FORM C/OH **CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Total pages filed: 1 Filer ID 2 The C/OH Instruction Guide explains how to complete this form. 35 MS/MRS/MR FIRST MI CANDIDATE / 3 OFFICE USE ONLY OFFICEHOLDER W. A. "Andy" NAME Date Received LAST SUFFIX NICKNAME Meyers OCT 7 2024 RCVD Date Hand-delivered or Date Postmarked ADDRESS / PO BOX; APT / SUITE #; ZIP CODE 4 CANDIDATE / CITY; OFFICEHOLDER 2242 Sunset Trails MAILING Receipt # Amount ADDRESS Change of Address Sugar Land, TX 77478 Date Processed Date Imaged CAMPAIGN FIRST MI MS/MRS/MR 5 TREASURER Debra NAME Meyers SUFFIX NICKNAME STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE CAMPAIGN 6 TREASURER 423 Longview Dr. Sugar Land, Texas 77478 ADDRESS (Residence or Business) AREA CODE CAMPAIGN PHONE NUMBER EXTENSION TREASURER PHONE 281-753-0395 8 REPORT TYPE 15th day after campaign treasurer appointment (officeholder only) January 15 X 30th day before election Runoff Final Report (Attach C/OH-FR) July 15 8th day before election Exceeded modified reporting limit PERIOD Month Day Year Month Day Year 9 COVERED THROUGH 10/05/2024 07/01/2024 **10** ELECTION ELECTION DATE **ELECTION TYPE** Month Day Year Primary Runoff Othe 11/05/2024 X General Special 11 OFFICE OFFICE HELD (if any) 12 OFFICE SOUGHT (if known) County Commissioner Pct. 3 County Commissioner Pct. 3 Fort Bend **GO TO PAGE 2** Version V4.1.0.48da51f7 Forms provided by Texas Ethics Commission www.ethics.state.tx.us

	The Instruc	ction Guide explains how to complete this form.	1		s Schedule A1: Rpt: 7/35	
2	FILER NAME Meyers, W. A	A "Andy"	3	Filer ID		
4	Date 08/20/2024	 5 Full name of contributor out-of-state PAC (ID#:	7	Amount of	Contribution (\$)	\$1,000.0
8	Principal occur	Dallas, TX 75252 Dation / Job title (See Instructions) 9 Employer (See Instru	ctions)			
	Date 08/22/2024	Full name of contributor out-of-state PAC (ID#:		Amount of	Contribution (\$)	\$1,000.
	Principal occup	pation / Job title (See Instructions) Employer (See Instru	ctions)			
	Date 09/16/2024	Full name of contributor out-of-state PAC (ID#: Jajoo, Harish Contributor address; City; State; Zip Code 62 Bradford Cir Sugar Land, TX 77479		Amount of	Contribution (\$)	\$3,000.
	Principal occup	Dation / Job title (See Instructions) Employer (See Instru	ctions)			
	Date 08/22/2024	Full name of contributor out-of-state PAC (ID#: Janak, Larry Contributor address; City; State; Zip Code 19215 Cohen Green Ln Houston, TX 77094		Amount of	Contribution (\$)	\$5,000.
	Principal occup	Dation / Job title (See Instructions) Employer (See Instru	ctions)			
	Date 08/05/2024	Full name of contributor out-of-state PAC (ID#: John, Telfryn Contributor address; City; State; Zip Code 15430 Woodland Orchard Ln Cypress, TX 77433		Amount of	Contribution (\$)	\$5,000.
-	Principal occur	bation / Job title (See Instructions) Employer (See Instru	ctions)			

MONETARY POLITICAL CONTRIBUTIO	ICAL CONTRIBUTIO	NS
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SCHEDULE A1

iction Guide explains how to complete this	form.			
		3 Filer ID		
A. "Andy"				
Miller, Erik 6 Contributor address; City; State; Zip Code 5454 Jackwood St.	#:)	7 Amount	o ^f Contribution (\$)	\$2,500.0
	9 Employer (See Instructions	;)		
	1			
Moacyr, Marcelo & Angela Contributor address; City; State; Zip Code 5719 Martinique Pass	#:)	Amount		\$1,000.0
	Employer (See Instructions	;)		
Morris, Jay Contributor address; City; State; Zip Code		Amount	of Contribution (\$)	\$5,000.0
Cypress, TX 77433	Employer (See Instructions	;)		
Full name of contributor out-of-state PAC (ID#	#:)	Amount	of Contribution (\$)	
Narayanappa, Harish				\$1,000.0
Contributor address; City; State; Zip Code 5110 Camden Haven Lane Sugar Land, TX 77479				
upation / Job title (See Instructions)	Employer (See Instructions EPIC	;)		
	#:)	Amount	of Contribution (\$)	\$1,000.0
Contributor address; City; State; Zip Code 21310 Lochmere Lane Katy, TX 77450				
		5)		
	A. "Andy" A. "Andy" Full name of contributor	A. *Andy" 5 Full name of contributor	Jaction Guide explains how to complete this form. Sch: 6/. Sch: 6/. 3 Filer ID A. "Andy" Sch: 6/. 5454 Gentributor address; City; State; Zip Code 7 Amount Moacyr, Marcelo & Angela Contributor address; City; State; Zip Code Amount Marcelo & Angela Amount Contributor address; City; State; Zip Code Amount Sugar Land, TX 77478 Employer (See Instructions) Full name of contributor out-of-state PAC (ID#:) Morris, Jay Amount Contributor address; City; State; Zip Code Amount 16210 Rolling View Tri Out-of-state PAC (ID#:) Cypress, TX 77433 Employer (See Instructions) Full name of contributor Out-of-state PAC (ID#:) Amount Amount Narayanappa, Harish	Sch: 010 kpt: 9/35 A. "Andy" 5 Full name of contributor out-of-state PAC (ID#

MONETA	ARY POLITICAL CONTRIBUTIC	ONS		SCHEDU	_e A1
The Instruct	tion Guide explains how to complete this f	orm.		es Schedule A1: 0 Rpt: 10/35	
2 FILER NAME Meyers, W. A.	. "Andy"		3 Filer ID		
4 Date 09/05/2024	 Full name of contributor out-of-state PAC (ID#:_Quiddity PAC Contributor address; City; State; Zip Code 6330 West Loop S. #260 Bellaire, TX 77401 		7 Amount c	f Contribution (\$)	\$2,500.00
B Principal occup	ation / Job title (See Instructions)	9 Employer (See Instructions)		
Date 08/22/2024	Full name of contributor out-of-state PAC (ID#:_ Ramsey, Robert Contributor address; City; State; Zip Code 5603 Mimosa Ln Richmond, TX 77406)	Amount c	f Contribution (\$)	\$150.00
Principal occup	ation / Job title (See Instructions)	Employer (See Instructions)		
Date 08/01/2024	Full name of contributor out-of-state PAC (ID#: Randermann, Randy Contributor address; City; State; Zip Code 4860 James Ln)	Amount c	of Contribution (\$)	\$1,500.00
Principal occup	Fulshear, TX 77441 ation / Job title (See Instructions)	Employer (See Instructions)		
Date 08/22/2024	Full name of contributorout-of-state PAC (ID#: Rapolu, Vijaya Contributor address; City; State; Zip Code 27822 Acacia Glen Ln. Katy, TX 77494)	Amount c	of Contribution (\$)	\$7,500.00
Principal occup	ation / Job title (See Instructions)	Employer (See Instructions)		
Date 08/15/2024	Full name of contributor out-of-state PAC (ID#:_ Republican Women's Club of Katy Contributor address; City; State; Zip Code 9550 Spring Green Blvd # 408-122 Katy, TX 77494)	Amount c	of Contribution (\$)	\$800.00
Principal occup	ation / Job title (See Instructions)	Employer (See Instructions)		
	y Texas Ethics Commission www.ethics	s.state.tx.us		Version V4.:	0.484251

М	IONET	ARY POLITICAL CONTRIBUTIONS			SCHEDU	LE A1
Th	ne Instruc	ction Guide explains how to complete this form.	1		s Schedule A1: Rpt: 11/35	
	ER NAME	A "Andy"	3	Filer ID		
4 Da		 5 Full name of contributor out-of-state PAC (ID#:) Rodrigo, A.M. 6 Contributor address; City; State; Zip Code 15514 Turtle Oak Ct. Houston, TX 77059 	7	Amount of	Contribution (\$)	\$1,000.00
8 Pri	incipal occu	pation / Job title (See Instructions) 9 Employer (See Instructions)	ons)			
Da 08	nte 5/22/2024	Full name of contributor out-of-state PAC (ID#:) Sass, Walter		Amount o	f Contribution (\$)	\$1,000.00
Pri	incipal occu	pation / Job title (See Instructions) Employer (See Instructions)	ons)			
Da 09	ute 0/21/2024	Full name of contributor out-of-state PAC (ID#:) Shah, Vinod Contributor address; City; State; Zip Code 7015 Paxton Court		Amount o	f Contribution (\$)	\$201.00
Pri	incipal occu	Sugar Land, TX 77479 pation / Job title (See Instructions) Employer (See Instructions)	ons)			
Da 09	nte 1/06/2024	Full name of contributor out-of-state PAC (ID#:) Sharma, Priya Ontributor address; City; State; Zip Code 4611 Valerie St. Bellaire, TX 77401		Amount of	f Contribution (\$)	\$2,500.00
Pri	ncipal occu	pation / Job title (See Instructions) Employer (See Instruction	ons)			
Da 08	nte 5/22/2024	Full name of contributor out-of-state PAC (ID#:) Sreerama, Karun Ontributor address; City; State; Zip Code 4406 Orange Leaf Ct. Houston , TX 77059		Amount of	f Contribution (\$)	\$2,500.00
Pri	ncipal occu	pation / Job title (See Instructions) Employer (See Instructions)	ons)			
	orouided	by Texas Ethics Commission www.ethics.state.tx.us			Version V4.1	0 4845516

The Instr	action Guide explains how to complete this form.	1	Total pages Sch: 9/10 F	Schedule A1: Rpt: 12/35	
2 FILER NAM		3	Filer ID		
Meyers, W	and the second	7	Amount of C	Contribution (\$)	
4 Date 08/19/2024	5 Full name of contributor out-of-state PAC (ID#:) Stevens, Charles 6 Contributor address; City; State; Zip Code 14531 FM 529 # 160	,	Amount of C		\$1,000.
	Houston, TX 77095				
8 Principal oc	upation / Job title (See Instructions) 9 Employer (See Instructions	;)			
Date	Full name of contributor out-of-state PAC (ID#:)	-	Amount of C	Contribution (\$)	- <u>1</u>
08/20/2024	Strange, Jon & Sue Contributor address; City; State; Zip Code 722 Pin Oak Road, #202A Katy, TX 77494				\$1,000.
Principal oc	upation / Job title (See Instructions) Employer (See Instructions	5)			
Date 08/16/2024	Full name of contributor X out-of-state PAC (ID#: C00457853 TSVC, Inc PAC Contributor address; City; State; Zip Code 10841 S. Ridgeview Rd. Clathe, KS 86061		Amount of C	Contribution (\$)	\$1,000.
Principal oc	Supation / Job title (See Instructions) Employer (See Instructions	5)			
Date 08/22/2024	Full name of contributor out-of-state PAC (ID#:) Turner, Llarance Contributor address; City; State; Zip Code P.O. Box 481 Stafford, TX 77497		Amount of C	Contribution (\$)	\$1,000.
Principal oc	supation / Job title (See Instructions) Employer (See Instructions	5)			
Date	Full name of contributor out-of-state PAC (ID#:)	Г	Amount of C	Contribution (\$)	
08/02/2024	Vesta Rea & Associates LLC Contributor address; City; State; Zip Code P.O. Box 73643				\$200
	Houston, TX 77279-3643 upation / Job title (See Instructions) Employer (See Instructions)				

MONETARY POLITICAL CONTRIE	BUTIONS		SCHEDULE A1
The Instruction Guide explains how to comple	te this form.		es Schedule A1: 10 Rpt: 13/35
FILER NAME		3 Filer ID	
Meyers, W. A. "Andy" Date 08/22/2024 5 Full name of contributor 08/22/2024 6 Contributor address; City; State; Zip Code 129 Adderley Blvd. Madison MS 20110		_) 7 Amount o	f Contribution (\$) \$500.C
Madison, MS 39110 Principal occupation / Job title (See Instructions)	9 Employer (See Instru	ctions)	

CONTRIBUTIO	NS		SCHEDULE F
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made Candidate/Officeholder/Politi Credit Card Payment		al Expense Solicitation/Fun al Expense Transportation I Travel in Distric Travel Out of Di act Labor OTHER (enter a	
Total pages Schedule F1		3 Filer ID	
Sch: 1/22 Rpt: 14/35	Meyers, W. A. "Andy"		
Date 07/01/2024	5 Payee name Academy		
Amount (\$) \$226.16	7 Payee address; City; State; Zip Code 23155 Katy Fwy		
PURPOSE	Katy, TX 77450 (a) Category (See Categories listed at the top of this schedule) (b) Desi	adiation	
OF	HQ Equipment	Check if travel outside of Texas, Con Check if Austin, TX, officeholder livin Npaign HQ Equipment	
Complete ONLY if direct expenditure to benefit C/0	Candidate/Officeholder name Office sought DH	Office h	eld
Date	Payee name		
08/01/2024	Aguilar, Laura		
	Aguilar, Laura Payee address; City; State; Zip Code 6110 Reeds Ferry		
08/01/2024 Amount (\$)	Aguilar, Laura Payee address; City; State; Zip Code 6110 Reeds Ferry Houston, TX 77041 (a) Category (see Categories listed at the top of this schedule) (b) Desc Salaries/Wages/Contract Labor Contract Labor	Cription Theck if travel outside of Texas. Con Theck if Austin, TX, officeholder livin npaign Worker	
08/01/2024 Amount (\$) \$390.00 PURPOSE OF	Aguilar, Laura Payee address; City; State; Zip Code 6110 Reeds Ferry Houston, TX 77041 (a) Category (see Categories listed at the top of this schedule) (b) Desc Salaries/Wages/Contract Labor Candidate/Officeholder name Office sought	Check if travel outside of Texas, Con Check if Austin, TX, officeholder livin	g expense
08/01/2024 Amount (\$) \$390.00 PURPOSE OF EXPENDITURE	Aguilar, Laura Payee address; City; State; Zip Code 6110 Reeds Ferry Houston, TX 77041 (a) Category (see Categories listed at the top of this schedule) (b) Desc Salaries/Wages/Contract Labor Candidate/Officeholder name Office sought	Check if travel outside of Texas, Con Check if Austin, TX, officeholder livin npaign Worker	g expense
08/01/2024 Amount (\$) \$390.00 PURPOSE OF EXPENDITURE Complete <u>ONLY</u> if direct expenditure to benefit C/0	Aguilar, Laura Payee address; City; State; Zip Code 6110 Reeds Ferry Houston, TX 77041 (a) Category (see Categories listed at the top of this schedule) (b) Desc Salaries/Wages/Contract Labor Candidate/Officeholder name Office sought	Check if travel outside of Texas, Con Check if Austin, TX, officeholder livin npaign Worker	g expense
08/01/2024 Amount (\$) \$390.00 PURPOSE OF EXPENDITURE Complete <u>ONLY</u> if direct expenditure to benefit C/0 Date	Aguilar, Laura Payee address; City; State; Zip Code 6110 Reeds Ferry Houston, TX 77041 (a) Category (see Categories listed at the top of this schedule) (b) Desc Salaries/Wages/Contract Labor Candidate/Officeholder name Office sought Candidate/Officeholder name Office sought Office sought Payee name Aguilar, Laura Payee address; City; State; Zip Code	Check if travel outside of Texas, Con Check if Austin, TX, officeholder livin npaign Worker	g expense
08/01/2024 Amount (\$) \$390.00 PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/0 Date 07/12/2024 Amount (\$)	Aguilar, Laura Payee address; City; State; Zip Code 6110 Reeds Ferry Houston, TX 77041 (a) Category (see Categories listed at the top of this schedule) (b) Desc Salaries/Wages/Contract Labor Candidate/Officeholder name Office sought Candidate/Officeholder name Office sought Office sought Payee name Aguilar, Laura Payee address; City; State; Zip Code	Check if travel outside of Texas, Con Check if Austin, TX, officeholder livin npaign Worker	g expense
08/01/2024 Amount (\$) \$390.00 PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/0 Date 07/12/2024 Amount (\$)	Aguilar, Laura Payee address; City; State; Zip Code 6110 Reeds Ferry Houston, TX 77041 (a) Category (see Categories listed at the top of this schedule) (b) Desc Salaries/Wages/Contract Labor (b) Desc Candidate/Officeholder name Office sought OH Office sought Payee name Aguilar, Laura Payee address; City; State; Zip Code 6110 Reeds Ferry Houston, TX 77041 (a) Category (see Categories listed at the top of this schedule) (b) Desc Salaries/Wages/Contract Labor (c) Desc	Check if travel outside of Texas. Con Check if Austin, TX, officeholder livin npaign Worker Office h	g expense reld

CONTRIBUTION	PENDITURES FROM POLITIC	AL.	SCHEDULE F1
	EXPENDITURE CATEGORIES FO	DR BOX 8(a)	
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan R Fees Office C Food/Beverage Expense Polling (- Gift/Awards/Memorials Expense Printing	epayment/Reimbursement Solicit verhead/Rental Expense Travel Expense Travel Expense Travel //Wages/Contract Labor OTHER	ation/Fundraising Expense vortation Equipment & Related Expense in District Out of District R (enter a category not listed above)
Total pages Schedule F1: Sch: 2/22 Rpt: 15/35	2 FILER NAME Meyers, W. A. "Andy"	3 Filer	D
Date 07/26/2024	5 Payee name Aguilar, Laura		
Amount (\$) \$498.00	7 Payee address; City; State; Zip 0 6110 Reeds Ferry	Code	
PURPOSE OF EXPENDITURE	Houston, TX 77041 (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description Check if travel outside of Te Check if Austin, TX, officeho Campaign Worker	
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office so	Dught C	Office held
Date	Payee name		
08/03/2024	Aguilar, Laura		
Amount (\$) \$305.00	Payee address; City; State; Zip C 6110 Reeds Ferry Houston, TX 77041	Code	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description Check if travel outside of Te Check if Austin, TX, officeho Campaign Worker	
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office so	L Dught C	Office held
Date	Payee name		
08/10/2024	Aguilar, Laura		
Amount (\$) \$450.00	Payee address; City; State; Zip C 6110 Reeds Ferry	Code	
	Houston, TX 77041		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description Check if travel outside of Te Check if Austin, TX, officeho Campaign Worker	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office so	bught C	Office held
ns provided by Texas E	thics Commission www.ethics.state.tx	.us	Version V4.1.0.48da

	EXPENDITURE CATEGORIES FOR E	20X 9(a)	+
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made Candidate/Officeholder/Pol Credit Card Payment	Event Expense Loan Repaym Fees Office Overhe Food/Beverage Expense Polling Exper By - Git/Awards/Memorials Expense Printing Expe	ant/Reimbursement Solicitatio ad/Rental Expense Transport ise Travel in nse Travel ou es/Contract Labor OTHER (c	n/Fundraising Expense ation Equipment & Related Expense Jistrict t of District enter a category not listed above)
Total pages Schedule F	1: 2 FILER NAME	3 Filer ID	
Sch: 3/22 Rpt: 16/35	Meyers, W. A. "Andy"		· · · · · · · · · · · · · · · · · · ·
Date	5 Payee name		
08/22/2024	Aguilar, Laura		
Amount (\$) \$300.0	7 Payee address; City; State; Zip Code 6110 Reeds Ferry Houston, TX 77041		
DUDDO05			
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) (b Salaries/Wages/Contract Labor	Description Check if travel outside of Texas Check if Austin, TX, officeholde Campaign Worker	
Complete <u>ONLY</u> if direct expenditure to benefit C		t Offi	ce held
Date	Payee name		
08/30/2024	Aguilar, Laura		
Amount (\$) \$450.0	Payee address; City; State; Zip Code 6110 Reeds Ferry		
	Houston, TX 77041		
PURPOSE OF EXPENDITURE		Description Check if travel outside of Texas Check if Austin, TX, officeholde Campaign Worker	
OF	(a) Category (See Categories listed at the top of this schedule) (b) Salaries/Wages/Contract Labor (b) Candidate/Officeholder name Office sough	Check if travel outside of Texas Check if Austin, TX, officeholde Campaign Worker	
OF EXPENDITURE Complete ONLY if direct expenditure to benefit C. Date	(a) Category (See Categories listed at the top of this schedule) (b) Salaries/Wages/Contract Labor (b) Candidate/Officeholder name Office sough Payee name (b)	Check if travel outside of Texas Check if Austin, TX, officeholde Campaign Worker	living expense
OF EXPENDITURE Complete ONLY if direct expenditure to benefit C, Date 09/07/2024	(a) Category (See Categories listed at the top of this schedule) (b) Salaries/Wages/Contract Labor (b) Candidate/Officeholder name Office sough /OH Payee name Aguilar, Laura (b)	Check if travel outside of Texas Check if Austin, TX, officeholde Campaign Worker	living expense
OF EXPENDITURE Complete ONLY if direct expenditure to benefit C. Date	(a) Category (See Categories listed at the top of this schedule) (b) Salaries/Wages/Contract Labor (b) Candidate/Officeholder name Office sough Payee name Aguilar, Laura Payee address; City; State; Zip Code	Check if travel outside of Texas Check if Austin, TX, officeholde Campaign Worker	living expense
OF EXPENDITURE Complete ONLY if direct expenditure to benefit C. Date 09/07/2024 Amount (\$)	(a) Category (See Categories listed at the top of this schedule) (b) Salaries/Wages/Contract Labor (b) Candidate/Officeholder name Office sough Payee name Aguilar, Laura Payee address; City; State; Zip Code	Check if travel outside of Texas Check if Austin, TX, officeholde Campaign Worker	living expense
OF EXPENDITURE Complete ONLY if direct expenditure to benefit C. Date 09/07/2024 Amount (\$)	(a) Category (See Categories listed at the top of this schedule) (b) Salaries/Wages/Contract Labor (b) Candidate/Officeholder name Office sough OH Payee name Aguilar, Laura Payee address; City; State; Zip Code 0 6110 Reeds Ferry Houston, TX 77041	Check if travel outside of Texas Check if Austin, TX, officeholde Campaign Worker	living expense ce held

CONTRIBUTIO	PENDITURES FROM POLITICAL	SCHEDULE F1
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made I Candidate/Officeholder/Politie Credit Card Payment	Fees Office Overhead/Rental Expense Trans Food/Beverage Expense Polling Expense Trave By - Gift/Awards/Memorials Expense Printing Expense Trave	ation/Fundraising Expense portation Equipment & Related Expense in District Out of District R (enter a category not listed above)
Total pages Schedule F1: Sch: 4/22 Rpt: 17/35	2 FILER NAME 3 Filer Meyers, W. A. "Andy"	ID
Date 09/16/2024	5 Payee name Aguilar, Laura	
Amount (\$) \$405.00	7 Payee address; City; State; Zip Code 6110 Reeds Ferry	
PURPOSE OF EXPENDITURE	Houston, TX 77041 (a) Category (see Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description	exas. Complete Schedule T, older living expense
Complete <u>ONLY</u> if direct expenditure to benefit C/C		Office held
Date 09/20/2024	Payee name Aguilar, Laura	
A Description of the second	Aguilar, Laura Payee address; City; State; Zip Code 6110 Reeds Ferry	
09/20/2024 Amount (\$)	Aguilar, Laura Payee address; City; State; Zip Code 6110 Reeds Ferry Houston, TX 77041 (a) Category (See Categories listed at the top of this schedule) (b) Description	exas. Complete Schedule T. Iolder living expense
09/20/2024 Amount (\$) \$476.87 PURPOSE OF	Aguilar, Laura Payee address; City; State; Zip Code 6110 Reeds Ferry Houston, TX 77041 (a) Category (see Categories listed at the top of this schedule) Salaries/Wages/Contract Labor Candidate/Officeholder name Office sought	
09/20/2024 Amount (\$) \$476.87 PURPOSE OF EXPENDITURE Complete <u>ONLY</u> if direct	Aguilar, Laura Payee address; City; State; Zip Code 6110 Reeds Ferry Houston, TX 77041 (a) Category (see Categories listed at the top of this schedule) Salaries/Wages/Contract Labor Candidate/Officeholder name Office sought	olde living expense
09/20/2024 Amount (\$) \$476.87 PURPOSE OF EXPENDITURE Complete <u>ONLY</u> if direct expenditure to benefit C/0 Date	Aguilar, Laura Payee address; City; State; Zip Code 6110 Reeds Ferry Houston, TX 77041 (a) Category (see Categories listed at the top of this schedule) (b) Description Salaries/Wages/Contract Labor Candidate/Officeholder name Office sought Candidate/Officeholder name Office sought Payee name Aguilar, Laura Payee address; City; State; Zip Code	olde living expense
09/20/2024 Amount (\$) \$476.87 PURPOSE OF EXPENDITURE Complete <u>ONLY</u> if direct expenditure to benefit C/0 Date 10/01/2024 Amount (\$)	Aguilar, Laura Payee address; City; State; Zip Code 6110 Reeds Ferry Houston, TX 77041 (a) Category (see Categories listed at the top of this schedule) (b) Description Salaries/Wages/Contract Labor Candidate/Officeholder name Office sought Candidate/Officeholder name Office sought Payee name Aguilar, Laura Payee address; City; State; Zip Code 6110 Reeds Ferry Houston, TX 77041	olde living expense
09/20/2024 Amount (\$) \$476.87 PURPOSE OF EXPENDITURE Complete <u>ONLY</u> if direct expenditure to benefit C/0 Date 10/01/2024 Amount (\$)	Aguilar, Laura Payee address; City; State; Zip Code 6110 Reeds Ferry Houston, TX 77041 (a) Category (see Categories listed at the top of this schedule) Salaries/Wages/Contract Labor Candidate/Officeholder name Office sought Payee name Aguilar, Laura Payee address; City; State; Zip Code 6110 Reeds Ferry Houston, TX 77041 (a) Category (see Categories listed at the top of this schedule) Image: Category (see Categories listed at the top of this schedule)	older living expense Office held exas. Complete Schedule T.

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Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made E Candidate/Officeholder/Politic Credit Card Payment	Fees Office C Food/Beverage Expense Polling Ay - Gitt/Awards/Memorials Expense Printing al Committee Legal Services Salaries	epayment/Reimbursement werhead/Rental Expense Expense Expense /Wages/Contract Labor	Solicitation/Fundraising Exp Transportation Equipment a Travel in District Travel Out of District OTHER (enter a category n	& Related Expense
	The Instruction Guide explains how to o			
Total pages Schedule F1: Sch: 5/22 Rpt: 18/35	2 FILER NAME Meyers, W. A. "Andy"	3	Filer ID	
Date 08/20/2024	5 Payee name Alings Restaurant			
Amount (\$) \$433.00	7 Payee address; City; State; Zip C 6542 Highway 90 A	Code		
PURPOSE OF EXPENDITURE	Sugar Land, TX 77478 (a) Category (See Categories listed at the top of this schedule) Event Expense		ide of Texas. Complete Sche , officeholder living expense ENSES	dule T.
Complete ONLY if direct expenditure to benefit C/C	Candidate/Officeholder name Office so DH	L bught	Office held	
Date 10/05/2024	Payee name Arif, Aamna			
	Arif, Aamna Payee address; City; State; Zip C 13100 W. Bellfort Ave. # 1124	Code		
10/05/2024 Amount (\$)	Arif, Aamna Payee address; City; State; Zip C	(b) Description	ide of Texas Complete Sche , officeholder living expense :@r	dule T.
10/05/2024 Amount (\$) \$150.00 PURPOSE OF	Arif, Aamna Payee address; City; State; Zip C 13100 W. Bellfort Ave. # 1124 Houston, TX 77099 (a) Category (see categories listed at the top of this schedule) Salaries/Wages/Contract Labor Candidate/Officeholder name Office science	(b) Description Check if travel outs Check if Austin, T> Campaign Worl	officeholder living expense	dule T.
10/05/2024 Amount (\$) \$150.00 PURPOSE OF EXPENDITURE Complete <u>ONLY</u> if direct	Arif, Aamna Payee address; City; State; Zip C 13100 W. Bellfort Ave. # 1124 Houston, TX 77099 (a) Category (see categories listed at the top of this schedule) Salaries/Wages/Contract Labor Candidate/Officeholder name Office science	(b) Description Check if travel outs Check if Austin, T> Campaign Worl	, officeholder living expense CCT	dule T.
10/05/2024 Amount (\$) \$150.00 PURPOSE OF EXPENDITURE Complete <u>ONLY</u> if direct expenditure to benefit C/C	Arif, Aamna Payee address; City; State; Zip C 13100 W. Bellfort Ave. # 1124 Houston, TX 77099 (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor Candidate/Officeholder name Office schedule Payee name	(b) Description Check if travel outs Check if Austin, Ty Campaign Worl	, officeholder living expense CCT	dule T.
10/05/2024 Amount (\$) \$150.00 PURPOSE OF EXPENDITURE Complete <u>ONLY</u> if direct expenditure to benefit C/C Date 08/17/2024 Amount (\$)	Arif, Aamna Payee address; City; State; Zip C 13100 W. Bellfort Ave. # 1124 Houston, TX 77099 (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor Candidate/Officeholder name Office schedule Payee name Bronsell, Cody Payee address; City; State;	(b) Description Check if travel outs Check if Austin, Ty Campaign Worl	, officeholder living expense CCT	dułe T.
10/05/2024 Amount (\$) \$150.00 PURPOSE OF EXPENDITURE Complete <u>ONLY</u> if direct expenditure to benefit C/C Date 08/17/2024 Amount (\$)	Arif, Aamna Payee address; City; State; Zip O 13100 W. Bellfort Ave. # 1124 Houston, TX 77099 (a) Category (see Categories listed at the top of this schedule) Salaries/Wages/Contract Labor Candidate/Officeholder name Office sc Payee name Bronsell, Cody Payee address; City; State; Zip O 3010 Riverbend Dr.	(b) Description Check if travel outs Campaign Worl Campaign Worl Code Code (b) Description Check if travel outs	officeholde living expense cer Office held ide of Texas. Complete Sche officeholder living expense	

	NS	SCHEDULE F1
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B	Fees Office Overhead/Rental Expense Transportati Food/Beverage Expense Polling Expense Travel in Dis	
Candidate/Officeholder/Politic Credit Card Payment		ter a category not listed above)
Total pages Schedule F1:	2 FILER NAME 3 Filer ID	+
Sch: 6/22 Rpt: 19/35	Meyers, W. A. "Andy"	
Date 09/06/2024	5 Payee name Bulletlink	
Amount (\$) \$300.00	7 Payee address; City; State; Zip Code 16431 Sky Blue Ln	
	Houston, TX 77095	
PURPOSE OF EXPENDITURE	 (a) Category (see Categories listed at the top of this schedule) Fees (b) Description Check if travel outside of Texas. Check if Austin, TX, officeholder Subscription Fee 	
Complete <u>ONLY</u> if direct expenditure to benefit C/C		e held
Date	Payee name	
07/06/2024	Campaign Partners LLC	
Amount (\$) \$5,920.00	Payee address; City; State; Zip Code P.O. Box 655	
	Bellaire, TX 77402	
PURPOSE OF EXPENDITURE	Bellaire, TX 77402 (a) Category (see Categories listed at the top of this schedule) Consulting Expense (b) Description Check if travel outside of Texas. Check if Austin, TX, officeholder	
OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Consulting Expense Check if travel outside of Texas. Check if Austin, TX, officeholder Consulting Candidate/Officeholder name Office sought Office	
OF EXPENDITURE Complete ONLY if direct	(a) Category (See Categories listed at the top of this schedule) (b) Description Consulting Expense Check if travel outside of Texas. Check if Austin, TX, officeholder Consulting Candidate/Officeholder name Office sought Office	living expense
OF EXPENDITURE Complete <u>ONLY</u> if direct expenditure to benefit C/C Date	(a) Category (See Categories listed at the top of this schedule) (b) Description Consulting Expense Check if travel outside of Texas. Check if Austin, TX, officeholder Consulting Candidate/Officeholder name Office sought Office Payee name Campaign Partners LLC Payee address; City; State; Zip Code	living expense
OF EXPENDITURE Complete <u>ONLY</u> if direct expenditure to benefit C/C Date 07/20/2024 Amount (\$)	(a) Category (See Categories listed at the top of this schedule) (b) Description Consulting Expense Check if travel outside of Texas. Check if Austin, TX, officeholder Consulting Candidate/Officeholder name Office sought Office Payee name Campaign Partners LLC Payee address; City; State; Zip Code	living expense
OF EXPENDITURE Complete <u>ONLY</u> if direct expenditure to benefit C/C Date 07/20/2024 Amount (\$)	(a) Category (See Categories listed at the top of this schedule) (b) Description Consulting Expense Check if travel outside of Texas. Check if Austin, TX, officeholder Consulting Candidate/Officeholder name Office sought Office OH Payee name Campaign Partners LLC Payee address; City; State; Zip Code P.O. Box 655 State; Zip Code	living expense e held Complete Schedule T.

•	CONTRIBUTIO	PENDITURES FROM POLITICA NS				SCHEDULE F1
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic Credit Card Payment	Fees Office 0 Food/Beverage Expense Polling 1 y - Gift/Awards/Memorials Expense Printing	epayment/Reimburs Overhead/Rental Exp Expense J Expense s/Wages/Contract La	pense T T abor C	ransportatio ravel in Dist ravel Out of	
	Total pages Schedule F1: Sch: 7/22 Rpt: 20/35				iler ID	
ŀ	Date 08/02/2024	5 Payee name Campaign Partners LLC			-	
5	Amount (\$) \$27,056.02	7 Payee address; City; State; Zip C P.O. Box 655 Bellaire, TX 77402	Code			
3	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense				complete Schedule T. ving expense
•	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office so	ought		Office	held
-	Date	Payee name				
	08/23/2024	Campaign Partners LLC				
	08/23/2024 Amount (\$) \$13,300.00	Payee address; City; State; Zip C P.O. Box 655	Code			
	Amount (\$)	Payee address; City; State; Zip C	(b) Descript			Complete Schedule T. ving expense
	Amount (\$) \$13,300.00 PURPOSE OF	Payee address; City; State; Zip C P.O. Box 655 Bellaire, TX 77402 (a) Category (See Categories listed at the top of this schedule) Advertising Expense Candidate/Officeholder name Office sc	(b) Descript	k if travel outside		ving expense
	Amount (\$) \$13,300.00 PURPOSE OF EXPENDITURE Complete <u>ONLY</u> if direct	Payee address; City; State; Zip C P.O. Box 655 Bellaire, TX 77402 (a) Category (See Categories listed at the top of this schedule) Advertising Expense Candidate/Officeholder name Office sc	(b) Descript	k if travel outside	ficeholder liv	ving expense
	Amount (\$) \$13,300.00 PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/O Date	Payee address; City; State; Zip C P.O. Box 655 Bellaire, TX 77402 (a) Category (See Categories listed at the top of this schedule) Advertising Expense Candidate/Officeholder name Office sc H Payee name	(b) Descripi Check Check Ads Dought	k if travel outside	ficeholder liv	ving expense
	Amount (\$) \$13,300.00 PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/O Date 08/30/2024 Amount (\$)	Payee address; City; State; Zip C P.O. Box 655 Bellaire, TX 77402 (a) Category (see Categories listed at the top of this schedule) Advertising Expense Candidate/Officeholder name Office so H Payee name Campaign Partners LLC Payee address; City; State; Zip C P.O. Box 655	(b) Descript Code	k if ravel outside k if Austin, TX, of tiOn k if travel outside k if Austin, TX, of	Office	ving expense held

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	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Office Overhead/Rental Expense Transportation Food/Beverage Expense Polling Expense Travel in Dist Gitt/Awards/Memorials Expense Printing Expense Travel Out of	
	Total pages Schedule F1: Sch: 8/22 Rpt: 21/35	2 FILER NAME 3 Filer ID Meyers, W. A. "Andy"	
	Date 09/07/2024	5 Payee name Campaign Partners LLC	
	Amount (\$) \$6,487.28	7 Payee address; City; State; Zip Code P.O. Box 655	
		Bellaire, TX 77402	
	PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Construction Check if Austin, TX, officeholder invited of Ads 	
•	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office H	held
-	Date	Payee name	
	09/16/2024	Campaign Partners LLC	
	Amount (\$) \$20,000.00	Payee address; City; State; Zip Code P.O. Box 655	
		Bellaire, TX 77402	
	PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Comparison Check if Austin, TX, officeholder live Ads 	
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office H	held
-	Date 09/20/2024	Payee name Campaign Partners LLC	
	Amount (\$) \$12,372.87	Payee address; City; State; Zip Code P.O. Box 655	
		Bellaire, TX 77402	
_	PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Cr Check if Austin, TX, officeholder live Ads 	
			held
	Complete ONLY if direct expenditure to benefit C/O		

	CONTRIBUTIO	PENDITURES FROM POLITICANS	HL.		SCHEDULE F1
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Office C Food/Beverage Expense Polling Gift/Awards/Memorials Expense Printing	epayment/Reimbursement Dverhead/Rental Expense Expense j Expense s/Wages/Contract Labor	Transportation E Travel in District Travel Out of Di	
	Total pages Schedule F1:	2 FILER NAME		Filer ID	
	Sch: 9/22 Rpt: 22/35	Meyers, W. A. "Andy"			
	Date 10/01/2024	5 Payee name Campaign Partners LLC			
5	Amount (\$) \$55,925.39	7 Payee address; City; State; Zip C P.O. Box 655 Bellaire, TX 77402	Code		
3	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		tside of Texas. Com X, officeholder living	
)	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office so H	bught	Office h	eld
	Date	Payee name			
	09/09/2024	Central Fort Bend Chamber			
	09/09/2024 Amount (\$) \$355.00	Payee address; City; State; Zip C 4120 Avenue H	Code		
	Amount (\$) \$355.00	Payee address; City; State; Zip C 4120 Avenue H Rosenberg, TX 77471			
	Amount (\$)	Payee address; City; State; Zip C 4120 Avenue H	(b) Description	tside of Texas, Com X, officeholder living Xpense	
	Amount (\$) \$355.00 PURPOSE OF	Payee address; City; State; Zip C 4120 Avenue H Rosenberg, TX 77471 (a) Category (See Categories listed at the top of this schedule) Event Expense Candidate/Officeholder name Office sc	(b) Description Check if travel ou Check if Austin, T Participation E	X, officeholder living	g expense
	Amount (\$) \$355.00 PURPOSE OF EXPENDITURE Complete <u>ONLY</u> if direct	Payee address; City; State; Zip C 4120 Avenue H Rosenberg, TX 77471 (a) Category (See Categories listed at the top of this schedule) Event Expense Candidate/Officeholder name Office sc	(b) Description Check if travel ou Check if Austin, T Participation E	X, officeholder living Xpense	g expense
	Amount (\$) \$355.00 PURPOSE OF EXPENDITURE Complete <u>QNLY</u> if direct expenditure to benefit C/O	Payee address; City; State; Zip C 4120 Avenue H Rosenberg, TX 77471 (a) Category (See Categories listed at the top of this schedule) Event Expense Candidate/Officeholder name Office sc	(b) Description Check if travel ou Check if Austin, T Participation E	X, officeholder living Xpense	g expense
	Amount (\$) \$355.00 PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/O Date	Payee address; City; State; Zip C 4120 Avenue H Rosenberg, TX 77471 (a) Category (see Categories listed at the top of this schedule) Event Expense Candidate/Officeholder name Office sc H	(b) Description Check if travel ou Check if Austin, T Participation E Dught	X, officeholder living Xpense	g expense
	Amount (\$) \$355.00 PURPOSE OF EXPENDITURE Complete <u>ONLY</u> if direct expenditure to benefit C/OI Date 09/23/2024 Amount (\$)	Payee address; City; State; Zip C 4120 Avenue H Rosenberg, TX 77471 (a) Category (See Categories listed at the top of this schedule) Event Expense Event Expense Office schedule Payee name Office schedule Domminos Payee address; City; State; Zip C	(b) Description Check if travel ou Check if Austin, T Participation E Dught	X, officeholder living Xpense	g expense
	Amount (\$) \$355.00 PURPOSE OF EXPENDITURE Complete <u>ONLY</u> if direct expenditure to benefit C/OI Date 09/23/2024 Amount (\$)	Payee address; City; State; Zip C 4120 Avenue H Rosenberg, TX 77471 (a) Category (see Categories listed at the top of this schedule) Event Expense Event Expense Office schedule Candidate/Officeholder name Office schedule Payee name Domminos Payee address; City; State; Zip C 11920 Dairy Ashford Rd State; Zip C	(b) Description Check if travel ou Check if Austin, T Participation E Dought Code (b) Description Check if travel ou	x, officeholder living xpense Office h Side of Texas. Com X, officeholder living	g expense eld nplete Schedule T. g expense

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politica Credit Card Payment	Fees Office Ove Food/Beverage Expense Polling Exp Gift/Awards/Memorials Expense Printing Ex	yment/Reimbursement rhead/Rental Expense pense pense lages/Contract Labor	Transportatio Travel in Dis Travel Out of	
	Total pages Schedule F1: Sch: 10/22 Rpt: 23/35	2 FILER NAME Meyers, W. A. "Andy"		3 Filer ID	
ŀ	Date 08/26/2024	5 Payee name Facebook		_	
5	Amount (\$) \$246.77	 7 Payee address; City; State; Zip Col 1 Hacker Way Menlo Park, CA 94025 	de		
3	PURPOSE OF EXPENDITURE			outside of Texas. C , TX, officeholder li	Complete Schedule T. ving expense
)	Complete <u>ONLY</u> if direct expenditure to benefit C/O	l Candidate/Officeholder name Office soug H	ght	Office	held
	Date 07/22/2024	Payee name Facebook			
	Amount (\$)	Payee address; City; State; Zip Co	de		
	\$957.18	1 Hacker Way Menlo Park, CA 94025			
	\$957.18 PURPOSE OF EXPENDITURE	Menlo Park, CA 94025		, TX, officeholder li	complete Schedule T. ving expense
	PURPOSE OF	Menlo Park, CA 94025 (a) Category (See Categories listed at the top of this schedule) Advertising Expense Candidate/Officeholder name Office sour	Check if travel Check if Austin Online advert	, TX, officeholder li	ving expense
	PURPOSE OF EXPENDITURE Complete ONLY if direct	Menlo Park, CA 94025 (a) Category (See Categories listed at the top of this schedule) Advertising Expense Candidate/Officeholder name Office sour	Check if travel Check if Austin Online advert	, TX, officeholder li tising	ving expense
	PURPOSE OF EXPENDITURE Complete <u>ONLY</u> if direct expenditure to benefit C/O Date	Menlo Park, CA 94025 (a) Category (See Categories listed at the top of this schedule) Advertising Expense Candidate/Officeholder name Payee name Facebook Payee address; City; State; Zip Con 1 Hacker Way	Check if travel Check if Austin Online advert	, TX, officeholder li tising	ving expense
	PURPOSE OF EXPENDITURE Complete <u>QNLY</u> if direct expenditure to benefit C/O Date 07/17/2024 Amount (\$)	Menlo Park, CA 94025 (a) Category (See Categories listed at the top of this schedule) Advertising Expense Candidate/Officeholder name Payee name Facebook Payee address; City; State; Zip Cor 1 Hacker Way Menlo Park, CA 94025	Check if travel Check if Austin Online advert	, TX, officeholder in tising Office	ving expense • held

	PENDITURES FROM POLITICANS	AL.		SCHEDULE F1
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Office 0 Food/Beverage Expense Polling 1 - Gitt/Awards/Memorials Expense Printing	epayment/Reimbursement verhead/Rental Expense Expense Expense /Wages/Contract Labor	Transportation Travel in Dist Travel Out of	
Total pages Schedule F1: Sch: 11/22 Rpt: 24/35	2 FILER NAME Meyers, W. A. "Andy"		3 Filer ID	
Date 07/16/2024	5 Payee name Facebook			
Amount (\$) \$900.00	7 Payee address; City; State; Zip C 1 Hacker Way	Code		
PURPOSE OF EXPENDITURE	Menlo Park, CA 94025 (a) Category (See Categories listed at the top of this schedule) Advertising Expense		n, TX, officeholder li	complete Schedule T. ving expense
Complete <u>ONLY</u> if direct expenditure to benefit C/O		L Dught	Office	held
07/16/2024	Payee name Facebook			
Amount (\$) \$956.82	Payee address; City; State; Zip C 1 Hacker Way Menlo Park, CA 94025	Code		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense		n, TX, officeholder li	complete Schedule T. ving expense
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office so	bught	Office	held
Date 09/26/2024	Payee name Fort Bend Herald			
Amount (\$) \$850.00	Payee address; City; State; Zip C 1902 S. 4th Street Rosenberg, TX 77471	Code		
PURPOSE OF EXPENDITURE	(a) Category (see Categories listed at the top of this schedule) Advertising Expense		outside of Texas. C n, TX, officeholder li	complete Schedule T. ving expense
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office so H	bught	Office	held
		pught	Office	held
orms provided by Texas E	thics Commission www.ethics.state.tx	IIS		Version V4.1.0.48

POLITICAL EXE CONTRIBUTION	PENDITURES FROM POLITICA	AL		SCHEDULE F1
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Office C Food/Beverage Expense Polling I Gift/Awards/Memorials Expense Printing	epayment/Reimbursement iverhead/Rental Expense Expense Expense sWages/Contract Labor	Transportation Travel in Dist Travel Out of	
Total pages Schedule F1: Sch: 12/22 Rpt: 25/35	2 FILER NAME Meyers, W. A. "Andy"		3 Filer ID	
Date 09/13/2024	5 Payee name Fort Bend Seniors Asso.			
Amount (\$) \$1,186.90	 7 Payee address; City; State; Zip C 1330 Band Rd Rosenberg, TX 77471 	Code		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		outside of Texas. C n, TX, officeholder li	complete Schedule T. ving expense
Complete <u>ONLY</u> if direct expenditure to benefit C/O		pught	Office	held
Date 09/30/2024	Payee name Home Depot			
Amount (\$) \$118.01	Payee address; City; State; Zip C 5900 Hiway 6 S Missouri City, TX 77459	Code		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Campaign Signs		n, TX, officeholder li	• •
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office so	pught	Office	held
Date 09/03/2024	Payee name Home Depot			
Amount (\$) \$242.76	Payee address; City; State; Zip 0 5900 Hiway 6 S	Code		
	Missouri City, TX 77459			
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Campaign Signs		n, TX, officeholder li	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office se	bught	Office	e held
	thics Commission www.ethics.state.tx			Version V4.1.0.48da

CONTRIBUTI	UNS			
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Maa Candidate/Officeholder/Po Credit Card Payment	Fees Office C Food/Beverage Expense Polling Ie By Gitt/Awards/Memorials Expense Printing	epayment/Reimbursement Dverhead/Rental Expense Expense J Expense s/Wages/Contract Labor	Transportation Travel in Dist Travel Out of	
Total pages Schedule F		complete this form.	3 Filer ID	
Sch: 13/22 Rpt: 26/3				
Date 08/08/2024	5 Payee name Homeless Pets Placement			
Amount (\$) \$250.0	7 Payee address; City; State; Zip 0 P.O. Box 273027	Code		
	Houston, TX 77277			
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee		n, TX, officeholder in	tomplete Schedule T. ving expense
Complete <u>ONLY</u> if direct expenditure to benefit C		ought	Office	held
Date 08/21/2024	Payee name InkBlots			
	InkBlots Payee address; City; State; Zip o 3043 Silver Cedar Trail	Code		
08/21/2024 Amount (\$)	InkBlots Payee address; City; State; Zip ((b) Description	outside of Texas C n, TX, officeholder In	complete Schedule T. ving expense
08/21/2024 Amount (\$) \$263.0 PURPOSE OF	InkBlots Payee address; City; State; Zip (3043 Silver Cedar Trail Katy, TX 77449 (a) Category (See Categories listed at the top of this schedule) Advertising Expense tt Candidate/Officeholder name Office se	(b) Description Check if travel Check if Austir Advertising		ving expense
08/21/2024 Amount (\$) \$263.0 PURPOSE OF EXPENDITURE	InkBlots Payee address; City; State; Zip (3043 Silver Cedar Trail Katy, TX 77449 (a) Category (See Categories listed at the top of this schedule) Advertising Expense tt Candidate/Officeholder name Office se	(b) Description Check if travel Check if Austir Advertising	n, TX, officeholder liv	ving expense
08/21/2024 Amount (\$) \$263.0 PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C Date	InkBlots Payee address; City; State; Zip of 3043 Silver Cedar Trail Katy, TX 77449 (a) Category (see Categories listed at the top of this schedule) Advertising Expense Advertising Expense Payee name Layman, Maddox Payee address; City; State; Zip of 200 2814 Holmes Dr.	(b) Description Check if travel Check if Austir Advertising	n, TX, officeholder liv	ving expense
08/21/2024 Amount (\$) \$263.0 PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit O Date 08/17/2024 Amount (\$) \$225.0	InkBlots Payee address; City; State; Zip (3043 Silver Cedar Trail Katy, TX 77449 (a) Category (See Categories listed at the top of this schedule) Advertising Expense Advertising Expense Payee name Layman, Maddox Payee address; City; State; Zip (2814 Holmes Dr. Richmond, TX 77406	(b) Description Check if travel Check if Austir Advertising Dught	n, TX, officeholder liv	ving expense
08/21/2024 Amount (\$) \$263.0 PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit O Date 08/17/2024 Amount (\$)	InkBlots Payee address; City; State; Zip of 3043 Silver Cedar Trail Katy, TX 77449 (a) Category (see Categories listed at the top of this schedule) Advertising Expense Advertising Expense Payee name Layman, Maddox Payee address; City; State; Zip of 200 2814 Holmes Dr.	(b) Description Check if travel Check if Austir Advertising Dought Code (b) Description Check if travel	outside of Texas. C	ving expense held

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic Credit Card Payment	Fees Office Food/Beverage Expense Polling y - Gift/Awards/Memorials Expense Printin	Repayment/Reimbursement Overhead/Rental Expense Expense g Expense es/Wages/Contract Labor	Transportatio Travel in Dist Travel Out of	
Total pages Schedule F1: Sch: 14/22 Rpt: 27/35	2 FILER NAME Meyers, W. A. "Andy"		3 Filer ID	
Date 08/17/2024	5 Payee name Lemos, Kyle James			
Amount (\$) \$225.00	7 Payee address; City; State; Zip 2554 Lake Dale Ln	Code		
PURPOSE OF EXPENDITURE	Richmond, TX 77406 (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		n, TX, officeholder in	complete Schedule T. ving expense
Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate/Officeholder name Office s H	sought	Office	held
Date	Payee name			
09/03/2024	Lowe's			
09/03/2024 Amount (\$) \$278.07	Payee address; City; State; Zip 16510 Southwest Fwy	Code		
Amount (\$)	Payee address; City; State; Zip	(b) Description Check if trave Check if Austi	l outside of Texas. C n, TX, officeholder li Campaign Sigr	
Amount (\$) \$278.07 PURPOSE OF	Payee address; City; State; Zip 16510 Southwest Fwy Sugar Land, TX 77478 (a) Category (See Categories listed at the top of this schedule) Campaign signs Candidate/Officeholder name Office s	(b) Description Check if trave Check if Austi Material for t	n, TX, officeholder liv	ving expense NS
Amount (\$) \$278.07 PURPOSE OF EXPENDITURE Complete <u>ONLY</u> if direct	Payee address; City; State; Zip 16510 Southwest Fwy Sugar Land, TX 77478 (a) Category (See Categories listed at the top of this schedule) Campaign signs Candidate/Officeholder name Office s	(b) Description Check if trave Check if Austi Material for t	n, TX, officeholder liv campaign sigr	ving expense NS
Amount (\$) \$278.07 PURPOSE OF EXPENDITURE Complete <u>ONLY</u> if direct expenditure to benefit C/C Date	Payee address; City; State; Zip 16510 Southwest Fwy Sugar Land, TX 77478 (a) Category (see Categories listed at the top of this schedule) Campaign signs Candidate/Officeholder name Office s H	(b) Description Check if trave Check if Austi Material for o	n, TX, officeholder liv campaign sigr	ving expense NS
Amount (\$) \$278.07 PURPOSE OF EXPENDITURE Complete <u>ONLY</u> if direct expenditure to benefit C/C Date 09/11/2024 Amount (\$)	Payee address; City; State; Zip 16510 Southwest Fwy Sugar Land, TX 77478 (a) Category (See Categories listed at the top of this schedule) Campaign signs Candidate/Officeholder name Office s Payee name Mailchimp Payee address; City; State; Zip 405 N Angier Ave. NE	(b) Description Check if trave Check if Austi Material for of sought Code	n, TX, officeholder in campaign sign Office	ving expense IS held

(ONTRIBUTIO	PENDITURES FROM POLITICAL NS	SCHEDULE F1
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic: Credit Card Payment	Fees Office Overhead/Rental Expense Transportation Food/Beverage Expense Polling Expense Travel out	
	Total pages Schedule F1: Sch: 15/22 Rpt: 28/35	2 FILER NAME 3 Filer ID Meyers, W. A. "Andy"	
ŀ	Date 07/05/2024	5 Payee name Marsala Radio	
5	Amount (\$) \$6,000.00	7 Payee address; City; State; Zip Code 2721 Fieldstone St.	
3	PURPOSE OF EXPENDITURE	Sugar Land, TX 77478 (a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Check if Austin, TX, officeholder Radio Ads	
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		e held
	Date	Payee name	
	Date 08/12/2024 Amount (\$) \$242.00	Office Depot Payee address; City; State; Zip Code 11815 Wilcrest Dr	
	08/12/2024 Amount (\$)	Office Depot Payee address; City; State; Zip Code	iving expense
	08/12/2024 Amount (\$) \$242.00 PURPOSE OF	Office Depot Payee address; City; State; Zip Code 11815 Wilcrest Dr Houston, TX 77031 (a) Category (See Categories listed at the top of this schedule) Campaign office supplies Check if travel outside of Texas. Check if Austin, TX, officeholder I Campaign office supplies Candidate/Officeholder name Office sought Office	iving expense
	08/12/2024 Amount (\$) \$242.00 PURPOSE OF EXPENDITURE	Office Depot Payee address; City; State; Zip Code 11815 Wilcrest Dr Houston, TX 77031 (a) Category (See Categories listed at the top of this schedule) Campaign office supplies Check if travel outside of Texas. Check if Austin, TX, officeholder I Campaign office supplies Candidate/Officeholder name Office sought Office	iving expense
	D8/12/2024 Amount (\$) \$242.00 PURPOSE OF EXPENDITURE Complete <u>ONLY</u> if direct expenditure to benefit C/O	Office Depot Payee address; City; State; Zip Code 11815 Wilcrest Dr Houston, TX 77031 (a) Category (see Categories listed at the top of this schedule) Campaign office supplies Candidate/Office Supplies Candidate/Officeholder name Office sought Office Office Payee name	iving expense
	D8/12/2024 Amount (\$) \$242.00 PURPOSE OF EXPENDITURE Complete <u>ONLY</u> if direct expenditure to benefit C/OI Date D8/20/2024 Amount (\$) \$950.00	Office Depot Payee address; City; State; Zip Code 11815 Wilcrest Dr Houston, TX 77031 (a) Category (see Categories listed at the top of this schedule) Campaign office supplies Campaign office supplies Candidate/Officeholder name Office sought Payee name Oliva, Alberto Payee address; City; State; Zip Code 2623 Ferrylanding Sugar Land, TX 77478	iving expense
	D8/12/2024 Amount (\$) \$242.00 PURPOSE OF EXPENDITURE Complete <u>QNLY</u> if direct expenditure to benefit C/OI Date D8/20/2024 Amount (\$)	Office Depot Payee address; City; State; Zip Code 11815 Wilcrest Dr Houston, TX 77031 (a) Category (see Categories listed at the top of this schedule) Campaign office supplies Candidate/Officeholder name Office sought Payee name Oliva, Alberto Payee address; City; State; Zip Code 2623 Ferrylanding	iving expense e held Complete Schedule T.

-	ONTRIBUTIO	45			
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Office (Food/Beverage Expense Polling Gift/Awards/Memorials Expense Printing	Repayment/Reimbursement Overhead/Rental Expense Expense g Expense s/Wages/Contract Labor	Transportation Travel in Distri Travel Out of I	
	otal pages Schedule F1:			3 Filer ID	
	Sch: 16/22 Rpt: 29/35	Meyers, W. A. "Andy"			
	Date 08/01/2024	5 Payee name Pressler, Cameron			
•	4mount (\$) \$360.00	7 Payee address; City; State; Zip (P.O. Box 655 Bellaire, TX 77402	Code		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		outside of Texas. Co n, TX, officeholder livi /orker	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office se	ought	Office	held
-					
	Date 17/12/2024	Payee name Pressler, Cameron			
C			Code		
C	17/12/2024 mount (\$)	Pressler, Cameron Payee address; City; State; Zip (P.O. Box 655	(b) Description	outside of Texas, Co n, TX, officeholder livin 'Orker	
	07/12/2024 xmount (\$) \$375.00 PURPOSE OF	Pressler, Cameron Payee address; City; State; Zip (P.O. Box 655 Bellaire, TX 77402 (a) Category (see Categories listed at the top of this schedule) Salaries/Wages/Contract Labor Candidate/Officeholder name Office so	(b) Description	n, TX, officeholderilivi	ng expense
	7/12/2024 smount (\$) \$375.00 PURPOSE OF EXPENDITURE Complete ONLY if direct	Pressler, Cameron Payee address; City; State; Zip (P.O. Box 655 Bellaire, TX 77402 (a) Category (see Categories listed at the top of this schedule) Salaries/Wages/Contract Labor Candidate/Officeholder name Office so	(b) Description	n, TX, officeholderilivi /orker	ng expense
	7/12/2024 wmount (\$) \$375.00 PURPOSE OF EXPENDITURE Complete <u>ONLY</u> if direct xpenditure to benefit C/OF pate	Pressler, Cameron Payee address; City; State; Zip (P.O. Box 655 Bellaire, TX 77402 (a) Category (see Categories listed at the top of this schedule) Salaries/Wages/Contract Labor Candidate/Officeholder name Office so Payee name Pressler, Cameron Payee address; City; State; Zip (State; Payee address; City; State; Zip (P.O. Box 655	(b) Description Check if travel Check if Austin Campaign W Dought	n, TX, officeholderilivi /orker	ng expense
	PURPOSE OF EXPENDITURE	Pressler, Cameron Payee address; City; State; Zip (Comparison) P.O. Box 655 Bellaire, TX 77402 (a) Category (see Categories listed at the top of this schedule) Salaries/Wages/Contract Labor Candidate/Officeholder name Office schedule Payee name Pressler, Cameron Payee address; City; State; Zip (Comparison)	(b) Description Check if travel Check if Austin Campaign W Dought Code (b) Description Check if travel	outside of Texas. Coi , TX, officeholder livir	ng expense

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic Credit Card Payment	Fees Office C Food/Beverage Expense Polling f y - Gift/Awards/Memorials Expense Printing	epayment/Reimbursement iverhead/Rental Expense Expense Expense /Wages/Contract Labor	Transportatio Travel in Dist Travel Out of	
Total pages Schedule F1:	2 FILER NAME		3 Filer ID	
Sch: 17/22 Rpt: 30/35	Meyers, W. A. "Andy"			
Date 08/03/2024	5 Payee name Pressler, Cameron			
Amount (\$) \$180.00	7 Payee address; City; State; Zip C P.O. Box 655 Bellaire, TX 77402	Code		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		n, TX, officeholder liv	omplete Schedule T. ving expense
Complete ONLY if direct	Candidate/Officeholder name Office so	ought	Office	held
expenditure to benefit C/C	н			
expenditure to benefit C/O Date 08/10/2024	Payee name Pressler, Cameron	Code		
expenditure to benefit C/O Date 08/10/2024 Amount (\$) \$300.00	Payee name Pressler, Cameron Payee address; City; State; Zip C P.O. Box 655 Bellaire, TX 77402			
expenditure to benefit C/O Date 08/10/2024 Amount (\$)	Payee name Pressler, Cameron Payee address; City; State; Zip C P.O. Box 655	(b) Description	n, TX, officeholder liv	vomplete Schedule T. ving expense
expenditure to benefit C/O Date 08/10/2024 Amount (\$) \$300.00 PURPOSE OF	Payee name Pressler, Cameron Payee address; City; State; Zip C P.O. Box 655 Bellaire, TX 77402 (a) Category (see Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description	n, TX, officeholder liv	ving expense
expenditure to benefit C/C Date 08/10/2024 Amount (\$) \$300.00 PURPOSE OF EXPENDITURE Complete <u>ONLY</u> if direct expenditure to benefit C/C Date	Payee name Pressler, Cameron Payee address; City; State; Zip C P.O. Box 655 Bellaire, TX 77402 (a) Category (see Categories listed at the top of this schedule) Salaries/Wages/Contract Labor Candidate/Officeholder name Office schedule H	(b) Description	n, TX, officeholder liv /orker	ving expense
expenditure to benefit C/C Date 08/10/2024 Amount (\$) \$300.00 PURPOSE OF EXPENDITURE Complete <u>ONLY</u> if direct expenditure to benefit C/C Date 08/23/2024	Payee name Pressler, Cameron Payee address; City; State; Zip C P.O. Box 655 Bellaire, TX 77402 (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor Candidate/Officeholder name Office schedule H Payee name Pressler, Cameron	(b) Description Check if travel Check if Austir Campaign W Dought	n, TX, officeholder liv /orker	ving expense
expenditure to benefit C/C Date 08/10/2024 Amount (\$) \$300.00 PURPOSE OF EXPENDITURE Complete <u>ONLY</u> if direct expenditure to benefit C/C Date	Payee name Pressler, Cameron Payee address; City; State; Zip C P.O. Box 655 Bellaire, TX 77402 (a) Category (see Categories listed at the top of this schedule) Salaries/Wages/Contract Labor Candidate/Officeholder name Office schedule H	(b) Description Check if travel Check if Austir Campaign W Dought	n, TX, officeholder liv /orker	ving expense
expenditure to benefit C/C Date 08/10/2024 Amount (\$) \$300.00 PURPOSE OF EXPENDITURE Complete <u>QNLY</u> if direct expenditure to benefit C/C Date 08/23/2024 Amount (\$)	Payee name Pressler, Cameron Payee address; City; State; Zip C P.O. Box 655 Bellaire, TX 77402 (a) Category (see Categories listed at the top of this schedule) Salaries/Wages/Contract Labor Candidate/Officeholder name Office schedule Payee name Pressler, Cameron Payee address; City; State; Payee address; City; State; Zip C	(b) Description Check if travel Check if Austir Campaign W Dought	n, TX, officeholder liv /orker	ving expense
expenditure to benefit C/C Date 08/10/2024 Amount (\$) \$300.00 PURPOSE OF EXPENDITURE Complete <u>QNLY</u> if direct expenditure to benefit C/C Date 08/23/2024 Amount (\$)	Payee name Pressler, Cameron Payee address; City; State; Zip C P.O. Box 655 Bellaire, TX 77402 (a) Category (see Categories listed at the top of this schedule) Salaries/Wages/Contract Labor Candidate/Officeholder name Office schedule H Payee name Pressler, Cameron Payee address; City; State; Zip C P.O. Box 655	(b) Description Check if travel Check if Austir Campaign W Dought Code (b) Description Check if travel	n, TX, officeholder in /orker Office outside of Texas. C n, TX, officeholder in	held

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Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic Credit Card Payment	Fees Office Over Food/Beverage Expense Polling Exp y - Gift/Awards/Memorials Expense Printing Exp	rment/Reimbursement head/Rental Expense ense pense ages/Contract Labor	Solicitation/Fundraising Ex Fransportation Equipment Travel in District Fravel Out of District DTHER (enter a category r	& Related Expense
Total pages Schedule F1:	2 FILER NAME		iler ID	
Sch: 18/22 Rpt: 31/35	Meyers, W. A. "Andy"			
Date 08/30/2024	5 Payee name Pressler, Cameron			
Amount (\$) \$150.00	7 Payee address; City; State; Zip Cod P.O. Box 655 Bellaire, TX 77402	le		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		e of Texas. Complete Sche fficeholder living expense r	edule T.
Complete ONLY if direct expenditure to benefit C/C	Candidate/Officeholder name Office soug	ht	Office held	· · · · · · · · · · · · · · · · · · ·
Date	Payee name			
Date 09/07/2024 Amount (\$)	Payee name Pressler, Cameron Payee address; City; State; Zip Cod	le	_	
Date 09/07/2024	Payee name Pressler, Cameron Payee address; City; State; Zip Cod P.O. Box 655 Bellaire, TX 77402	(b) Description	e of Texas. Complete Sche fficeholder living expense	edule T.
Date 09/07/2024 Amount (\$) \$150.00 PURPOSE OF EXPENDITURE	Payee name Pressler, Cameron Payee address; City; State; Zip Cod P.O. Box 655 Bellaire, TX 77402 (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description Check if travel outsid Check if Austin, TX, of Campaign Worke	fficeholder living expense	edule T.
Date 09/07/2024 Amount (\$) \$150.00 PURPOSE OF EXPENDITURE Complete <u>ONLY</u> if direct expenditure to benefit C/C	Payee name Pressler, Cameron Payee address; City; State; Zip Cod P.O. Box 655 Bellaire, TX 77402 (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description Check if travel outsid Check if Austin, TX, of Campaign Worke	fficeholder living expense r	edule T.
Date 09/07/2024 Amount (\$) \$150.00 PURPOSE OF EXPENDITURE	Payee name Pressler, Cameron Payee address; City; State; Zip Cod P.O. Box 655 Bellaire, TX 77402 (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description Check if travel outsid Check if Austin, TX, of Campaign Worke	fficeholder living expense r	edule T.
Date 09/07/2024 Amount (\$) \$150.00 PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/O Date	Payee name Pressler, Cameron Payee address; City; State; Zip Cod P.O. Box 655 Bellaire, TX 77402 (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor Candidate/Officeholder name Office soug H	(b) Description Check if travel outsid Check if Austin, TX, of Campaign Worker ht	fficeholder living expense r	edule T.
Date 09/07/2024 Amount (\$) \$150.00 PURPOSE OF EXPENDITURE Complete <u>ONLY</u> if direct expenditure to benefit C/C Date 08/01/2024 Amount (\$)	Payee name Pressler, Cameron Payee address; City; State; Zip Cod P.O. Box 655 Bellaire, TX 77402 (a) Category (See Categories listed at the top of this schedule) (Salaries/Wages/Contract Labor Candidate/Officeholder name Office soug Payee name Pressler, Madison Payee address; City; State; Payee address; City; State; Zip Cod	(b) Description Check if travel outsid Check if Austin, TX, of Campaign Worker ht	fficeholder living expense r	edule T.
Date 09/07/2024 Amount (\$) \$150.00 PURPOSE OF EXPENDITURE Complete <u>ONLY</u> if direct expenditure to benefit C/C Date 08/01/2024 Amount (\$)	Payee name Pressler, Cameron Payee address; City; State; Zip Cod P.O. Box 655 Bellaire, TX 77402 (a) Category (See Categories listed at the top of this schedule) (a) Salaries/Wages/Contract Labor Candidate/Officeholder name Office soug Payee name Pressler, Madison Payee address; City; State; Zip Cod P.O. Box 655 Bellaire, TX 77402	 (b) Description Check if travel outsid Check if Austin, TX, of Campaign Worke (b) Description Check if travel outsid 	fliceholder living expense r Office held	

CONTRIBUTIO		AL		SCHEDULE F
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made I Candidate/Officeholder/Politie Credit Card Payment	Fees Office C Food/Beverage Expense Polling By - Gift/Awards/Memorials Expense Printing	epayment/Reimbursement Overhead/Rental Expense Expense j Expense s/Wages/Contract Labor	Transportation Travel in Distr Travel Out of I	
Total pages Schedule F1: Sch: 19/22 Rpt: 32/35	2 FILER NAME Meyers, W. A. "Andy"		3 Filer ID	
Date 07/12/2024	5 Payee name Pressler, Madison			1
Amount (\$) \$285.00	7 Payee address; City; State; Zip C P.O. Box 655 Bellaire, TX 77402	Code		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		TX, officeholder livi	omplete Schedule T. ing expense
Complete ONLY if direct	Candidate/Officeholder name Office so	ought	Office	held
expenditure to benefit C/C				
Date 07/26/2024	Payee name Pressler, Madison			
Date 07/26/2024 Amount (\$) \$270.00	Payee name Pressler, Madison Payee address; City; State; Zip C P.O. Box 655 Bellaire, TX 77402			
Date 07/26/2024 Amount (\$)	Payee name Pressler, Madison Payee address; City; State; Zip C P.O. Box 655	(b) Description	TX, officeholder livi	omplete Schedule T.
Date 07/26/2024 Amount (\$) \$270.00 PURPOSE OF	Payee name Pressler, Madison Payee address; City; State; Zip C P.O. Box 655 Bellaire, TX 77402 (a) Category (see Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description Check if travel of Check if Austin, Campaign We	TX, officeholder livi	ing expense
Date 07/26/2024 Amount (\$) \$270.00 PURPOSE OF EXPENDITURE	Payee name Pressler, Madison Payee address; City; State; Zip C P.O. Box 655 Bellaire, TX 77402 (a) Category (see Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description Check if travel of Check if Austin, Campaign We	TX, officeholder livi Orker	ing expense
Date 07/26/2024 Amount (\$) \$270.00 PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/O Date	Payee name Pressler, Madison Payee address; City; State; Zip C P.O. Box 655 Bellaire, TX 77402 (a) Category (see Categories listed at the top of this schedule) Salaries/Wages/Contract Labor Candidate/Officeholder name Payee name Pressler, Madison Payee address; City; State; Zip C P.O. Box 655	(b) Description Check if travel of Check if Austin, Campaign Wo Dought	TX, officeholder livi Orker	ing expense
Date 07/26/2024 Amount (\$) \$270.00 PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/O Date 08/16/2024 Amount (\$) \$195.00	Payee name Pressler, Madison Payee address; City; State; Zip C P.O. Box 655 Bellaire, TX 77402 (a) Category (see Categories listed at the top of this schedule) Salaries/Wages/Contract Labor Candidate/Officeholder name Payee name Pressler, Madison Payee address; City; State; Zip C P.O. Box 655 Bellaire, TX 77402	(b) Description Check if travel of Check if Austin, Campaign Wo Dought	TX, officeholder livi Orker	ing expense
Date 07/26/2024 Amount (\$) \$270.00 PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/C Date 08/16/2024 Amount (\$)	Payee name Pressler, Madison Payee address; City; State; Zip C P.O. Box 655 Bellaire, TX 77402 (a) Category (see Categories listed at the top of this schedule) Salaries/Wages/Contract Labor Candidate/Officeholder name Payee name Pressler, Madison Payee address; City; State; Zip C P.O. Box 655	(b) Description Check if travel of Check if Austin, Campaign Wo Dought Code (b) Description Check if travel of Check i	TX, officeholder livi orker Office I	held

	CONTRIBUTIO	PENDITURES FROM POLITICA	AL		SCHEDULE F
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic Credit Card Payment	Fees Office (Food/Beverage Expense Polling y - Gift/Awards/Memorials Expense Printing	tepayment/Reimbursement Overhead/Rental Expense Expense g Expense s/Wages/Contract Labor	Transportation Travel in Distric Travel Out of D	
	Total pages Schedule F1: Sch: 20/22 Rpt: 33/35	2 FILER NAME Meyers, W. A. "Andy"		3 Filer ID	
	Date 08/22/2024	5 Payee name Pressler, Madison			
	Amount (\$) \$150.00	7 Payee address; City; State; Zip (P.O. Box 655 Bellaire, TX 77402	Code		
3	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor		outside of Texas. Con n, TX, officeholder livir /orker	
-	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office si H	ought	Office h	neld
	Date	Payee name			
	08/30/2024	Pressler, Madison			
	A manuat (ft)				
	Amount (\$) \$150.00	Payee address; City; State; Zip (P.O. Box 655	Code		
			(b) Description	outside of Texas, Coi n, TX, officeholder livir /orker	
	\$150.00 PURPOSE OF	P.O. Box 655 Bellaire, TX 77402 (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor Candidate/Officeholder name Office sciences	(b) Description Check if travel Check if Austir Campaign W	n, TX, officeholder livir	ig expense
	\$150.00 PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/O	P.O. Box 655 Bellaire, TX 77402 (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor Candidate/Officeholder name Office so	(b) Description Check if travel Check if Austir Campaign W	n, TX, officeholder livir /orker	ig expense
	\$150.00 PURPOSE OF EXPENDITURE	P.O. Box 655 Bellaire, TX 77402 (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor Candidate/Officeholder name Office sciences	(b) Description Check if travel Check if Austir Campaign W	n, TX, officeholder livir /orker	ig expense
	\$150.00 PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/O Date	P.O. Box 655 Bellaire, TX 77402 (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor Candidate/Officeholder name H Payee name Sahar, Anam Payee address; City; State; Zip of 13100 W. Bellfort Ave. # 917	(b) Description Check if travel Check if Austir Campaign W ought	n, TX, officeholder livir /orker	ig expense
	\$150.00 PURPOSE OF EXPENDITURE Complete ONLY if direct expenditure to benefit C/O Date 10/05/2024 Amount (\$)	P.O. Box 655 Bellaire, TX 77402 (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor Candidate/Officeholder name H Payee name Sahar, Anam Payee address; City; State; Zip ((b) Description Check if travel Campaign W ought Code (b) Description Check if travel	n, TX, officeholder livir /orker Office h outside of Texas. Cor n, TX, officeholder livir	ng expense neld

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made E Candidate/Officeholder/Politic Credit Card Payment	Fees Office (Food/Beverage Expense Polling By - Git/Awards/Memorials Expense Printing	Repayment/Reimbursement Overhead/Rental Expense Expense g Expense s/Wages/Contract Labor	Transportation Travel in Distri Travel Out of E	
Total pages Schedule F1:			3 Filer ID	
Sch: 21/22 Rpt: 34/35	Meyers, W. A. "Andy"			
Date 07/22/2024	5 Payee name Sugar Creek Country Club			
Amount (\$) \$2,001.25	7 Payee address; City; State; Zip (2306 Country Club Blvd. Sugar Land, TX 77478	Code		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Community meeting	Check if Austi	outside of Texas, Co n, TX, officeholder Ivin nd HOA meetin	ng expense
Complete <u>ONLY</u> if direct expenditure to benefit C/C	Candidate/Officeholder name Office so DH	ought	Office t	neld
Date	Payee name			
09/18/2024	U.S. Post Office Stafford, TX.			
Amount (\$) \$232.00	Payee address; City; State; Zip (4110 Bluebonnet Dr.	Code		
	Stafford, TX 77477			
PURPOSE OF EXPENDITURE	Stafford, TX 77477 (a) Category (See Categories listed at the top of this schedule) Fees		outside of Texas. Con n, TX, officeholder livin	
OF	(a) Category (See Categories listed at the top of this schedule) Fees Candidate/Officeholder name Office so	Check if travel	n, TX, officeholder livir	ng expense
OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees Candidate/Officeholder name Office so	Check if travel	n, TX, officeholder livir	ng expense
OF EXPENDITURE Complete <u>QNLY</u> if direct expenditure to benefit C/C	(a) Category (See Categories listed at the top of this schedule) Fees Candidate/Officeholder name Office so	Check if travel	n, TX, officeholder livir	ng expense
OF EXPENDITURE Complete <u>ONLY</u> if direct expenditure to benefit C/C Date	(a) Category (See Categories listed at the top of this schedule) Fees Candidate/Officeholder name OH Payee name Vacek, Riley Paige Payee address; City; State; Zip of 2434 Country Place	Check if ravel	n, TX, officeholder livir	ng expense
OF EXPENDITURE Complete <u>ONLY</u> if direct expenditure to benefit C/O Date 08/12/2024 Amount (\$)	(a) Category (See Categories listed at the top of this schedule) Fees Candidate/Officeholder name OH Payee name Vacek, Riley Paige Payee address; City; State; Zip (Code	n, TX, officeholder livir Office t outside of Texas. Con n, TX, officeholder livir	ng expense neld mplete Schedule T.

	CONTRIBUTION	PENDITURES FROM POLITICAL		SCHEDULE F1
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Political Credit Card Payment		Transportation Travel in Distri Travel Out of I	
-	Total pages Schedule F1:		3 Filer ID	
	Sch: 22/22 Rpt: 35/35	Meyers, W. A. "Andy"		
	Date 08/09/2024	5 Payee name Waller County EDC		
	Amount (\$) \$1,200.00	7 Payee address; City; State; Zip Code 519 9th Street		
	PURPOSE OF EXPENDITURE		outside of Texas, Co TX, officeholder livi	implete Schedule T. ng expense