Lemmon Ave
		Dallas, TX 75204
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  Travel In District  (b) Description  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Gas for campaign sign deliveries
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experience to benefit ever	
	Date	Payee name
	11/14/2024	Robinson, Shelby
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,500.00	PSC 41 Box 92
		ADO AE 00564
		APO, AE 09564
	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 expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

#### SCHEDULE F1

Advertising Expense Evaccounting/Banking Feaccounting/Banking Feaccounting Expense Footsibutions/ Donations Made By - Gilliand Committee Feaccounting Feaccounting Feaccounting Feaccounting Feaccounting Feaccounting Fea

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

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

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

	Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 32/45 Rpt: 54/78	Meyer, Morgan D. (The Honorable) 00069344
4	Date	5 Payee name
	12/16/2024	Robinson, Shelby
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,500.00	PSC 41 Box 92
		APO, AE 09564
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/O	-t
	Date	Payee name
	12/02/2024	Rogers, Linda
	Amount (\$)	Payee address; City; State; Zip Code
	\$2,100.00	11008 Rosser Rd
		Dallas, TX 75229
	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	
	Date	Payee name
	10/28/2024	RumbleUp
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,000.00	2001 K Street NW
		Washington, DC 20006
	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
		Peer-to-peer campaign texting
	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/ 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: 33/45 Rpt: 55/78	Meyer, Morgan D. (The Honorable) 00069344
4	Date	5 Payee name
	10/28/2024	RumbleUp
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$3,000.00	2001 K Street NW
		Washington, DC 20006
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
		Peer-to-peer campaign texting
		Tool to pool sampaign toxing
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
Г	Date	Payee name
	10/30/2024	RumbleUp
Г	Amount (\$)	Payee address; City; State; Zip Code
	\$1,500.00	2001 K Street NW
		Washington, DC 20006
	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 Peer-to-peer campaign texting
		Teer to peer earnpuigh texting
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
F	Date	Payee name
	11/05/2024	RumbleUp
	Amount (\$)	Payee address; City; State; Zip Code
	\$100.00	2001 K Street NW
		Washington, DC 20006
	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 Peer-to-peer campaign texting
		r eer-to-peer campaign texting
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
$\vdash$		
ı		

### SCHEDULE F1

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

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By 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 compl	ete this form.
1	Total pages Schedule F1: Sch: 34/45 Rpt: 56/78	2 FILER NAME Meyer, Morgan D. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00069344
4	Date 11/05/2024	5 Payee name RumbleUp	
6	Amount (\$) \$1,000.00	<ul><li>7 Payee address; City; State; Zip Code</li><li>2001 K Street NW</li><li>Washington, DC 20006</li></ul>	
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Peer-to-peer campaign texting
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	Date 10/28/2024	Payee name Shell	
	Amount (\$) \$43.65	Payee address; City; State; Zip Code 4747 Greenville Ave  Dallas, TX 75206	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Travel In District	Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Travel expense for campaign staff for travel in district for campaign activities
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	Date 11/01/2024	Payee name Shell	
	Amount (\$) \$41.31	Payee address; City; State; Zip Code 4747 Greenville Ave	
		Dallas, TX 75206	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Travel In District  (b)	Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Travel expense for campaign staff for travel in district for campaign activities
	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 Comm

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		Travel Out of District OTHER (enter a category not listed above)
_	Total names Oct 11 51		2 Files ID /Files Constitute File >
1	Total pages Schedule F1: Sch: 35/45 Rpt: 57/78	2 FILER NAME Meyer, Morgan D. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00069344
4	Date	5 Payee name	
Ĺ	11/06/2024	Shell	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$47.02	4747 Greenville Ave	
		Dallas, TX 75206	
8	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.
			TX, officeholder living expense se for campaign staff for travel in district
		for campaign	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	1	
	Date	Payee name	
	11/07/2024	Starbucks	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$9.12	13556 Preston Rd	
		Dallas, TX 75240	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	nuteide of Toyon Complete California
	EXPENDITURE	1 000/Develage Expense	outside of Texas. Complete Schedule T. , TX, officeholder living expense
		🗀	nk for campaign meeting to discuss
		campaign iss	
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	1	
	Date	Payee name	
	12/31/2024	Stripe	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$462.28	510 Townsend St	
		San Francisco, CA 94103	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	putside of Teyes Complete Schoolule T
	EXPENDITURE	1 663	outside of Texas. Complete Schedule T. , TX, officeholder living expense
			vice fees for online contributions Sept
		27 - Oct 26	·
	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)

Event Expense Loan Repayment/Reimbu

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

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: 36/45 Rpt: 58/78	Meyer, Morgan D. (The Honorable) 00069344
4	Date	5 Payee name
	10/28/2024	Taco Joint
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$4.32	6112 Luther Ln
		Dallas, TX 75225
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
		Food and drink for campaign meeting to discuss
		campaign issues
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1
	Date	Payee name
	10/28/2024	Taco Joint
	Amount (\$)	Payee address; City; State; Zip Code
	\$44.19	6112 Luther Ln
		Dallas, TX 75225
	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
		Food and drink for campaign meeting to discuss
		campaign issues
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	10/31/2024	Taco Joint
	Amount (\$)	Payee address; City; State; Zip Code
	\$54.75	6112 Luther Ln
		Dallas, TX 75225
	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  Food and drink for campaign meeting to discuss
		campaign issues
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

#### SCHEDULE F1

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

Event Expense Loan Repaymer
Fees Office Overheac
Food/Beverage Expense Polling Expense
Gift/Awards/Memorials Expense Printing Expense
Lenal Services Salaries/Mages

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

	Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment			Legal Services Frinting Expense Salaries/Wages/Contract Labor					OTHER (enter a category not listed above)			
				The Instruction G	uide explains h	ow to co	mple	ete this form.				
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	(Ethics Commissio	n Filers)
	Sch: 37/45 Rpt: 59/78		Meyer, Morç	gan D. (The Ho	norable)					00069344		
4	Date	5	Payee name									
	12/04/2024		Target									
6	Amount (\$)	7	Payee addres	ss; City;	State;	Zip Co	de					
	\$24.49		2417 N Has	kell Ave								
			Dallas, TX 7	5204								
8	PURPOSE	(a)		e Categories listed at t	the ten of this cabo	dula)	(b)	Description				
ľ	OF	(")	Advertising I		ine top of this sche	edule)	(2)		outsio	de of Texas. Con	nplete Schedule T.	
	EXPENDITURE		/ tavertishing i	<u> Е</u> хрепос				=		officeholder livin		
								Supplies for n	nai	ling of cam	paign christmas o	cards
9	Complete ONLY if direct		Candidate/Offic	ceholder name	0	ffice sou	ght			Office h	eld	
	expenditure to benefit C/OI	Н										
	Date		Payee name									
	11/06/2024		The Great C	outdoors								
	Amount (\$)		Payee addres	ss; City;	State;	Zip Co	de					
	\$79.37		6918 Green	ville Ave								
			Dallas, TX 7	5231								
	PURPOSE	(a)	Category (se	e Categories listed at t	the ten of this cahe	idulo)	(b)	Description				
	OF	<u> </u> `		age Expense	are top or this serie	uuic)	` ,	_ :	outsio	de of Texas. Con	nplete Schedule T.	
	EXPENDITURE							<b>—</b>		officeholder livin		
											n meeting to disc	cuss
								campaign iss	ues			
	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Offic	ceholder name	0	ffice sou	ght			Office h	eld	
	experialitate to beliefit e/of											
	Date		Payee name									
	11/01/2024		Tom Thumb									
	Amount (\$)		Payee addres	ss; City;	State;	Zip Co	de					
	\$22.45		4001 Villand	va St								
			Dallas, TX 7	5225								
	PURPOSE	(a)	Category (Se	e Categories listed at t	the top of this sche	edule)	(b)	Description				
	OF EXPENDITURE			nead/Rental Ex		,		ш			nplete Schedule T.	
	LAI LINDITORE							_		officeholder livin	g expense	
								Supplies for C	anر,	npaign		
_	Complete ONLY if allower	<u> </u>	Condidate /Off	abaldar as		ffing s =	ale.			Off:	ald	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Offic	enolaer name	O	ffice sou	gnt			Office h	eiu	
	·											

### SCHEDULE F1

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

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee 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: 38/45 Rpt: 60/78	Meyer, Morgan D. (The Honorable) 00069344
4	Date	5 Payee name
	11/01/2024	Tom Thumb
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$7.20	4001 Villanova St
		Dallas, TX 75225
8	PURPOSE	
٠	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
		Coffee for campaign staff while poll greeting
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/Ol	1
	Date	Payee name
	11/01/2024	Tom Thumb
	Amount (\$)	Payee address; City; State; Zip Code
	\$12.34	3878 Oak Lawn Ave
		Dallas, TX 75219
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Food for campaign staff while poll greeting
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	11/04/2024	Tom Thumb
	Amount (\$)	Payee address; City; State; Zip Code
	\$14.18	4001 Villanova St
		Dallas, TX 75225
	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.
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		Food for campaign staff while poll greeting
	Complete CALLY'S	Condidate/Officeholder name
	Complete ONLY if direct expenditure to benefit C/Ol	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 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	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: 39/45 Rpt: 61/78	Meyer, Morgan D. (The Honorable)	00069344					
4	Date	5 Payee name						
	12/09/2024	Tom Thumb						
6	Amount (\$)	<b>7</b> Payee address; City; State; Zip Co	de					
	\$8.64	3878 Oak Lawn Ave						
		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.				
	EXPENDITORE			Check if Austin, TX, officeholder living expense				
				Supplies for mailing of campaign christmas cards				
_								
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	ght	Office held				
	Date	Payee name						
	11/06/2024	Uber						
Amount (\$)		Payee address; City; State; Zip Co	de					
	\$43.97	1457 Market St. Ste 400						
		San Francisco, CA 94103						
	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.					
			Check if Austin, TX, officeholder living expense  Uber for campaign staff to campaign meeting					
				ober for campaign stain to campaign meeting				
	Complete ONLY if direct	Candidate/Officeholder name Office sou	aht	Office held				
	expenditure to benefit C/OI		grit	Office field				
	Data							
	Date 11/07/2024	Payee name Uber						
	Amount (\$)	Payee address; City; State; Zip Co	de					
	\$8.54	1457 Market St. Ste 400						
		San Francisco, CA 94103						
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b)	Description				
	EXPENDITURE	Travel In District		Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense				
				Uber for campaign staff to campaign meeting				
				1 2 1 9				
	Complete ONLY if direct	Candidate/Officeholder name Office sou	ght	Office held				
	expenditure to benefit C/OI							

### SCHEDULE F1

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

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

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

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

	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: 40/45 Rpt: 62/78	Meyer, Morgan D. (The Honorable) 00069344
4	Date	5 Payee name
	11/08/2024	Uber
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$7.53	1457 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	Travel In District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Uber for campaign staff to campaign meeting
		Ober for campaight stail to campaigh meeting
_	0 1: 0:11:4"	
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	11/12/2024	Uber
	Amount (\$)	Payee address; City; State; Zip Code
	\$1.00	1457 Market St. Ste 400
		San Francisco, CA 94103
	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.
	LAFENDITORE	Check if Austin, TX, officeholder living expense
		Uber for campaign staff to campaign meeting
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experiulture to beliefit C/Oi	1
	Date	Payee name
	12/20/2024	Uber
	Amount (\$)	Payee address; City; State; Zip Code
	\$13.00	1457 Market St. Ste 400
	7-2	
		San Francisco, CA 94103
	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.
	LAFENDITORE	Check if Austin, TX, officeholder living expense
		Uber for campaign staff for campaign purposes
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experience to beliefft C/OI	<u>'</u>

#### SCHEDULE F1

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

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
		<u>_</u>
1	Total pages Schedule F1:	
	Sch: 41/45 Rpt: 63/78	Meyer, Morgan D. (The Honorable) 00069344
4	Date	5 Payee name
	12/23/2024	Uber
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$11.96	1457 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	Travel In District Check if travel outside of Texas. Complete Schedule T.
	LAI LINDITORE	Check if Austin, TX, officeholder living expense
		Uber for campaign staff for campaign purposes
_		
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	12/30/2024	Uber
	Amount (\$)	Payee address; City; State; Zip Code
	\$1.00	1457 Market St. Ste 400
		San Francisco, CA 94103
	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.
		Check if Austin, TX, officeholder living expense  Uber for campaign staff for campaign purposes
		Ober for campaign stan for campaign purposes
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
_	Date	Davisa nama
	12/30/2024	Payee name Uber
	Amount (\$) \$8.99	Payee address; City; State; Zip Code
	Ф0.99	1457 Market St. Ste 400
		Con Francisco CA 04103
		San Francisco, CA 94103
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  Travel in District  (b) Description  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Uber for campaign staff for campaign purposes
	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 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 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: 42/45 Rpt: 64/78	Meyer, Morgan D. (The Honorable) 00069344					
4	Date	5 Payee name					
	11/19/2024	United States Postal Service					
6	Amount (\$)	7 Payee address; City; State; Zip Code					
	\$29.20	8604 Turtle Creek Blvd					
		Dallas, TX 75225					
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.					
		Check if Austin, TX, officeholder living expense  Mailing of Campaign materials					
		Mailing of Sampaign materials					
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held					
۱	expenditure to benefit C/O						
-	Date	Dougo nama					
	12/04/2024	Payee name					
		United States Postal Service					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$58.40 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					
		Check if Austin, TX, officeholder living expense					
		Postage for mailing of campaign christmas cards					
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held					
	expenditure to benefit C/O						
_	D :						
	Date	Payee name					
	12/05/2024	United States Postal Service					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$1,022.00	401 Tom Landry Fwy					
		Dallas, TX 75260					
	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 Postage for mailing of campaign christmas cards					
		Postage for mailing of campaign christmas cards					
_	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

	Credit Card Payment	The Instruction Guide explains how to complete this form.						
1	Total pages Schedule F1: Sch: 43/45 Rpt: 65/78	2 FILER NAME Meyer, Morgan D. (The Honorable)  3 Filer ID (Ethics Commission Filers) 00069344						
4	Date 12/11/2024	5 Payee name Wayfair						
6	Amount (\$) \$151.32	7 Payee address; City; State; Zip Code 4 Copley Pl Floor 7 Boston, MA 02116						
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  Furniture for Austin apartment for officeholder						
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held						
	Date 12/16/2024	Payee name Wayfair						
	Amount (\$) \$107.16	Payee address; City; State; Zip Code 4 Copley PI Floor 7 Boston, MA 75204						
	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  Furniture for Austin apartment for officeholder						
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held						
	Date 12/17/2024	Payee name Wayfair						
	Amount (\$) \$277.11	Payee address; City; State; Zip Code 4 Copley Pl Floor 7 Boston, MA 02116						
	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  Furniture for Austin apartment for officeholder						
	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 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: 44/45 Rpt: 66/78	Meyer, Morgan D. (The Honorable) 00069344				
4	Date	5 Payee name				
	11/21/2024	Wendy's				
6	Amount (\$) \$15.67	7 Payee address; City; State; Zip Code 6210 E Ben White Blvd				
		Austin, TX 78741				
8	PURPOSE 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	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/O	Candidate/Officeholder name Office sought Office held				
	Date	Payee name				
	10/29/2024	Youngers, Josh				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$125.00 1141 South Ridge Dr.					
		Midlothian, TX 75065				
	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				
		The second secon				
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held				
	expenditure to benefit C/OI	1				
	Date	Payee name				
	10/29/2024	Youngers, Madison				
	Amount (\$)	Payee address; City; State; Zip Code				
	\$100.00	1141 South Ridge Dr.				
		Midlothian, TX 75065				
	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				
		ı ü				
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held				
	expenditure to benefit C/O					

### SCHEDULE F1

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

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

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

	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: 45/45 Rpt: 67/78	Meyer, Morgan D. (The Honorable) 00069344
4	Date	5 Payee name
	11/01/2024	Zoom
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$17.05	55 Almaden Blvd
		Floor 6
		San Jose, CA 95113
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 Zoom account
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	12/02/2024	Zoom
	Amount (\$)	Payee address; City; State; Zip Code
	\$17.05	55 Almaden Blvd
		San Jose, CA 95113
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Campaign Zoom account
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	experiorative to benefit C/Oi	<u>'</u>

### SCHEDULE F4

#### **EXPENDITURE CATEGORIES FOR BOX 10(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

	The Inst	ruction Guide explains how	to complete this form.				
1 Total pages Schedule F4:	hedule F4: 2 FILER NAME			3 Filer ID (Ethics Commission Filers)			
Sch: 1/9 Rpt: 68/78	Meyer, Morgan D. (	(The Honorable)	00069344				
4 CREDIT CARD ISSUER		ncial institution Bank	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$			
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	r Paid			
	\$17.26	11/12/2024	12/09/2024				
7 PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code			
	Uber		1457 Market St. Ste 400				
	( ) 2 :		San Francisco, CA 94103				
8 PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Travel Out of District	of this schedule)	(b) Description  Uber in Austin for officeholder while traveling for officeholder activites				
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expense			
9 Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought	Office held			
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuel 12/09/2024	r Paid			
	\$10.53	11/12/2024	12/09/2024				
PAYEE	PAYEE (a) Payee name		(b) Payee address;	City, State, Zip Code			
	Uber		1457 Market St. Ste 400				
	( ) 2 :		San Francisco, CA 94103				
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description  Uber in Austin for officeholder while traveling for officeholder activites				
X Political							
Non-Political	`	of Texas. Complete Schedule T.	<b>—</b>	officeholder living expense			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder	name Offic	e sought	Office held			
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuel 12/09/2024	r Paid			
	\$18.96	11/13/2024	12/09/2024				
PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code			
	Uber		1457 Market St. Ste 400				
			San Francisco, CA 94103				
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description				
l <u> </u>	Travel Out of District	c. a soriculary	Uber in Austin for officeholder while traveling for officeholder activites				
X Political Non-Political	( ) <b>[</b> ( ) ( ) ( )						
	(c) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule T.	Check if Austin, TX,	officeholder living expense Office held			
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeriolder	name Oilid	c sougiii	Office field			

### SCHEDULE F4

#### **EXPENDITURE CATEGORIES FOR BOX 10(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

Printing Expense Salaries/Wages/Contract Labor

		The Inst	ruction Guide explains how	to complete t	his form.			
1	Total pages Schedule F4:	4: 2 FILER NAME				3 Filer ID (Eth	ics Commis	sion Filers)
	Sch: 2/9 Rpt: 69/78	Meyer, Morgan D. (	00069344					
4	CREDIT CARD ISSUER		ncial institution revious	EXPEN	OF UNITEMIZED DITURES ED TO A CREDIT	\$		
6	PAYMENT	(a) Amount Charged \$28.03	(b) Date of Charge 11/13/2024	(c) Date(s) 12/09/20	Credit Card Issuer 24	r Paid		
7	PAYEE	(a) Payee name Uber			address; ket St. Ste 400 cisco, CA 94103	City,	State,	Zip Code
8	PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Travel Out of District	of this schedule)	(b) Descrip			eling for (	officeholder
	Non-Political	· · ·	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living ex	oense	
	Complete ONLY if direct xpenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		
	PAYMENT	(a) Amount Charged \$26.26	(b) Date of Charge 11/14/2024	(c) Date(s) 12/09/20	Credit Card Issuer 24	r Paid		
PAYEE (a) Payee na Uber		(a) Payee name Uber			ket St. Ste 400	City,	State,	Zip Code
	PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Travel Out of District	of this schedule)	San Francisco, CA 94103  (b) Description  Uber in Austin for officeholder while traveling for officeholder activites				officeholder
	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living ex	pense	
е	Complete ONLY if direct xpenditure to benefit C/OH	Candidate/Officeholder	name Office	ce sought Office held				
	PAYMENT	(a) Amount Charged \$18.96	(b) Date of Charge 12/02/2024	(c) Date(s) 12/09/20	Credit Card Issuer 24	r Paid		
	PAYEE	(a) Payee name Uber			address; ket St. Ste 400 cisco, CA 94103	City,	State,	Zip Code
	PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Travel Out of District	of this schedule)	(b) Description  Uber in Austin for officeholder while traveling for officeholde activites				officeholder
L	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living ex	pense	
е	Complete ONLY if direct xpenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held		

### SCHEDULE F4

#### **EXPENDITURE CATEGORIES FOR BOX 10(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

	The Inst	ruction Guide explains how	to complete this form.			
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics Commission Filers)		
Sch: 3/9 Rpt: 70/78	Meyer, Morgan D. (	(The Honorable)		00069344		
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$		
6 PAYMENT	(a) Amount Charged \$16.96	(b) Date of Charge 12/02/2024	(c) Date(s) Credit Card Issue 12/09/2024	r Paid		
7 PAYEE	(a) Payee name Uber		(b) Payee address; 1457 Market St. Ste 400	City, State, Zip Code		
			San Francisco, CA 94103			
8 PURPOSE OF EXPENDITURE  X Political	(See Categories listed at the top of this schedule)  Travel Out of Dietrict		(b) Description Uber in Austin for officeholder while traveling for officehold activites			
Non-Political	(c) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX,		officeholder living expense			
<b>9</b> Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder		e sought	Office held		
PAYMENT	(a) Amount Charged \$26.95	(b) Date of Charge 12/08/2024	(c) Date(s) Credit Card Issue 12/09/2024	r Paid		
PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code		
	Uber  (a) Category (See Categories listed at the top of this schedule) Travel Out of District		1457 Market St. Ste 400			
PURPOSE OF EXPENDITURE    X   Political			San Francisco, CA 94103  (b) Description  Uber in Austin for officeholder while traveling for officehold activites			
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Chock if Austin TV	officeholder living expense		
Complete ONLY if direct	Candidate/Officeholder	<u> </u>	e sought	Office held		
expenditure to benefit C/OH PAYMENT	(a) Amount Charged \$19.90	(b) Date of Charge 12/09/2024	(c) Date(s) Credit Card Issue 12/09/2024	r Paid		
PAYEE	(a) Payee name Uber	1	(b) Payee address; 1457 Market St. Ste 400 San Francisco, CA 94103	City, State, Zip Code		
PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top of this schedule) Travel Out of District		(b) Description Uber in Austin for officeholder while traveling for officehold activites			
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	e sought	Office held		

### SCHEDULE F4

#### **EXPENDITURE CATEGORIES FOR BOX 10(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

	The Instruction Guide explains how to complete this form.					
1 Total pages Schedule F4:	4: 2 FILER NAME			3 Filer ID (Ethics Commission Filers)		
Sch: 4/9 Rpt: 71/78	Meyer, Morgan D. (	(The Honorable)	00069344			
4 CREDIT CARD ISSUER	Name of financial institution JPMorgan Chase		5 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD			
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issue	er Paid		
	\$144.32	11/13/2024	12/09/2024			
7 PAYEE	(a) Payee name	•	(b) Payee address;	City, State, Zip Code		
	Red Ash Italia		303 Colorado St #200 Austin, TX 78701			
8 PURPOSE OF	(a) Category		(b) Description			
EXPENDITURE  X Political	(See Categories listed at the top Food/Beverage Exper	•	Food & beverageerage at campaign matters	t campaign meeting to discuss		
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX	, officeholder living expense		
9 Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought	Office held		
expenditure to benefit C/OH						
PAYMENT	(a) Amount Charged \$20.86	(b) Date of Charge 11/13/2024	(c) Date(s) Credit Card Issue 12/09/2024	r Paid		
PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code		
	Hudson Dallas Lov	e Field Airport	8008 Herb Kelleher Way  Dallas, TX 75235			
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description			
EXPENDITURE  X Political			Food and beverage for office holder while traveling			
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX	, officeholder living expense		
Complete ONLY if direct	Candidate/Officeholder	<u> </u>	e sought	Office held		
expenditure to benefit C/OH						
PAYMENT	(a) Amount Charged \$31.06	(b) Date of Charge 11/14/2024	(c) Date(s) Credit Card Issue 12/09/2024	r Paid		
PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code		
	Hilton Austin		500 East 4th Street			
			Austin, TX 78701			
PURPOSE OF	(a) Category		(b) Description			
EXPENDITURE	(See Categories listed at the top of this schedule)  Travel Out of District		Lodging for officeholder while traveling for officeholder			
X Political	Tractor Gut of District		activities			
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 Offic	e sought	Office held		

#### SCHEDULE F4

#### **EXPENDITURE CATEGORIES FOR BOX 10(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

	The Inst	ruction Guide explains how	to complete this form.	(		
1 Total pages Schedule F4:	2 FILER NAME			3 Filer ID (Ethics Commission Filers)		
Sch: 5/9 Rpt: 72/78	Meyer, Morgan D. (	(The Honorable)		00069344		
4 CREDIT CARD ISSUER		ncial institution revious	5 TOTAL OF UNITEMI EXPENDITURES CHARGED TO A CR CARD	\$		
6 PAYMENT	(a) Amount Charged \$297.42	(b) Date of Charge 11/22/2024	(c) Date(s) Credit Card I 12/09/2024	ssuer Paid		
7 PAYEE	(a) Payee name  Royal Sonesta Hote	el	(b) Payee address; 701 Congress Ave	City, State, Zip Coo		
8 PURPOSE OF	(a) Category		Austin, TX 78701 (b) Description			
EXPENDITURE  X Political	(See Categories listed at the top Travel Out of District	of this schedule)	1 ' '	der while traveling for officeholder		
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.	Check if Aust	in, TX, officeholder living expense		
9 Complete ONLY if direct Candidate/Officeholder name Office sought Cexpenditure to benefit C/OH				Office held		
PAYMENT	(a) Amount Charged \$18.81	(b) Date of Charge 12/02/2024	(c) Date(s) Credit Card I 12/09/2024	ssuer Paid		
PAYEE	(a) Payee name  La Madeleine		(b) Payee address; 8008 Cedar Springs Terminal 2 Gate 6 Dallas, TX 75235	City, State, Zip Coo Rd		
PURPOSE OF EXPENDITURE  X Political	(a) Category (See Categories listed at the top Food/Beverage Expe		(b) Description Food for officeholder while traveling for officeholder activities			
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Aust	in, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held		
PAYMENT	(a) Amount Charged \$73.00	(b) Date of Charge 12/02/2024	(c) Date(s) Credit Card I 12/09/2024	ssuer Paid		
PAYEE	(a) Payee name  Aloft Element Austi	n Downtown	(b) Payee address; 621 Congress Ave Austin, TX 78701	City, State, Zip Coo		
PURPOSE OF EXPENDITURE    X   Political	(a) Category (See Categories listed at the top Food/Beverage Expe		(b) Description Food for officeholder activities	while traveling for officeholder		
Non-Political	`	of Texas. Complete Schedule T.		in, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought	Office held		
I						

### SCHEDULE F4

#### **EXPENDITURE CATEGORIES FOR BOX 10(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

The Instruction Guide explains how to complete this form.									
1	Total pages Schedule F4:	chedule F4: 2 FILER NAME			3 Filer ID (Ethics Commission Filers)				
	Sch: 6/9 Rpt: 73/78	Meyer, Morgan D. (	00069344						
4	CREDIT CARD ISSUER	see previous		EXPEND	F UNITEMIZED ITURES D TO A CREDIT	\$			
6	PAYMENT	(a) Amount Charged \$56.13	(b) Date of Charge 12/03/2024	(c) Date(s) 0 12/09/2024	Credit Card Issuer 4	Paid			
7	PAYEE	(a) Payee name (b) Payee address; 407 Lavaca Street		a Street	City,	State,	Zip Code		
Ļ	DUDDO05.05	(a) Cataman		Austin, TX					
8	PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense  (b) Description Food for officeholder wactivities				le traveling for officeholder				
	Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living expense			
9	Complete ONLY if direct	Candidate/Officeholder name Office sought				Office held			
е	xpenditure to benefit C/OH								
	PAYMENT	(a) Amount Charged \$491.93	(b) Date of Charge 12/04/2024	(c) Date(s) 0 12/09/2024	Credit Card Issuer 4	Paid			
PAYEE		(a) Payee name		(b) Payee ad	ddress;	City,	State,	Zip Code	
		Royal Sonesta Hotel		701 Congr		<i>y.</i>		·	
				Austin, TX	78701				
	PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule)  Travel Out of District			(b) Description  Lodging for officeholder while traveling for officeholder activities					
	Non-Political	(a) Chapte if traval autoids	of Toyon, Complete Cohodule T		Charle if Austin TV	officeholder living evnense			
	Complete ONLY if direct	(c) Check if travel outside Candidate/Officeholder	of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense e sought Office held					
е	xpenditure to benefit C/OH	Canadate/Officeriolaer	Tiane Office						
	PAYMENT	(a) Amount Charged \$124.49	(b) Date of Charge 12/05/2024	(c) Date(s) C 12/09/2024	Credit Card Issuer 4	<sup>*</sup> Paid			
	PAYEE	(a) Payee name Acre 41		(b) Payee at 1901 San Austin, TX	Antonio St	City,	State,	Zip Code	
PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense		(b) Description Food for officeholder while traveling for officeholder activities				er			
L	Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense		
е	Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held					_			

### SCHEDULE F4

#### **EXPENDITURE CATEGORIES FOR BOX 10(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

The Instruction Guide explains how to complete this form.									
1	Total pages Schedule F4:	edule F4: 2 FILER NAME			3 Filer ID (Ethics Commission Filers)				
	Sch: 7/9 Rpt: 74/78	Meyer, Morgan D. (	00069344						
4	CREDIT CARD ISSUER	Name of financial institution see previous		EXPEND	F UNITEMIZED ITURES D TO A CREDIT	\$			
6	PAYMENT	(a) Amount Charged \$240.40	(b) Date of Charge 12/06/2024	(c) Date(s) 0 12/09/2024	Credit Card Issuer 4	Paid			
7	PAYEE	(a) Payee name (b) Payee address; Acre 41 1901 San Antonio		Antonio Sr	City,	State,	Zip Code		
8	PURPOSE OF (a) Category (See Categories listed at the top of this schedule)  Food (Payments Figure 1999)			(b) Descripti	Austin, TX 78705  (b) Description  Food for officeholder while traveling for officeholder activities				
	Non-Political (c) Check if travel outside of Texas. Complete Schedule T.			Check if Austin, TX, officeholder living expense					
	Complete <u>ONLY</u> if direct xpenditure to benefit C/OH	Candidate/Officeholder		e sought		Office held			
	PAYMENT	(a) Amount Charged \$1,419.71	(b) Date of Charge 12/07/2024	(c) Date(s) C 12/09/2024	Credit Card Issuer 4	<sup>*</sup> Paid			
PAYEE		(a) Payee name  The Otis Hotel		(b) Payee at 1901 San A	Antonio St	City,	State,	Zip Code	
	PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule)  Travel Out of District			(b) Description Lodging for officeholder while traveling for officeholder activities					
	Non-Political  (c) Check if travel outside of Texas. Complete Schedule T. Check if Aust			Check if Austin, TX,	X, officeholder living expense				
е	Complete ONLY if direct xpenditure to benefit C/OH	Candidate/Officeholder	name Office	e sought		Office held			
	PAYMENT	(a) Amount Charged \$42.81	(b) Date of Charge 12/07/2024	(c) Date(s) 0 12/09/2024	Credit Card Issuer 4	Paid			
PAYEE (a) Payee name  The Roaring Fork		(b) Payee address; City, State, Zip Code 701 Congress  Austin, TX 78701							
PURPOSE OF EXPENDITURE  (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense			(b) Description Food for officeholder while traveling for officeholder activities				er		
	Non-Political	\(\frac{1}{2}\)	of Texas. Complete Schedule T.		Check if Austin, TX,	officeholder living exp	ense		
е	Complete ONLY if direct expenditure to benefit C/OH  Candidate/Officeholder name Office sought Office held								

### SCHEDULE F4

#### **EXPENDITURE CATEGORIES FOR BOX 10(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

The Instruction Guide explains how to complete this form.								
1 Total pages Schedule F4:	pages Schedule F4: 2 FILER NAME			3 Filer ID (Ethics Commission Filers)				
Sch: 8/9 Rpt: 75/78	Meyer, Morgan D. (	00069344						
4 CREDIT CARD ISSUER	Name of financial institution see previous		5 TOTAL OF UN EXPENDITURE CHARGED TO CARD	ES	\$			
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit	Card Issuer	Paid			
	\$292.29	12/08/2024	12/09/2024					
7 PAYEE	(a) Payee name		(b) Payee address	5;	City,	State,	Zip Code	
Royal Sonesta Hotel		701 Congress Ave						
	() 2 :		Austin, TX 7870	)1				
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description	oboldor wi	hilo travalina f	or officeb	oldor	
X Political	Travel Out of District			Lodging for officeholder while traveling for officeholder activities				
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Chec	ck if Austin, TX, o	officeholder living ex	pense		
9 Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought		Office held			
expenditure to benefit C/OH								
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit	Card Issuer	Paid			
	\$24.40	12/08/2024	12/09/2024					
PAYEE	(a) Payee name	•	(b) Payee address	5;	City,	State,	Zip Code	
AUS - Wes Market			5812 Trade Center Dr. Suite 20					
			Austin, TX 7874	14				
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top	of this schedule)	(b) Description Food for officeholder while traveling for officeholder activities				or	
X Political	Food/Beverage Expe	nse						
Non-Political	(c) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense					
Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought		Office held			
expenditure to benefit C/OH			_					
PAYMENT	(a) Amount Charged \$217.82	(b) Date of Charge 12/07/2024	(c) Date(s) Credit 12/09/2024	Card Issuer	Paid			
PAYEE	(a) Payee name Perry's Steakhouse & Grille		(b) Payee address	5;	City,	State,	Zip Code	
			114 W. 7th Street					
			Austin, TX 78701					
PURPOSE OF  (a) Category  (See Categories listed at the tag of this schedule)		of this schodulo)	(b) Description					
EXPENDITURE (See Categories listed at the top of this schedule)  Food/Beverage Expense			Food for officeholder while traveling for officeholder activities					
X   Political								
Non-Political		ck if Austin, TX,	officeholder living ex	pense				
Complete ONLY if direct	Candidate/Officeholder	name Offic	e sought		Office held			
expenditure to benefit C/OH								

#### SCHEDULE F4

#### **EXPENDITURE CATEGORIES FOR BOX 10(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	-			THER (enter a category not listed above)			
		ruction Guide explains how	to complete this form.	I			
1 Total pages Schedule F4:				3 Filer ID (Ethics Commission Filers)			
Sch: 9/9 Rpt: 76/78	Meyer, Morgan D. (	00069344					
4 CREDIT CARD ISSUER	Name of finar	ncial institution	5 TOTAL OF UNITEMIZED EXPENDITURES	l <sub>s</sub>			
ISSUER	see pr	revious	CHARGED TO A CREDIT	ΙΨ			
			CARD				
6 PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuer	Paid			
	\$77.94	12/11/2024					
7 PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code			
	Ct. Michaelle Mome	unio Evoluoreno	#5 Highland Park Village				
	St. Michael's Woma	in's Exchange					
			Dallas, TX 75205				
8 PURPOSE OF	(a) Category (See Categories listed at the top	of this schoolule)	(b) Description				
EXPENDITURE 	Gift/Awards/Memorials		Thank you gift for campai	gn supporter			
X Political		- r					
Non-Political	(C) Check if travel outside	of Texas. Complete Schedule T.	Check if Austin, TX, officeholder living expense				
9 Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held			
expenditure to benefit C/OH							
PAYMENT	(a) Amount Charged	(b) Date of Charge	(c) Date(s) Credit Card Issuer	Paid			
	\$198.19	12/13/2024					
PAYEE	(a) Payee name		(b) Payee address;	City, State, Zip Code			
The Constant Cuille			500 Crescent Ct Stuie 135	5			
	The Capital Grille						
			Dallas, TX 75201				
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top)	of this schedule)	(b) Description  Campaign lunch to discuss campaign matters and parking				
l <u> </u>	Food/Beverage Exper						
X Political			<u>_</u>				
Non-Political	`	of Texas. Complete Schedule T.		officeholder living expense			
Complete ONLY if direct	Candidate/Officeholder	name Office	e sought	Office held			
expenditure to benefit C/OH							
I							

### POLITICAL EXPENDITURES FROM PERSONAL FUNDS

## SCHEDULE G

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

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains		Expense Wages/Contract Labor	Travel II District Travel Out of District OTHER (enter a category not listed above)	
1 Total pages Schedule G: 2 FILEI		2 FILER NA	FILER NAME			3 Filer ID (Ethics Commission Filers)	
	Sch: 1/1 Rpt: 77/78	Meyer, M	Norgan D. (The Honorable)			00069344	
4	Date	5 Payee na	me				
	12/09/2024	Masterca	ard				
6	Amount (\$)	7 Payee ad	dress; City; State	e; Zip C	ode		
	\$183.81	PO Box (	6004				
	Reimbursement from political contributions intended	Sioux Fa	ılls, SD 57117				
8	PURPOSE	(a) Category	(See Categories listed at the top of this so	hedule)	(b) Description	Check if travel outside of Texas. Complete Schedule T.	
	OF EXPENDITURE	Credit Ca	ard Payment			Check if Austin, TX, officeholder living expense	
					Credit card paym	nent for expenditures reported in F4	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Off	iceholder name		Office sought	Office held	
	Date	Payee na	me				
	11/09/2024	Visa					
	Amount (\$)	Payee address; City; State; Zip Code					
\$834.58 900 Metro Center Blvd.							
	Reimbursement from						
	X political contributions intended	Foster C	ity, CA 94404				
	PURPOSE	Category	(See Categories listed at the top of this so	hedule)	Description	Check if travel outside of Texas. Complete Schedule T.	
OF EXPENDITURE		Credit Ca	ard Payment			Check if Austin, TX, officeholder living expense	
	ZA ZHOMONZ				Credit card paym	nent for expenditures reported in F4	
Complete <u>ONLY</u> if direct expenditure to benefit		Candidate/Off	iceholder name		Office sought	Office held	
	C/OH						
	Date	Payee na	me				
	12/09/2024	Visa					
	Amount (\$)	Payee ad	dress; City; State	e; Zip C	ode		
	\$3,495.45	900 Metr	o Center Blvd.				
	Reimbursement from political contributions intended	Foster C	ity, CA 94404				
	PURPOSE	Category	(See Categories listed at the top of this so	hedule)	Description	Check if travel outside of Texas. Complete Schedule T.	
	OF EXPENDITURE	Credit Ca	ard Payment			Check if Austin, TX, officeholder living expense	
					Credit card paym	nent for expenditures reported in F4	
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Off	iceholder name		Office sought	Office held	

## 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: 78/78 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 11/01/2024 **Texas Ethics Commission** \$12.45 6 Address of person from whom amount is received; City; State; Zip Code Austin, TX 78701 Purpose for which amount is received ☐ Check if political contribution returned to filer TEC refund Amount (\$) Date Name of person from whom amount is received 11/04/2024 **Texas Ethics Commission** \$500.00 Address of person from whom amount is received; City; State; Zip Code Austin, TX 78701 Purpose for which amount is received Check if political contribution returned to filer TEC refund