CANDIDAT CAMPAIGN		FORM C/OH COVER SHEET PG 1			
he C/OH Instruction	Guide explains how to compl	ete this form.	ID .	2 Total pages	filed:
CANDIDATE /	MS / MRS / MR	FIRST	MI	OFFICE	USE ONLY
OFFICEHOLDER NAME		W. A. "Andy"		Date Received	· ·
	NICKNAME	LAST Meyers	SUFFIX		JAN 5 2022
CANDIDATE /	ADDRESS / PO BOX; APT	/ SUITE #; CITY;	ZIP CODE	Date Hand-delivered	or Date Postmarked
OFFICEHOLDER MAILING	423 Longview Dr.			Receipt #	Amount
ADDRESS  Change of Address	Sugar Land, TX 77478				
				Date Processed	
				Date Imaged	
CAMPAIGN TREASURER NAME	MS / MRS / MR	FIRST	MI	<u> </u>	·
	NICKNAME	LAST	SUFFIX		
CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO	50% ( 22, 62),	APT / SUITE #; CITY		FATE; ZIP CODE
CAMPAIGN TREASURER PHONE	AREA CODE PHON	E NUMBER EXTENSION	ON		
REPORT TYPE	X January 15  July 15	30th day before election 8th day before election	Runoff  Exceeded modified reporting limit 3800	appointment (of	
PERIOD COVERED	Month Day Year 07/01/2021	THROUGH	Month Day Day 0 2023 12/31/20	· · · · · · · · · · · · · · · · · · ·	103.00
0 ELECTION	ELECTION DATE Month Day Year	Primary General	ELECTION TYPE Runoff Special	Other	
1 OFFICE	OFFICE HELD (if any) County Commissioner Pct	•	County Commis		
		COTORAC			1
	was Ethios Commission	GO TO PAG		·	ersion V1 1 ah070f02
orms provided by Te	xas Ethics Commission	www.ethics.state	e.tx.us	Vo	ersion V1.1.ab979f0

ORIGINAL

# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

## FORM C/OH **COVER SHEET PG 2**

				2 of 11				
13 C / OH NAME	Meyers, W. A. "Andy	.  1	.4 Filer ID	· · · · · · · · · · · · · · · · · · ·				
15 NOTICE FROM POLITICAL COMMITTEE(S)	This box is for notice of candidate / officeholder. consent. Candidates and	e candidate's or officeho	older's knowledge or					
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME						
🛏	GENERAL							
		COMMITTEE ADDRESS						
	SPECIFIC							
		COMMITTEE CAMPAIGN TREASURER NAME						
		COMMITTEE CAMPAIGN TREASURER ADDRESS						
16 CONTRIBUTION TOTALS		IZED POLITICAL CONTRIBUTIONS (OTHER THAN ES OF LOANS, OR CONTRIBUTIONS MADE ELEC		\$ 0.00				
		CAL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS)		\$ 4,000.00				
EXPENDITURE TOTALS	3. TOTAL UNITEM	IZED POLITICAL EXPENDITURES		\$ 1,024.22				
	4. TOTAL POLITIC	CAL EXPENDITURES		<b>\$</b> 15,336.23				
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE LAS	ST DAY OF THE	\$ 99,046.69				
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS O	OF THE LAST DAY	\$ 0.00				
17 AFFIDAVIT	DIANA DOB Notary Public, State of Comm. Expires 01-1 Notary ID 13185	of Texas 7-2023 326-6	of perjury, that the accordinformation required to be the second of the	pe reported by me				
		aidA	_, this the5	rhday				
Signature of office	cer administering	Printed name of officer administering	Title of officer a	dministering oath				

## FORM C/OH **SUBTOTALS - C/OH COVER SHEET PG 3** 3 of 11 19 Filer ID **18 FILER NAME** Meyers, W. A. "Andy" **20 SCHEDULE SUBTOTALS** SUBTOTAL AMOUNT NAME OF SCHEDULE SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS X 4,000.00 \$ SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS SCHEDULE B: PLEDGED CONTRIBUTIONS \$ SCHEDULE E: LOANS SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS \$ 15,336.23 SCHEDULE F2: UNPAID INCURRED OBLIGATIONS SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS \$ 10. SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS \$ SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED 12. X \$ 1,213.58 TO FILER

MONET	TARY POLITICAL CONTRIBUTION	ONS	SCHEDUI	LE A1
The Instru	action Guide explains how to complete this t	form.	1 Total pages Schedule A1: Sch: 1/1 Rpt: 4/11	
FILER NAME			3 Filer ID	
Meyers, W.	5 Full name of contributor out-of-state PAC (ID#:		7 Amount of Contribution (\$)	
10/25/2021		7 Amount or Continuation (C)	\$500.00	
	6 Contributor address; City; State; Zip Code 1807 Breezy Bend Dr.			
	Katy, TX 77494			
3 Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions	)	
Date	Full name of contributor  ut-of-state PAC (ID#:	)	Amount of Contribution (\$)	
07/28/2021	Johnson, Gabriel		(,,	\$1,000.00
	Contributor address; City; State; Zip Code			
	9407 Reston Grove Lane			
	Houston, TX 77093			
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	)	
	,	Land Tejas	,	
Date	Full name of contributor  ut-of-state PAC (ID#:		Amount of Contribution (\$)	
07/26/2021	OTHON, CHARLES & KAREN			\$2,500.00
	Contributor address; City; State; Zip Code 5906 LAGUNA FALLS CT			
	Houston, TX 77041			
Principal occi	upation / Job title (See Instructions)	Employer (See Instructions	)	<u>-</u>
	•			
	•			
		•		
	by Texas Ethics Commission www.ethic	s.state.tx.us		1.1.ab979f0

#### SCHEDULE F1

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

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

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment			Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services	Office Overhe Polling Expen Printing Expe Salaries/Wag	Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)	
	Credit Card Payment		The Instruction Guide expl	ains how to comp	lete this form.	
1	Total pages Schedule F1:	2 FILER NAM	lE			3 Filer ID
ı	Sch: 1/6 Rpt: 5/11	Meyers, W	/. A. "Andy"			
4	Date	5 Payee nam	e			
	12/08/2021	Ben's Chu				
6	Amount (\$)	7 Payee addr	ess; City; S	tate; Zip Code		
	\$497.50	4104 Pola	-	, .,		
	,					
		Wallis, TX	77485			
8	PURPOSE			105	) Baradala	
8	OF		See Categories listed at the top of the	is schedule) (D	Description  Check if travel or	utside of Texas. Complete Schedule T.
	EXPENDITURE		ons/Donations Made By /Officeholder/Political Co	mmittee	<b>=</b>	TX, officeholder living expense
					Christmas Lun	ich for Fort Bend Road & Bridge
l						
9	Complete ONLY if direct	Candidate/Of	ficeholder name	Office sough	<u> </u>	Office held
	expenditure to benefit C/O	Н		·		
	Date	Payee name				
	07/27/2021	Cubesmar				
H	Amount (\$)	Payee addr		tate; Zip Code		
	\$109.00	23110 FM	•	tate, Zip Code		
	Ψ103.00	231101101	1035			
		Richmond	TX 77046			
	PURPOSE	(a) Category	See Categories listed at the top of thi	s schedule) (b	) Description	
	OF EXPENDITURE	Office Ove	rhead/Rental Expense	ļ	_	itside of Texas. Complete Schedule T.
			,		Storage Space	TX, officeholder living expense
				ļ	Storage Space	Rental
_	Complete ONLY if direct	Candidate/Of	ficeholder name	Office sought	<del></del>	Office held
	expenditure to benefit C/Ol		niceriolider frame	Onice sough		Office field
	Date	Payee name	•			
	10/25/2021	Cubesmar	t			
	Amount (\$)	Payee addre	ess; City; S	tate; Zip Code		
	\$109.00	23110 FM	1093			
		Richmond,	TX 77046			
	PURPOSE OF		See Categories listed at the top of thi	s schedule) (b)	Description	toide of Toyon Complete School de T
	EXPENDITURE	Office Ove	rhead/Rental Expense			tside of Texas. Complete Schedule T. X, officeholder tiving expense
					Storage Space	
_	Complete ONLY if direct	Candidate/∩f	ficeholder name	Office sought	<del></del>	Office held
	expenditure to benefit C/OI			g		

#### SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

	Contributions/ Oonations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID
	Sch: 2/6 Rpt: 6/11	Meyers, W. A. "Andy"
4	Date	5 Payee name
	10/26/2021	Essentials Restaurant
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,448.44	2731 FM 1463 #800
L		Katy, TX 77494
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)
1	EXPENDITURE	Dinner Meeting MUD & HOA Directors  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
l		Dinner Meeting MUD & HOA Directors
ı		
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	H
	Date	Payee name
	12/01/2021	FORT BEND FAIR ASSOCIATION
Г	Amount (\$)	Payee address; City; State; Zip Code
l	\$8,250.00	4310 SH 36
		ROSENBERG, TX 77471
Г	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
	LAFENDITORE	Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense
ĺ		Donation to County Fair
┝	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
F	Date	Payee name
	10/12/2021	Flathouse, Lauren
Г	Amount (\$)	Payee address; City; State; Zip Code
	\$172.66	13131 Diary Ashford # 390
l		Sugar Land, TX 77478
H	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas, Complete Schedule T.
l	EXPENDITORE	Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense
		Breakfast for Elementary School Teachers
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
Н		

#### SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

**EXPENDITURE CATEGORIES FOR BOX 8(a)** Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Fees Food/Beverage Expense

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		mmittee	Gift/Awards/Memorials Expensional Services  The Instruction Guide expension of the Instruction Guide expension of the Instruction Guide expension of the Instruction of the Instruction Guide expension of the Instruction Guide expension of the Instruction of the	Salaries/	Wages	s/Contract Labor	Travel Out of District OTHER (enter a category	y not listed above)
1 - 1	Total pages Schedule F1:	12	FILER NAME				3	Filer ID	
	Sch: 3/6 Rpt: 7/11	L	Meyers, W.	. A. "Andy"					
4	Date	5	Payee name	1					
	12/06/2021		Go Daddy						
6	Amount (\$)	7	Payee addres	ess; City;	State; Zip Co	ode		-	<u> </u>
	\$313.60		14455 N Ha	ayden Rd Ste 226					
				,					
L			Scottsdale,	AZ 85260					
8	PURPOSE	(a)	Category (S	ee Categories listed at the top of	of this schedule)	(b)	Description		
	OF EXPENDITURE		Advertising				<b>⊑</b>	tside of Texas. Complete Sch	
	EAF ENDITORIE							X, officeholder living expense	e
		١,					Website Charge	es	
L						L			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Offi	iceholder name	Office sou	ught		Office held	
	Date		Payee name						
	10/19/2021		Katy Rotary	/					
$\vdash$	Amount (\$)	$\vdash$	Payee address	ess; City;	State; Zip Co	ode			
	\$222.00		•	d Parkway E	C	3			
	<b>VLL</b>		1400 0141.5	T dikway =					
			Katy, TX 77	494		_			
	PURPOSE	(a)		ee Categories listed at the top of		(b)	Description		
	OF EXPENDITURE			ns/Donations Made B			브	side of Texas. Complete Sch	
			Candidate/C	Officeholder/Political	Committee		_	X, officeholder living expense	a
							Dues to Service	e Organization	
L		乚				Ļ			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Office	iceholder name	Office sou	ught		Office held	
	experiulture to beliefit oron	'							
	Date		Payee name						
	10/19/2021		Katy Rotary						
$\vdash$	Amount (\$)	$\vdash$	Payee addres		State; Zip Co	ode			
	\$221.45		1450 Grand		State, Lip Co	Juc			
	<b>Φ221.4</b> 3		1450 Granu	Parkway E					
									•
			Katy, TX 77	494					
Г	PURPOSE	(a)	Category (Se	ee Categories listed at the top o	of this schedule)	(b)	Description		
	OF EXPENDITURE		Contribution	ns/Donations Made B	Ву			side of Texas. Complete Sch	
	EXPENDITURE		Candidate/C	Officeholder/Political	Committee		_	X, officeholder living expense	9
							Dues to Service	e Organization	
Г	Complete ONLY if direct		Candidate/Offic	iceholder name	Office sou	ıght		Office held	
	expenditure to benefit C/OF	4							
$\vdash$						_			
1									

#### SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

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

Fees Food/Be

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

	Contributions/ Donations Made By Candidate/Officeholder/Political Credit Card Payment		Gift/Awards/Memorials Legal Services The Instruction Gu		Printing Exp Salaries/Wa	ges/Con		Travel Out of District OTHER (enter a category not listed about	ove)
1	Total pages Schedule F1:	2 FILER	NAME				3	Filer ID	
	Sch: 4/6 Rpt: 8/11	Meye	rs, W. A. "Andy"						
4	Date	5 Payee							
	10/29/2021	Mcafe	e						
6	Amount (\$)	7 Payee	address; City;	State;	Zip Cod	е			
	\$140.71	5000	Headquarters Dr.						
L		Plano	, TX 75024						
8	PURPOSE	(a) Catego	Ory (See Categories listed at th	e top of this sched	<sub>dule)</sub> (	b) De	scription		
	OF EXPENDITURE	Antivi	rus Software					tside of Texas. Complete Schedule T. X, officeholder living expense	
l			***	•	i	<b>∟</b> An		are annual charge	
								and anniced change	
9	Complete ONLY if direct	Candida	te/Officeholder name	Of	ffice soug	ht		Office held	
ľ	expenditure to benefit C/O		ac, omeen order manie	0.				Cindo Noia	
┍	Date	Payee	name						
l	09/01/2021	Norto	n						
H	Amount (\$)	Payee	address; City;	State;	Zip Cod	e			-
l	\$113.65		Ilis Street		·				
		Moun	tain View, CA 94043			_			
Г	PURPOSE	(a) Categ	Ory (See Categories listed at th	e top of this sched	dule) (	b) De	scription		
1	OF EXPENDITURE	Antivi	rus Software		- 1			tside of Texas. Complete Schedule T.	
l						LI An	itivirus Softw	X, officeholder living expense	·
l						,	itivii as coitiv	are onarge	
┝	Complete ONLY if direct	Candida	te/Officeholder name	Of	ffice soug	ht		Office held	
l	expenditure to benefit C/O	+							
⊨	Date	Payee	nomo						
1	07/14/2021		idt, Judy						
⊢				Ctata	7im Cod				
	Amount (\$)	_	address; City;	State;	Zip Cod	е			
l	\$118.69	4120	Avenue H						
ĺ		_							
L			nberg, TX 77471						
l	PURPOSE OF		Ory (See Categories listed at th		dule) (	b) De	scription		
ı	EXPENDITURE		butions/Donations Ma date/Officeholder/Poli		#00	H		tside of Texas. Complete Schedule T. X, officeholder living expense	
		Canu	date/Oniceriolder/Foli	licai Commit		C	ntribution to		
1									
H	Complete ONLY if direct	Candida	ite/Officeholder name	Of	ffice soug	ht		Office held	
	expenditure to benefit C/O			3.		-			
$\vdash$									

#### SCHEDULE F1

Advertising Expense Accounting/Banking

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Food/Beverage Expense Gift/Awards/Memorials Expe Legal Services The Instruction Guide	ense Pr Sa		ense ges/Contract Labor	Travel in District Travel Out of District OTHER (enter a category not list	ed above)
1	Total pages Schodulo F1:	I SUED NAME		exhiguis 110V	TO COM	piete tilis torili.	a Filer ID	
1	Total pages Schedule F1: Sch: 5/6 Rpt: 9/11	Meyers, W					3 Filer ID	
4	Date	5 Payee name						
	12/08/2021	Smith, Keli						
6	Amount (\$)	7 Payee addre	ess; City;	State; Z	ip Code	<del></del>	<del></del>	
1	\$750.00	1124 Blume	•	, Z	. J.			
	1,00,00							
		Rosenberg	, TX 77471					
8	PURPOSE	(a) Category (s	ee Categories listed at the top	o of this schedule	(l	b) Description		
	OF EXPENDITURE	Contribution	ns/Donations Made	Ву		<b>=</b>	outside of Texas. Complete Schedule T	•
		Candidate/	Officeholder/Politica	u Committe	e		n, TX, officeholder living expense	16 District
		<u>'</u>				Christinas Di	nner for Fort Bend Drainag	ac District
٥	Complete ONLY if direct	Candidata/O#	iceholder name	0#:-	e sough	nt	Office held	
	expenditure to benefit C/O		oenoluer name	Опіс	e sougl		Office field	
Γ	Date	Payee name						
	07/13/2021	Sprint PC						
	Amount (\$)	Payee addre	ss; City;	State; Z	ip Code	9		
	\$119.32	P.O. Box 60	60075					
		Dallas, TX	75266-0075					
Г	PURPOSE	(a) Category (s	ee Categories listed at the top	of this schedule	e) (t	Description		
	OF EXPENDITURE		Phones & Ipad		` <b>\</b> `	Check if travel	outside of Texas. Complete Schedule T	
	LAFERDITORE					<b>—</b>	, TX, officeholder living expense	205
						Campaign Ph	nones & Ipad monthly char	yes
	Complete ONLY if direct	Candidate/Offi	iceholder name	Offic	e sough	nt	Office held	·
	expenditure to benefit C/OF				_ Jougi		536 Hold	
	Date	Payee name						
	09/13/2021	Sprint PC						
_	Amount (\$)	Payee addre	ss; City;	State; Z	ip Code	;		
	\$126.39	P.O. Box 66						
		Dallas, TX	75266-0075					
	PURPOSE		ee Categories listed at the top	of this schedule	e) (b	Description		
	. OF EXPENDITURE	Campaign I	Phones & IPad			_	outside of Texas. Complete Schedule T. , TX, officeholder living expense	
							, TX, officeholder living expense ones & IPad monthly charg	es
						Jampaign PC	an anoming charg	30
_	Complete ONLY if discar	Candidate/Off	ceholder name	Offic	e sough	<u> </u>	Office held	
	Complete ONLY if direct expenditure to benefit C/OF		centiuei naine	Onic	e sougr	14	Onice field	
				_				

#### SCHEDULE F1

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

Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District

	Candidate/Officeholder/Politica Credit Card Payment		mmitte <b>e</b>	Legal Services  The Instruction Guid	Sa		ages/	//Contract Labor OTHER (enter a category not listed above)	
1	Total pages Schedule F1:	2	FILER NAME	<u> </u>				3 Filer ID	
•	Sch: 6/6 Rpt: 10/11	_	Meyers, W.						
4	Date	5	Payee name						
	10/13/2021		Sprint PC						
6	Amount (\$)	7	Payee addre	ss; City;	State; Z	Zip Cod	de		
	\$115.78		P.O. Box 6	60075					
			Dallas, TX	75266-0075					
8	PURPOSE	(a)	Category (s	ee Categories listed at the	top of this schedu	ıle)	(b)	Description	
	OF EXPENDITURE			Phones & IPad		1		Check if travel outside of Texas. Complete Schedule T.	
	EXPERDITORE							Check if Austin, TX, officeholder living expense	
l						l		Campaign Phones & IPad monthly charges	
L									
9	Complete ONLY if direct expenditure to benefit C/O		Candidate/Off	iceholder name	Offi	ce soug	ght	Office held	
⊨	Data		Douge						
	Date 07/20/2021	l	Payee name						
L	07/20/2021	L	Squarespa	ce, inc.					
	Amount (\$)	1	Payee addre		State; 2	Zip Coo	de		
l	\$233.82	l	225 Varick	Street 12th Floor					
		ĺ							
	•		New York,	NY 10014					
┢	PURPOSE	(a	Category (s	ee Categories listed at the	ton of this schedu	ite)	(b)	Description	<del>-</del>
ı	OF	ľ	Advertising		top of this serieud	,		Check if travel outside of Texas. Complete Schedule T.	
l	EXPENDITURE	l				- 1		Check if Austin, TX, officeholder living expense	
ı		l						Advertising	
		ĺ				- 1			
Γ	Complete ONLY if direct		Candidate/Off	iceholder name	Offi	ice souç	ght	Office held	
	expenditure to benefit C/O	Н							
F	Date	T	Payee name						
	08/16/2021	l	•	end Republican	Women's Ch	narity			
┝		┡					<del>.</del> –		
	Amount (\$)			ess; City;	State; 2	Zip Coo	de		
l	\$1,250.00		1012 Morto	on St.				•	
l		ı							
		l	Richmond,	TX 77469					
Г	PURPOSE	(a	Category (s	See Categories listed at the	e top of this schedu	ute)	(b)	Description	
	OF			ns/Donations Mad	•			Check if travel outside of Texas. Complete Schedule T.	
ı	EXPENDITURE		Candidate/	Officeholder/Polit	ical Committe	ee		Check if Austin, TX, officeholder living expense	
Ĺ								Donation to Charity	
L		L							
	Complete ONLY if direct		Candidate/Off	iceholder name	Offi	ice souç	ght	Office held	
	expenditure to benefit C/O	Н							
Г		_							

# INTEREST, CREDITS, GAINS, REFUNDS, AND SCHEDULE K **CONTRIBUTIONS RETURNED TO FILER** 1 Total pages Schedule K: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 11/11 2 FILER NAME 3 Filer ID Meyers, W. A. "Andy" 4 Date 5 Name of person from whom amount is received 8 Amount (\$) 07/15/2021 \$1,213.58 Meyers, Wilton 6 Address of person from whom amount is received; City; State; Zip Code 423 Longview Drive Sugar Land, TX 77478 Purpose for which amount is received Check if political contribution returned to filer

www.ethics.state.tx.us

Forms provided by Texas Ethics Commission

Version V1.1.ab979f02