

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH INSTRUCTION GUIDE explains how to complete this form.

1 ACCOUNT #
(Ethics Commission filers)
0000

2 PAGE #
1 of 101

**3 CANDIDATE /
OFFICEHOLDER
NAME**

MS / MRS / MR

Mr.

FIRST

W. A.

MI

NICKNAME

Andy

LAST

Meyers

SUFFIX

OFFICE USE ONLY

Date Received

RECEIVED
JUL 16 2007
ETHICS COMMISSION

Date Hand-delivered or Date Postmarked

**4 CANDIDATE /
OFFICEHOLDER
MAILING
ADDRESS**

ADDRESS / PO BOX:

APT / SUITE #:

CITY:

STATE:

ZIP CODE

 423 Longview Drive
Sugar Land, TX 77478


Change of Address

Receipt #

Amount

**5 CAMPAIGN
TREASURER
NAME**

MS / MRS / MR

Mr.

FIRST

Michael

MI

NICKNAME

LAST

Meyers

SUFFIX

Date Processed

Date Imaged

**6 CAMPAIGN
TREASURER
ADDRESS**

(Residence or business)

STREET ADDRESS (NO PO BOX PLEASE!)

APT / SUITE #

CITY:

STATE:

ZIP CODE

 423 Longview Drive
Sugar Land, TX 77478

**7 CAMPAIGN
TREASURER
PHONE**

AREA CODE

PHONE NUMBER

EXTENSION

8 REPORT TYPE


January 15



30th day before election



Runoff



15th day after campaign treasurer appointment (officeholder only)



July 15



8th day before election



Exceeded \$500 limit



Final report (Attach C/OH - FR)

**9 PERIOD
COVERED**

Month

Day

Year

THROUGH

Month

Day

Year

01/01/2007

06/30/2007

10 ELECTION

ELECTION DATE

Month

Day

Year

ELECTION TYPE



Primary



Runoff



General



Special

11 OFFICE

OFFICE HELD (if any)

County Commissioner

12 OFFICE SOUGHT (if known)
**13 NOTICE
OF DIRECT
CAMPAIGN
EXPENDITURE
BY OTHER
INDIVIDUALS**

... Direct campaign expenditures are campaign expenditures made by others without the candidate's prior consent or approval. Candidates are required to disclose this information only if they receive notification of the direct campaign expenditure. ...

Name

Address/PO Box

Apt / Suite #:

City:

State:

Zip Code



Additional pages

GO TO PAGE 2

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CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

14 C/OH NAME Meyers, W. A. (Mr.)

15 ACCOUNT # (Ethics Commission filers)
000016 NOTICE
FROM
POLITICAL
COMMITTEE(S)

.. This box is for notice of political expenditures by political committees to support the candidate / officeholder. These expenditures may have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this information only if they receive notice of such expenditures. ..

COMMITTEE TYPE

COMMITTEE NAME

☐ GENERAL

COMMITTEE ADDRESS

☐ SPECIFIC

COMMITTEE CAMPAIGN TREASURER NAME

☐ additional pages

COMMITTEE CAMPAIGN TREASURER ADDRESS

17 CONTRIBUTION
TOTALS1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN
PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED

\$

150.00

2. TOTAL POLITICAL CONTRIBUTIONS
(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)

\$

69,650.00

EXPENDITURE
TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED

\$

145.00

4. TOTAL POLITICAL EXPENDITURES

\$

39,537.40

CONTRIBUTION
BALANCE5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE
LAST DAY OF THE REPORTING PERIOD

\$

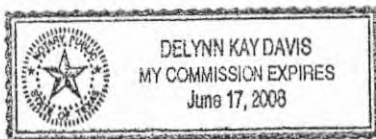
47,644.15

OUTSTANDING
LOAN TOTALS6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE
LAST DAY OF THE REPORTING PERIOD

\$

0.00

18 AFFIDAVIT



I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

W. A. Meyers
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said W. A. Meyers, this the 14th day of July, 2007, to certify which, witness my hand and seal of office.

Delynn Kay Davis
Signature of officer administering oath

Delynn Kay Davis
Print name of officer administering oath

Notary Public
Title of officer administering oath

Electronic Filing Version

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 1/40 Report: 3/101

2 FILER NAME Meyers, W. A. (Mr.)

3 ACCOUNT # (Ethics Commission filers)

0000

4 Date

02/05/2007

5 Full name of contributor ☐ out-of-state PAC(ID# _____)
Aschilman, Nick (Mr.)6 Contributor address; City; State; Zip Code
4129 University
Houston, TX 770057 Amount of
contribution (\$)

\$500.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

10 In-kind contribution

☐ Check if in-kind contribution for travel outside Texas and
complete boxes 12-18. Otherwise, complete box 11 if applicable.

11 In-kind description (if applicable)

12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)

13 Departure city / location

14 Departure date

15 Destination city / location

16 Arrival date

17 Means of transportation

18 Purpose of travel

4 Date

04/17/2007

5 Full name of contributor ☐ out-of-state PAC(ID# _____)
Babineaux, Bruce (Mr.)6 Contributor address; City; State; Zip Code
9800 Richmond Ave. #400
Houston, TX 770427 Amount of
contribution (\$)

\$125.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

10 In-kind contribution

☐ Check if in-kind contribution for travel outside Texas and
complete boxes 12-18. Otherwise, complete box 11 if applicable.

11 In-kind description (if applicable)

12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)

13 Departure city / location

14 Departure date

15 Destination city / location

16 Arrival date

17 Means of transportation

18 Purpose of travel

Electronic Filing Version

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.				1 PAGE # Schedule: 2/40 Report: 4/101	
2 FILER NAME Meyers, W. A. (Mr.)				3 ACCOUNT # (Ethics Commission filers) 0000	
4 Date 02/05/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Bahl, Vishwa (Mr.)			7 Amount of contribution (\$) \$250.00	
6 Contributor address: City: State: Zip Code 11767 Katy Frwy # 510 Houston, TX 77079					
8 Principal occupation / Job title (See Instructions)			9 Employer (See Instructions)		
10 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.			11 In-kind description (if applicable)		
12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)					
13 Departure city / location		14 Departure date	15 Destination city / location		16 Arrival date
17 Means of transportation			18 Purpose of travel		
4 Date 02/05/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Barfield, Larry (Mr.)			7 Amount of contribution (\$) \$500.00	
6 Contributor address: City: State: Zip Code 15611 Stable Park Dr. Cypress, TX 77429					
8 Principal occupation / Job title (See Instructions)			9 Employer (See Instructions)		
10 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.			11 In-kind description (if applicable)		
12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)					
13 Departure city / location		14 Departure date	15 Destination city / location		16 Arrival date
17 Means of transportation			18 Purpose of travel		

Electronic Filing Version

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.				1 PAGE # Schedule: 3/40 Report: 5/101	
2 FILER NAME Meyers, W. A. (Mr.)				3 ACCOUNT # (Ethics Commission filers) 0000	
4 Date 02/05/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Berg-Oliver PAC			7 Amount of contribution (\$) \$250.00	
6 Contributor address; City; State; Zip Code 14701 St. Mary's Ln #400 Houston, TX 77079					
8 Principal occupation / Job title (See Instructions)			9 Employer (See Instructions)		
10 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.			11 In-kind description (if applicable)		
12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)					
13 Departure city / location		14 Departure date	15 Destination city / location		16 Arrival date
17 Means of transportation			18 Purpose of travel		
4 Date 02/05/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Bullard, Patrick (Mr.)			7 Amount of contribution (\$) \$1,000.00	
6 Contributor address; City; State; Zip Code 2450 Fondren # 210 Houston, TX 77063					
8 Principal occupation / Job title (See Instructions)			9 Employer (See Instructions)		
10 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.			11 In-kind description (if applicable)		
12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)					
13 Departure city / location		14 Departure date	15 Destination city / location		16 Arrival date
17 Means of transportation			18 Purpose of travel		

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 4/40 Report: 6/101	
2 FILER NAME Meyers, W. A. (Mr.)		3 ACCOUNT # (Ethics Commission filers) 0000	
4 Date 02/05/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Carter, Darrell 6 Contributor address; City; State; Zip Code 1301 Travis # 300 Houston, TX 77002		7 Amount of contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.		11 In-kind description (if applicable)	
12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)			
13 Departure city / location	14 Departure date	15 Destination city / location	16 Arrival date
17 Means of transportation		18 Purpose of travel	
4 Date 02/05/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Chiang Patel & Yerby PAC 6 Contributor address; City; State; Zip Code 1820 Regal Row #200 Dallas, TX 75235		7 Amount of contribution (\$) \$2,000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.		11 In-kind description (if applicable)	
12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)			
13 Departure city / location	14 Departure date	15 Destination city / location	16 Arrival date
17 Means of transportation		18 Purpose of travel	

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.				1 PAGE # Schedule: 5/40 Report: 7/101	
2 FILER NAME Meyers, W. A. (Mr.)				3 ACCOUNT # (Ethics Commission filers) 0000	
4 Date 02/05/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) CLR PAC			7 Amount of contribution (\$) \$2,000.00	
6 Contributor address; City; State; Zip Code 7600 W. Tidwell Houston, TX 77040					
8 Principal occupation / Job title (See Instructions)			9 Employer (See Instructions)		
10 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.			11 In-kind description (if applicable)		
12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)					
13 Departure city / location		14 Departure date		15 Destination city / location	
				16 Arrival date	
17 Means of transportation		18 Purpose of travel			
4 Date 02/05/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Cobb, Harold			7 Amount of contribution (\$) \$500.00	
6 Contributor address; City; State; Zip Code 11555 Clay Rod # 100 Houston, TX 77043					
8 Principal occupation / Job title (See Instructions)			9 Employer (See Instructions)		
10 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.			11 In-kind description (if applicable)		
12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)					
13 Departure city / location		14 Departure date		15 Destination city / location	
				16 Arrival date	
17 Means of transportation		18 Purpose of travel			

Electronic Filing Version

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 6/40 Report: 8/101	
2 FILER NAME Meyers, W. A. (Mr.)		3 ACCOUNT # (Ethics Commission filers) 0000	
4 Date 02/05/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Cook, Gary 6 Contributor address: City: State: Zip Code 8101 Desert Jewel Circle Las Vegas, NV 89128		7 Amount of contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.		11 In-kind description (if applicable)	
12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)			
13 Departure city / location	14 Departure date	15 Destination city / location	16 Arrival date
17 Means of transportation		18 Purpose of travel	
4 Date 02/05/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Crouch, Kay (Mrs.) 6 Contributor address: City: State: Zip Code 402 Teetshorn St. Houston, TX 77009		7 Amount of contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.		11 In-kind description (if applicable)	
12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)			
13 Departure city / location	14 Departure date	15 Destination city / location	16 Arrival date
17 Means of transportation		18 Purpose of travel	

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 7/40 Report: 9/101

2 FILER NAME Meyers, W. A. (Mr.)

3 ACCOUNT # (Ethics Commission filers)
0000

4 Date

5 Full name of contributor ☐ out-of-state PAC(ID# _____)
Dannebaum, Jim7 Amount of
contribution (\$)

02/05/2007

6 Contributor address; City; State; Zip Code
3100 West Alabama #200
Houston, TX 77019

\$2,000.00

8 Principal occupation / Job title (See instructions)

9 Employer (See instructions)

10 In-kind contribution

☐ Check if in-kind contribution for travel outside Texas and
complete boxes 12-18. Otherwise, complete box 11 if applicable.

11 In-kind description (if applicable)

12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)

13 Departure city / location

14 Departure date

15 Destination city / location

16 Arrival date

17 Means of transportation

18 Purpose of travel

4 Date

5 Full name of contributor ☐ out-of-state PAC(ID# _____)
Deforest, Robert7 Amount of
contribution (\$)

02/05/2007

6 Contributor address; City; State; Zip Code
15810 Park Ten Place # 160
Houston, TX 77084

\$500.00

8 Principal occupation / Job title (See instructions)

9 Employer (See instructions)

10 In-kind contribution

☐ Check if in-kind contribution for travel outside Texas and
complete boxes 12-18. Otherwise, complete box 11 if applicable.

11 In-kind description (if applicable)

12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)

13 Departure city / location

14 Departure date

15 Destination city / location

16 Arrival date

17 Means of transportation

18 Purpose of travel

Electronic Filing Version

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 8/40 Report: 10/101

2 FILER NAME Meyers, W. A. (Mr.)

3 ACCOUNT # (Ethics Commission filers)

0000

4 Date

5 Full name of contributor ☐ out-of-state PAC(ID# _____)
Eastwood, David7 Amount of
contribution (\$)

02/05/2007

6 Contributor address; City; State; Zip Code
800 Victoria Drive
Houston, TX 77022

\$1,000.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

10 In-kind contribution

☐ Check if in-kind contribution for travel outside Texas and
complete boxes 12-18. Otherwise, complete box 11 if applicable.

11 In-kind description (if applicable)

12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)

13 Departure city / location

14 Departure date

15 Destination city / location

16 Arrival date

17 Means of transportation

18 Purpose of travel

4 Date

5 Full name of contributor ☐ out-of-state PAC(ID# _____)
Edminster, Truman (Mr.)7 Amount of
contribution (\$)

02/05/2007

6 Contributor address; City; State; Zip Code
10555 Westoffice Dr.
Houston, TX 77042

\$500.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

10 In-kind contribution

☐ Check if in-kind contribution for travel outside Texas and
complete boxes 12-18. Otherwise, complete box 11 if applicable.

11 In-kind description (if applicable)

12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)

13 Departure city / location

14 Departure date

15 Destination city / location

16 Arrival date

17 Means of transportation

18 Purpose of travel

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 9/40 Report: 11/101

2 FILER NAME Meyers, W. A. (Mr.)

3 ACCOUNT # (Ethics Commission filers)
0000

4 Date

02/05/2007

5 Full name of contributor ☐ out-of-state PAC(ID# _____)
Elberger, Robert (Mr.)6 Contributor address: City: State: Zip Code
4615 Post Oak Place # 210
Houston, TX 770277 Amount of
contribution (\$)

\$250.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

10 In-kind contribution

☐ Check if in-kind contribution for travel outside Texas and
complete boxes 12-18. Otherwise, complete box 11 if applicable.

11 In-kind description (if applicable)

12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)

13 Departure city / location

14 Departure date

15 Destination city / location

16 Arrival date

17 Means of transportation

18 Purpose of travel

4 Date

02/05/2007

5 Full name of contributor ☐ out-of-state PAC(ID# _____)
Fendley, William6 Contributor address: City: State: Zip Code
5300 Hollister # 400
Houston, TX 770477 Amount of
contribution (\$)

\$500.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

10 In-kind contribution

☐ Check if in-kind contribution for travel outside Texas and
complete boxes 12-18. Otherwise, complete box 11 if applicable.

11 In-kind description (if applicable)

12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)

13 Departure city / location

14 Departure date

15 Destination city / location

16 Arrival date

17 Means of transportation

18 Purpose of travel

Electronic Filing Version

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.				1 PAGE # Schedule: 10/40 Report: 12/101	
2 FILER NAME Meyers, W. A. (Mr.)				3 ACCOUNT # (Ethics Commission filers) 0000	
4 Date 02/05/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Ferguson, Bob			7 Amount of contribution (\$) \$2,000.00	
6 Contributor address; City; State; Zip Code 21711 FM 1093 Richmond, TX 77469					
8 Principal occupation / Job title (See Instructions)			9 Employer (See Instructions)		
10 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.			11 In-kind description (if applicable)		
12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)					
13 Departure city / location		14 Departure date		15 Destination city / location	
				16 Arrival date	
17 Means of transportation		18 Purpose of travel			
4 Date 02/05/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Gay, Dick			7 Amount of contribution (\$) \$2,000.00	
6 Contributor address; City; State; Zip Code 11490 Westheimer # 700 Houston, TX 77077					
8 Principal occupation / Job title (See Instructions)			9 Employer (See Instructions)		
10 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.			11 In-kind description (if applicable)		
12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)					
13 Departure city / location		14 Departure date		15 Destination city / location	
				16 Arrvai date	
17 Means of transportation		18 Purpose of travel			

Electronic Filing Version

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 11/40 Report: 13/101

2 FILER NAME Meyers, W. A. (Mr.)

3 ACCOUNT # (Ethics Commission filers)

0000

4 Date 02/05/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Gibbs, Robert (Mr.)	7 Amount of contribution (\$) \$250.00
6 Contributor address: City: State: Zip Code 14222 Golf View Trail Houston, TX 77059		

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
10 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.	11 In-kind description (if applicable)

12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)

13 Departure city / location	14 Departure date	15 Destination city / location	16 Arrival date
17 Means of transportation		18 Purpose of travel	

4 Date 02/05/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Gilbert, Kerry	7 Amount of contribution (\$) \$500.00
6 Contributor address: City: State: Zip Code 15810 Park Ten Place # 180 Houston, TX 77084		

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
10 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.	11 In-kind description (if applicable)

12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)

13 Departure city / location	14 Departure date	15 Destination city / location	16 Arrival date
17 Means of transportation		18 Purpose of travel	

Electronic Filing Version

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 12/40 Report: 14/101

2 FILER NAME Meyers, W. A. (Mr.)

3 ACCOUNT # (Ethics Commission filers)
0000

4 Date 02/05/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Gilliam, Lance (Mr.)	7 Amount of contribution (\$) \$1,000.00
6 Contributor address: City: State: Zip Code 3003 W. Alabama Houston, TX 77098		

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
---	-------------------------------

10 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.	11 In-kind description (if applicable)
--	--

12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)

13 Departure city / location	14 Departure date	15 Destination city / location	16 Arrival date
------------------------------	-------------------	--------------------------------	-----------------

17 Means of transportation	18 Purpose of travel
----------------------------	----------------------

4 Date 02/05/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Gonzales, Jim	7 Amount of contribution (\$) \$1,000.00
6 Contributor address: City: State: Zip Code 1803 Hulsches Drive Richmond, TX 77469		

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
---	-------------------------------

10 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.	11 In-kind description (if applicable)
--	--

12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)

13 Departure city / location	14 Departure date	15 Destination city / location	16 Arrival date
------------------------------	-------------------	--------------------------------	-----------------

17 Means of transportation	18 Purpose of travel
----------------------------	----------------------

Electronic Filing Version

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 13/40 Report: 15/101

2 FILER NAME Meyers, W. A. (Mr.)

3 ACCOUNT # (Ethics Commission filers)

0000

4 Date

02/05/2007

5 Full name of contributor ☐ out-of-state PAC(ID# _____)
Greer, Lori & Alan7 Amount of
contribution (\$)

\$250.00

6 Contributor address; City: State: Zip Code
2304 Mulberry Ct.
Colleyville, TX 76034

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

10 In-kind contribution

☐ Check if in-kind contribution for travel outside Texas and
complete boxes 12-18. Otherwise, complete box 11 if applicable.

11 in-kind description (if applicable)

12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)

13 Departure city / location

14 Departure date

15 Destination city / location

16 Arrival date

17 Means of transportation

18 Purpose of travel

4 Date

02/05/2007

5 Full name of contributor ☐ out-of-state PAC(ID# _____)
Gubbles, Pat (Mr.)7 Amount of
contribution (\$)

\$100.00

6 Contributor address; City: State: Zip Code
P.O. Box 1789
Rosenberg, TX 77471

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

10 In-kind contribution

☐ Check if in-kind contribution for travel outside Texas and
complete boxes 12-18. Otherwise, complete box 11 if applicable.

11 in-kind description (if applicable)

12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)

13 Departure city / location

14 Departure date

15 Destination city / location

16 Arrival date

17 Means of transportation

18 Purpose of travel

Electronic Filing Version

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.				1 PAGE # Schedule: 14/40 Report: 16/101	
2 FILER NAME Meyers, W. A. (Mr.)				3 ACCOUNT # (Ethics Commission filers) 0000	
4 Date 02/05/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Halff Associates State PAC			7 Amount of contribution (\$) \$1,000.00	
6 Contributor address: City: State: Zip Code 8616 Northwest Plaza Dr. Dallas, TX 75225					
8 Principal occupation / Job title (See Instructions)			9 Employer (See Instructions)		
10 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.			11 In-kind description (if applicable)		
12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)					
13 Departure city / location		14 Departure date	15 Destination city / location		16 Arrival date
17 Means of transportation			18 Purpose of travel		
4 Date 02/05/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Halliburton Company PAC			7 Amount of contribution (\$) \$500.00	
6 Contributor address: City: State: Zip Code 4100 Clinton Dr. Houston, TX 77020					
8 Principal occupation / Job title (See Instructions)			9 Employer (See Instructions)		
10 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.			11 In-kind description (if applicable)		
12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)					
13 Departure city / location		14 Departure date	15 Destination city / location		16 Arrival date
17 Means of transportation			18 Purpose of travel		

Electronic Filing Version

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 15/40 Report: 17/101

2 FILER NAME Meyers, W. A. (Mr.)

3 ACCOUNT # (Ethics Commission filers)
0000

4 Date 04/17/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Hamilton, David	7 Amount of contribution (\$) \$1,000.00
6 Contributor address; City; State; Zip Code 14614 Logans Fall Lane Humble, TX 77396		

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
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10 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.	11 In-kind description (if applicable)
--	--

12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)

13 Departure city / location	14 Departure date	15 Destination city / location	16 Arrival date
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17 Means of transportation	18 Purpose of travel
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4 Date 02/05/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Henriksen, Ron & Sheri	7 Amount of contribution (\$) \$2,000.00
6 Contributor address; City; State; Zip Code 8831 Stable Lane Houston, TX 77024		

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
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10 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.	11 In-kind description (if applicable)
--	--

12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)

13 Departure city / location	14 Departure date	15 Destination city / location	16 Arrival date
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17 Means of transportation	18 Purpose of travel
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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 16/40 Report: 18/101	
2 FILER NAME Meyers, W. A. (Mr.)		3 ACCOUNT # (Ethics Commission filers) 0000	
4 Date 02/05/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Holder, Floyd (Mr.) 6 Contributor address: City: State: Zip Code 1029 Hwy 6 N. Suite 650 # 102 Houston, TX 77079	7 Amount of contribution (\$) \$500.00	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.		11 In-kind description (if applicable)	
12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)			
13 Departure city / location	14 Departure date	15 Destination city / location	16 Arrival date
17 Means of transportation		18 Purpose of travel	
4 Date 02/05/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Jarvis, Steven 6 Contributor address: City: State: Zip Code 12200 Duncan Rd Houston, TX 77066	7 Amount of contribution (\$) \$1,000.00	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.		11 In-kind description (if applicable)	
12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)			
13 Departure city / location	14 Departure date	15 Destination city / location	16 Arrival date
17 Means of transportation		18 Purpose of travel	

Electronic Filing Version

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.				1 PAGE # Schedule: 17/40 Report: 19/101	
2 FILER NAME Meyers, W. A. (Mr.)				3 ACCOUNT # (Ethics Commission filers) 0000	
4 Date 02/05/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Johnson, C. Shane (Mr.)			7 Amount of contribution (\$) \$250.00	
6 Contributor address; City; State; Zip Code 11200 Richmond Ave. # 300 Houston, TX 77082					
8 Principal occupation / Job title (See Instructions)			9 Employer (See Instructions)		
10 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.			11 In-kind description (if applicable)		
12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)					
13 Departure city / location		14 Departure date		15 Destination city / location	
				16 Arrival date	
17 Means of transportation		18 Purpose of travel			
4 Date 02/05/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Jones, Bobby			7 Amount of contribution (\$) \$1,000.00	
6 Contributor address; City; State; Zip Code 8335 Gulfion #100 Houston, TX 77081					
8 Principal occupation / Job title (See Instructions)			9 Employer (See Instructions)		
10 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.			11 In-kind description (if applicable)		
12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)					
13 Departure city / location		14 Departure date		15 Destination city / location	
				16 Arrival date	
17 Means of transportation		18 Purpose of travel			

Electronic Filing Version

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.				1 PAGE # Schedule: 18/40 Report: 20/101	
2 FILER NAME Meyers, W. A. (Mr.)				3 ACCOUNT # (Ethics Commission filers) 0000	
4 Date 04/17/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Kim, Michael (Mr.)			7 Amount of contribution (\$) \$2,000.00	
6 Contributor address; City; State; Zip Code 1915 Mission Springs Dr. Katy, TX 77450					
8 Principal occupation / Job title (See Instructions)			9 Employer (See Instructions)		
10 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.			11 In-kind description (if applicable)		
12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)					
13 Departure city / location		14 Departure date	15 Destination city / location		16 Arrival date
17 Means of transportation			18 Purpose of travel		
4 Date 02/05/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Ladner, Calvin			7 Amount of contribution (\$) \$1,000.00	
6 Contributor address; City; State; Zip Code 2929 Briarpark # 600 Houston, TX 77042					
8 Principal occupation / Job title (See Instructions)			9 Employer (See Instructions)		
10 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.			11 In-kind description (if applicable)		
12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)					
13 Departure city / location		14 Departure date	15 Destination city / location		16 Arrival date
17 Means of transportation			18 Purpose of travel		

Electronic Filing Version

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.				1 PAGE # Schedule: 19/40 Report: 21/101	
2 FILER NAME Meyers, W. A. (Mr.)				3 ACCOUNT # (Ethics Commission filers) 0000	
4 Date 04/17/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Lapsley, Brent (Mr.) 6 Contributor address; City; State; Zip Code 2501 Central Parkwy # A-3 Houston, TX 77092			7 Amount of contribution (\$) \$1,000.00	
8 Principal occupation / Job title (See Instructions)			9 Employer (See Instructions)		
10 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.			11 In-kind description (if applicable)		
12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)					
13 Departure city / location		14 Departure date	15 Destination city / location		16 Arrival date
17 Means of transportation			18 Purpose of travel		
4 Date 02/05/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Lofti, Ray (Mr.) 6 Contributor address; City; State; Zip Code P.O. Box 17234 Sugar Land, TX 77496			7 Amount of contribution (\$) \$500.00	
8 Principal occupation / Job title (See Instructions)			9 Employer (See Instructions)		
10 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.			11 In-kind description (if applicable)		
12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)					
13 Departure city / location		14 Departure date	15 Destination city / location		16 Arrival date
17 Means of transportation			18 Purpose of travel		

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 20/40 Report: 22/101

2 FILER NAME Meyers, W. A. (Mr.)

3 ACCOUNT # (Ethics Commission filers)
0000

4 Date

02/05/2007

5 Full name of contributor ☐ out-of-state PAC(ID# _____)
Maadani, Fariborz6 Contributor address; City; State; Zip Code
12422 Shadycrest Dr.
Houston, TX 770827 Amount of
contribution (\$)

\$250.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

10 In-kind contribution

☐ Check if in-kind contribution for travel outside Texas and
complete boxes 12-18. Otherwise, complete box 11 if applicable.

11 In-kind description (if applicable)

12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)

13 Departure city / location

14 Departure date

15 Destination city / location

16 Arrival date

17 Means of transportation

18 Purpose of travel

4 Date

02/05/2007

5 Full name of contributor ☐ out-of-state PAC(ID# _____)
Marshall, Joel6 Contributor address; City; State; Zip Code
PO Box 584
Barker, TX 774137 Amount of
contribution (\$)

\$1,000.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

10 In-kind contribution

☐ Check if in-kind contribution for travel outside Texas and
complete boxes 12-18. Otherwise, complete box 11 if applicable.

11 In-kind description (if applicable)

12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)

13 Departure city / location

14 Departure date

15 Destination city / location

16 Arrival date

17 Means of transportation

18 Purpose of travel

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 21/40 Report: 23/101	
2 FILER NAME Meyers, W. A. (Mr.)		3 ACCOUNT # (Ethics Commission filers) 0000	
4 Date 02/05/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Marshall, Jon (Mr.) 6 Contributor address; City; State; Zip Code P.O. Box 4379 Houston, TX 77210	7 Amount of contribution (\$) \$500.00	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.		11 In-kind description (if applicable)	
12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)			
13 Departure city / location	14 Departure date	15 Destination city / location	16 Arrival date
17 Means of transportation		18 Purpose of travel	
4 Date 02/05/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Martin, Peyton (Mr.) 6 Contributor address; City; State; Zip Code 310 Morton Street # 280 Richmond, TX 77469	7 Amount of contribution (\$) \$1,000.00	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.		11 In-kind description (if applicable)	
12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)			
13 Departure city / location	14 Departure date	15 Destination city / location	16 Arrival date
17 Means of transportation		18 Purpose of travel	

Electronic Filing Version

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.				1 PAGE # Schedule: 22/40 Report: 24/101	
2 FILER NAME Meyers, W. A. (Mr.)				3 ACCOUNT # (Ethics Commission filers) 0000	
4 Date 02/05/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Maxwell, Troy & Keri 6 Contributor address: City: State: Zip Code P.O. Box 97 Baker, TX 77413			7 Amount of contribution (\$) \$250.00	
8 Principal occupation / Job title (See Instructions)			9 Employer (See Instructions)		
10 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.			11 In-kind description (if applicable)		
12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)					
13 Departure city / location		14 Departure date	15 Destination city / location		16 Arrival date
17 Means of transportation			18 Purpose of travel		
4 Date 02/05/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) McCain, Ken 6 Contributor address: City: State: Zip Code 2501 S. Mason Road Katy, TX 77450			7 Amount of contribution (\$) \$1,000.00	
8 Principal occupation / Job title (See Instructions)			9 Employer (See Instructions)		
10 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.			11 In-kind description (if applicable)		
12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)					
13 Departure city / location		14 Departure date	15 Destination city / location		16 Arrival date
17 Means of transportation			18 Purpose of travel		

Electronic Filing Version

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 23/40 Report: 25/101	
2 FILER NAME Meyers, W. A. (Mr.)		3 ACCOUNT # (Ethics Commission filers) 0000	
4 Date 02/05/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) McCarter, Richard (Mr.) 6 Contributor address: City: State: Zip Code 5418 Cherry Ridge Rd. Richmond, TX 77469	7 Amount of contribution (\$) \$100.00	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.		11 In-kind description (if applicable)	
12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)			
13 Departure city / location	14 Departure date	15 Destination city / location	16 Arrival date
17 Means of transportation		18 Purpose of travel	
4 Date 02/05/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) McDermott, Robert & Kathryn 6 Contributor address: City: State: Zip Code 6911 Hickory Creek Ln. Dallas, TX 75252	7 Amount of contribution (\$) \$1,000.00	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.		11 In-kind description (if applicable)	
12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)			
13 Departure city / location	14 Departure date	15 Destination city / location	16 Arrival date
17 Means of transportation		18 Purpose of travel	

Electronic Filing Version

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.				1 PAGE # Schedule: 24/40 Report: 26/101	
2 FILER NAME Meyers, W. A. (Mr.)				3 ACCOUNT # (Ethics Commission filers) 0000	
4 Date 02/05/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) McDonough, Ranney 6 Contributor address: City: State: Zip Code 5629 Schumacher Houston, TX 77057			7 Amount of contribution (\$) \$500.00	
8 Principal occupation / Job title (See Instructions)			9 Employer (See Instructions)		
10 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.			11 In-kind description (if applicable)		
12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)					
13 Departure city / location		14 Departure date	15 Destination city / location		16 Arrival date
17 Means of transportation			18 Purpose of travel		
4 Date 02/05/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Moody III, Dan (Mr.) 6 Contributor address: City: State: Zip Code 3003 W. Alabama Houston, TX 77098			7 Amount of contribution (\$) \$1,000.00	
8 Principal occupation / Job title (See Instructions)			9 Employer (See Instructions)		
10 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.			11 In-kind description (if applicable)		
12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)					
13 Departure city / location		14 Departure date	15 Destination city / location		16 Arrival date
17 Means of transportation			18 Purpose of travel		

Electronic Filing Version

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.				1 PAGE # Schedule: 25/40 Report: 27/101	
2 FILER NAME Meyers, W. A. (Mr.)				3 ACCOUNT # (Ethics Commission filers) 0000	
4 Date 02/05/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Morris, Jay			7 Amount of contribution (\$) \$2,000.00	
6 Contributor address: City: State: Zip Code 10260 Westheimer #460 Houston, TX 77042					
8 Principal occupation / Job title (See Instructions)			9 Employer (See Instructions)		
10 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.			11 In-kind description (if applicable)		
12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)					
13 Departure city / location		14 Departure date	15 Destination city / location		16 Arrival date
17 Means of transportation			18 Purpose of travel		
4 Date 04/17/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Newton, Tim (Mr.)			7 Amount of contribution (\$) \$125.00	
6 Contributor address: City: State: Zip Code 4436 Holt Bellaire, TX 77401					
8 Principal occupation / Job title (See Instructions)			9 Employer (See Instructions)		
10 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.			11 In-kind description (if applicable)		
12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)					
13 Departure city / location		14 Departure date	15 Destination city / location		16 Arrival date
17 Means of transportation			18 Purpose of travel		

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 26/40 Report: 28/101

2 FILER NAME Meyers, W. A. (Mr.)

3 ACCOUNT # (Ethics Commission filers)
0000

4 Date 02/05/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Othon, William	7 Amount of contribution (\$) \$500.00
6 Contributor address: City: State: Zip Code 11111 Wilcrest Green Drive #128 Houston, TX 77042		

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

10 In-kind contribution

☐ Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.

11 In-kind description (if applicable)

12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)

13 Departure city / location

14 Departure date

15 Destination city / location

16 Arrival date

17 Means of transportation

18 Purpose of travel

4 Date 01/15/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Perry, Bob	7 Amount of contribution (\$) \$5,100.00
6 Contributor address: City: State: Zip Code PO Box 34153 Houston, TX 77234		

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

10 In-kind contribution

☐ Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.

11 In-kind description (if applicable)

Homebuilder

12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)

13 Departure city / location

14 Departure date

15 Destination city / location

16 Arrival date

17 Means of transportation

18 Purpose of travel

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 27/40 Report: 29/101

2 FILER NAME Meyers, W. A. (Mr.)

3 ACCOUNT # (Ethics Commission filers)
0000

4 Date 01/15/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Perry, Doyleene (Mrs.)	7 Amount of contribution (\$) \$5,100.00
6 Contributor address: City: State: Zip Code 18630 Barbuda Houston, TX 77058		

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
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10 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.	11 In-kind description (if applicable)
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12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)			
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13 Departure city / location	14 Departure date	15 Destination city / location	16 Arrival date
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17 Means of transportation	18 Purpose of travel
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4 Date 02/05/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Poarch, Donald	7 Amount of contribution (\$) \$250.00
6 Contributor address: City: State: Zip Code P.O. Box 19129 Houston, TX 77224		

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
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10 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.	11 In-kind description (if applicable)
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12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)			
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13 Departure city / location	14 Departure date	15 Destination city / location	16 Arrival date
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17 Means of transportation	18 Purpose of travel
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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 28/40 Report: 30/101	
2 FILER NAME Meyers, W. A. (Mr.)		3 ACCOUNT # (Ethics Commission filers) 0000	
4 Date 02/05/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Raba-Kistner PAC 6 Contributor address; City; State; Zip Code P.O. Box 690287 San Antonio, TX 78269	7 Amount of contribution (\$) \$250.00	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.		11 In-kind description (if applicable)	
12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)			
13 Departure city / location	14 Departure date	15 Destination city / location	16 Arrival date
17 Means of transportation		18 Purpose of travel	
4 Date 02/05/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Ramsey, Tom 6 Contributor address; City; State; Zip Code 1410 Mustang Lake Court Richmond, TX 77469	7 Amount of contribution (\$) \$500.00	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.		11 In-kind description (if applicable)	
12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)			
13 Departure city / location	14 Departure date	15 Destination city / location	16 Arrival date
17 Means of transportation		18 Purpose of travel	

Electronic Filing Version

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 29/40 Report: 31/101

2 FILER NAME Meyers, W. A. (Mr.)

3 ACCOUNT # (Ethics Commission filers)

0000

4 Date

5 Full name of contributor ☐ out-of-state PAC(ID# _____)
Ratnala, Balwanthrao (Mr.)7 Amount of
contribution (\$)

02/05/2007

6 Contributor address; City; State; Zip Code
18815 Windsor Lakes Dr.
Houston, TX 77094

\$250.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

10 In-kind contribution

☐ Check if in-kind contribution for travel outside Texas and
complete boxes 12-18. Otherwise, complete box 11 if applicable.

11 In-kind description (if applicable)

12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)

13 Departure city / location

14 Departure date

15 Destination city / location

16 Arrival date

17 Means of transportation

18 Purpose of travel

4 Date

5 Full name of contributor ☐ out-of-state PAC(ID# _____)
Ross, Jeff (Mr.)7 Amount of
contribution (\$)

02/05/2007

6 Contributor address; City; State; Zip Code
13333 Northwest Fwy # 300
Houston, TX 77040

\$500.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

10 In-kind contribution

☐ Check if in-kind contribution for travel outside Texas and
complete boxes 12-18. Otherwise, complete box 11 if applicable.

11 In-kind description (if applicable)

12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)

13 Departure city / location

14 Departure date

15 Destination city / location

16 Arrival date

17 Means of transportation

18 Purpose of travel

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.				1 PAGE # Schedule: 30/40 Report: 32/101	
2 FILER NAME Meyers, W. A. (Mr.)				3 ACCOUNT # (Ethics Commission filers) 0000	
4 Date 02/05/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Sabouni, Lina (Mrs.) 6 Contributor address: City: State: Zip Code 6200 Savoy # 100 Houston, TX 77036			7 Amount of contribution (\$) \$250.00	
8 Principal occupation / Job title (See Instructions)			9 Employer (See Instructions)		
10 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.			11 In-kind description (if applicable)		
12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)					
13 Departure city / location		14 Departure date	15 Destination city / location		16 Arrival date
17 Means of transportation			18 Purpose of travel		
4 Date 02/05/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Sahu, Upendra (Mr.) 6 Contributor address: City: State: Zip Code 5018 Berkshire Ct. Sugar Land, TX 77479			7 Amount of contribution (\$) \$250.00	
8 Principal occupation / Job title (See Instructions)			9 Employer (See Instructions)		
10 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.			11 In-kind description (if applicable)		
12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)					
13 Departure city / location		14 Departure date	15 Destination city / location		16 Arrival date
17 Means of transportation			18 Purpose of travel		

Electronic Filing Version

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 31/40 Report: 33/101	
2 FILER NAME Meyers, W. A. (Mr.)		3 ACCOUNT # (Ethics Commission filers) 0000	
4 Date 02/05/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Saour, Saib (Mr.) 6 Contributor address; City; State; Zip Code 2401 Fountainview # 226 Houston, TX 77057	7 Amount of contribution (\$) \$1,000.00	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.		11 In-kind description (if applicable)	
12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)			
13 Departure city / location	14 Departure date	15 Destination city / location	16 Arrival date
17 Means of transportation		18 Purpose of travel	
4 Date 02/05/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Shah, Dinesh (Mr.) 6 Contributor address; City; State; Zip Code 4660 Sweetwater Blvd. # 300 Sugar Land, TX 77479	7 Amount of contribution (\$) \$250.00	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.		11 In-kind description (if applicable)	
12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)			
13 Departure city / location	14 Departure date	15 Destination city / location	16 Arrival date
17 Means of transportation		18 Purpose of travel	

Electronic Filing Version

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 32/40 Report: 34/101	
2 FILER NAME Meyers, W. A. (Mr.)		3 ACCOUNT # (Ethics Commission filers) 0000	
4 Date 02/05/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Showalter, David (Mr.) 6 Contributor address: City; State; Zip Code 1121 FM 359 Richmond, TX 77469	7 Amount of contribution (\$) \$1,000.00	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.		11 In-kind description (if applicable)	
12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)			
13 Departure city / location	14 Departure date	15 Destination city / location	16 Arrival date
17 Means of transportation		18 Purpose of travel	
4 Date 02/05/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Smith III, Nelson 6 Contributor address: City; State; Zip Code 6919 Soledad Houston, TX 77083	7 Amount of contribution (\$) \$500.00	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.		11 In-kind description (if applicable)	
12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)			
13 Departure city / location	14 Departure date	15 Destination city / location	16 Arrival date
17 Means of transportation		18 Purpose of travel	

Electronic Filing Version

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 33/40 Report: 35/101	
2 FILER NAME Meyers, W. A. (Mr.)		3 ACCOUNT # (Ethics Commission filers) 0000	
4 Date 02/05/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Sparks, Randy (Mr.) 6 Contributor address; City; State; Zip Code 21020 Park Row Katy, TX 77449	7 Amount of contribution (\$) \$1,000.00	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.		11 In-kind description (if applicable)	
12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)			
13 Departure city / location	14 Departure date	15 Destination city / location	16 Arrival date
17 Means of transportation		18 Purpose of travel	

4 Date 02/05/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Spinks, Melvin 6 Contributor address; City; State; Zip Code 11821 Telge Rd. Houston, TX 77042	7 Amount of contribution (\$) \$500.00	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.		11 In-kind description (if applicable)	
12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)			
13 Departure city / location	14 Departure date	15 Destination city / location	16 Arrival date
17 Means of transportation		18 Purpose of travel	

Electronic Filing Version

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 34/40 Report: 36/101	
2 FILER NAME Meyers, W. A. (Mr.)		3 ACCOUNT # (Ethics Commission filers) 0000	
4 Date 02/05/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Stanley, Stan (Mr.) 6 Contributor address; City; State; Zip Code 24611 Stoughton Court Katy, TX 77449	7 Amount of contribution (\$) \$100.00	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.		11 In-kind description (if applicable)	
12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)			
13 Departure city / location	14 Departure date	15 Destination city / location	16 Arrival date
17 Means of transportation		18 Purpose of travel	
4 Date 02/05/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Staudt, Thomas (Mr.) 6 Contributor address; City; State; Zip Code 2627 North Loop West # 224 Houston, TX 77079	7 Amount of contribution (\$) \$500.00	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.		11 In-kind description (if applicable)	
12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)			
13 Departure city / location	14 Departure date	15 Destination city / location	16 Arrival date
17 Means of transportation		18 Purpose of travel	

Electronic Filing Version

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 35/40 Report: 37/101

2 FILER NAME Meyers, W. A. (Mr.)

3 ACCOUNT # (Ethics Commission filers)

0000

4 Date 02/05/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Steffek, Keith & Jonnie	7 Amount of contribution (\$) \$250.00
6 Contributor address: City: State: Zip Code 26811 Willow Ln. Katy, TX 77494		

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
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10 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.	11 In-kind description (if applicable)
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12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)

13 Departure city / location	14 Departure date	15 Destination city / location	16 Arrival date
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17 Means of transportation	18 Purpose of travel
----------------------------	----------------------

4 Date 02/05/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Stone, Travis (Mr.)	7 Amount of contribution (\$) \$1,000.00
6 Contributor address: City: State: Zip Code 10235 W. Little York # 300 Houston, TX 77040		

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
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10 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.	11 In-kind description (if applicable)
--	--

12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)

13 Departure city / location	14 Departure date	15 Destination city / location	16 Arrival date
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17 Means of transportation	18 Purpose of travel
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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 36/40 Report: 38/101

2 FILER NAME Meyers, W. A. (Mr.)

3 ACCOUNT # (Ethics Commission filers)

0000

4 Date 02/05/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Stout, Bob (Mr.)	7 Amount of contribution (\$) \$250.00
6 Contributor address: City: State: Zip Code 40410 Drake # 111 Houston, TX 77005		

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
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10 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.	11 In-kind description (if applicable)
--	--

12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)

13 Departure city / location	14 Departure date	15 Destination city / location	16 Arrival date
------------------------------	-------------------	--------------------------------	-----------------

17 Means of transportation	18 Purpose of travel
----------------------------	----------------------

4 Date 04/17/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Sutton, Charles (Mr.)	7 Amount of contribution (\$) \$1,000.00
6 Contributor address: City: State: Zip Code 512 S. Seventh Street Richmond, TX 77469		

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
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10 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.	11 In-kind description (if applicable)
--	--

12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)

13 Departure city / location	14 Departure date	15 Destination city / location	16 Arrival date
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17 Means of transportation	18 Purpose of travel
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Electronic Filing Version

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 37/40 Report: 39/101

2 FILER NAME Meyers, W. A. (Mr.)

3 ACCOUNT # (Ethics Commission filers)
0000

4 Date

02/05/2007

5 Full name of contributor ☐ out-of-state PAC(ID# _____)
Swinbank, Joe6 Contributor address; City; State; Zip Code
PO Box 19129
Houston, TX 772247 Amount of
contribution (\$)

\$250.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

10 In-kind contribution

☐ Check if in-kind contribution for travel outside Texas and
complete boxes 12-18. Otherwise, complete box 11 if applicable.

11 In-kind description (if applicable)

12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)

13 Departure city / location

14 Departure date

15 Destination city / location

16 Arrival date

17 Means of transportation

18 Purpose of travel

4 Date

02/05/2007

5 Full name of contributor ☐ out-of-state PAC(ID# _____)
TCS Fund6 Contributor address; City; State; Zip Code
3300 S. Gessner # 100
Houston, TX 770637 Amount of
contribution (\$)

\$2,000.00

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

10 In-kind contribution

☐ Check if in-kind contribution for travel outside Texas and
complete boxes 12-18. Otherwise, complete box 11 if applicable.

11 In-kind description (if applicable)

12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)

13 Departure city / location

14 Departure date

15 Destination city / location

16 Arrival date

17 Means of transportation

18 Purpose of travel

Electronic Filing Version

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 38/40 Report: 40/101

2 FILER NAME Meyers, W. A. (Mr.)

3 ACCOUNT # (Ethics Commission filers)
0000

4 Date 02/05/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Thompson, Ben	7 Amount of contribution (\$) \$1,000.00
6 Contributor address: City: State: Zip Code 10497 Town & Country Way # 550 Houston, TX 77024		

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
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10 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.	11 In-kind description (if applicable)
--	--

12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)

13 Departure city / location	14 Departure date	15 Destination city / location	16 Arrival date
------------------------------	-------------------	--------------------------------	-----------------

17 Means of transportation	18 Purpose of travel
----------------------------	----------------------

4 Date 02/05/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Turner, Collie & Braden PAC	7 Amount of contribution (\$) \$1,000.00
6 Contributor address: City: State: Zip Code PO Box 130089 Houston, TX 77219		

8 Principal occupation / Job title (See Instructions)	9 Employer (See Instructions)
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10 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.	11 In-kind description (if applicable)
--	--

12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)

13 Departure city / location	14 Departure date	15 Destination city / location	16 Arrival date
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17 Means of transportation	18 Purpose of travel
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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 39/40 Report: 41/101	
2 FILER NAME Meyers, W. A. (Mr.)		3 ACCOUNT # (Ethics Commission filers) 0000	
4 Date 04/17/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Van De Wiele, John (Mr.)	7 Amount of contribution (\$) \$2,000.00	
6 Contributor address: City: State: Zip Code 1715 Mossy Stone Drive Houston, TX 77077			
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.		11 In-kind description (if applicable)	
12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)			
13 Departure city / location	14 Departure date	15 Destination city / location	16 Arrival date
17 Means of transportation		18 Purpose of travel	
4 Date 02/05/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Ventana Development Partners	7 Amount of contribution (\$) \$1,000.00	
6 Contributor address: City: State: Zip Code Route 2 Box 200C Bay City, TX 77414			
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.		11 In-kind description (if applicable)	
12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)			
13 Departure city / location	14 Departure date	15 Destination city / location	16 Arrival date
17 Means of transportation		18 Purpose of travel	

Electronic Filing Version

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 40/40 Report: 42/101	
2 FILER NAME Meyers, W. A. (Mr.)		3 ACCOUNT # (Ethics Commission filers) 0000	
4 Date 02/05/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) White, Bobby (Mr.) 6 Contributor address: City: State: Zip Code 1710 Seamist Dr. Houston, TX 77008	7 Amount of contribution (\$) \$1,000.00	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.		11 In-kind description (if applicable)	
12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)			
13 Departure city / location	14 Departure date	15 Destination city / location	16 Arrival date
17 Means of transportation		18 Purpose of travel	
4 Date 02/05/2007	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Wong, Daniel 6 Contributor address: City: State: Zip Code 4506 Colony Glen Ct. Sugar Land, TX 77479	7 Amount of contribution (\$) \$500.00	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)	
10 In-kind contribution <input type="checkbox"/> Check if in-kind contribution for travel outside Texas and complete boxes 12-18. Otherwise, complete box 11 if applicable.		11 In-kind description (if applicable)	
12 Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)			
13 Departure city / location	14 Departure date	15 Destination city / location	16 Arrival date
17 Means of transportation		18 Purpose of travel	

Electronic Filing Version

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.				1 PAGE # Schedule: 1/32 Report: 43/101	
2 FILER NAME Meyers, W. A. (Mr.)				3 ACCOUNT # (Ethics Commission filers) 0000	
4 Date 06/23/2007	5 Payee name Bill Heard Chevrolet 6 Payee address; City; State; Zip Code 13115 Southwest Frwy Sugar Land, TX 77478			7 Amount (\$) \$500.00	
8 Purpose of payment (See instructions regarding type of information required.) Use of personal vehicle for campaign/office purposes & Reimburse C/OH per Schedules G <input type="checkbox"/> Payment for travel outside Texas (complete boxes 10-16)			9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:		
10 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)					
11 Departure city / location		12 Departure date	13 Destination city / location		14 Arrival date
15 Means of transportation			16 Purpose of travel		
4 Date 04/25/2007	5 Payee name Bisopia 6 Payee address; City; State; Zip Code 1011 Highway 6 S. # 320 Houston, TX 77077			7 Amount (\$) \$199.99	
8 Purpose of payment (See instructions regarding type of information required.) Campaign Web Site Hosting Expense <input type="checkbox"/> Payment for travel outside Texas (complete boxes 10-16)			9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:		
10 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)					
11 Departure city / location		12 Departure date	13 Destination city / location		14 Arrival date
15 Means of transportation			16 Purpose of travel		

Electronic Filing Version

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 2/32 Report: 44/101

2 FILER NAME Meyers, W. A. (Mr.)

3 ACCOUNT # (Ethics Commission filers)
0000

4 Date 05/02/2007	5 Payee name Bisopia 6 Payee address: City: State: Zip Code 1011 Highway 6 S. # 320 Houston, TX 77077	7 Amount (\$) \$19.99
8 Purpose of payment (See instructions regarding type of information required.) Campaign Web Site Hosting Expense <input type="checkbox"/> Payment for travel outside Texas (complete boxes 10-16)		9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
10 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)		
11 Departure city / location	12 Departure date	13 Destination city / location
14 Arrival date		
15 Means of transportation		16 Purpose of travel
4 Date 04/10/2007	5 Payee name Brazos Valley Schools Credit Union 6 Payee address: City: State: Zip Code 1116 Soldiers Field Dr. Sugar Land, TX 77479	7 Amount (\$) \$244.32
8 Purpose of payment (See instructions regarding type of information required.) Use of personal vehicle for campaign/office purposes/Reimbursement current/prior Schedules G <input type="checkbox"/> Payment for travel outside Texas (complete boxes 10-16)		9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
10 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)		
11 Departure city / location	12 Departure date	13 Destination city / location
14 Arrival date		
15 Means of transportation		16 Purpose of travel

Electronic Filing Version

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 3/32 Report: 45/101**2** FILER NAME Meyers, W. A. (Mr.)**3** ACCOUNT # (Ethics Commission filers)
0000

4 Date 05/15/2007	5 Payee name Brazos Valley Schools Credit Union 6 Payee address: City: State: Zip Code 1116 Soldiers Field Dr. Sugar Land, TX 77479	7 Amount (\$) \$322.00
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8 Purpose of payment (See instructions regarding type of information required.) Use of personal vehicle for campaign/office purposes/Reimbursement current/prior Schedules G <input type="checkbox"/> Payment for travel outside Texas (complete boxes 10-16)	9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
--	---

10 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)

11 Departure city / location	12 Departure date	13 Destination city / location	14 Arrival date
15 Means of transportation		16 Purpose of travel	

4 Date 06/10/2007	5 Payee name Brazos Valley Schools Credit Union 6 Payee address: City: State: Zip Code 1116 Soldiers Field Dr. Sugar Land, TX 77479	7 Amount (\$) \$322.00
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8 Purpose of payment (See instructions regarding type of information required.) Use of personal vehicle for campaign/office purposes/Reimbursement current/prior Schedules G <input type="checkbox"/> Payment for travel outside Texas (complete boxes 10-16)	9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
--	---

10 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)

11 Departure city / location	12 Departure date	13 Destination city / location	14 Arrival date
15 Means of transportation		16 Purpose of travel	

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 4/32 Report: 46/101

2 FILER NAME Meyers, W. A. (Mr.)**3 ACCOUNT #** (Ethics Commission filers)

0000

4 Date

01/05/2007

5 Payee name
Chase**6 Payee address;** City: State: Zip CodeP.O. Box 52045
Phoenix, AZ 85072**7**Amount
(\$)

\$2,000.00

8 Purpose of payment
(See instructions regarding type of information required.)
Reimbursement to C/OH for xpensitures for
campaign/office on current & prior period Schedules G☐ Payment for travel outside Texas (complete boxes 10-16)**9 ** Complete if direct expenditure to benefit Candidate/Officeholder ****
Candidate / Officeholder name:

Office sought:

Office held:

10 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)**11 Departure city / location****12 Departure date****13 Destination city / location****14 Arrival date****15 Means of transportation****16 Purpose of travel****4 Date**

03/08/2007

5 Payee name
Chase**6 Payee address;** City: State: Zip CodeP.O. Box 52045
Phoenix, AZ 85072**7**Amount
(\$)

\$900.00

8 Purpose of payment
(See instructions regarding type of information required.)
Reimbursement to C/OH for campaign/office expense on
current & prior period Schedules G net☐ Payment for travel outside Texas (complete boxes 10-16)**9 ** Complete if direct expenditure to benefit Candidate/Officeholder ****
Candidate / Officeholder name:

Office sought:

Office held:

10 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)**11 Departure city / location****12 Departure date****13 Destination city / location****14 Arrival date****15 Means of transportation****16 Purpose of travel**

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 5/32 Report: 47/101

2 FILER NAME Meyers, W. A. (Mr.)

3 ACCOUNT # (Ethics Commission filers)
0000

4 Date 06/18/2007	5 Payee name Chase 6 Payee address; City; State; Zip Code P.O. Box 52045 Phoenix, AZ 85072	7 Amount (\$) \$416.39
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8 Purpose of payment
(See instructions regarding type of information required.)
Reimbursement to C/OH for campaign/office expense on
current & prior period Schedules G net9 ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:

Office held:

☐ Payment for travel outside Texas (complete boxes 10-16)

10 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)

11 Departure city / location	12 Departure date	13 Destination city / location	14 Arrival date
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15 Means of transportation	16 Purpose of travel
----------------------------	----------------------

4 Date 02/08/2007	5 Payee name Exxon/Mobil Oil 6 Payee address; City; State; Zip Code P.O. Box 768911 Roswell, GA 30078-8911	7 Amount (\$) \$321.00
--------------------------	--	----------------------------------

8 Purpose of payment
(See instructions regarding type of information required.)
Expenses - Campaign Manager vehicle & other for
services per agreement.9 ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:

Office held:

☐ Payment for travel outside Texas (complete boxes 10-16)

10 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)

11 Departure city / location	12 Departure date	13 Destination city / location	14 Arrival date
------------------------------	-------------------	--------------------------------	-----------------

15 Means of transportation	16 Purpose of travel
----------------------------	----------------------

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 6/32 Report: 48/101

2 FILER NAME Meyers, W. A. (Mr.)**3** ACCOUNT # (Ethics Commission filers)

0000

4 Date

05/21/2007

5 Payee name

Exxon/Mobil Oil

7Amount
(\$)

\$234.00

6 Payee address; City; State; Zip Code

P.O. Box 768911

Roswell, GA 30078-8911

8 Purpose of payment
(See instructions regarding type of information required.)
Expenses - Campaign Manager vehicle & other for
services per agreement.☐ Payment for travel outside Texas (complete boxes 10-16)**9** ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:

Office held:

10 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)**11** Departure city / location**12** Departure date**13** Destination city / location**14** Arrival date**15** Means of transportation**16** Purpose of travel**4** Date

06/17/2007

5 Payee name

Exxon/Mobil Oil

7Amount
(\$)

\$300.00

6 Payee address; City; State; Zip Code

P.O. Box 768911

Roswell, GA 30078-8911

8 Purpose of payment
(See instructions regarding type of information required.)
Expenses - Campaign Manager vehicle & other for
services per agreement.☐ Payment for travel outside Texas (complete boxes 10-16)**9** ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:

Office held:

10 Name of person(s) travelling on whose behalf the expenditure for travel was made (attach additional pages if necessary)**11** Departure city / location**12** Departure date**13** Destination city / location**14** Arrival date**15** Means of transportation**16** Purpose of travel

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 7/32 Report: 49/101

2 FILER NAME Meyers, W. A. (Mr.)**3** ACCOUNT # (Ethics Commission filers)

0000

4 Date

01/08/2007

5 Payee name
FIA Credit Card**6** Payee address; City; State; Zip Code
P.O. Box 15286
Wilmington, DE 19886**7** Amount
(\$)

\$3,000.00

8 Purpose of payment
(See instructions regarding type of information required.)
Reimbursement of expenditures for campaign/office per
current & prior period Schedules G☐ Payment for travel outside Texas (complete boxes 10-16)**9** ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:

Office held:

10 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)**11** Departure city / location**12** Departure date**13** Destination city / location**14** Arrival date**15** Means of transportation**16** Purpose of travel**4** Date

06/28/2007

5 Payee name
Fort Bend Corp**6** Payee address; City; State; Zip Code
1811 Eldridge Road
Sugar Land, TX 77478**7** Amount
(\$)

\$150.00

8 Purpose of payment
(See instructions regarding type of information required.)
Donation to Charity/Service Organization☐ Payment for travel outside Texas (complete boxes 10-16)**9** ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:

Office held:

10 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)**11** Departure city / location**12** Departure date**13** Destination city / location**14** Arrival date**15** Means of transportation**16** Purpose of travel

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 8/32 Report: 50/101**2** FILER NAME Meyers, W. A. (Mr.)**3** ACCOUNT # (Ethics Commission filers)
0000

4 Date 03/18/2007	5 Payee name Fort Bend Republican Club 6 Payee address; City: State: Zip Code 130 Industrial Blvd. # 110 Sugar Land, TX 77478	7 Amount (\$) \$750.00
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8 Purpose of payment (See instructions regarding type of information required.) Sponsor of Club Speaker <input type="checkbox"/> Payment for travel outside Texas (complete boxes 10-16)	9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
--	---

10 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)

11 Departure city / location	12 Departure date	13 Destination city / location	14 Arrival date
15 Means of transportation		16 Purpose of travel	

4 Date 02/09/2007	5 Payee name Fort Bend Republican Party 6 Payee address; City: State: Zip Code 310 Morton PMB 147 Richmond, TX 77469	7 Amount (\$) \$2,500.00
---------------------------------	--	---

8 Purpose of payment (See instructions regarding type of information required.) Contribution for Republican Party Lincoln Day Event <input type="checkbox"/> Payment for travel outside Texas (complete boxes 10-16)	9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
--	---

10 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)

11 Departure city / location	12 Departure date	13 Destination city / location	14 Arrival date
15 Means of transportation		16 Purpose of travel	

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.				1 PAGE # Schedule: 9/32 Report: 51/101	
2 FILER NAME Meyers, W. A. (Mr.)				3 ACCOUNT # (Ethics Commission filers) 0000	
4 Date 03/20/2007	5 Payee name Katy Chamber of Commerce 6 Payee address; City; State; Zip Code 2501 S. Mason Rd # 230 Katy, TX 77450			7 Amount (\$) \$127.00	
8 Purpose of payment (See instructions regarding type of information required.) Katy Chamber of Commerce Event <input type="checkbox"/> Payment for travel outside Texas (complete boxes 10-16)			9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:		
10 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)					
11 Departure city / location		12 Departure date	13 Destination city / location		14 Arrival date
15 Means of transportation			16 Purpose of travel		
4 Date 02/02/2007	5 Payee name Katy Exchange Club 6 Payee address; City; State; Zip Code P.O. Box 136 Baker, TX 77413			7 Amount (\$) \$200.00	
8 Purpose of payment (See instructions regarding type of information required.) Advertisement with Service Club <input type="checkbox"/> Payment for travel outside Texas (complete boxes 10-16)			9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:		
10 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)					
11 Departure city / location		12 Departure date	13 Destination city / location		14 Arrival date
15 Means of transportation			16 Purpose of travel		

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 10/32 Report: 52/101**2** FILER NAME Meyers, W. A. (Mr.)**3** ACCOUNT # (Ethics Commission filers)
0000**4** Date

02/18/2007

5 Payee name
Katy Exchange Club**6** Payee address: City: State: Zip Code
P.O. Box 136
Baker, TX 77413**7** Amount
(\$)

\$200.00

8 Purpose of payment
(See instructions regarding type of information required.)
Advertisement with Service Club☐ Payment for travel outside Texas (complete boxes 10-16)**9** ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:

Office held:

10 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)**11** Departure city / location**12** Departure date**13** Destination city / location**14** Arrival date**15** Means of transportation**16** Purpose of travel**4** Date

02/24/2007

5 Payee name
Katy ISD FFA**6** Payee address: City: State: Zip Code
P.O. Box 159
Katy, TX 77492-0159**7** Amount
(\$)

\$500.00

8 Purpose of payment
(See instructions regarding type of information required.)
Donation to FFA☐ Payment for travel outside Texas (complete boxes 10-16)**9** ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:

Office held:

10 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)**11** Departure city / location**12** Departure date**13** Destination city / location**14** Arrival date**15** Means of transportation**16** Purpose of travel

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 11/32 Report: 53/101**2** FILER NAME Meyers, W. A. (Mr.)**3** ACCOUNT # (Ethics Commission filers)
0000**4** Date

04/26/2007

5 Payee name
Katy ISD FFA**6** Payee address: City: State: Zip Code
P.O. Box 159
Katy, TX 77492-0159**7** Amount
(\$)

\$2,134.80

8 Purpose of payment
(See instructions regarding type of information required.)
Donation to High School FFA Scholarship Fund☐ Payment for travel outside Texas (complete boxes 10-16)**9** ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:

Office held:

10 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)**11** Departure city / location**12** Departure date**13** Destination city / location**14** Arrival date**15** Means of transportation**16** Purpose of travel**4** Date

03/07/2007

5 Payee name
Lamar Little League**6** Payee address: City: State: Zip Code
George Memorial Park
Richmond, TX 77469**7** Amount
(\$)

\$50.00

8 Purpose of payment
(See instructions regarding type of information required.)
Donation to Little League Organization☐ Payment for travel outside Texas (complete boxes 10-16)**9** ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:

Office held:

10 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)**11** Departure city / location**12** Departure date**13** Destination city / location**14** Arrival date**15** Means of transportation**16** Purpose of travel

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 12/32 Report: 54/101

2 FILER NAME Meyers, W. A. (Mr.)

3 ACCOUNT # (Ethics Commission filers)
0000

4 Date 04/08/2007	5 Payee name Meyers, Michael (Mr.)	7 Amount (\$) \$520.00
6 Payee address; City: State: Zip Code 7222 Belerive # 2505 Houston, TX 77036		

8 Purpose of payment (See instructions regarding type of information required.) Campaign Manager Services <input type="checkbox"/> Payment for travel outside Texas (complete boxes 10-16)	9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
---	--

10 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)

11 Departure city / location	12 Departure date	13 Destination city / location	14 Arrival date
15 Means of transportation		16 Purpose of travel	

4 Date 05/04/2007	5 Payee name Meyers, Michael (Mr.)	7 Amount (\$) \$450.00
6 Payee address; City: State: Zip Code 7222 Belerive # 2505 Houston, TX 77036		

8 Purpose of payment (See instructions regarding type of information required.) Campaign Manager Services <input type="checkbox"/> Payment for travel outside Texas (complete boxes 10-16)	9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
---	--

10 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)

11 Departure city / location	12 Departure date	13 Destination city / location	14 Arrival date
15 Means of transportation		16 Purpose of travel	

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 13/32 Report: 55/101**2** FILER NAME Meyers, W. A. (Mr.)**3** ACCOUNT # (Ethics Commission filers)
0000

4 Date 06/09/2007	5 Payee name Meyers, Michael (Mr.) 6 Payee address; City; State; Zip Code 7222 Belerive # 2505 Houston, TX 77036	7 Amount (\$) \$250.00
---------------------------------	--	---

8 Purpose of payment
(See instructions regarding type of information required.)
Campaign Manager Services**9** ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:

Office held:

☐ Payment for travel outside Texas (complete boxes 10-16)**10** Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)

11 Departure city / location	12 Departure date	13 Destination city / location	14 Arrival date
15 Means of transportation		16 Purpose of travel	

4 Date 06/29/2007	5 Payee name Meyers, W. A. (Mr.) 6 Payee address; City; State; Zip Code 423 Longview Drive Sugar Land, TX 77478	7 Amount (\$) \$240.00
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8 Purpose of payment
(See instructions regarding type of information required.)
Reimburse C/OH for campaign expenditures per Schedules
G**9** ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:

Office held:

☐ Payment for travel outside Texas (complete boxes 10-16)**10** Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)

11 Departure city / location	12 Departure date	13 Destination city / location	14 Arrival date
15 Means of transportation		16 Purpose of travel	

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.				1 PAGE # Schedule: 14/32 Report: 56/101	
2 FILER NAME Meyers, W. A. (Mr.)				3 ACCOUNT # (Ethics Commission filers) 0000	
4 Date 01/24/2007	5 Payee name MPrinting Graphic 6 Payee address; City; State; Zip Code 3902 E. Wisteria Sugar Land, TX 77479			7 Amount (\$) \$2,000.00	
8 Purpose of payment (See instructions regarding type of information required.) Advertisement Republican Party Lincoln Day Event <input type="checkbox"/> Payment for travel outside Texas (complete boxes 10-16)			9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:		
10 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)					
11 Departure city / location		12 Departure date	13 Destination city / location		14 Arrival date
15 Means of transportation			16 Purpose of travel		
4 Date 03/29/2007	5 Payee name MPrinting Graphic 6 Payee address; City; State; Zip Code 3902 E. Wisteria Sugar Land, TX 77479			7 Amount (\$) \$1,764.48	
8 Purpose of payment (See instructions regarding type of information required.) Printing of www.AndyMeyers.com signs advertising web site <input type="checkbox"/> Payment for travel outside Texas (complete boxes 10-16)			9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:		
10 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)					
11 Departure city / location		12 Departure date	13 Destination city / location		14 Arrival date
15 Means of transportation			16 Purpose of travel		

Electronic Filing Version

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 15/32 Report: 57/101	
2 FILER NAME Meyers, W. A. (Mr.)		3 ACCOUNT # (Ethics Commission filers) 0000	
4 Date 03/09/2007	5 Payee name Nationwide Insurance 6 Payee address: City: State: Zip Code 14140 Southwest Frwy # 100 Sugar Land, TX 77478	7 Amount (\$) \$391.93	
8 Purpose of payment (See instructions regarding type of information required.) Use of personal vehicle for campaign/office purposes/Reimbursement current/prior Schedules G <input type="checkbox"/> Payment for travel outside Texas (complete boxes 10-16)		9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:	
10 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)			
11 Departure city / location	12 Departure date	13 Destination city / location	14 Arrival date
15 Means of transportation		16 Purpose of travel	
4 Date 03/09/2007	5 Payee name Nationwide Insurance 6 Payee address: City: State: Zip Code 14140 Southwest Frwy # 100 Sugar Land, TX 77478	7 Amount (\$) \$197.43	
8 Purpose of payment (See instructions regarding type of information required.) Insurance expense for Campaign Truck <input type="checkbox"/> Payment for travel outside Texas (complete boxes 10-16)		9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:	
10 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)			
11 Departure city / location	12 Departure date	13 Destination city / location	14 Arrival date
15 Means of transportation		16 Purpose of travel	

Electronic Filing Version

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 16/32 Report: 58/101

2 FILER NAME Meyers, W. A. (Mr.)

3 ACCOUNT # (Ethics Commission filers)
0000

4 Date

5 Payee name
Nationwide Insurance7 Amount
(\$)

04/17/2007

6 Payee address: City: State: Zip Code
14140 Southwest Frwy # 100
Sugar Land, TX 77478

\$127.58

8 Purpose of payment
(See instructions regarding type of information required.)
Use of personal vehicle for campaign/office
purposes/Reimbursement current/prior Schedules G9 ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:☐ Payment for travel outside Texas (complete boxes 10-16)

Office sought:

Office held:

10 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)

11 Departure city / location

12 Departure date

13 Destination city / location

14 Arrival date

15 Means of transportation

16 Purpose of travel

4 Date

5 Payee name
Nationwide Insurance7 Amount
(\$)

04/17/2007

6 Payee address: City: State: Zip Code
14140 Southwest Frwy # 100
Sugar Land, TX 77478

\$62.40

8 Purpose of payment
(See instructions regarding type of information required.)
Insurance expense for Campaign Truck9 ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:☐ Payment for travel outside Texas (complete boxes 10-16)

Office sought:

Office held:

10 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)

11 Departure city / location

12 Departure date

13 Destination city / location

14 Arrival date

15 Means of transportation

16 Purpose of travel

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 17/32 Report: 59/101**2** FILER NAME Meyers, W. A. (Mr.)**3** ACCOUNT # (Ethics Commission filers)
0000

4 Date 05/15/2007	5 Payee name Nationwide Insurance 6 Payee address; City; State; Zip Code 14140 Southwest Frwy # 100 Sugar Land, TX 77478	7 Amount (\$) \$127.58
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8 Purpose of payment (See instructions regarding type of information required.) Use of personal vehicle for campaign/office purposes/Reimbursement current/prior Schedules G <input type="checkbox"/> Payment for travel outside Texas (complete boxes 10-16)	9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
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10 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)

11 Departure city / location	12 Departure date	13 Destination city / location	14 Arrival date
15 Means of transportation		16 Purpose of travel	

4 Date 06/15/2007	5 Payee name Nationwide Insurance 6 Payee address; City; State; Zip Code 14140 Southwest Frwy # 100 Sugar Land, TX 77478	7 Amount (\$) \$127.58
---------------------------------	--	--------------------------------------

8 Purpose of payment (See instructions regarding type of information required.) Use of personal vehicle for campaign/office purposes/Reimbursement current/prior Schedules G <input type="checkbox"/> Payment for travel outside Texas (complete boxes 10-16)	9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
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10 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)

11 Departure city / location	12 Departure date	13 Destination city / location	14 Arrival date
15 Means of transportation		16 Purpose of travel	

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 18/32 Report: 60/101**2** FILER NAME Meyers, W. A. (Mr.)**3** ACCOUNT # (Ethics Commission filers)
0000

4 Date 05/15/2007	5 Payee name Nationwide Insurance (Truck) 6 Payee address: City: State: Zip Code 14140 Southwest Frwy # 100 Sugar Land, TX 77478	7 Amount (\$) \$62.40
---------------------------------	--	--

8 Purpose of payment
(See instructions regarding type of information required.)
Expenses Campaign Truck**9** ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:

Office held:

☐ Payment for travel outside Texas (complete boxes 10-16)**10** Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)**11** Departure city / location**12** Departure date**13** Destination city / location**14** Arrival date**15** Means of transportation**16** Purpose of travel

4 Date 06/15/2007	5 Payee name Nationwide Insurance (Truck) 6 Payee address: City: State: Zip Code 14140 Southwest Frwy # 100 Sugar Land, TX 77478	7 Amount (\$) \$62.40
---------------------------------	--	--

8 Purpose of payment
(See instructions regarding type of information required.)
Expenses Campaign Truck**9** ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:

Office held:

☐ Payment for travel outside Texas (complete boxes 10-16)**10** Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)**11** Departure city / location**12** Departure date**13** Destination city / location**14** Arrival date**15** Means of transportation**16** Purpose of travel

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 19/32 Report: 61/101**2** FILER NAME Meyers, W. A. (Mr.)**3** ACCOUNT # (Ethics Commission filers)
0000**4** Date**5** Payee name
Office Depot**7** Amount
(\$)

04/17/2007

6 Payee address; City; State; Zip Code
11815 Wilcrest
Houston, TX 77031

\$50.87

8 Purpose of payment
(See instructions regarding type of information required.)
Campaign Supplies**9** ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:☐ Payment for travel outside Texas (complete boxes 10-16)

Office sought:

Office held:

10 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)**11** Departure city / location**12** Departure date**13** Destination city / location**14** Arrival date**15** Means of transportation**16** Purpose of travel**4** Date**5** Payee name
Prosperity Bank**7** Amount
(\$)

04/12/2007

6 Payee address; City; State; Zip Code
14060 Southwest Freeway
Sugar Land, TX 77478

\$200.00

8 Purpose of payment
(See instructions regarding type of information required.)
Bank Charges for Research related to campaign expenditures**9** ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:☐ Payment for travel outside Texas (complete boxes 10-16)

Office sought:

Office held:

10 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)**11** Departure city / location**12** Departure date**13** Destination city / location**14** Arrival date**15** Means of transportation**16** Purpose of travel

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 20/32 Report: 62/101**2** FILER NAME Meyers, W. A. (Mr.)**3** ACCOUNT # (Ethics Commission filers)
0000**4** Date**5** Payee name
Prosperity Bank**7** Amount
(\$)

04/23/2007

6 Payee address; City; State; Zip Code
14060 Southwest Freeway
Sugar Land, TX 77478

\$1,005.00

8 Purpose of payment
(See instructions regarding type of information required.)
Returned Campaign Contribution**9** ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:☐ Payment for travel outside Texas (complete boxes 10-16)

Office sought:

Office held:

10 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)**11** Departure city / location**12** Departure date**13** Destination city / location**14** Arrival date**15** Means of transportation**16** Purpose of travel**4** Date**5** Payee name
Prosperity Bank**7** Amount
(\$)

04/27/2007

6 Payee address; City; State; Zip Code
14060 Southwest Freeway
Sugar Land, TX 77478

\$25.00

8 Purpose of payment
(See instructions regarding type of information required.)
Charge for Stop Payment on Lost Campaign Bank Account
Check**9** ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:☐ Payment for travel outside Texas (complete boxes 10-16)

Office sought:

Office held:

10 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)**11** Departure city / location**12** Departure date**13** Destination city / location**14** Arrival date**15** Means of transportation**16** Purpose of travel

POLITICAL EXPENDITURES**SCHEDULE F**The *INSTRUCTION GUIDE* explains how to complete this form.**1** PAGE #
Schedule: 21/32 Report: 63/101**2** FILER NAME Meyers, W. A. (Mr.)**3** ACCOUNT # (Ethics Commission filers)
0000

4 Date 05/22/2007	5 Payee name Prosperity Bank 6 Payee address; City; State; Zip Code 14060 Southwest Freeway Sugar Land, TX 77478	7 Amount (\$) \$132.75
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8 Purpose of payment (See instructions regarding type of information required.) Research Fee related to campaign expenditures <input type="checkbox"/> Payment for travel outside Texas (complete boxes 10-16)	9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
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10 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)

11 Departure city / location	12 Departure date	13 Destination city / location	14 Arrival date
15 Means of transportation		16 Purpose of travel	

4 Date 03/01/2007	5 Payee name Robert E. Wells Enterprises 6 Payee address; City; State; Zip Code 3005 FM 528 Alvin, TX 77511	7 Amount (\$) \$6,009.78
---------------------------------	--	---

8 Purpose of payment (See instructions regarding type of information required.) Purchase of 3/4 ton pickup truck for campaign/office use. <input type="checkbox"/> Payment for travel outside Texas (complete boxes 10-16)	9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
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10 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)

11 Departure city / location	12 Departure date	13 Destination city / location	14 Arrival date
15 Means of transportation		16 Purpose of travel	

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 22/32 Report: 64/101**2** FILER NAME Meyers, W. A. (Mr.)**3** ACCOUNT # (Ethics Commission filers)
0000

4 Date 01/18/2007	5 Payee name Rosenberg Loins Club 6 Payee address; City; State; Zip Code P.O. Box 1009 Rosenberg, TX 77471	7 Amount (\$) \$100.00
---------------------------------	--	---

8 Purpose of payment (See instructions regarding type of information required.) Donation to Service Club <input type="checkbox"/> Payment for travel outside Texas (complete boxes 10-16)	9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
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10 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)

11 Departure city / location	12 Departure date	13 Destination city / location	14 Arrival date
15 Means of transportation		16 Purpose of travel	

4 Date 02/22/2007	5 Payee name Rosenberg Loins Club 6 Payee address; City; State; Zip Code P.O. Box 1009 Rosenberg, TX 77471	7 Amount (\$) \$75.00
---------------------------------	--	--

8 Purpose of payment (See instructions regarding type of information required.) Donation to Service Club <input type="checkbox"/> Payment for travel outside Texas (complete boxes 10-16)	9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
---	---

10 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)

11 Departure city / location	12 Departure date	13 Destination city / location	14 Arrival date
15 Means of transportation		16 Purpose of travel	

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 23/32 Report: 65/101**2** FILER NAME Meyers, W. A. (Mr.)**3** ACCOUNT # (Ethics Commission filers)
0000

4 Date 01/18/2007	5 Payee name Rosenberg Rotary Club 6 Payee address; City; State; Zip Code 2627 FM 762 Rosenberg, TX 77471	7 Amount (\$) \$100.00
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8 Purpose of payment
(See instructions regarding type of information required.)
Donation to service club**9** ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:☐ Payment for travel outside Texas (complete boxes 10-16)

Office sought:

Office held:

10 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)

11 Departure city / location	12 Departure date	13 Destination city / location	14 Arrival date
15 Means of transportation		16 Purpose of travel	

4 Date 02/01/2007	5 Payee name Rosenberg Rotary Club 6 Payee address; City; State; Zip Code 2627 FM 762 Rosenberg, TX 77471	7 Amount (\$) \$500.00
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8 Purpose of payment
(See instructions regarding type of information required.)
Donation to service club**9** ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:☐ Payment for travel outside Texas (complete boxes 10-16)

Office sought:

Office held:

10 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)

11 Departure city / location	12 Departure date	13 Destination city / location	14 Arrival date
15 Means of transportation		16 Purpose of travel	

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.				1 PAGE # Schedule: 24/32 Report: 66/101	
2 FILER NAME Meyers, W. A. (Mr.)				3 ACCOUNT # (Ethics Commission filers) 0000	
4 Date 03/10/2007	5 Payee name Second Mile Mission 6 Payee address; City: State: Zip Code 504 FM 1092 # 1 Stafford, TX 77477			7 Amount (\$) \$100.00	
8 Purpose of payment (See instructions regarding type of information required.) Donation to Charity <input type="checkbox"/> Payment for travel outside Texas (complete boxes 10-16)			9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:		
10 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)					
11 Departure city / location		12 Departure date	13 Destination city / location		14 Arrival date
15 Means of transportation			16 Purpose of travel		
4 Date 01/08/2007	5 Payee name Shell Oil 6 Payee address; City: State: Zip Code P.O. Box 9151 Des Moines, IA 50368-9151			7 Amount (\$) \$220.00	
8 Purpose of payment (See instructions regarding type of information required.) Use of personal vehicle for campaign/office purposes/Reimbursement current/prior Schedules G <input type="checkbox"/> Payment for travel outside Texas (complete boxes 10-16)			9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:		
10 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)					
11 Departure city / location		12 Departure date	13 Destination city / location		14 Arrival date
15 Means of transportation			16 Purpose of travel		

Electronic Filing Version

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.				1 PAGE # Schedule: 25/32 Report: 67/101	
2 FILER NAME Meyers, W. A. (Mr.)				3 ACCOUNT # (Ethics Commission filers) 0000	
4 Date 02/08/2007	5 Payee name Shell Oil 6 Payee address: City: State: Zip Code P.O. Box 9151 Des Moines, IA 50368-9151			7 Amount (\$) \$250.00	
8 Purpose of payment (See instructions regarding type of information required.) Use of personal vehicle for campaign/office purposes/Reimbursement current/prior Schedules G <input type="checkbox"/> Payment for travel outside Texas (complete boxes 10-16)			9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:		
10 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)					
11 Departure city / location		12 Departure date	13 Destination city / location		14 Arrival date
15 Means of transportation			16 Purpose of travel		
4 Date 03/19/2007	5 Payee name Shell Oil 6 Payee address: City: State: Zip Code P.O. Box 9151 Des Moines, IA 50368-9151			7 Amount (\$) \$350.00	
8 Purpose of payment (See instructions regarding type of information required.) Use of personal vehicle for campaign/office purposes/Reimbursement current/prior Schedules G <input type="checkbox"/> Payment for travel outside Texas (complete boxes 10-16)			9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:		
10 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)					
11 Departure city / location		12 Departure date	13 Destination city / location		14 Arrival date
15 Means of transportation			16 Purpose of travel		

Electronic Filing Version

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 26/32 Report: 68/101**2** FILER NAME Meyers, W. A. (Mr.)**3** ACCOUNT # (Ethics Commission filers)
0000

4 Date 04/28/2007	5 Payee name Shell Oil 6 Payee address; City; State; Zip Code P.O. Box 9151 Des Moines, IA 50368-9151	7 Amount (\$) \$274.39
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8 Purpose of payment (See instructions regarding type of information required.) Use of personal vehicle for campaign/office purposes/Reimbursement current/prior Schedules G <input type="checkbox"/> Payment for travel outside Texas (complete boxes 10-16)	9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
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10 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)

11 Departure city / location	12 Departure date	13 Destination city / location	14 Arrival date
15 Means of transportation		16 Purpose of travel	

4 Date 06/05/2007	5 Payee name Shell Oil 6 Payee address; City; State; Zip Code P.O. Box 9151 Des Moines, IA 50368-9151	7 Amount (\$) \$450.00
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8 Purpose of payment (See instructions regarding type of information required.) Use of personal vehicle for campaign/office purposes/Reimbursement current/prior Schedules G <input type="checkbox"/> Payment for travel outside Texas (complete boxes 10-16)	9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
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10 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)

11 Departure city / location	12 Departure date	13 Destination city / location	14 Arrival date
15 Means of transportation		16 Purpose of travel	

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 27/32 Report: 69/101

2 FILER NAME Meyers, W. A. (Mr.)

3 ACCOUNT # (Ethics Commission filers)
0000

4 Date 06/25/2007	5 Payee name Shelley Sekula Gibbs for Congress Committee 6 Payee address; City; State; Zip Code 17300 El Camino Real Houston, TX 77058	7 Amount (\$) \$1,445.47
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8 Purpose of payment
(See instructions regarding type of information required.)
Payment for Email Addresses for Campaign Web Site9 ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:

Office held:

☐ Payment for travel outside Texas (complete boxes 10-16)

10 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)

11 Departure city / location	12 Departure date	13 Destination city / location	14 Arrival date
15 Means of transportation		16 Purpose of travel	

4 Date 01/31/2007	5 Payee name Smith, Lila (Mrs.) 6 Payee address; City; State; Zip Code 1809 Eldridge Sugar Land, TX 77478	7 Amount (\$) \$76.80
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8 Purpose of payment
(See instructions regarding type of information required.)
Reimbursement for Auction Item for Chairty9 ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:

Office held:

☐ Payment for travel outside Texas (complete boxes 10-16)

10 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)

11 Departure city / location	12 Departure date	13 Destination city / location	14 Arrival date
15 Means of transportation		16 Purpose of travel	

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 28/32 Report: 70/101**2** FILER NAME Meyers, W. A. (Mr.)**3** ACCOUNT # (Ethics Commission filers)
0000

4 Date 01/08/2007	5 Payee name Sprint PCS 6 Payee address; City; State; Zip Code P.O. Box 660750 Dallas, TX 75266	7 Amount (\$) \$137.18
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8 Purpose of payment
(See instructions regarding type of information required.)
Campaign Manager Cell Phone by agreement & Campaign
Cell phone**9** ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:

Office held:

☐ Payment for travel outside Texas (complete boxes 10-16)**10** Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)

11 Departure city / location	12 Departure date	13 Destination city / location	14 Arrival date
15 Means of transportation		16 Purpose of travel	

4 Date 03/19/2007	5 Payee name Sprint PCS 6 Payee address; City; State; Zip Code P.O. Box 660750 Dallas, TX 75266	7 Amount (\$) \$270.79
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8 Purpose of payment
(See instructions regarding type of information required.)
Campaign Manager Cell Phone by agreement & Campaign
Cell phone**9** ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:

Office held:

☐ Payment for travel outside Texas (complete boxes 10-16)**10** Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)

11 Departure city / location	12 Departure date	13 Destination city / location	14 Arrival date
15 Means of transportation		16 Purpose of travel	

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 29/32 Report: 71/101**2** FILER NAME Meyers, W. A. (Mr.)**3** ACCOUNT # (Ethics Commission filers)
0000**4** Date

06/05/2007

5 Payee name
Sprint PCS**6** Payee address; City; State; Zip Code
P.O. Box 660750
Dallas, TX 75266**7** Amount
(\$)

\$139.61

8 Purpose of payment
(See instructions regarding type of information required.)
Campaign Manager Cell Phone by agreement & Campaign
Cell phone☐ Payment for travel outside Texas (complete boxes 10-16)**9** ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:

Office held:

10 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)**11** Departure city / location**12** Departure date**13** Destination city / location**14** Arrival date**15** Means of transportation**16** Purpose of travel**4** Date

03/22/2007

5 Payee name
Sugar Creek Country Club**6** Payee address; City; State; Zip Code
420 Sugar Creek Blvd
Sugar Land, TX 77478**7** Amount
(\$)

\$322.03

8 Purpose of payment
(See instructions regarding type of information required.)
County Club used exclusively for campaign/office purposes
during period☐ Payment for travel outside Texas (complete boxes 10-16)**9** ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:

Office held:

10 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)**11** Departure city / location**12** Departure date**13** Destination city / location**14** Arrival date**15** Means of transportation**16** Purpose of travel

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.				1 PAGE # Schedule: 30/32 Report: 72/101	
2 FILER NAME Meyers, W. A. (Mr.)				3 ACCOUNT # (Ethics Commission filers) 0000	
4 Date 06/12/2007	5 Payee name Sugar Creek Country Club 6 Payee address; City; State; Zip Code 420 Sugar Creek Blvd Sugar Land, TX 77478			7 Amount (\$) \$417.12	
8 Purpose of payment (See instructions regarding type of information required.) County Club used exclusively for campaign/office purposes during period <input type="checkbox"/> Payment for travel outside Texas (complete boxes 10-16)			9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:		
10 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)					
11 Departure city / location		12 Departure date	13 Destination city / location		14 Arrival date
15 Means of transportation			16 Purpose of travel		
4 Date 05/08/2007	5 Payee name Time Warner/Comcast 6 Payee address; City; State; Zip Code 2507 Bagby Houston, TX 77006			7 Amount (\$) \$33.85	
8 Purpose of payment (See instructions regarding type of information required.) Campaign Web Internet Access Expense <input type="checkbox"/> Payment for travel outside Texas (complete boxes 10-16)			9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:		
10 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)					
11 Departure city / location		12 Departure date	13 Destination city / location		14 Arrival date
15 Means of transportation			16 Purpose of travel		

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 31/32 Report: 73/101**2** FILER NAME Meyers, W. A. (Mr.)**3** ACCOUNT # (Ethics Commission filers)
0000

4 Date 05/08/2007	5 Payee name Time Warner/Comcast 6 Payee address; City; State; Zip Code 2507 Bagby Houston, TX 77006	7 Amount ($\$$) \$35.00
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8 Purpose of payment (See instructions regarding type of information required.) Campaign Web Internet Access Expense connect modem <input type="checkbox"/> Payment for travel outside Texas (complete boxes 10-16)	9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
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10 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)

11 Departure city / location	12 Departure date	13 Destination city / location	14 Arrival date
15 Means of transportation		16 Purpose of travel	

4 Date 06/28/2007	5 Payee name Time Warner/Comcast 6 Payee address; City; State; Zip Code 2507 Bagby Houston, TX 77006	7 Amount ($\$$) \$38.44
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8 Purpose of payment (See instructions regarding type of information required.) Campaign Web Internet Access Expense <input type="checkbox"/> Payment for travel outside Texas (complete boxes 10-16)	9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
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10 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)

11 Departure city / location	12 Departure date	13 Destination city / location	14 Arrival date
15 Means of transportation		16 Purpose of travel	

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 32/32 Report: 74/101**2** FILER NAME Meyers, W. A. (Mr.)**3** ACCOUNT # (Ethics Commission filers)
0000**4** Date

04/28/2007**5** Payee name
Windstream Telephone**6** Payee address; City; State; Zip Code
8306 Hwy 90A
Sugar Land, TX 77478**7** Amount
(\$)

\$82.00**8** Purpose of payment
(See instructions regarding type of information required.)
Campaign phone☐ Payment for travel outside Texas (complete boxes 10-16)**9** ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:

Office held:

10 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)**11** Departure city / location**12** Departure date**13** Destination city / location**14** Arrival date**15** Means of transportation**16** Purpose of travel

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 1/27 Report: 75/101

2 FILER NAME Meyers, W. A. (Mr.)

3 ACCOUNT # (Ethics Commission filers)
0000

4 Date 03/19/2007	5 Payee name 10 Minute Oil Change 6 Payee address: City: State: Zip Code 13670 Murphy Rd Stafford, TX 77477	7 Amount (\$) \$168.98 <input checked="" type="checkbox"/> Reimbursement from political contributions intended
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8 Purpose of expenditure
(See instructions regarding type of information required.)
Service Campaign Truck

☐ Payment for travel outside Texas (complete boxes 9-15)

9 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)

10 Departure city / location	11 Departure date	12 Destination city / location	13 Arrival date
14 Means of transportation		15 Purpose of travel	

4 Date 01/23/2007	5 Payee name Chase Credit Card 6 Payee address: City: State: Zip Code P.O. Box 94014 Palatine, IL 19886	7 Amount (\$) \$266.39 <input checked="" type="checkbox"/> Reimbursement from political contributions intended
--------------------------	---	---

8 Purpose of expenditure
(See instructions regarding type of information required.)
Interest/card charges on campaign/office expenditures to Chase Card

☐ Payment for travel outside Texas (complete boxes 9-15)

9 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)

10 Departure city / location	11 Departure date	12 Destination city / location	13 Arrival date
14 Means of transportation		15 Purpose of travel	

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 2/27 Report: 76/101

2 FILER NAME Meyers, W. A. (Mr.)

3 ACCOUNT # (Ethics Commission filers)
0000

4 Date 02/27/2007	5 Payee name Chase Credit Card	7 Amount (\$) \$310.12
6 Payee address; City; State; Zip Code P.O. Box 94014 Palatine, IL 19886		<input checked="" type="checkbox"/> Reimbursement from political contributions intended

8 Purpose of expenditure
(See instructions regarding type of information required.)
Interest/card charges on campaign/office expenditures to Chase Card

☐ Payment for travel outside Texas (complete boxes 9-15)

9 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)

10 Departure city / location	11 Departure date	12 Destination city / location	13 Arrival date
14 Means of transportation		15 Purpose of travel	

4 Date 03/25/2007	5 Payee name Chase Credit Card	7 Amount (\$) \$181.94
6 Payee address; City; State; Zip Code P.O. Box 94014 Palatine, IL 19886		<input checked="" type="checkbox"/> Reimbursement from political contributions intended

8 Purpose of expenditure
(See instructions regarding type of information required.)
Interest/card charges on campaign/office expenditures to Chase Card

☐ Payment for travel outside Texas (complete boxes 9-15)

9 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)

10 Departure city / location	11 Departure date	12 Destination city / location	13 Arrival date
14 Means of transportation		15 Purpose of travel	

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 3/27 Report: 77/101	
2 FILER NAME Meyers, W. A. (Mr.)		3 ACCOUNT # (Ethics Commission filers) 0000	
4 Date 04/23/2007	5 Payee name Chase Credit Card 6 Payee address; City: State; Zip Code P.O. Box 94014 Palatine, IL 19886	7 Amount (\$) \$206.19 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	
8 Purpose of expenditure (See instructions regarding type of information required.) Interest/card charges on campaign/office expenditures to Chase Card <input type="checkbox"/> Payment for travel outside Texas (complete boxes 9-15)			
9 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)			
10 Departure city / location	11 Departure date	12 Destination city / location	13 Arrival date
14 Means of transportation		15 Purpose of travel	
4 Date 05/23/2007	5 Payee name Chase Credit Card 6 Payee address; City: State; Zip Code P.O. Box 94014 Palatine, IL 19886	7 Amount (\$) \$157.17 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	
8 Purpose of expenditure (See instructions regarding type of information required.) Interest/card charges on campaign/office expenditures to Chase Card <input type="checkbox"/> Payment for travel outside Texas (complete boxes 9-15)			
9 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)			
10 Departure city / location	11 Departure date	12 Destination city / location	13 Arrival date
14 Means of transportation		15 Purpose of travel	

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 4/27 Report: 78/101	
2 FILER NAME Meyers, W. A. (Mr.)		3 ACCOUNT # (Ethics Commission filers) 0000	
4 Date 06/23/2007	5 Payee name Chase Credit Card 6 Payee address; City; State; Zip Code P.O. Box 94014 Palatine, IL 19886	7 Amount (\$) \$79.66 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	
8 Purpose of expenditure (See instructions regarding type of information required.) Interest/card charges on campaign/office expenditures to Chase Card <input type="checkbox"/> Payment for travel outside Texas (complete boxes 9-15)			
9 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)			
10 Departure city / location	11 Departure date	12 Destination city / location	13 Arrival date
14 Means of transportation		15 Purpose of travel	
4 Date 06/06/2007	5 Payee name CVS Austin 6 Payee address; City; State; Zip Code 1105 N. I 35 Austin, TX 78701	7 Amount (\$) \$25.98 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	
8 Purpose of expenditure (See instructions regarding type of information required.) Expenses of Austin Trip for Office Purposes <input type="checkbox"/> Payment for travel outside Texas (complete boxes 9-15)			
9 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)			
10 Departure city / location	11 Departure date	12 Destination city / location	13 Arrival date
14 Means of transportation		15 Purpose of travel	

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

The INSTRUCTION GUIDE explains how to complete this form.				1 PAGE # Schedule: 5/27 Report: 79/101	
2 FILER NAME Meyers, W. A. (Mr.)				3 ACCOUNT # (Ethics Commission filers) 0000	
4 Date 05/08/2007	5 Payee name Denny's 6 Payee address; City; State; Zip Code 11511 W. Airport Blvd. Stafford, TX 77477	7 Amount (\$) \$21.86 <input checked="" type="checkbox"/> Reimbursement from political contributions intended			
8 Purpose of expenditure (See instructions regarding type of information required.) Meet with constituent/supporter for campaign/political/office purposes <input type="checkbox"/> Payment for travel outside Texas (complete boxes 9-15)					
9 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)					
10 Departure city / location		11 Departure date		12 Destination city / location	
13 Arrival date					
14 Means of transportation			15 Purpose of travel		
4 Date 01/16/2007	5 Payee name EV1.Net 6 Payee address; City; State; Zip Code P.O. Box 26909 San Francisco, CA 94126				7 Amount (\$) \$10.66 <input checked="" type="checkbox"/> Reimbursement from political contributions intended
8 Purpose of expenditure (See instructions regarding type of information required.) Campaign Web Site Internet Service Provider <input type="checkbox"/> Payment for travel outside Texas (complete boxes 9-15)					
9 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)					
10 Departure city / location		11 Departure date		12 Destination city / location	
13 Arrival date					
14 Means of transportation			15 Purpose of travel		

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POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 6/27 Report: 80/101

2 FILER NAME Meyers, W. A. (Mr.)

3 ACCOUNT # (Ethics Commission filers)
0000

4 Date 02/16/2007	5 Payee name EV1.Net 6 Payee address: City: State: Zip Code P.O. Box 26909 San Francisco, CA 94126	7 Amount (\$) \$10.66 <input checked="" type="checkbox"/> Reimbursement from political contributions intended
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8 Purpose of expenditure
(See instructions regarding type of information required.)
Campaign Web Site Internet Service Provider☐ Payment for travel outside Texas (complete boxes 9-15)

9 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)

10 Departure city / location	11 Departure date	12 Destination city / location	13 Arrival date
14 Means of transportation		15 Purpose of travel	

4 Date 03/16/2007	5 Payee name EV1.Net 6 Payee address: City: State: Zip Code P.O. Box 26909 San Francisco, CA 94126	7 Amount (\$) \$10.95 <input checked="" type="checkbox"/> Reimbursement from political contributions intended
--------------------------	--	---

8 Purpose of expenditure
(See instructions regarding type of information required.)
Campaign Web Site Internet Service Provider☐ Payment for travel outside Texas (complete boxes 9-15)

9 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)

10 Departure city / location	11 Departure date	12 Destination city / location	13 Arrival date
14 Means of transportation		15 Purpose of travel	

Electronic Filing Version

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 7/27 Report: 81/101

2 FILER NAME Meyers, W. A. (Mr.)

3 ACCOUNT # (Ethics Commission filers)
0000

4 Date 04/27/2007	5 Payee name Fort Bend County	7 Amount (\$) \$70.48
6 Payee address; City; State; Zip Code 301 Jackson St. Richmond, TX 77469		<input checked="" type="checkbox"/> Reimbursement from political contributions intended

8 Purpose of expenditure
(See instructions regarding type of information required.)
License Tags for Campaign Truck

☐ Payment for travel outside Texas (complete boxes 9-15)

9 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)

10 Departure city / location	11 Departure date	12 Destination city / location	13 Arrival date
14 Means of transportation		15 Purpose of travel	

4 Date 01/05/2007	5 Payee name GMAC Credit Card	7 Amount (\$) \$201.30
6 Payee address; City; State; Zip Code P. O. Box 15021 Wilmington, DE 19850		<input checked="" type="checkbox"/> Reimbursement from political contributions intended

8 Purpose of expenditure
(See instructions regarding type of information required.)
Interest/card charges during period on campaign/office expenditures made to GMAC credit card

☐ Payment for travel outside Texas (complete boxes 9-15)

9 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)

10 Departure city / location	11 Departure date	12 Destination city / location	13 Arrival date
14 Means of transportation		15 Purpose of travel	

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

The INSTRUCTION GUIDE explains how to complete this form.				1 PAGE # Schedule: 8/27 Report: 82/101	
2 FILER NAME Meyers, W. A. (Mr.)				3 ACCOUNT # (Ethics Commission filers) 0000	
4 Date 02/05/2007	5 Payee name GMAC Credit Card 6 Payee address; City; State; Zip Code P. O. Box 15021 Wilmington, DE 19850			7 Amount (\$) \$155.64 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	
8 Purpose of expenditure (See instructions regarding type of information required.) Interest/card charges during period on campaign/office expenditures made to GMAC credit card <input type="checkbox"/> Payment for travel outside Texas (complete boxes 9-15)					
9 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)					
10 Departure city / location		11 Departure date	12 Destination city / location		13 Arrival date
14 Means of transportation			15 Purpose of travel		
4 Date 03/06/2007	5 Payee name GMAC Credit Card 6 Payee address; City; State; Zip Code P. O. Box 15021 Wilmington, DE 19850			7 Amount (\$) \$144.88 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	
8 Purpose of expenditure (See instructions regarding type of information required.) Interest/card charges during period on campaign/office expenditures made to GMAC credit card <input type="checkbox"/> Payment for travel outside Texas (complete boxes 9-15)					
9 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)					
10 Departure city / location		11 Departure date	12 Destination city / location		13 Arrival date
14 Means of transportation			15 Purpose of travel		

Electronic Filing Version

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 9/27 Report: 83/101

2 FILER NAME Meyers, W. A. (Mr.)

3 ACCOUNT # (Ethics Commission filers)

0000

4 Date 04/05/2007	5 Payee name GMAC Credit Card	7 Amount (\$) \$156.91
6 Payee address; City: State: Zip Code P. O. Box 15021 Wilmington, DE 19850		<input checked="" type="checkbox"/> Reimbursement from political contributions intended

8 Purpose of expenditure
(See instructions regarding type of information required.)
Interest/card charges during period on campaign/office expenditures made to GMAC credit card

☐ Payment for travel outside Texas (complete boxes 9-15)

9 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)

10 Departure city / location	11 Departure date	12 Destination city / location	13 Arrival date
14 Means of transportation		15 Purpose of travel	

4 Date 05/04/2007	5 Payee name GMAC Credit Card	7 Amount (\$) \$47.44
6 Payee address; City: State: Zip Code P. O. Box 15021 Wilmington, DE 19850		<input checked="" type="checkbox"/> Reimbursement from political contributions intended

8 Purpose of expenditure
(See instructions regarding type of information required.)
Interest/card charges during period on campaign/office expenditures made to GMAC credit card

☐ Payment for travel outside Texas (complete boxes 9-15)

9 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)

10 Departure city / location	11 Departure date	12 Destination city / location	13 Arrival date
14 Means of transportation		15 Purpose of travel	

**POLITICAL EXPENDITURES
MADE FROM PERSONAL FUNDS****SCHEDULE G**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 10/27 Report: 84/101

2 FILER NAME Meyers, W. A. (Mr.)

3 ACCOUNT # (Ethics Commission filers)

0000

4 Date 03/26/2007	5 Payee name Godaddy.com	7 Amount (\$) \$64.32
6 Payee address; City; State; Zip Code 14455 N. Hayden Road # 219 Scottsdale, AZ 85260		<input checked="" type="checkbox"/> Reimbursement from political contributions intended

8 Purpose of expenditure
(See instructions regarding type of information required.)
Register Web Site Domain Name☐ Payment for travel outside Texas (complete boxes 9-15)

9 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)

10 Departure city / location	11 Departure date	12 Destination city / location	13 Arrival date
14 Means of transportation		15 Purpose of travel	

4 Date 01/28/2007	5 Payee name Harris County Toll Road Authority	7 Amount (\$) \$34.55
6 Payee address; City; State; Zip Code 330 Meadowfern Houston, TX 77067		<input checked="" type="checkbox"/> Reimbursement from political contributions intended

8 Purpose of expenditure
(See instructions regarding type of information required.)
Toll Charges for Campaign/office purposes☐ Payment for travel outside Texas (complete boxes 9-15)

9 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)

10 Departure city / location	11 Departure date	12 Destination city / location	13 Arrival date
14 Means of transportation		15 Purpose of travel	

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

The INSTRUCTION GUIDE explains how to complete this form.				1 PAGE # Schedule: 11/27 Report: 85/101	
2 FILER NAME Meyers, W. A. (Mr.)				3 ACCOUNT # (Ethics Commission filers) 0000	
4 Date 03/10/2007	5 Payee name Harris County Toll Road Authority 6 Payee address; City; State; Zip Code 330 Meadowfern Houston, TX 77067			7 Amount (\$) \$35.85 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	
8 Purpose of expenditure (See instructions regarding type of information required.) Toll Charges for Campaign/office purposes <input type="checkbox"/> Payment for travel outside Texas (complete boxes 9-15)					
9 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)					
10 Departure city / location		11 Departure date	12 Destination city / location		13 Arrival date
14 Means of transportation			15 Purpose of travel		
4 Date 03/25/2007	5 Payee name Harris County Toll Road Authority 6 Payee address; City; State; Zip Code 330 Meadowfern Houston, TX 77067			7 Amount (\$) \$32.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	
8 Purpose of expenditure (See instructions regarding type of information required.) Toll Charges for Campaign/office purposes <input type="checkbox"/> Payment for travel outside Texas (complete boxes 9-15)					
9 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)					
10 Departure city / location		11 Departure date	12 Destination city / location		13 Arrival date
14 Means of transportation			15 Purpose of travel		

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POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 12/27 Report: 86/101

2 FILER NAME Meyers, W. A. (Mr.)

3 ACCOUNT # (Ethics Commission filers)
0000

4 Date 04/12/2007	5 Payee name Harris County Toll Road Authority	7 Amount (\$) \$40.00
6 Payee address; City: State: Zip Code 330 Meadowfern Houston, TX 77067		<input checked="" type="checkbox"/> Reimbursement from political contributions intended

8 Purpose of expenditure
(See instructions regarding type of information required.)
Toll Charges for Campaign/office purposes

☐ Payment for travel outside Texas (complete boxes 9-15)

9 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)

10 Departure city / location	11 Departure date	12 Destination city / location	13 Arrival date
14 Means of transportation		15 Purpose of travel	

4 Date 04/22/2007	5 Payee name Harris County Toll Road Authority	7 Amount (\$) \$40.00
6 Payee address; City: State: Zip Code 330 Meadowfern Houston, TX 77067		<input checked="" type="checkbox"/> Reimbursement from political contributions intended

8 Purpose of expenditure
(See instructions regarding type of information required.)
Toll Charges for Campaign/office purposes

☐ Payment for travel outside Texas (complete boxes 9-15)

9 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)

10 Departure city / location	11 Departure date	12 Destination city / location	13 Arrival date
14 Means of transportation		15 Purpose of travel	

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 13/27 Report: 87/101

2 FILER NAME Meyers, W. A. (Mr.)

3 ACCOUNT # (Ethics Commission filers)
0000

4 Date 05/04/2007	5 Payee name Harris County Toll Road Authority 6 Payee address; City: State: Zip Code 330 Meadowfern Houston, TX 77067	7 Amount (\$) \$40.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended
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8 Purpose of expenditure
(See instructions regarding type of information required.)
Toll Charges for Campaign/office purposes

☐ Payment for travel outside Texas (complete boxes 9-15)

9 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)

10 Departure city / location	11 Departure date	12 Destination city / location	13 Arrival date
14 Means of transportation		15 Purpose of travel	

4 Date 05/23/2007	5 Payee name Harris County Toll Road Authority 6 Payee address; City: State: Zip Code 330 Meadowfern Houston, TX 77067	7 Amount (\$) \$40.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended
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8 Purpose of expenditure
(See instructions regarding type of information required.)
Toll Charges for Campaign/office purposes

☐ Payment for travel outside Texas (complete boxes 9-15)

9 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)

10 Departure city / location	11 Departure date	12 Destination city / location	13 Arrival date
14 Means of transportation		15 Purpose of travel	

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

The INSTRUCTION GUIDE explains how to complete this form.				1 PAGE # Schedule: 14/27 Report: 88/101	
2 FILER NAME Meyers, W. A. (Mr.)				3 ACCOUNT # (Ethics Commission filers) 0000	
4 Date 06/06/2007	5 Payee name Harris County Toll Road Authority 6 Payee address; City: State: Zip Code 330 Meadowfern Houston, TX 77067			7 Amount (\$) \$40.70 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	
8 Purpose of expenditure (See instructions regarding type of information required.) Toll Charges for Campaign/office purposes <input type="checkbox"/> Payment for travel outside Texas (complete boxes 9-15)					
9 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)					
10 Departure city / location		11 Departure date	12 Destination city / location		13 Arrival date
14 Means of transportation			15 Purpose of travel		
4 Date 04/03/2007	5 Payee name Lopez Restaurant 6 Payee address; City: State: Zip Code 11606 S. Wilcrest Drive Houston, TX 77031			7 Amount (\$) \$52.52 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	
8 Purpose of expenditure (See instructions regarding type of information required.) Meeting with constituent/supporter for campaign/office purposes <input type="checkbox"/> Payment for travel outside Texas (complete boxes 9-15)					
9 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)					
10 Departure city / location		11 Departure date	12 Destination city / location		13 Arrival date
14 Means of transportation			15 Purpose of travel		

Electronic Filing Version

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 15/27 Report: 89/101

2 FILER NAME Meyers, W. A. (Mr.)

3 ACCOUNT # (Ethics Commission filers)
0000

4 Date

04/18/2007

5 Payee name

Lopez Restaurant

7 Amount
(\$)

\$59.71

6 Payee address; City; State; Zip Code

11606 S. Wilcrest Drive
Houston, TX 77031

☒ Reimbursement from
political contributions
intended

8 Purpose of expenditure

(See instructions regarding type of information required.)

Meeting with constituent/supporter for campaign/office purposes

☐ Payment for travel outside Texas (complete boxes 9-15)

9 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)

10 Departure city / location

11 Departure date

12 Destination city / location

13 Arrival date

14 Means of transportation

15 Purpose of travel

4 Date

02/01/2007

5 Payee name

Michael Meyers Campaign Consultant

7 Amount
(\$)

\$520.00

6 Payee address; City; State; Zip Code

7222 Belerive # 2505
Houston, TX 77036

☒ Reimbursement from
political contributions
intended

8 Purpose of expenditure

(See instructions regarding type of information required.)

Campaign Manager services

☐ Payment for travel outside Texas (complete boxes 9-15)

9 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)

10 Departure city / location

11 Departure date

12 Destination city / location

13 Arrival date

14 Means of transportation

15 Purpose of travel

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

The INSTRUCTION GUIDE explains how to complete this form.				1 PAGE # Schedule: 16/27 Report: 90/101	
2 FILER NAME Meyers, W. A. (Mr.)				3 ACCOUNT # (Ethics Commission filers) 0000	
4 Date 05/04/2007	5 Payee name Michael Meyers Campaign Consultant 6 Payee address; City; State; Zip Code 7222 Belerive # 2505 Houston, TX 77036			7 Amount (\$) \$150.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	
8 Purpose of expenditure (See instructions regarding type of information required.) Campaign Manager services <input type="checkbox"/> Payment for travel outside Texas (complete boxes 9-15)					
9 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)					
10 Departure city / location		11 Departure date	12 Destination city / location		13 Arrival date
14 Means of transportation			15 Purpose of travel		
4 Date 03/19/2007	5 Payee name O'Reilly/Hi-Lo Auto Parts 6 Payee address; City; State; Zip Code 10410 Hemstead Rd Houston, TX 77092			7 Amount (\$) \$16.85 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	
8 Purpose of expenditure (See instructions regarding type of information required.) Campaign Truck supplies <input type="checkbox"/> Payment for travel outside Texas (complete boxes 9-15)					
9 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)					
10 Departure city / location		11 Departure date	12 Destination city / location		13 Arrival date
14 Means of transportation			15 Purpose of travel		

Electronic Filing Version

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 17/27 Report: 91/101

2 FILER NAME Meyers, W. A. (Mr.)

3 ACCOUNT # (Ethics Commission filers)
0000

4 Date 01/02/2007	5 Payee name People PC . Com 6 Payee address; City; State; Zip Code P.O. Box 26909 San Francisco, CA 94126	7 Amount (\$) \$10.95 <input checked="" type="checkbox"/> Reimbursement from political contributions intended
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8 Purpose of expenditure
(See instructions regarding type of information required.)
Internet Service Provider for Campaign Web Site

☐ Payment for travel outside Texas (complete boxes 9-15)

9 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)

10 Departure city / location	11 Departure date	12 Destination city / location	13 Arrival date
14 Means of transportation		15 Purpose of travel	

4 Date 03/09/2007	5 Payee name People PC . Com 6 Payee address; City; State; Zip Code P.O. Box 26909 San Francisco, CA 94126	7 Amount (\$) \$10.95 <input checked="" type="checkbox"/> Reimbursement from political contributions intended
--------------------------	--	--

8 Purpose of expenditure
(See instructions regarding type of information required.)
Internet Service Provider for Campaign Web Site

☐ Payment for travel outside Texas (complete boxes 9-15)

9 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)

10 Departure city / location	11 Departure date	12 Destination city / location	13 Arrival date
14 Means of transportation		15 Purpose of travel	

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 18/27 Report: 92/101

2 FILER NAME Meyers, W. A. (Mr.)

3 ACCOUNT # (Ethics Commission filers)
0000

4 Date 04/06/2007	5 Payee name People PC . Com	7 Amount (\$) \$10.95
6 Payee address; City; State; Zip Code P.O. Box 26909 San Francisco, CA 94126		<input checked="" type="checkbox"/> Reimbursement from political contributions intended

8 Purpose of expenditure
(See instructions regarding type of information required.)
Internet Service Provider for Campaign Web Site

☐ Payment for travel outside Texas (complete boxes 9-15)

9 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)

10 Departure city / location	11 Departure date	12 Destination city / location	13 Arrival date
14 Means of transportation		15 Purpose of travel	

4 Date 05/03/2007	5 Payee name People PC Com	7 Amount (\$) \$10.95
6 Payee address; City; State; Zip Code P.O. Box 26909 San Francisco, CA 94126		<input checked="" type="checkbox"/> Reimbursement from political contributions intended

8 Purpose of expenditure
(See instructions regarding type of information required.)
Internet Service Provider for Campaign Web Site

☐ Payment for travel outside Texas (complete boxes 9-15)

9 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)

10 Departure city / location	11 Departure date	12 Destination city / location	13 Arrival date
14 Means of transportation		15 Purpose of travel	

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 19/27 Report: 93/101

2 FILER NAME Meyers, W. A. (Mr.)

3 ACCOUNT # (Ethics Commission filers)

0000

4 Date 03/14/2007	5 Payee name Pep Boys Auto Parts 6 Payee address; City: State; Zip Code 7525 Southwest Frwy Houston, TX 77074	7 Amount (\$) \$143.37 <input checked="" type="checkbox"/> Reimbursement from political contributions intended
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8 Purpose of expenditure
(See instructions regarding type of information required.)
Expenses for Campaign Truck - bed liner

☐ Payment for travel outside Texas (complete boxes 9-15)

9 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)

10 Departure city / location	11 Departure date	12 Destination city / location	13 Arrival date
14 Means of transportation		15 Purpose of travel	

4 Date 03/16/2007	5 Payee name Pep Boys Auto Parts 6 Payee address; City: State; Zip Code 7525 Southwest Frwy Houston, TX 77074	7 Amount (\$) \$31.34 <input checked="" type="checkbox"/> Reimbursement from political contributions intended
--------------------------	---	---

8 Purpose of expenditure
(See instructions regarding type of information required.)
Expenses for Campaign Truck - Whippers

☐ Payment for travel outside Texas (complete boxes 9-15)

9 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)

10 Departure city / location	11 Departure date	12 Destination city / location	13 Arrival date
14 Means of transportation		15 Purpose of travel	

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 20/27 Report: 94/101

2 FILER NAME Meyers, W. A. (Mr.)

3 ACCOUNT # (Ethics Commission filers)
0000

4 Date 03/17/2007	5 Payee name Pep Boys Auto Parts 6 Payee address; City; State; Zip Code 7525 Southwest Frwy Houston, TX 77074	7 Amount (\$) \$45.82 <input checked="" type="checkbox"/> Reimbursement from political contributions intended
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8 Purpose of expenditure
(See instructions regarding type of information required.)
Expenses for Campaign Truck - Steering Wheel Cover

☐ Payment for travel outside Texas (complete boxes 9-15)

9 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)

10 Departure city / location	11 Departure date	12 Destination city / location	13 Arrival date
14 Means of transportation		15 Purpose of travel	

4 Date 03/18/2007	5 Payee name Pep Boys Auto Parts 6 Payee address; City; State; Zip Code 7525 Southwest Frwy Houston, TX 77074	7 Amount (\$) \$62.05 <input checked="" type="checkbox"/> Reimbursement from political contributions intended
--------------------------	---	--

8 Purpose of expenditure
(See instructions regarding type of information required.)
Expenses for Campaign Truck - bed liner

☐ Payment for travel outside Texas (complete boxes 9-15)

9 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)

10 Departure city / location	11 Departure date	12 Destination city / location	13 Arrival date
14 Means of transportation		15 Purpose of travel	

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 21/27 Report: 95/101

2 FILER NAME Meyers, W. A. (Mr.)

3 ACCOUNT # (Ethics Commission filers)
0000

4 Date 05/11/2007	5 Payee name Raia, Terese	7 Amount (\$) \$45.00
6 Payee address; City; State; Zip Code 1 Turnaround Ct. Sugar Land, TX 77478		<input checked="" type="checkbox"/> Reimbursement from political contributions intended

8 Purpose of expenditure
(See instructions regarding type of information required.)
Reimbursement for Republican Party event

☐ Payment for travel outside Texas (complete boxes 9-15)

9 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)

10 Departure city / location	11 Departure date	12 Destination city / location	13 Arrival date
14 Means of transportation		15 Purpose of travel	

4 Date 03/19/2007	5 Payee name Simple Host	7 Amount (\$) \$14.95
6 Payee address; City; State; Zip Code 52 Westerville Sq. # 240 Westerville, OH 43081		<input checked="" type="checkbox"/> Reimbursement from political contributions intended

8 Purpose of expenditure
(See instructions regarding type of information required.)
Campaign Email/Web Site Host

☐ Payment for travel outside Texas (complete boxes 9-15)

9 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)

10 Departure city / location	11 Departure date	12 Destination city / location	13 Arrival date
14 Means of transportation		15 Purpose of travel	

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

The INSTRUCTION GUIDE explains how to complete this form.				1 PAGE # Schedule: 22/27 Report: 96/101	
2 FILER NAME Meyers, W. A. (Mr.)				3 ACCOUNT # (Ethics Commission filers) 0000	
4 Date 04/17/2007	5 Payee name Simple Host 6 Payee address; City; State; Zip Code 52 Westerville Sq. # 240 Westerville,, OH 43081			7 Amount (\$) \$90.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	
8 Purpose of expenditure (See instructions regarding type of information required.) Campaign Email/Web Site Host <input type="checkbox"/> Payment for travel outside Texas (complete boxes 9-15)					
9 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)					
10 Departure city / location		11 Departure date	12 Destination city / location		13 Arrival date
14 Means of transportation			15 Purpose of travel		
4 Date 01/08/2007	5 Payee name Snapper Jack's Seafood Restaurant 6 Payee address; City; State; Zip Code 8125 Jones Road Houston, TX 77065			7 Amount (\$) \$34.74 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	
8 Purpose of expenditure (See instructions regarding type of information required.) Meeting with supporter/constituent <input type="checkbox"/> Payment for travel outside Texas (complete boxes 9-15)					
9 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)					
10 Departure city / location		11 Departure date	12 Destination city / location		13 Arrival date
14 Means of transportation			15 Purpose of travel		

Electronic Filing Version

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

The INSTRUCTION GUIDE explains how to complete this form.				1 PAGE # Schedule: 23/27 Report: 97/101	
2 FILER NAME Meyers, W. A. (Mr.)				3 ACCOUNT # (Ethics Commission filers) 0000	
4 Date 03/22/2007	5 Payee name Sugar Creek Country Club 6 Payee address; City; State; Zip Code 420 Sugar Creek Blvd Sugar Land, TX 77478			7 Amount (\$) \$322.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	
8 Purpose of expenditure (See instructions regarding type of information required.) County Club used exclusively for campaign/office purposes during period <input type="checkbox"/> Payment for travel outside Texas (complete boxes 9-15)					
9 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)					
10 Departure city / location		11 Departure date	12 Destination city / location		13 Arrival date
14 Means of transportation			15 Purpose of travel		
4 Date 01/24/2007	5 Payee name Sugar Land Rotary 6 Payee address; City; State; Zip Code 4400 Palm Royale Drive Sugar Land, TX 77479			7 Amount (\$) \$30.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	
8 Purpose of expenditure (See instructions regarding type of information required.) Rotary Meeting <input type="checkbox"/> Payment for travel outside Texas (complete boxes 9-15)					
9 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)					
10 Departure city / location		11 Departure date	12 Destination city / location		13 Arrival date
14 Means of transportation			15 Purpose of travel		

Electronic Filing Version

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

The INSTRUCTION GUIDE explains how to complete this form.				1 PAGE # Schedule: 24/27 Report: 98/101	
2 FILER NAME Meyers, W. A. (Mr.)				3 ACCOUNT # (Ethics Commission filers) 0000	
4 Date 03/13/2007	5 Payee name Texas Land & Cattle Restaurant 6 Payee address; City; State; Zip Code 12710 Southwest Frwy Stafford, TX 77477			7 Amount (\$) \$31.46 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	
8 Purpose of expenditure (See instructions regarding type of information required.) Meeting with constituent/supporter for campaign/office purposes <input type="checkbox"/> Payment for travel outside Texas (complete boxes 9-15)					
9 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)					
10 Departure city / location		11 Departure date	12 Destination city / location		13 Arrival date
14 Means of transportation			15 Purpose of travel		
4 Date 04/16/2007	5 Payee name The Planet.com 6 Payee address; City; State; Zip Code P.O. Box 26909 San Francisco, CA 94126			7 Amount (\$) \$10.66 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	
8 Purpose of expenditure (See instructions regarding type of information required.) Campaign Web Site Hosting/Internet Connection <input type="checkbox"/> Payment for travel outside Texas (complete boxes 9-15)					
9 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)					
10 Departure city / location		11 Departure date	12 Destination city / location		13 Arrival date
14 Means of transportation			15 Purpose of travel		

Electronic Filing Version

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 25/27 Report: 99/101

2 FILER NAME Meyers, W. A. (Mr.)

3 ACCOUNT # (Ethics Commission filers)
0000

4 Date 05/16/2007	5 Payee name The Planet.com 6 Payee address; City; State; Zip Code P.O. Box 26909 Sand Francisco, CA 94126	7 Amount (\$) \$10.66 <input checked="" type="checkbox"/> Reimbursement from political contributions intended
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8 Purpose of expenditure
(See instructions regarding type of information required.)
Campaign Web Site Hosting/Internet Connection

☐ Payment for travel outside Texas (complete boxes 9-15)

9 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)

10 Departure city / location	11 Departure date	12 Destination city / location	13 Arrival date
14 Means of transportation		15 Purpose of travel	

4 Date 06/16/2007	5 Payee name The Planet.com 6 Payee address; City; State; Zip Code P.O. Box 26909 Sand Francisco, CA 94126	7 Amount (\$) \$10.66 <input checked="" type="checkbox"/> Reimbursement from political contributions intended
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8 Purpose of expenditure
(See instructions regarding type of information required.)
Campaign Web Site Hosting/Internet Connection

☐ Payment for travel outside Texas (complete boxes 9-15)

9 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)

10 Departure city / location	11 Departure date	12 Destination city / location	13 Arrival date
14 Means of transportation		15 Purpose of travel	

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POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 26/27 Report: 100/101

2 FILER NAME Meyers, W. A. (Mr.)

3 ACCOUNT # (Ethics Commission filers)
0000

4 Date 04/23/2007	5 Payee name Tractor Supply 6 Payee address; City: State; Zip Code 1903 First Street Rosenberg, TX 77459	7 Amount (\$) \$257.30 <input checked="" type="checkbox"/> Reimbursement from political contributions intended
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8 Purpose of expenditure
(See instructions regarding type of information required.)
T-Posts for www.AndyMeyers.com 4X8 Signs

☐ Payment for travel outside Texas (complete boxes 9-15)

9 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)

10 Departure city / location	11 Departure date	12 Destination city / location	13 Arrival date
14 Means of transportation		15 Purpose of travel	

4 Date 02/27/2007	5 Payee name Windstream Telephone 6 Payee address; City: State; Zip Code 8306 Hwy 90A Sugar Land, TX 77478	7 Amount (\$) \$116.66 <input checked="" type="checkbox"/> Reimbursement from political contributions intended
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8 Purpose of expenditure
(See instructions regarding type of information required.)
Campaign phone & Campaign Web Site Internet Connection

☐ Payment for travel outside Texas (complete boxes 9-15)

9 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)

10 Departure city / location	11 Departure date	12 Destination city / location	13 Arrival date
14 Means of transportation		15 Purpose of travel	

**POLITICAL EXPENDITURES
MADE FROM PERSONAL FUNDS****SCHEDULE G**

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 27/27 Report: 101/101	
2 FILER NAME Meyers, W. A. (Mr.)		3 ACCOUNT # (Ethics Commission filers) 0000	
4 Date 04/12/2007	5 Payee name Windstream Telephone 6 Payee address; City; State; Zip Code 8306 Hwy 90A Sugar Land, TX 77478	7 Amount (\$) \$81.87 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	
8 Purpose of expenditure (See instructions regarding type of information required.) Campaign phone <input type="checkbox"/> Payment for travel outside Texas (complete boxes 9-15)			
9 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)			
10 Departure city / location	11 Departure date	12 Destination city / location	13 Arrival date
14 Means of transportation		15 Purpose of travel	

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