

# 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 39
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Mr.	FIRST W. A.	MI
	NICKNAME Andy	LAST Meyers	SUFFIX
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX:	APT / SUITE #:	CITY: STATE: ZIP CODE
	423 Longview Drive Sugar Land, TX 77478		
5 CAMPAIGN TREASURER NAME	MS / MRS / MR Mr.	FIRST Michael	MI
	NICKNAME	LAST Meyers	SUFFIX
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	<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)		
	<input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final report (Attach C/OH - FR)		
9 PERIOD COVERED	Month Day Year	THROUGH	Month Day Year
		07/01/2008	12/31/2008
10 ELECTION	ELECTION DATE Month Day Year		ELECTION TYPE
	11/04/2008		<input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input checked="" type="checkbox"/> General <input type="checkbox"/> Special
11 OFFICE	OFFICE HELD (if any) County Commissioner Pct. 3		12 OFFICE SOUGHT (if known) County Commissioner Pct. 3
13 NOTICE OF DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS  <input type="checkbox"/> additional pages	<p>.. 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. ..</p>		
	Name		
	Address/PO Box; Apt. / Suite #; City; State; Zip Code		
<b>GO TO PAGE 2</b>			

# 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)  
0000

16 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 TOTALS

1.	TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$	0.00
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2.	TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	11,000.00
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EXPENDITURE TOTALS

3.	TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED	\$	685.25
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4.	TOTAL POLITICAL EXPENDITURES	\$	20,157.35
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CONTRIBUTION BALANCE

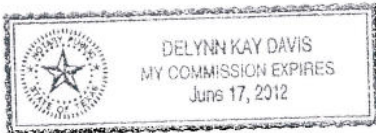
5.	TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	6,244.00
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OUTSTANDING LOAN TOTALS

6.	TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	0.00
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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 12<sup>th</sup> day of January, 2009, to certify which, witness my hand and seal of office.

*Delynn Kay Davis*      Delynn Kay Davis      *Notary Public*  
Signature of officer administering oath      Print name of officer administering oath      Title of officer administering oath

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.				1 PAGE # Schedule: 1/9 Report: 3/39	
2 FILER NAME Meyers, W. A. (Mr.)				3 ACCOUNT # (Ethics Commission filers) 0000	
4 Date 12/15/2008	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Babineaux, Bruce (Mr.)			7 Amount of contribution (\$) \$250.00	
6 Contributor address; City; State; Zip Code 9800 Richmond Ave. # 400 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 12/15/2008	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Binkley, Brett (Mr.)			7 Amount of contribution (\$) \$500.00	
6 Contributor address; City; State; Zip Code 1710 Seamist Dr. Houston, TX 77008					
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		

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.				1 PAGE # Schedule: 2/9 Report: 4/39	
2 FILER NAME Meyers, W. A. (Mr.)				3 ACCOUNT # (Ethics Commission filers) 0000	
4 Date 12/15/2008	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		
4 Date 12/15/2008	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Eastwood, David			7 Amount of contribution (\$) \$750.00	
	6 Contributor address; City; State; Zip Code 800 Victoria Drive Houston, TX 77022				
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) Business Owner		
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: 3/9 Report: 5/39	
2 FILER NAME Meyers, W. A. (Mr.)			3 ACCOUNT # (Ethics Commission filers) 0000		
4 Date 12/15/2008	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Fields, Richard (Mr.)		7 Amount of contribution (\$) \$500.00		
		6 Contributor address; City; State; Zip Code 4800 Sugar Grove # 600 Stafford, TX 77477			
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) Business Owner		
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 12/15/2008	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		

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.				1 PAGE # Schedule: 4/9 Report: 6/39	
2 FILER NAME Meyers, W. A. (Mr.)			3 ACCOUNT # (Ethics Commission filers) 0000		
4 Date 12/15/2008	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Gustefson, Jim			7 Amount of contribution (\$) \$750.00	
6 Contributor address; City; State; Zip Code 8955 Katy Freeway Houston, TX 77024					
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) Business Owner		
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 12/15/2008	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Henriksen, Ron & Sheri			7 Amount of contribution (\$) \$250.00	
6 Contributor address; City; State; Zip Code 8831 Stable Lane Houston, TX 77024					
8 Principal occupation / Job title (See Instructions)			9 Employer (See Instructions)		
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) Business Owner - Telecommunications		
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: 5/9 Report: 7/39	
2 FILER NAME Meyers, W. A. (Mr.)		3 ACCOUNT # (Ethics Commission filers) 0000	
4 Date 12/15/2008	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Ifan, Moh (Mr.)	7 Amount of contribution (\$) \$500.00	
6 Contributor address; City; State; Zip Code P.O. Box 5205 Katy, TX 77491			
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) Business Owner	
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 12/15/2008	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Joiner, Pattie (Ms.)	7 Amount of contribution (\$) \$250.00	
6 Contributor address; City; State; Zip Code 8588 Katy Freeway # 441 Houston, TX 77024			
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) Business Owner	
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: 6/9 Report: 8/39	
2 FILER NAME Meyers, W. A. (Mr.)			3 ACCOUNT # (Ethics Commission filers) 0000		
4 Date 12/15/2008	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) KBR PAC			7 Amount of contribution (\$) \$1,000.00	
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) Political Action Committee		
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 12/15/2008	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Mullinax, Ronnie (Mr.)			7 Amount of contribution (\$) \$750.00	
6 Contributor address; City; State; Zip Code 10777 Westheimer Suite 400 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		



# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 7/9 Report: 9/39	
2 FILER NAME Meyers, W. A. (Mr.)		3 ACCOUNT # (Ethics Commission filers) 0000	
4 Date  12/15/2008	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Perry, Bob  6 Contributor address; City; State; Zip Code PO Box 34153 Houston, TX 77234	7 Amount of contribution (\$)  \$2,500.00	
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) Business Owner	
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  12/15/2008	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Ramey, Lina (Ms.)  6 Contributor address; City; State; Zip Code 2400 Augusta Drive # 301 Houston, TX 77057	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) Business Owner	
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: 8/9 Report: 10/39	
2 FILER NAME Meyers, W. A. (Mr.)			3 ACCOUNT # (Ethics Commission filers) 0000		
4 Date 12/15/2008	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Sabouni, Lina (Mrs.)			7 Amount of contribution (\$) \$250.00	
6 Contributor address; City; State; Zip Code 6200 Savoy # 100 Houston, TX 77036					
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) Business Owner		
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 12/15/2008	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Van De Wiele, John (Mr.)			7 Amount of contribution (\$) \$750.00	
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		

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		<b>1</b> PAGE # Schedule: 9/9 Report: 11/39	
<b>2</b> FILER NAME Meyers, W. A. (Mr.)		<b>3</b> ACCOUNT # (Ethics Commission filers) 0000	
<b>4</b> Date  12/15/2008	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) Williammson, Claudia (Ms.)  <b>6</b> Contributor address: City: State: Zip Code 2925 Briarpark Dr. Houston, TX 77042	<b>7</b> Amount of contribution (\$)  \$250.00	
<b>8</b> Principal occupation / Job title (See Instructions)		<b>9</b> Employer (See Instructions)	
<b>10</b> 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.		<b>11</b> In-kind description (if applicable)	
<b>12</b> Name of person(s) traveling on whose behalf the travel was accepted (attach additional pages if necessary)			
<b>13</b> Departure city / location	<b>14</b> Departure date	<b>15</b> Destination city / location	<b>16</b> Arrival date
<b>17</b> Means of transportation		<b>18</b> Purpose of travel	

**POLITICAL EXPENDITURES****SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

**1** PAGE #  
Schedule: 1/23 Report: 12/39**2** FILER NAME Meyers, W. A. (Mr.)**3** ACCOUNT # (Ethics Commission filers)  
0000

<b>4</b> Date 07/31/2008	<b>5</b> Payee name Boy Scouts of America	<b>7</b> Amount (\$) \$493.62
<b>6</b> Payee address; City; State; Zip Code c/o Lane Scholl 3011 Norwood Hills Dr. Katy, TX 77450		

<b>8</b> Purpose of payment (See instructions regarding type of information required.) Donation to Boy Scouts  <input type="checkbox"/> Payment for travel outside Texas (complete boxes 10-16)	<b>9</b> ** 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)

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

<b>4</b> Date 07/01/2008	<b>5</b> Payee name Campaign Solutions LLC	<b>7</b> Amount (\$) \$320.00
<b>6</b> Payee address; City; State; Zip Code 7222 Bellerive # 2505 Houston, TX 77036		

<b>8</b> Purpose of payment (See instructions regarding type of information required.) Political Consulting/Campaign Management Expenses  <input type="checkbox"/> Payment for travel outside Texas (complete boxes 10-16)	<b>9</b> ** 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)

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

# POLITICAL EXPENDITURES

# SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

**1** PAGE #  
Schedule: 2/23 Report: 13/39

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

**3** ACCOUNT # (Ethics Commission filers)  
0000

<b>4</b> Date	<b>5</b> Payee name Campaign Solutions LLC	<b>7</b> Amount (\$)
09/09/2008	<b>6</b> Payee address; City; State; Zip Code 7222 Bellerive # 2505 Houston, TX 77036	\$1,000.00

<b>8</b> Purpose of payment (See instructions regarding type of information required.) Campaign Services Fee	<b>9</b> ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name:
<input type="checkbox"/> 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)

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

<b>4</b> Date	<b>5</b> Payee name Campaign Solutions LLC	<b>7</b> Amount (\$)
09/30/2008	<b>6</b> Payee address; City; State; Zip Code 7222 Bellerive # 2505 Houston, TX 77036	\$640.00

<b>8</b> Purpose of payment (See instructions regarding type of information required.) Campaign/Political Consulting Services	<b>9</b> ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name:
<input type="checkbox"/> 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)

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

**POLITICAL EXPENDITURES****SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.				<b>1</b> PAGE # Schedule: 3/23 Report: 14/39	
<b>2</b> FILER NAME Meyers, W. A. (Mr.)			<b>3</b> ACCOUNT # (Ethics Commission filers) 0000		
<b>4</b> Date  10/27/2008	<b>5</b> Payee name Campaign Solutions LLC		<b>7</b> Amount (\$)  \$1,190.68		
<b>6</b> Payee address; City; State; Zip Code 7222 Bellerive # 2505 Houston, TX 77036					
<b>8</b> Purpose of payment (See instructions regarding type of information required.) Political Fundraiser/Consultation  <input type="checkbox"/> Payment for travel outside Texas (complete boxes 10-16)			<b>9</b> ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name:  Office sought:  Office held:		
<b>10</b> Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)					
<b>11</b> Departure city / location		<b>12</b> Departure date	<b>13</b> Destination city / location		<b>14</b> Arrival date
<b>15</b> Means of transportation			<b>16</b> Purpose of travel		
<b>4</b> Date  12/18/2008	<b>5</b> Payee name Campaign Solutions LLC		<b>7</b> Amount (\$)  \$295.89		
<b>6</b> Payee address; City; State; Zip Code 7222 Bellerive # 2505 Houston, TX 77036					
<b>8</b> Purpose of payment (See instructions regarding type of information required.) Campaign Services Fee  <input type="checkbox"/> Payment for travel outside Texas (complete boxes 10-16)			<b>9</b> ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name:  Office sought:  Office held:		
<b>10</b> Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)					
<b>11</b> Departure city / location		<b>12</b> Departure date	<b>13</b> Destination city / location		<b>14</b> Arrival date
<b>15</b> Means of transportation			<b>16</b> Purpose of travel		

# POLITICAL EXPENDITURES

# SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

**1** PAGE #  
Schedule: 4/23 Report: 15/39

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

**3** ACCOUNT # (Ethics Commission filers)  
0000

<b>4</b> Date	<b>5</b> Payee name Comcast	<b>7</b> Amount (\$)
07/01/2008	<b>6</b> Payee address; City; State; Zip Code 8590 W. Tidwell Rd Houston, TX 77040	\$66.60

<b>8</b> Purpose of payment (See instructions regarding type of information required.) Campaign Web Site ISP	<b>9</b> ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name:
<input type="checkbox"/> 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)

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

<b>4</b> Date	<b>5</b> Payee name Comcast	<b>7</b> Amount (\$)
08/30/2008	<b>6</b> Payee address; City; State; Zip Code 8590 W. Tidwell Rd Houston, TX 77040	\$66.60

<b>8</b> Purpose of payment (See instructions regarding type of information required.) Campaign Web Site ISP	<b>9</b> ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name:
<input type="checkbox"/> 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)

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

**POLITICAL EXPENDITURES****SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.				1 PAGE # Schedule: 5/23 Report: 16/39	
2 FILER NAME Meyers, W. A. (Mr.)				3 ACCOUNT # (Ethics Commission filers) 0000	
4 Date  09/30/2008	5 Payee name Comcast  6 Payee address; City; State; Zip Code 8590 W. Tidwell Rd Houston, TX 77040			7 Amount (\$)  \$66.60	
8 Purpose of payment (See instructions regarding type of information required.) Campaign Web Site ISP  <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  09/17/2008	5 Payee name Craig Bingham 10 Minute Lube  6 Payee address; City; State; Zip Code 13770 Murphy Road Stafford, TX 77477			7 Amount (\$)  \$199.97	
8 Purpose of payment (See instructions regarding type of information required.) Maintenance service of campaign-owned pickup 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		



**POLITICAL EXPENDITURES****SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

**1** PAGE #

Schedule: 6/23 Report: 17/39

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

0000

<b>4</b> Date  12/22/2008	<b>5</b> Payee name CVS  <b>6</b> Payee address; City; State; Zip Code 13829 Southwest Freeway Sugar Land, TX 77478	<b>7</b> Amount (\$)  \$182.02
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<b>8</b> Purpose of payment (See instructions regarding type of information required.) Christmas Gifts for office staff  <input type="checkbox"/> Payment for travel outside Texas (complete boxes 10-16)	<b>9</b> ** 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)

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

<b>4</b> Date  12/01/2008	<b>5</b> Payee name Dean Hrbacek & Associates  <b>6</b> Payee address; City; State; Zip Code 130 Industrial Blvd. # 120 Sugar Land, TX 77478	<b>7</b> Amount (\$)  \$750.00
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<b>8</b> Purpose of payment (See instructions regarding type of information required.) Legal services to Campaign  <input type="checkbox"/> Payment for travel outside Texas (complete boxes 10-16)	<b>9</b> ** 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)

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

# POLITICAL EXPENDITURES

# SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 7/23 Report: 18/39	
2 FILER NAME Meyers, W. A. (Mr.)		3 ACCOUNT # (Ethics Commission filers) 0000	
4 Date  09/02/2008	5 Payee name Exxon/Mobil  6 Payee address; City; State; Zip Code 16760 Southwest Freeway Sugar Land, TX 77478	7 Amount (\$)  \$61.13	
8 Purpose of payment (See instructions regarding type of information required.) Fuel for campaign pickup for political sign location/installation  <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  10/14/2008	5 Payee name Exxon/Mobil  6 Payee address; City; State; Zip Code 16760 Southwest Freeway Sugar Land, TX 77478	7 Amount (\$)  \$74.85	
8 Purpose of payment (See instructions regarding type of information required.) Fuel for campaign pickup for political sign location/installation  <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: 8/23 Report: 19/39

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

**3** ACCOUNT # (Ethics Commission filers)  
0000

<b>4</b> Date  10/16/2008	<b>5</b> Payee name Fort Bend Buyers Group  <b>6</b> Payee address; City; State; Zip Code 12919 Dairy Ashford Sugar Land, TX 77478	<b>7</b> Amount (\$)  \$100.00
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<b>8</b> Purpose of payment (See instructions regarding type of information required.) Donation to Fort Bend Fair Association buyers group  <input type="checkbox"/> Payment for travel outside Texas (complete boxes 10-16)	<b>9</b> ** 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)

<b>11</b> Departure city / location	<b>12</b> Departure date	<b>13</b> Destination city / location	<b>14</b> Arrival date
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<b>15</b> Means of transportation	<b>16</b> Purpose of travel
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<b>4</b> Date  12/01/2008	<b>5</b> Payee name Fort Bend Chamber  <b>6</b> Payee address; City; State; Zip Code 445 Commerce Green Blvd Sugar Land, TX 77478	<b>7</b> Amount (\$)  \$225.00
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<b>8</b> Purpose of payment (See instructions regarding type of information required.) Chamber Membership Dues  <input type="checkbox"/> Payment for travel outside Texas (complete boxes 10-16)	<b>9</b> ** 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)

<b>11</b> Departure city / location	<b>12</b> Departure date	<b>13</b> Destination city / location	<b>14</b> Arrival date
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<b>15</b> Means of transportation	<b>16</b> Purpose of travel
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# POLITICAL EXPENDITURES

# SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.		<b>1</b> PAGE # Schedule: 9/23 Report: 20/39	
<b>2</b> FILER NAME Meyers, W. A. (Mr.)		<b>3</b> ACCOUNT # (Ethics Commission filers) 0000	
<b>4</b> Date  10/06/2008	<b>5</b> Payee name Fort Bend Exchange Club  <b>6</b> Payee address; City; State; Zip Code ..... 4400 Palm Royale Sugar Land, TX 77479	<b>7</b> Amount (\$)  \$300.00	
<b>8</b> Purpose of payment (See instructions regarding type of information required.) Donation/Political advertising  <input type="checkbox"/> Payment for travel outside Texas (complete boxes 10-16)		<b>9</b> ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name:  Office sought: Office held:	
<b>10</b> Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)			
<b>11</b> Departure city / location	<b>12</b> Departure date	<b>13</b> Destination city / location	<b>14</b> Arrival date
<b>15</b> Means of transportation		<b>16</b> Purpose of travel	
<b>4</b> Date  10/09/2008	<b>5</b> Payee name Fort Bend Horse Task Force  <b>6</b> Payee address; City; State; Zip Code ..... 1402 Bend Road # 100 Rosenberg, TX 77471	<b>7</b> Amount (\$)  \$150.00	
<b>8</b> Purpose of payment (See instructions regarding type of information required.) Donation to community service organization  <input type="checkbox"/> Payment for travel outside Texas (complete boxes 10-16)		<b>9</b> ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name:  Office sought: Office held:	
<b>10</b> Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)			
<b>11</b> Departure city / location	<b>12</b> Departure date	<b>13</b> Destination city / location	<b>14</b> Arrival date
<b>15</b> Means of transportation		<b>16</b> Purpose of travel	

# POLITICAL EXPENDITURES

# SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

**1** PAGE #  
Schedule: 10/23 Report: 21/39

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

**3** ACCOUNT # (Ethics Commission filers)  
0000

<b>4</b> Date	<b>5</b> Payee name Fort Bend Independent Newspaper,	<b>7</b> Amount (\$)
07/14/2008	<b>6</b> Payee address; City; State; Zip Code 10701 Corporate Drive # 282 Stafford, TX 77477	\$3,000.00

<b>8</b> Purpose of payment (See instructions regarding type of information required.) Polital Advertising  <input type="checkbox"/> Payment for travel outside Texas (complete boxes 10-16)	<b>9</b> ** 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)

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

<b>4</b> Date	<b>5</b> Payee name Fort Bend Republican Party	<b>7</b> Amount (\$)
10/31/2008	<b>6</b> Payee address; City; State; Zip Code 3218 Oakland Drive Sugar Land, TX 77479	\$1,180.00

<b>8</b> Purpose of payment (See instructions regarding type of information required.) In-kind contribution (MPrinting & Graphics) robo calls  <input type="checkbox"/> Payment for travel outside Texas (complete boxes 10-16)	<b>9</b> ** 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)

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

# POLITICAL EXPENDITURES

# SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.		<b>1</b> PAGE # Schedule: 11/23 Report: 22/39	
<b>2</b> FILER NAME Meyers, W. A. (Mr.)		<b>3</b> ACCOUNT # (Ethics Commission filers) 0000	
<b>4</b> Date  12/01/2008	<b>5</b> Payee name Fort Bend Republican Party  ..... <b>6</b> Payee address; City; State; Zip Code 3218 Oakland Drive Sugar Land, TX 77479	<b>7</b> Amount (\$)  \$300.00	
<b>8</b> Purpose of payment (See instructions regarding type of information required.) Contribution for Republican Party Christmas Party Event  <input type="checkbox"/> Payment for travel outside Texas (complete boxes 10-16)		<b>9</b> ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name:  Office sought: Office held:	
<b>10</b> Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)			
<b>11</b> Departure city / location	<b>12</b> Departure date	<b>13</b> Destination city / location	<b>14</b> Arrival date
<b>15</b> Means of transportation		<b>16</b> Purpose of travel	
<b>4</b> Date  12/01/2008	<b>5</b> Payee name Fort Bend Republican Party  ..... <b>6</b> Payee address; City; State; Zip Code 3218 Oakland Drive Sugar Land, TX 77479	<b>7</b> Amount (\$)  \$301.00	
<b>8</b> Purpose of payment (See instructions regarding type of information required.) Contribution for political mailout  <input type="checkbox"/> Payment for travel outside Texas (complete boxes 10-16)		<b>9</b> ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name:  Office sought: Office held:	
<b>10</b> Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)			
<b>11</b> Departure city / location	<b>12</b> Departure date	<b>13</b> Destination city / location	<b>14</b> Arrival date
<b>15</b> Means of transportation		<b>16</b> Purpose of travel	

**POLITICAL EXPENDITURES****SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.				<b>1</b> PAGE # Schedule: 12/23 Report: 23/39	
<b>2</b> FILER NAME Meyers, W. A. (Mr.)			<b>3</b> ACCOUNT # (Ethics Commission filers) 0000		
<b>4</b> Date  07/28/2008	<b>5</b> Payee name Houston Livestock Show & Rodeo  <b>6</b> Payee address; City; State; Zip Code 319 William Morton Richmond, TX 77469			<b>7</b> Amount (\$)  \$150.00	
<b>8</b> Purpose of payment (See instructions regarding type of information required.) Donation/Ad  <input type="checkbox"/> Payment for travel outside Texas (complete boxes 10-16)			<b>9</b> ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name:  Office sought: Office held:		
<b>10</b> Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)					
<b>11</b> Departure city / location		<b>12</b> Departure date	<b>13</b> Destination city / location		<b>14</b> Arrival date
<b>15</b> Means of transportation			<b>16</b> Purpose of travel		
<b>4</b> Date  11/25/2008	<b>5</b> Payee name Impressive Printing  <b>6</b> Payee address; City; State; Zip Code 3727 Greenbriar Stafford, TX 77477			<b>7</b> Amount (\$)  \$143.21	
<b>8</b> Purpose of payment (See instructions regarding type of information required.) Campaign Stationary for campaign fundraiser  <input type="checkbox"/> Payment for travel outside Texas (complete boxes 10-16)			<b>9</b> ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name:  Office sought: Office held:		
<b>10</b> Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)					
<b>11</b> Departure city / location		<b>12</b> Departure date	<b>13</b> Destination city / location		<b>14</b> Arrival date
<b>15</b> Means of transportation			<b>16</b> Purpose of travel		

# POLITICAL EXPENDITURES

# SCHEDULE F

The <b>INSTRUCTION GUIDE</b> explains how to complete this form.		<b>1</b> PAGE # Schedule: 13/23 Report: 24/39	
<b>2</b> FILER NAME Meyers, W. A. (Mr.)		<b>3</b> ACCOUNT # (Ethics Commission filers) 0000	
<b>4</b> Date  12/12/2008	<b>5</b> Payee name Impressive Printing  <b>6</b> Payee address; City; State; Zip Code 3727 Greenbriar Stafford, TX 77477	<b>7</b> Amount (\$)  \$84.54	
<b>8</b> Purpose of payment (See instructions regarding type of information required.) Campaign Stationary for campaign fundraiser  <input type="checkbox"/> Payment for travel outside Texas (complete boxes 10-16)		<b>9</b> ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name:  Office sought: Office held:	
<b>10</b> Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)			
<b>11</b> Departure city / location	<b>12</b> Departure date	<b>13</b> Destination city / location	<b>14</b> Arrival date
<b>15</b> Means of transportation		<b>16</b> Purpose of travel	
<b>4</b> Date  12/18/2008	<b>5</b> Payee name Impressive Printing  <b>6</b> Payee address; City; State; Zip Code 3727 Greenbriar Stafford, TX 77477	<b>7</b> Amount (\$)  \$84.54	
<b>8</b> Purpose of payment (See instructions regarding type of information required.) Campaign Stationary for campaign fundraiser  <input type="checkbox"/> Payment for travel outside Texas (complete boxes 10-16)		<b>9</b> ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name:  Office sought: Office held:	
<b>10</b> Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)			
<b>11</b> Departure city / location	<b>12</b> Departure date	<b>13</b> Destination city / location	<b>14</b> Arrival date
<b>15</b> Means of transportation		<b>16</b> Purpose of travel	



# POLITICAL EXPENDITURES

# SCHEDULE F

The **INSTRUCTION GUIDE** explains how to complete this form.

**1** PAGE #  
Schedule: 14/23 Report: 25/39

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

**3** ACCOUNT # (Ethics Commission filers)  
0000

<b>4</b> Date	<b>5</b> Payee name Mulder Services	<b>7</b> Amount (\$)
09/09/2008	<b>6</b> Payee address; City; State; Zip Code 1011 Highway 6 S. Houston, TX 77077	\$1,500.00

<b>8</b> Purpose of payment (See instructions regarding type of information required.) Campaign Web Site Re-Design/Data Management  <input type="checkbox"/> Payment for travel outside Texas (complete boxes 10-16)	<b>9</b> ** 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)

<b>11</b> Departure city / location	<b>12</b> Departure date	<b>13</b> Destination city / location	<b>14</b> Arrival date
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<b>15</b> Means of transportation	<b>16</b> Purpose of travel
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<b>4</b> Date	<b>5</b> Payee name Office Depot	<b>7</b> Amount (\$)
07/14/2008	<b>6</b> Payee address; City; State; Zip Code 11815 Wilcrest Houston, TX 77031	\$61.69

<b>8</b> Purpose of payment (See instructions regarding type of information required.) Office Supplies for campaign  <input type="checkbox"/> Payment for travel outside Texas (complete boxes 10-16)	<b>9</b> ** 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)

<b>11</b> Departure city / location	<b>12</b> Departure date	<b>13</b> Destination city / location	<b>14</b> Arrival date
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<b>15</b> Means of transportation	<b>16</b> Purpose of travel
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# POLITICAL EXPENDITURES

# SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

**1** PAGE #  
Schedule: 15/23 Report: 26/39

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

**3** ACCOUNT # (Ethics Commission filers)  
0000

<b>4</b> Date	<b>5</b> Payee name Office Depot	<b>7</b> Amount (\$)
11/24/2008	<b>6</b> Payee address; City; State; Zip Code 11815 Wilcrest Houston, TX 77031	\$100.40

<b>8</b> Purpose of payment (See instructions regarding type of information required.) Campaign Fundraiser expenses - supplies	<b>9</b> ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name:
<input type="checkbox"/> 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)

<b>11</b> Departure city / location	<b>12</b> Departure date	<b>13</b> Destination city / location	<b>14</b> Arrival date
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<b>15</b> Means of transportation	<b>16</b> Purpose of travel
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<b>4</b> Date	<b>5</b> Payee name Office Depot	<b>7</b> Amount (\$)
12/05/2008	<b>6</b> Payee address; City; State; Zip Code 6129 C Edloe Street Houston, TX 77005	\$420.51

<b>8</b> Purpose of payment (See instructions regarding type of information required.) in-kind contribution to campaign (Office Depot) mailout	<b>9</b> ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name:
<input type="checkbox"/> 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)

<b>11</b> Departure city / location	<b>12</b> Departure date	<b>13</b> Destination city / location	<b>14</b> Arrival date
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<b>15</b> Means of transportation	<b>16</b> Purpose of travel
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**POLITICAL EXPENDITURES****SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

**1** PAGE #  
Schedule: 16/23 Report: 27/39**2** FILER NAME Meyers, W. A. (Mr.)**3** ACCOUNT # (Ethics Commission filers)  
0000

<b>4</b> Date  12/15/2008	<b>5</b> Payee name Office Depot	<b>7</b> Amount (\$)  \$150.66
<b>6</b> Payee address; City; State; Zip Code 11815 Wilcrest Houston, TX 77031		

<b>8</b> Purpose of payment (See instructions regarding type of information required.) Campaign Fundraiser expenses - supplies  <input type="checkbox"/> Payment for travel outside Texas (complete boxes 10-16)	<b>9</b> ** 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)

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

<b>4</b> Date  11/20/2008	<b>5</b> Payee name Pete Olson Campaign	<b>7</b> Amount (\$)  \$300.00
<b>6</b> Payee address; City; State; Zip Code P O Box 16381 Sugar Land, TX 77496		

<b>8</b> Purpose of payment (See instructions regarding type of information required.) Contribution to campaign  <input type="checkbox"/> Payment for travel outside Texas (complete boxes 10-16)	<b>9</b> ** 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)

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

**POLITICAL EXPENDITURES****SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.				1 PAGE # Schedule: 17/23 Report: 28/39	
2 FILER NAME Meyers, W. A. (Mr.)			3 ACCOUNT # (Ethics Commission filers) 0000		
4 Date  11/28/2008	5 Payee name Quorum Report		7 Amount (\$)  \$388.62		
		6 Payee address; City; State; Zip Code 8407 S. 1st Street Austin, TX 78748			
8 Purpose of payment (See instructions regarding type of information required.) Subscription to political online newsletter  <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  09/09/2008	5 Payee name Republican Party of Fort Bend County / Lynda Mixon		7 Amount (\$)  \$1,000.00		
		6 Payee address; City; State; Zip Code 3218 Oakland Dr. Sugar Land, TX 77479			
8 Purpose of payment (See instructions regarding type of information required.) Contribution to County Republican Party  <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: 18/23 Report: 29/39	
2 FILER NAME Meyers, W. A. (Mr.)			3 ACCOUNT # (Ethics Commission filers) 0000		
4 Date  10/09/2008	5 Payee name Republican Party of Fort Bend County / Lynda Mixon  6 Payee address; City; State; Zip Code 3218 Oakland Dr. Sugar Land, TX 77479			7 Amount (\$)  \$800.00	
8 Purpose of payment (See instructions regarding type of information required.) Political Ad in County Republican Party Newsletter  <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  12/01/2008	5 Payee name Rose/Rich Chamber of Commerce  6 Payee address; City; State; Zip Code 4120 Avenue H Rosenberg, TX 77459			7 Amount (\$)  \$250.00	
8 Purpose of payment (See instructions regarding type of information required.) Dues to Rose/Rich Chamber of Commerce  <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.		<b>1</b> PAGE # Schedule: 19/23 Report: 30/39	
<b>2</b> FILER NAME Meyers, W. A. (Mr.)		<b>3</b> ACCOUNT # (Ethics Commission filers) 0000	
<b>4</b> Date  09/15/2008	<b>5</b> Payee name Shell Oil  ..... <b>6</b> Payee address; City; State; Zip Code 12602 Southwest Freeway Stafford, TX 77477	<b>7</b> Amount (\$)  \$99.00	
<b>8</b> Purpose of payment (See instructions regarding type of information required.) Fuel for campaign pickup truck for political sign location/installation  <input type="checkbox"/> Payment for travel outside Texas (complete boxes 10-16)		<b>9</b> ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name:  Office sought: Office held:	
<b>10</b> Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)			
<b>11</b> Departure city / location	<b>12</b> Departure date	<b>13</b> Destination city / location	<b>14</b> Arrival date
<b>15</b> Means of transportation		<b>16</b> Purpose of travel	
<b>4</b> Date  10/31/2008	<b>5</b> Payee name Sprint PCS  ..... <b>6</b> Payee address; City; State; Zip Code P.O. Box 660750 Dallas, TX 75266	<b>7</b> Amount (\$)  \$387.20	
<b>8</b> Purpose of payment (See instructions regarding type of information required.) Expense of Campaign Cell phone  <input type="checkbox"/> Payment for travel outside Texas (complete boxes 10-16)		<b>9</b> ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name:  Office sought: Office held:	
<b>10</b> Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)			
<b>11</b> Departure city / location	<b>12</b> Departure date	<b>13</b> Destination city / location	<b>14</b> Arrival date
<b>15</b> Means of transportation		<b>16</b> Purpose of travel	

# POLITICAL EXPENDITURES

# SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

**1** PAGE #  
Schedule: 20/23 Report: 31/39

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

**3** ACCOUNT # (Ethics Commission filers)  
0000

<b>4</b> Date	<b>5</b> Payee name US Postoffice	<b>7</b> Amount (\$)
12/12/2008	<b>6</b> Payee address; City; State; Zip Code Postoffice Stafford, TX 77477	\$448.00

<b>8</b> Purpose of payment (See instructions regarding type of information required.) Postage for Campaign Fundraiser / Rent Post Office Box for Campaign  <input type="checkbox"/> Payment for travel outside Texas (complete boxes 10-16)	<b>9</b> ** 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)

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

<b>4</b> Date	<b>5</b> Payee name Violence Against Women Prevention Asso.	<b>7</b> Amount (\$)
10/16/2008	<b>6</b> Payee address; City; State; Zip Code 10505 Cash Road Stafford, TX 77477	\$300.00

<b>8</b> Purpose of payment (See instructions regarding type of information required.) Donation to community service organization/advertising  <input type="checkbox"/> Payment for travel outside Texas (complete boxes 10-16)	<b>9</b> ** 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)

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

**POLITICAL EXPENDITURES****SCHEDULE F**

The <b>INSTRUCTION GUIDE</b> explains how to complete this form.				<b>1</b> PAGE # Schedule: 21/23 Report: 32/39	
<b>2</b> FILER NAME Meyers, W. A. (Mr.)			<b>3</b> ACCOUNT # (Ethics Commission filers) 0000		
<b>4</b> Date  07/30/2008	<b>5</b> Payee name W. A. Meyers		<b>7</b> Amount (\$)  \$548.62		
		<b>6</b> Payee address; City; State; Zip Code 423 Longview Drive Sugar Land, TX 77478			
<b>8</b> Purpose of payment (See instructions regarding type of information required.) Reimburse political expenditures from personal funds Pr Yr Rpt. & campaign use of personal car  <input type="checkbox"/> Payment for travel outside Texas (complete boxes 10-16)			<b>9</b> ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name:  Office sought: Office held:		
<b>10</b> Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)					
<b>11</b> Departure city / location		<b>12</b> Departure date	<b>13</b> Destination city / location		<b>14</b> Arrival date
<b>15</b> Means of transportation			<b>16</b> Purpose of travel		
<b>4</b> Date  11/10/2008	<b>5</b> Payee name W. A. Meyers		<b>7</b> Amount (\$)  \$498.94		
		<b>6</b> Payee address; City; State; Zip Code 423 Longview Drive Sugar Land, TX 77478			
<b>8</b> Purpose of payment (See instructions regarding type of information required.) Reimburse political expenditures from personal funds Pr Yr Rpt & campaign use of personal car  <input type="checkbox"/> Payment for travel outside Texas (complete boxes 10-16)			<b>9</b> ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name:  Office sought: Office held:		
<b>10</b> Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)					
<b>11</b> Departure city / location		<b>12</b> Departure date	<b>13</b> Destination city / location		<b>14</b> Arrival date
<b>15</b> Means of transportation			<b>16</b> Purpose of travel		



**POLITICAL EXPENDITURES****SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

**1** PAGE #  
Schedule: 22/23 Report: 33/39**2** FILER NAME Meyers, W. A. (Mr.)**3** ACCOUNT # (Ethics Commission filers)  
0000**4** Date  
  
09/23/2008**5** Payee name  
West Fort Bend Republican Women's Club**7** Amount  
(\$)  
  
\$40.00**6** Payee address; City; State; Zip Code  
24503 Falcon Point  
Katy, TX 77494**8** Purpose of payment  
(See instructions regarding type of information required.) 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  
  
07/29/2008**5** Payee name  
Windstream Telephone**7** Amount  
(\$)  
  
\$101.43**6** Payee address; City; State; Zip Code  
8306 Hwy 90A  
Sugar Land, TX 77478**8** Purpose of payment  
(See instructions regarding type of information required.)  
Campaign phone/fax 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: 23/23 Report: 34/39**2** FILER NAME Meyers, W. A. (Mr.)**3** ACCOUNT # (Ethics Commission filers)  
0000**4** Date

12/09/2008

**5** Payee name  
Windstream Telephone**6** Payee address; City; State; Zip Code  
P.O. Box 9001908  
Louisville, KY 40290**7** Amount  
(\$)

\$203.50

**8** Purpose of payment  
(See instructions regarding type of information required.)  
Campaign ISP; phone/fax 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: 1/5 Report: 35/39

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

**3** ACCOUNT # (Ethics Commission filers)  
0000

<b>4</b> Date  07/11/2008	<b>5</b> Payee name Harris County Toll Road Authority  <b>6</b> Payee address; City; State; Zip Code 330 Meadowfern Houston, TX 77067	<b>7</b> Amount (\$)  \$40.00  <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

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)

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

<b>4</b> Date  07/29/2008	<b>5</b> Payee name Harris County Toll Road Authority  <b>6</b> Payee address; City; State; Zip Code 330 Meadowfern Houston, TX 77067	<b>7</b> Amount (\$)  \$40.00  <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

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)

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

# POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

## SCHEDULE G

The <b>INSTRUCTION GUIDE</b> explains how to complete this form.		<b>1</b> PAGE # Schedule: 2/5 Report: 36/39	
<b>2</b> FILER NAME Meyers, W. A. (Mr.)		<b>3</b> ACCOUNT # (Ethics Commission filers) 0000	
<b>4</b> Date  10/06/2008	<b>5</b> Payee name Harris County Toll Road Authority  <b>6</b> Payee address; City; State; Zip Code 330 Meadowfern Houston, TX 77067	<b>7</b> Amount (\$)  \$40.00	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
<b>8</b> 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)			
<b>9</b> Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)			
<b>10</b> Departure city / location	<b>11</b> Departure date	<b>12</b> Destination city / location	<b>13</b> Arrival date
<b>14</b> Means of transportation		<b>15</b> Purpose of travel	
<b>4</b> Date  10/26/2008	<b>5</b> Payee name Harris County Toll Road Authority  <b>6</b> Payee address; City; State; Zip Code 330 Meadowfern Houston, TX 77067	<b>7</b> Amount (\$)  \$40.00	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
<b>8</b> 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)			
<b>9</b> Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)			
<b>10</b> Departure city / location	<b>11</b> Departure date	<b>12</b> Destination city / location	<b>13</b> Arrival date
<b>14</b> Means of transportation		<b>15</b> Purpose of travel	

# POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

## SCHEDULE G

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #  
Schedule: 3/5 Report: 37/39

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

3 ACCOUNT # (Ethics Commission filers)  
0000

4 Date	5 Payee name Harris County Toll Road Authority	7 Amount (\$)
11/26/2008	6 Payee address; City; State; Zip Code 330 Meadowfern Houston, TX 77067	\$40.00
		<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

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	5 Payee name Harris County Toll Road Authority	7 Amount (\$)
12/12/2008	6 Payee address; City; State; Zip Code 330 Meadowfern Houston, TX 77067	\$40.00
		<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

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: 4/5 Report: 38/39

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

3 ACCOUNT # (Ethics Commission filers)  
0000

4 Date 08/20/2008	5 Payee name Sugar Land Rotary	7 Amount (\$) \$15.00
6 Payee address; City; State; Zip Code 4400 Palm Royale Drive Sugar Land, TX 77479		<input checked="" type="checkbox"/> Reimbursement from political contributions intended

8 Purpose of expenditure  
(See instructions regarding type of information required.)  
Rotary Meeting

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 09/03/2008	5 Payee name Sugar Land Rotary	7 Amount (\$) \$100.00
6 Payee address; City; State; Zip Code 4400 Palm Royale Drive Sugar Land, TX 77479		<input checked="" type="checkbox"/> Reimbursement from political contributions intended

8 Purpose of expenditure  
(See instructions regarding type of information required.)  
Donation Rotary Foundation

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: 5/5 Report: 39/39

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

3 ACCOUNT # (Ethics Commission filers)  
0000

4 Date

12/11/2008

5 Payee name  
West Fort Bend Republican Women's Club

6 Payee address; City; State; Zip Code  
24503 Falcon Point  
Katy, TX 77494

7 Amount  
(\$)

\$15.00

Reimbursement from  
political contributions  
intended

8 Purpose of expenditure  
(See instructions regarding type of information required.)  
Republican Club Dues

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

08/14/2008

5 Payee name  
Windstream Telephone

6 Payee address; City; State; Zip Code  
P.O. Box 9001908  
Louisville, KY 40290

7 Amount  
(\$)

\$77.28

Reimbursement from  
political contributions  
intended

8 Purpose of expenditure  
(See instructions regarding type of information required.)  
Campaign phone/fax

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