CANDIDATE / OFFICEHOLDER FORM C/OH CAMPAIGN FINANCE REPORT COVER SHEET PG 1 1 Filer ID 2 Total pages filed: The C/OH Instruction Guide explains how to complete this form. CANDIDATE / MS/MRS/MR FIRST MI OFFICE USE ONLY **OFFICEHOLDER** W. A. "Andy" NAME Date Received 20128 2024 10/2 **NICKNAME** LAST SUFFIX Meyers ADDRESS / PO BOX; APT / SUITE #; CITY; CANDIDATE / Date Hand-delivered or Date Postmarked ZIP CODE OFFICEHOLDER 2242 Sunset Trails MAILING Receipt # Amount **ADDRESS** Sugar Land, TX 77478 Change of Address Date Processed Date Imaged **CAMPAIGN** MS/MRS/MR FIRST MI **TREASURER** Debora NAME NICKNAME LAST SUFFIX Meyeas STREET ADDRESS (NO PO BOX PLEASE); CAMPAIGN APT / SUITE #; SUGRALANS DX ZIP CODE **TREASURER** 427 LONGVIEW BS. 77478 **ADDRESS** (Residence or Business) PHONE NUMBER EXTENSION CAMPAIGN AREA CODE **TREASURER** 7530395 281 PHONE REPORT TYPE January 15 30th day before election Runoff 15th day after campaign treasurer appointment (officeholder only) July 15 8th day before election Exceeded modified Final Report (Attach C/OH-FR) reporting limit 9 PERIOD Day Year Day Year Month Month COVERED 10/06/2024 THROUGH 10/26/2024 10 ELECTION **ELECTION DATE ELECTION TYPE** Month Other Day Year Primary Runoff 11/05/2024 X General Special 12 OFFICE SOUGHT (if known) OFFICE HELD (if any) 11 OFFICE County Commissioner Precinct 3 Fort Bend County Commissioner Precinct 3

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

2 of 14

13 C / OH NAME	Meyers, W. A. "Andy"		14 Filer ID		
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditures may have been made without of officeholders are required to report this information	the candidate's or officeho	older's knov	wledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME			
	GENERAL	COMMITTEE ADDRESS			
	SPECIFIC				
		COMMITTEE CAMPAIGN TREASURER NAME			
		COMMITTEE CAMPAIGN TREASURER ADDRES	SS		
16 CONTRIBUTION TOTALS		J MIZED POLITICAL CONTRIBUTIONS (OTHER THA EES OF LOANS, OR CONTRIBUTIONS MADE ELE		\$	0.00
	1	CAL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS	S)	\$	11,900.00
EXPENDITURE TOTALS	3. TOTAL UNITEM	MIZED POLITICAL EXPENDITURES		\$	864.74
	4. TOTAL POLITIC	CAL EXPENDITURES		\$	111,075.69
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	CAL CONTRIBUTIONS MAINTAINED AS OF THE LERIOD	AST DAY OF THE	\$	21,860.40
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	PAL AMOUNT OF ALL OUTSTANDING LOANS AS RTING PERIOD	OF THE LAST DAY	\$	0.00
Cor	AQSA ALI ary Public, State of Texas mm. Expires 09-04-2028 Notary ID 135074522	I swear, or affirm, under penalt true and correct and includes a under Title 15, Election Code. Signature of	all information required to	be reported	report is d by me
AFFIX NO	DTARY STAMP / SEAL AB	OVE	20	11	
of Octol	lli	ertify which, witness my hand and seal of office.	, this the		day
Signature of offi	icer administering	Printed name of officer administering	Title of officer a	ıdministerir	ng oath

SUBTOTALS - C/OH

FORM C/OH **COVER SHEET PG 3**

- 1					3 of 14
	18 FILER NAI Mevers, V	ME V. A. "Andy"	19 Filer ID		
	20 SCHEDUL NAME OF	SUE	BTOTAL AMOUNT		
	1. X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	11,900.00
	2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
	3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
	4.	SCHEDULE E: LOANS		\$	
	5. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION:	s	\$	111,075.69
	6.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
	7.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
	8.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
	9.	SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	
	10.	SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$	
	11.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	
	12.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$	
			ı		,
					raion VA 1 0 49doE1f

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 1/2 Rpt: 4/14 3 Filer ID 2 FILER NAME Meyers, W. A. "Andy" 7 Amount of Contribution (\$) Date 5 Full name of contributor out-of-state PAC (ID#. \$500.00 Boswell, Andrew 10/11/2024 6 Contributor address; City; State; Zip Code 1310 W, Twin Circle Richmond , TX 77406 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: \$5,000.00 10/11/2024 Cannon, Jeffery Contributor address; City; State; Zip Code 4315 Whickham Dr Fulshear, TX 77441 Principal occupation / Job title (See Instructions) Employer (See Instructions) Amount of Contribution (\$) Full name of contributor out-of-state PAC (ID#: Date 10/11/2024 McClendon, Randy \$300.00 Contributor address; City; State; Zip Code 12621 W Airport Blvd Suite 100 Sugar Land, TX 77478 Principal occupation / Job title (See Instructions) Employer (See Instructions) Tejas Surveying Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#: \$1,000.00 10/11/2024 Sandersen, Alan Contributor address; City; State; Zip Code 730 Summer Trace Ln. Richmond, TX 77406 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 10/11/2024 Sreerama, Karun \$5,000.00 Contributor address; City; State; Zip Code 4406 Orange Leaf Ct. Houston, TX 77059 Principal occupation / Job title (See Instructions) Employer (See Instructions) Forms provided by Texas Ethics Commission www.ethics.state.tx.us Version V4.1.0.48da51f

MONET	ARY POLITICAL CONTRIE	BUTIONS	SCHEDULE A1
The Instru	ction Guide explains how to complet	te this form.	1 Total pages Schedule A1: Sch: 2/2 Rpt: 5/14
FILER NAME			3 Filer ID
Meyers, W. Date 10/11/2024	Full name of contributor		
	11218 Balmullo Ct.		
Principal occu	Richmond, TX 77407 upation / Job title (See Instructions)	9 Employer (See Inst	ructions)
orms provided	by Texas Ethics Commission w	ww.ethics.state.tx.us	Version V4.1.0.48d

SCHEDULE F1

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

Event Expense Fees Food/Beverage Expense Gitt/Awards/Memorials Expense Legal Services

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Credit Card Payment	The Instruction Guide explains how to complete this form.
Total pages Schedule F1: Sch: 1/9 Rpt: 6/14	2 FILER NAME Meyers, W. A. "Andy" 3 Filer ID
Date 10/14/2024	5 Payee name Campaign Partners LLC
Amount (\$) \$6,398.00	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. Complete Schedule T. Check if Austin, TX, officeholder living expense Ads
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date 10/15/2024	Payee name Campaign Partners LLC
Amount (\$) \$51,198.14	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. Complete Schedule T. Check if Austin, TX, officeholder living expense Ads
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date 10/17/2024	Payee name Campaign Partners LLC
Amount (\$) \$4,000.00	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. Complete Schedule T. Check if Austin, TX, officeholder living expense Ads
Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

	The Instruction Guide	explains how to comple	ete this form.
1 Total pages Schedule F1: Sch: 2/9 Rpt: 7/14	2 FILER NAME Meyers, W. A. "Andy"		3 Filer ID
4 Date 10/17/2024	5 Payee name Campaign Partners LLC		
6 Amount (\$) \$13,300.00	7 Payee address; City; P.O. Box 655	State; Zip Code	
8 PURPOSE OF EXPENDITURE	Bellaire, TX 77402 (a) Category (See Categories listed at the to Advertising Expense	op of this schedule) (b)	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Ads
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sought	Office held
Date 10/25/2024	Payee name Campaign Partners LLC		
Amount (\$) \$12,847.36	Payee address; City; P.O. Box 655	State; Zip Code	
	Bellaire, TX 77402		
PURPOSE OF EXPENDITURE	(a) Category (see Categories listed at the to Advertising Expense	p of this schedule) (b)	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Ads
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sought	Office held
Date 10/07/2024	Payee name Comcast		
Amount (\$) \$507.09	Payee address; City; 12602 Westheimer	State; Zip Code	
	Houston, TX 77077		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the to Internet for HQ Office	p of this schedule) (b)	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Internet for HQ Office
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name H	Office sought	Office held

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense
Contributions/ Donations Made By - Event Expense Loan Repayment/Reimbursement
Fees Office Overhead/Rental Expense
Food/Beverage Expense Polling Expense
Gift/Awards/Memorials Expense
Printing Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

	Candidate/Officeholder/Political Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID
	Sch: 3/9 Rpt: 8/14	Meyers, W. A. "Andy"
4	Date	5 Payee name
	10/07/2024	Domino's
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$191.52	11920 Dairy Ashford
		Sugar Land, TX 77478
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas, Complete Schedule T.
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule 1. Check if Austin, TX, officeholder living expense
		Food for Workers
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	10/16/2024	Fort Bend Independent Newspaper
	Amount (\$)	Payee address; City; State; Zip Code
	\$5,000.00	P.O. Box 623
		Sugar Land, TX 77487
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T. Check If Austin, TX, officeholder living expense
		Ads
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	H
_	Date	Payee name
	10/25/2024	Home Depot
_	Amount (\$)	Payee address; City; State; Zip Code
	\$756.14	5900 Hiway 6 S
		Missouri City, TX 77459
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Material for Campaign Signs
		Waterial for Campaign Signs
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
_		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gitt/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

		The Instruction Guide	explains how to compl	ete this form.
1	Total pages Schedule F1: Sch: 4/9 Rpt: 9/14	2 FILER NAME Meyers, W. A. "Andy"		3 Filer ID
4	Date 10/21/2024	5 Payee name Home Depot		
6	Amount (\$) \$347.92	7 Payee address; City; 5900 Hiway 6 S	State; Zip Code	
		Missouri City, TX 77459		
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the to Advertising Expense	p of this schedule) (b)	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder fiving expense Material for Campaign Signs
9	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name	Office sought	Office held
_	Date	Payee name		
	10/18/2024	Home Depot		
	Amount (\$) \$276.08	Payee address; City; 5900 Hiway 6 S	State; Zip Code	
		Missouri City, TX 77459		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the to Advertising Expense	p of this schedule) (b)	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Material for Signs
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name H	Office sought	Office held
_	Date	Payee name		
	10/11/2024	Home Depot		
	Amount (\$) \$461.69	Payee address; City; 5900 Hiway 6 S	State; Zip Code	
		Missouri City, TX 77459		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the to Advertising Expense	p of this schedule) (b)	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Material for Campaign Signs
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name H	Office sought	Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Contributions/ Donations Made By Candidate/Officeholder/Political Credit Card Payment		nmittee I	Gift/Awards/Memorials Ex Legal Services The Instruction Guid			ages	/Contract Labor		Out of District ! (enter a category not listed above)	
1	Total pages Schedule F1:	2	FILER NAME					3	Filer II	D	
_	Sch: 5/9 Rpt: 10/14		Meyers, W.	A. "Andy"							
4	Date	5	Payee name								
	10/19/2024		InkBlots								
	Amount (\$) \$330.00	7	Payee address 3043 Silver Katy, TX 774	Cedar Trail	State;	; Zip Coo	le				
8	PURPOSE OF EXPENDITURE	(a)	Category (Se Advertising	e Categories listed at the Expense	top of this sch	edule)	(b)	<u></u>		xas. Complete Schedule T. Ider living expense	
9	Complete ONLY if direct expenditure to benefit C/O		Candidate/Offic	ceholder name	C	Office sou	ght		0	office held	
	Date		Payee name								
L	10/15/2024		Lowe's								
	Amount (\$)		Payee address		State	; Zip Co	de				
	\$229.23		16510 South	nwest Fwy							
			Sugar Land								
	PURPOSE OF EXPENDITURE	(a)	Category _{(Se} Advertising	e Categories listed at the Expense	top of this sch	nedule)	(b)	Description Check if travel ou Check if Austin, 7	TX, officeho	xas. Complete Schedule T. older living expense	
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Offic	ceholder name	(Office sou	ght		C	Office held	
	Date 10/10/2024		Payee name Mailchimp								
-	Amount (\$)	-	Payee address	ss; City;	State	; Zip Co	de				
	\$793.10		405 N Angie		State	, Lip 00	40				
			Atlanta, CO							A STATE OF THE STA	
	PURPOSE OF EXPENDITURE	(a)	Category (Se Advertising	e Categories listed at the Expense	top of this sch	nedule)	(b)			exas. Complete Schedule T.	
	Complete ONLY if direct expenditure to benefit C/O		Candidate/Offic	ceholder name	(Office sou	ght		C	Office held	
								-		Printer and the second	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		mmittee	Gift/Awards/Memoria Legal Services The Instruction (ls Expense		xpen: Wage:	se s/Contract Labor	1	Travel in District Travel Out of District DTHER (enter a category not listed at	oove)
1	Total pages Schedule F1:	2	FILER NAM	E					3 F	Filer ID	
	Sch: 6/9 Rpt: 11/14		Meyers, W	. A. "Andy"							
4	Date	5	Payee name	9							
	10/14/2024	1	Sangeet R	adio							
6	Amount (\$)	7	Payee addre	ess; City;	State	; Zip Co	ode				
	\$2,000.00		11011 Bro	oklet Dr #320,							
	, _,										
			Houston, T	X 77099							
8	PURPOSE	(a	Category (See Categories listed at	the top of this so	hadula)	(b)	Description	***		
	OF		Advertising		tive top or tills so	ileduic)	1		outside	of Texas. Complete Schedule T.	
	EXPENDITURE							Check if Austin,	TX, o	fficeholder living expense	
								Ads			
9	Complete ONLY if direct expenditure to benefit C/O		Candidate/Of	ficeholder name		Office sou	ight			Office held	
-	Date		Payee name								
	10/10/2024		•	ek Country Club							
_		_									
	Amount (\$)		Payee addre		State	; Zip Co	ode				
	\$1,756.46		2306 Coun	try Club Blvd.							
			Sugar Land	d, TX 77478							
	PURPOSE	(a)	Category (s	See Categories listed at	the top of this sci	nedule)	(b)	Description			· · · · · · · · · · · · · · · · · · ·
	OF		Event Expe			iouuio,		-	utside	of Texas. Complete Schedule T.	
	EXPENDITURE							Check if Austin,	TX, o	fficeholder living expense	
								Lunch for HO	A &	MUD Directors	
	Complete ONLY if direct expenditure to benefit C/O		Candidate/Off	ficeholder name		Office sou	ight			Office held	
_											
	Date		Payee name								
	10/24/2024		Texting for	Less							
	Amount (\$)		Payee addre	ess; City;	State	; Zip Co	ode				
	\$2,321.34		354 State S	St #104							
			Hackensac	k, NJ 07601							
	PURPOSE	(a)	Category (S	See Categories listed at	the top of this sch	nedule)	(b)	Description			
	OF EXPENDITURE		Advertising	Expense						of Texas. Complete Schedule T.	
	EXPERIENCE								TX, of	fficeholder living expense	
								Ads			
	Complete ONLY if direct		Candidate/Off	iceholder name	(Office sou	ght			Office held	
	expenditure to benefit C/OF	4									
_											

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Candidate/Officeholder/Politica Credit Card Payment	Il Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID
Sch: 7/9 Rpt: 12/14	Meyers, W. A. "Andy"
4 Date	5 Payee name
10/24/2024	Texting for Less
6 Amount (\$) \$1,292.82	7 Payee address; City; State; Zip Code 354 State St #104
	Hackensack, NJ 07601
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Ads
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
10/23/2024	Texting for Less
Amount (\$) \$341.57	Payee address; City; State; Zip Code 354 State St #104 Hackensack, NJ 07601
BUBBBBB	
PURPOSE OF EXPENDITURE	(a) Category (see Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Ads
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
10/22/2024	Texting for Less
Amount (\$) \$705.27	Payee address; City; State; Zip Code 354 State St #104
	Hackensack, NJ 07601
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Ads
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

		The Instruction Guide	explains now to con	npiete this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID
	Sch: 8/9 Rpt: 13/14	Meyers, W. A. "Andy"		
4	Date	5 Payee name		
_	10/22/2024	Texting for Less		
_	Amount (¢)	-	State: 7in Coo	J.
ľ	Amount (\$)		State; Zip Coo	de .
١	\$3,200.77	354 State St #104		
		Hackensack, NJ 07601		
8	PURPOSE	(a) Category (See Categories listed at the to	n of this schedule)	(b) Description
	OF	Advertising Expense	p or and sortedule)	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	5 1		Check if Austin, TX, officeholder living expense
				Ads
9	Complete ONLY if direct	Candidate/Officeholder name	Office soug	ght Office held
	expenditure to benefit C/OI	-1		
H	Date	Payee name		
	10/07/2024	Texting for Less		
L				
	Amount (\$)	Payee address; City;	State; Zip Cod	de
	\$672.27	354 State St #104		
		Hackensack, NJ 07601		
	PURPOSE	(a) Category (See Categories listed at the to	o of this schedule)	(b) Description
	OF	Advertising Expense		Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	3		Check if Austin, TX, officeholder living expense
				Ads
Г	Complete ONLY if direct	Candidate/Officeholder name	Office soug	pht Office held
	expenditure to benefit C/OI	1		
H	Date	Payee name		
ı	10/07/2024	Texting for Less		
_				
	Amount (\$)	Payee address; City;	State; Zip Coo	de
	\$961.82	354 State St #104		
		Hackensack, NJ 07601		
\vdash	PURPOSE	(a) Category (See Categories listed at the to	o of this schedule)	(b) Description
	OF	Advertising Expense		Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE			Check if Austin, TX, officeholder living expense
				Ads
Г	Complete ONLY if direct	Candidate/Officeholder name	Office soug	pht Office held
	expenditure to benefit C/O	4		
-				

SCHEDULE F1

Г			EXPENDITURE C	ATEGORIE	S FOR E	OX 8(a)		
Accounting/Banking Fees Office Overhead/Rental Expense Transportation Equipment & Re Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By - Gift/Awards/Memorials Expense Printing Expense Travel Out of District								
1	Total pages Schedule F1:	2 FILER NAM					3	Filer ID
•	Sch: 9/9 Rpt: 14/14		/. A. "Andy"				ľ	THE
4	Date	5 Payee nam	е					
\vdash	10/18/2024	Tractor St	pply			····		
6	Amount (\$)	7 Payee addr	ess; City;	State:	Zip Code			
ľ	\$322.36		uthwest Fwy	State, 2	Zip Code			
		Rosenber	g, TX 77471					
8	PURPOSE OF EXPENDITURE		See Categories listed at the top g Expense	of this schedu	ule) (b		n, TX	ide of Texas. Complete Schedule T. , officeholder living expense
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/O	fficeholder name	Offi	ice sough	t		Office held