



# JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

## FORM JC/OH COVER SHEET PG 2

**14 C/OH NAME**  
Hon. W. Jeanne Meurer

**15 ACCOUNT #** (Ethics Commission filers)  
00020526

**16 NOTICE FROM POLITICAL COMMITTEE(S)**

additional pages

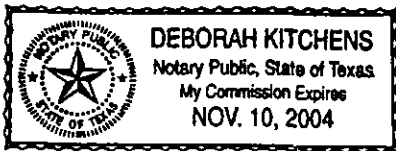
.. This listing includes political expenditures by political committees to support the candidate / officeholder. These expenditures may have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this information only if they receive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

<b>COMMITTEE TYPE</b>	<b>COMMITTEE NAME</b>
<input type="checkbox"/> GENERAL	<b>COMMITTEE ADDRESS</b>
<input type="checkbox"/> SPECIFIC	<b>COMMITTEE CAMPAIGN TREASURER NAME</b>
	<b>COMMITTEE CAMPAIGN TREASURER ADDRESS</b>

<b>17 CONTRIBUTION TOTALS</b>	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$ 0.00	
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 50.00	
	3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED	\$ 0.00	
	<b>EXPENDITURE TOTALS</b>	4. TOTAL POLITICAL EXPENDITURES	\$ 9685.02
	<b>OUTSTANDING LOAN TOTALS</b>	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 97842.21
	<b>CONTRIBUTION BALANCE</b>	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

**18 AFFIDAVIT**

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



AFFIX NOTARY STAMP / SEAL ABOVE

*W. Jeanne Meurer*  
Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said W. JEANNE MEURER, this the 14<sup>th</sup> day of JULY, 2004, to certify which, witness my hand and seal of office.

*Deborah Kitchens*      DEBORAH KITCHENS      Notary  
Signature of officer administering oath      Print name of officer administering oath      Title of officer administering oath

# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS (JUDICIAL)

## SCHEDULE A (J)

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages report: <b>3/24</b>	
2 FILER NAME Hon. W. Jeanne Meurer		3 ACCOUNT # (Ethics Commission files) <b>00020526</b>	
4 Date <b>03/23/2004</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC(ID# _____) <b>Ms. Lana Varney</b>	7 Amount of contribution (\$) <b>50.00</b>	8 In-kind contribution description(if applicable)
6 Contributor address; City; State; Zip Code <b>600 Congress Suite 2400 Austin TX 78701</b>			
9 Contributor's principal occupation <b>Attorney</b>		10 Contributor's job title <b>Attorney/Partner</b>	
11 Contributor's employer/law firm <b>Fulbright &amp; Jawarswki</b>		12 Law firm of contributor's spouse (if any)	
13 If contributor is a child, law firm of parent(s) (if any)			

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

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages report: 4/24
2 FILER NAME Hon. W. Jeanne Meurer		3 ACCOUNT # (Ethics Commission filers) 00020526
4 Date 01/16/2004	5 Payee name 34th Street Catering 6 Payee address; City; State; Zip Code 1005 W. 34th Street Austin TX 78758	7 Amount (\$) 434.75
8 Purpose of expenditure (See instructions regarding type of information required.) Catering for Filing Day Dinner		9 .. Complete if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held
Date 01/15/2004	Payee name American Community Services Payee address; City; State; Zip Code 816 Congress Ave. Austin TX 78701	Amount (\$) 100.00
Purpose of expenditure (See instructions regarding type of information required.) Donation		.. Complete if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held
Date 04/28/2004	Payee name Cinco de Mayo Celebration,% Commissioner Margaret Gomez Payee address; City; State; Zip Code Granger Building,Rm. 525 Austin TX 78701	Amount (\$) 25.00
Purpose of expenditure (See instructions regarding type of information required.) Sponsorship for Cinco de Mayo Celebration		.. Complete if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held
Date 04/28/2004	Payee name Ron Davis Payee address; City; State; Zip Code P.O. Box 16665 Austin TX 78761	Amount (\$) 125.00
Purpose of expenditure (See instructions regarding type of information required.) Tickets - Supporter		.. Complete if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held Ron Davis Other - County Commissioner Prct 1 Other - County Commissioner Prct 1

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

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages report: 5/24
2 FILER NAME Hon. W. Jeanne Meurer		3 ACCOUNT # (Ethics Commission filers) 00020526
4 Date 01/13/2004	5 Payee name Ms. Deborah Kitchens 6 Payee address; City; State; Zip Code 158 FM 86 Red Rock TX 78662	7 Amount (\$) 500.00
8 Purpose of expenditure (See instructions regarding type of information required.) Maintenance of Financial Data and Reports		9 -- Complete if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held
Date 03/05/2004	Payee name Ms. Deborah Kitchens Payee address; City; State; Zip Code 158 FM 86 Red Rock TX 78662	Amount (\$) 500.00
Purpose of expenditure (See instructions regarding type of information required.) Prepare and File Campaign Financial Report		-- Complete if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held
Date 04/06/2004	Payee name Ms. Deborah Kitchens Payee address; City; State; Zip Code 158 FM 86 Red Rock TX 78662	Amount (\$) 500.00
Purpose of expenditure (See instructions regarding type of information required.) Maintenance of Financial Data and Reports		-- Complete if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held
Date 06/17/2004	Payee name Online Tech Support, Inc. Payee address; City; State; Zip Code 607 Brazos Street Suite 803 Austin TX 78701	Amount (\$) 690.76
Purpose of expenditure (See instructions regarding type of information required.) Computer		-- Complete if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held

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

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages report: 6/24
2 FILER NAME Hon. W. Jeanne Meurer		3 ACCOUNT # (Ethics Commission filers) 00020526
4 Date 06/17/2004	5 Payee name Online Tech Support, Inc. 6 Payee address; City; State; Zip Code 607 Brazos Street Suite 803 Austin TX 78701	7 Amount (\$) 102.04
8 Purpose of expenditure (See instructions regarding type of information required.) Delivery and Setup of New Computer		9 -- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name Office sought Office held
Date 04/06/2004	Payee name Open Door Preschool Payee address; City; State; Zip Code 3804 Cherrywood Rd. Austin TX 78722	Amount (\$) 250.00
Purpose of expenditure (See instructions regarding type of information required.) Contribution for Benefit 5/1/04		-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name Office sought Office held
Date 01/01/2004	Payee name Ozarka Payee address; City; State; Zip Code 2767 Imperial Highway Suite 100 Brea CA 92821-6713	Amount (\$) 25.50
Purpose of expenditure (See instructions regarding type of information required.) Water for Office		-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name Office sought Office held
Date 02/04/2004	Payee name Ozarka Payee address; City; State; Zip Code 2767 Imperial Highway Suite 100 Brea CA 92821-6713	Amount (\$) 27.10
Purpose of expenditure (See instructions regarding type of information required.) Water for Office		-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name Office sought Office held

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

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report:

7/24

2 FILER NAME

Hon. W. Jeanne Meurer

3 ACCOUNT # (Ethics Commission filers)

00020526

4 Date	5 Payee name	7 Amount (\$)
03/03/2004	Ozarka ..... 6 Payee address; City; State; Zip Code 2767 Imperial Highway Suite 100 Brea CA 92821-6713	27.10

8 Purpose of expenditure (See instructions regarding type of information required.) Water for Office	9 .. Complete if direct expenditure to benefit C/OH .. Candidate / Officeholder name      Office sought      Office held
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Date	Payee name	Amount (\$)
04/01/2004	Ozarka ..... Payee address; City; State; Zip Code 2767 Imperial Highway Suite 100 Brea CA 92821-6713	34.70

Purpose of expenditure (See instructions regarding type of information required.) Water for Office	.. Complete if direct expenditure to benefit C/OH .. Candidate / Officeholder name      Office sought      Office held
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Date	Payee name	Amount (\$)
05/10/2004	Ozarka ..... Payee address; City; State; Zip Code 2767 Imperial Highway Suite 100 Brea CA 92821-6713	17.86

Purpose of expenditure (See instructions regarding type of information required.) Water for Office	.. Complete if direct expenditure to benefit C/OH .. Candidate / Officeholder name      Office sought      Office held
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Date	Payee name	Amount (\$)
06/01/2004	Ozarka ..... Payee address; City; State; Zip Code 2767 Imperial Highway Suite 100 Brea CA 92821-6713	42.30

Purpose of expenditure (See instructions regarding type of information required.) Water for Office	.. Complete if direct expenditure to benefit C/OH .. Candidate / Officeholder name      Office sought      Office held
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**POLITICAL  
EXPENDITURES****SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

**1** Total pages report:

8/24

**2** FILER NAME

Hon. W. Jeanne Meurer

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

00020526

4 Date	5 Payee name	7 Amount (\$)
01/02/2004	Sprint ..... 6 Payee address; City; State; Zip Code P. O. Box 219554 Austin TX 78767	43.85

8 Purpose of expenditure (See instructions regarding type of information required.)	9 -- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name Office sought Office held
Cell Phone Bill	

Date	Payee name	Amount (\$)
02/05/2004	Sprint ..... Payee address; City; State; Zip Code P. O. Box 219554 Austin TX 78767	42.34

Purpose of expenditure (See instructions regarding type of information required.)	-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name Office sought Office held
Cell Phone Bill	

Date	Payee name	Amount (\$)
03/03/2004	Sprint ..... Payee address; City; State; Zip Code P. O. Box 219554 Austin TX 78767	52.59

Purpose of expenditure (See instructions regarding type of information required.)	-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name Office sought Office held
Cell Phone Bill	

Date	Payee name	Amount (\$)
04/01/2004	Sprint ..... Payee address; City; State; Zip Code P. O. Box 219554 Austin TX 78767	42.34

Purpose of expenditure (See instructions regarding type of information required.)	-- Complete if direct expenditure to benefit C/OH -- Candidate / Officeholder name Office sought Office held
Cell Phone Bill	



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

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages report: 9/24
2 FILER NAME Hon. W. Jeanne Meurer		3 ACCOUNT # (Ethics Commission filers) 00020526
4 Date 05/05/2004	5 Payee name Sprint 6 Payee address; City; State; Zip Code P. O. Box 219554 Austin TX 78767	7 Amount (\$) 87.62
8 Purpose of expenditure (See instructions regarding type of information required.) Cell Phone Bill		9 -- Complete if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held
Date 06/01/2004	Payee name Sprint Payee address; City; State; Zip Code P. O. Box 219554 Austin TX 78767	Amount (\$) 43.81
Purpose of expenditure (See instructions regarding type of information required.) Cell Phone Bill		-- Complete if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held
Date 01/13/2004	Payee name Texas Bar Foundation Payee address; City; State; Zip Code 1502 E. 6th Street Austin TX 78702	Amount (\$) 200.00
Purpose of expenditure (See instructions regarding type of information required.) Fellow Membership		-- Complete if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held
Date 03/30/2004	Payee name Yellow Pine Ranch Payee address; City; State; Zip Code 15880 State Highway 12 Cuchara CO 81055	Amount (\$) 700.00
Purpose of expenditure (See instructions regarding type of information required.) Staff Bonuses		-- Complete if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held

# POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

## SCHEDULE G

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages report: 10/24
2 FILER NAME Hon. W. Jeanne Meurer		3 ACCOUNT # (Ethics Commission filers) 00020526
4 Date 01/21/2004	5 Payee name Al Jabor 6 Payee address; City; State; Zip Code Balcones at 2222 Austin TX 78731 7 Purpose of expenditure (See instructions regarding type of information required.) Beverages for filing dinner party	8 Amount (\$) 167.80 <input checked="" type="checkbox"/> Reimbursement from political contributions intended
4 Date 04/21/2004	5 Payee name Aiffs 6 Payee address; City; State; Zip Code 600 Congress Ave. Austin TX 78701 7 Purpose of expenditure (See instructions regarding type of information required.) Flowers - Staff - Co-workers	8 Amount (\$) 101.21 <input checked="" type="checkbox"/> Reimbursement from political contributions intended
4 Date 01/21/2004	5 Payee name Anderson Coffee Co 6 Payee address; City; State; Zip Code 1601 W. 38th Street Jefferson Square Austin TX 78758 7 Purpose of expenditure (See instructions regarding type of information required.) Coffee for Office	8 Amount (\$) 16.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended
4 Date 01/21/2004	5 Payee name Anderson Coffee Co 6 Payee address; City; State; Zip Code 1601 W. 38th Street Jefferson Square Austin TX 78758 7 Purpose of expenditure (See instructions regarding type of information required.) Coffee for Office	8 Amount (\$) 16.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended
4 Date 02/21/2004	5 Payee name Anderson Coffee Co 6 Payee address; City; State; Zip Code 1601 W. 38th Street Jefferson Square Austin TX 78758 7 Purpose of expenditure (See instructions regarding type of information required.) Coffee of Office	8 Amount (\$) 7.50 <input checked="" type="checkbox"/> Reimbursement from political contributions intended

# POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

## SCHEDULE G

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages report: 11/24
2 FILER NAME Hon. W. Jeanne Meurer		3 ACCOUNT # (Ethics Commission filers) 00020526
4 Date 03/21/2004	5 Payee name Anderson Coffee Co 6 Payee address; City; State; Zip Code 1601 W. 38th Street Jefferson Square Austin TX 78758	8 Amount (\$) 11.00
	7 Purpose of expenditure (See instructions regarding type of information required.) Coffee for Office	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
4 Date 03/21/2004	5 Payee name Anderson Coffee Co 6 Payee address; City; State; Zip Code 1601 W. 38th Street Jefferson Square Austin TX 78758	8 Amount (\$) 11.00
	7 Purpose of expenditure (See instructions regarding type of information required.) Coffee for Office	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
4 Date 04/21/2004	5 Payee name Anderson Coffee Co 6 Payee address; City; State; Zip Code 1601 W. 38th Street Jefferson Square Austin TX 78758	8 Amount (\$) 14.00
	7 Purpose of expenditure (See instructions regarding type of information required.) Coffee for Office	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
4 Date 04/21/2004	5 Payee name Anderson Coffee Co 6 Payee address; City; State; Zip Code 1601 W. 38th Street Jefferson Square Austin TX 78758	8 Amount (\$) 10.50
	7 Purpose of expenditure (See instructions regarding type of information required.) Coffee for Office	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
4 Date 05/21/2004	5 Payee name Anderson Coffee Co 6 Payee address; City; State; Zip Code 1601 W. 38th Street Jefferson Square Austin TX 78758	8 Amount (\$) 14.50
	7 Purpose of expenditure (See instructions regarding type of information required.) Coffee for Office	<input checked="" type="checkbox"/> Reimbursement from political contributions intended

# POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

## SCHEDULE G

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report:  
12/24

2 FILER NAME

Hon. W. Jeanne Meurer

3 ACCOUNT # (Ethics Commission filers)  
00020526

4 Date 06/21/2004	5 Payee name Anderson Coffee Co	8 Amount (\$) 14.00
	6 Payee address; City; State; Zip Code 1601 W. 38th Street Jefferson Square Austin TX 78758	
	7 Purpose of expenditure (See instructions regarding type of information required.) Coffee for Office	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
4 Date 06/21/2004	5 Payee name Anderson Coffee Co	8 Amount (\$) 14.00
	6 Payee address; City; State; Zip Code 1601 W. 38th Street Jefferson Square Austin TX 78758	
	7 Purpose of expenditure (See instructions regarding type of information required.) Coffee for Office	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
4 Date 04/21/2004	5 Payee name Arizona Biltmore Resort	8 Amount (\$) 470.69
	6 Payee address; City; State; Zip Code 2400 E. Missouri  Phoenix AZ 85016	
	7 Purpose of expenditure (See instructions regarding type of information required.) Visit Juvenile Justice Facility	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
4 Date 01/21/2004	5 Payee name Austin Flower Co.	8 Amount (\$) 38.21
	6 Payee address; City; State; Zip Code 1612 W. 35th Street  Austin TX 78758	
	7 Purpose of expenditure (See instructions regarding type of information required.) Centerpiece of flowers for filing dinner	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
4 Date 02/21/2004	5 Payee name Best Buy	8 Amount (\$) 12.98
	6 Payee address; City; State; Zip Code 9607 Research Blvd.  Austin TX 78759	
	7 Purpose of expenditure (See instructions regarding type of information required.) Office Supplies	<input checked="" type="checkbox"/> Reimbursement from political contributions intended

# POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

## SCHEDULE G

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages report: 13/24
2 FILER NAME Hon. W. Jeanne Meurer		3 ACCOUNT # (Ethics Commission filers) 00020526
4 Date 02/21/2004	5 Payee name Best Buy 6 Payee address; City; State; Zip Code 9607 Research Blvd. Austin TX 78759 7 Purpose of expenditure (See instructions regarding type of information required.) Office Supplies	8 Amount (\$) 61.65 <input checked="" type="checkbox"/> Reimbursement from political contributions intended
4 Date 04/21/2004	5 Payee name Biltmore Grill 6 Payee address; City; State; Zip Code 2400 E. Missouri Phoenix AZ 85216 7 Purpose of expenditure (See instructions regarding type of information required.) Lunch - Visit Juvenile Justice Facility	8 Amount (\$) 51.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended
4 Date 05/21/2004	5 Payee name Casa Garcia 6 Payee address; City; State; Zip Code 1000 S. Lamar Blvd. Austin TX 78704 7 Purpose of expenditure (See instructions regarding type of information required.) Meeting with Commissioner	8 Amount (\$) 73.04 <input checked="" type="checkbox"/> Reimbursement from political contributions intended
4 Date 05/21/2004	5 Payee name Chaveros Restaurant 6 Payee address; City; State; Zip Code 1610 Lavaca Austin TX 78701 7 Purpose of expenditure (See instructions regarding type of information required.) Staff Lunch	8 Amount (\$) 15.42 <input checked="" type="checkbox"/> Reimbursement from political contributions intended
4 Date 06/21/2004	5 Payee name Chaveros Restaurant 6 Payee address; City; State; Zip Code 1610 Lavaca Austin TX 78701 7 Purpose of expenditure (See instructions regarding type of information required.) Staff Lunch	8 Amount (\$) 14.80 <input checked="" type="checkbox"/> Reimbursement from political contributions intended

# POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

## SCHEDULE G

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages report: 14/24
2 FILER NAME Hon. W. Jeanne Meurer		3 ACCOUNT # (Ethics Commission filers) 00020526
4 Date 03/21/2004	5 Payee name Chez Zee 6 Payee address; City; State; Zip Code 5406 Balcones Dr. Austin TX 78731	8 Amount (\$) 125.00
7 Purpose of expenditure (See instructions regarding type of information required.) Dinner with Former Juvenile Judge		<input checked="" type="checkbox"/> Reimbursement from political contributions intended
4 Date 03/21/2004	5 Payee name Chez Zee 6 Payee address; City; State; Zip Code 5406 Balcones Dr. Austin TX 78731	8 Amount (\$) 79.00
7 Purpose of expenditure (See instructions regarding type of information required.) Meeting		<input checked="" type="checkbox"/> Reimbursement from political contributions intended
4 Date 05/21/2004	5 Payee name Circuit City 6 Payee address; City; State; Zip Code 9333 Research Austin TX 78758	8 Amount (\$) 961.25
7 Purpose of expenditure (See instructions regarding type of information required.) Computer Monitor		<input checked="" type="checkbox"/> Reimbursement from political contributions intended
4 Date 04/21/2004	5 Payee name Eddie V 6 Payee address; City; State; Zip Code 301 E. 5th Street Austin TX 78701	8 Amount (\$) 26.40
7 Purpose of expenditure (See instructions regarding type of information required.) Meeting with CASA		<input checked="" type="checkbox"/> Reimbursement from political contributions intended
4 Date 05/21/2004	5 Payee name Filling Station 6 Payee address; City; State; Zip Code 801 Barton Springs Rd Austin TX 78704	8 Amount (\$) 25.00
7 Purpose of expenditure (See instructions regarding type of information required.) Meeting with Commissioner		<input checked="" type="checkbox"/> Reimbursement from political contributions intended

# POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

## SCHEDULE G

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages report: 15/24
2 FILER NAME Hon. W. Jeanne Meurer		3 ACCOUNT # (Ethics Commission filers) 00020526
4 Date 02/21/2004	5 Payee name Four Seasons 6 Payee address; City; State; Zip Code 1309 E. 7th Street Austin TX 78702	8 Amount (\$) 10.00
	7 Purpose of expenditure (See instructions regarding type of information required.) Parking for Meeting	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
4 Date 02/21/2004	5 Payee name Four Seasons 6 Payee address; City; State; Zip Code 1309 E. 7th Street Austin TX 78702	8 Amount (\$) 49.00
	7 Purpose of expenditure (See instructions regarding type of information required.) Meeting/County Judge	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
4 Date 05/21/2004	5 Payee name Four Seasons 6 Payee address; City; State; Zip Code 1309 E. 7th Street Austin TX 78702	8 Amount (\$) 5.00
	7 Purpose of expenditure (See instructions regarding type of information required.) Parking at Four Season for Meeting with Commissioner	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
4 Date 05/21/2004	5 Payee name Four Seasons 6 Payee address; City; State; Zip Code 1309 E. 7th Street Austin TX 78702	8 Amount (\$) 53.50
	7 Purpose of expenditure (See instructions regarding type of information required.) Meeting with Commissioner	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
4 Date 04/21/2004	5 Payee name Guero's Restaurant 6 Payee address; City; State; Zip Code 1412 S. Congress Ave. Austin TX 78704	8 Amount (\$) 8.20
	7 Purpose of expenditure (See instructions regarding type of information required.) Juvenile Meeting	<input checked="" type="checkbox"/> Reimbursement from political contributions intended

# POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

## SCHEDULE G

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report:  
16/24

2 FILER NAME

Hon. W. Jeanne Meurer

3 ACCOUNT # (Ethics Commission filers)  
00020526

4 Date 05/21/2004	5 Payee name H.E.B. 6 Payee address; City; State; Zip Code 9414 N. Lamar Austin TX 78753	8 Amount (\$) 146.24
	7 Purpose of expenditure (See instructions regarding type of information required.) Dinner for CASA Tx Volunteers	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
4 Date 06/29/2004	5 Payee name Jeffreys 6 Payee address; City; State; Zip Code 1204 West Lynn Austin TX 78703	8 Amount (\$) 58.00
	7 Purpose of expenditure (See instructions regarding type of information required.) Meeting with State Representative	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
4 Date 05/21/2004	5 Payee name Lora Livingston 6 Payee address; City; State; Zip Code P.O.Box 1748 Austin TX 78767	8 Amount (\$) 10.00
	7 Purpose of expenditure (See instructions regarding type of information required.) Judge Hathaway's Farewell	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
4 Date 01/21/2004	5 Payee name Marriott Capitol 6 Payee address; City; State; Zip Code 701 E. 11th Street Austin TX 78701	8 Amount (\$) 5.00
	7 Purpose of expenditure (See instructions regarding type of information required.) Parking	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
4 Date 01/12/2004	5 Payee name Ryan Meurer 6 Payee address; City; State; Zip Code 6808 Shawcross Lane Fayetteville NC 28314	8 Amount (\$) 150.00
	7 Purpose of expenditure (See instructions regarding type of information required.) Repair of computer -virus	<input checked="" type="checkbox"/> Reimbursement from political contributions intended



# POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

## SCHEDULE G

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report:  
17/24

2 FILER NAME

Hon. W. Jeanne Meurer

3 ACCOUNT # (Ethics Commission filers)  
00020526

4 Date 04/21/2004	5 Payee name National Car Rental	8 Amount (\$) 31.50
	6 Payee address; City; State; Zip Code Scottsdale Air Center 15290 N.,78th Way Scottsdale AZ 85260	
	7 Purpose of expenditure (See instructions regarding type of information required.) Gasoline for Rental Car - 7 gal @ \$4.50 per gallon -- Vis - it Juvenile Justice Facility	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
4 Date 04/21/2004	5 Payee name National Car Rental	8 Amount (\$) 225.47
	6 Payee address; City; State; Zip Code Scottsdale Air Center 15290 N.,78th Way Scottsdale AZ 85260	
	7 Purpose of expenditure (See instructions regarding type of information required.) Rental Car for Visit of Juvenile Justice Facility	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
4 Date 05/21/2004	5 Payee name Office Depot	8 Amount (\$) 443.73
	6 Payee address; City; State; Zip Code 8752 Research Blvd.  Austin TX 78758	
	7 Purpose of expenditure (See instructions regarding type of information required.) Office Chairs	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
4 Date 05/21/2004	5 Payee name Office Depot	8 Amount (\$) 59.38
	6 Payee address; City; State; Zip Code 8752 Research Blvd.  Austin TX 78758	
	7 Purpose of expenditure (See instructions regarding type of information required.) Office supplies	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
4 Date 05/21/2004	5 Payee name Office Depot	8 Amount (\$) 80.79
	6 Payee address; City; State; Zip Code 8752 Research Blvd.  Austin TX 78758	
	7 Purpose of expenditure (See instructions regarding type of information required.) Computer Keyboard	<input checked="" type="checkbox"/> Reimbursement from political contributions intended

# POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

## SCHEDULE G

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages report: 18/24
2 FILER NAME Hon. W. Jeanne Meurer		3 ACCOUNT # (Ethics Commission filers) 00020526
4 Date 06/21/2004	5 Payee name Office Depot 6 Payee address; City; State; Zip Code 8752 Research Blvd. Austin TX 78758 7 Purpose of expenditure (See instructions regarding type of information required.) Office Supplies	8 Amount (\$) 36.92 <input checked="" type="checkbox"/> Reimbursement from political contributions intended
4 Date 01/21/2004	5 Payee name Officemax 6 Payee address; City; State; Zip Code 10001 Research Blvd. Austin TX 78759 7 Purpose of expenditure (See instructions regarding type of information required.) Software	8 Amount (\$) 64.90 <input checked="" type="checkbox"/> Reimbursement from political contributions intended
4 Date 01/21/2004	5 Payee name Officemax 6 Payee address; City; State; Zip Code 10001 Research Blvd. Austin TX 78759 7 Purpose of expenditure (See instructions regarding type of information required.) Toner for printer	8 Amount (\$) 46.86 <input checked="" type="checkbox"/> Reimbursement from political contributions intended
4 Date 01/21/2004	5 Payee name Officemax 6 Payee address; City; State; Zip Code 10001 Research Blvd. Austin TX 78759 7 Purpose of expenditure (See instructions regarding type of information required.) Software	8 Amount (\$) 64.90 <input checked="" type="checkbox"/> Reimbursement from political contributions intended
4 Date 05/21/2004	5 Payee name Officemax 6 Payee address; City; State; Zip Code 10001 Research Blvd. Austin TX 78759 7 Purpose of expenditure (See instructions regarding type of information required.) Computer Mouse	8 Amount (\$) 54.11 <input checked="" type="checkbox"/> Reimbursement from political contributions intended

# POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

## SCHEDULE G

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages report: 19/24
2 FILER NAME Hon. W. Jeanne Meurer		3 ACCOUNT # (Ethics Commission filers) 00020526
4 Date 05/21/2004	5 Payee name Officemax 6 Payee address; City; State; Zip Code 10001 Research Blvd. Austin TX 78759	8 Amount (\$) 27.77
	7 Purpose of expenditure (See instructions regarding type of information required.) Office supplies	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
4 Date 06/21/2004	5 Payee name Officemax 6 Payee address; City; State; Zip Code 10001 Research Blvd. Austin TX 78759	8 Amount (\$) 148.97
	7 Purpose of expenditure (See instructions regarding type of information required.) Office Supplies	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
4 Date 04/21/2004	5 Payee name Paper Place 6 Payee address; City; State; Zip Code 4001 N.Lamar Blvd. Austin TX 78756	8 Amount (\$) 50.82
	7 Purpose of expenditure (See instructions regarding type of information required.) Business Cards/Envelopes	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
4 Date 04/21/2004	5 Payee name Refreshment Center 6 Payee address; City; State; Zip Code Arizona Biltmore Resort 2400 E. Missouri Phoenix AZ 85016	8 Amount (\$) 77.18
	7 Purpose of expenditure (See instructions regarding type of information required.) Dinner - Visit Juvenile Justice Facility	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
4 Date 05/21/2004	5 Payee name Roaring Fork 6 Payee address; City; State; Zip Code 701 Congress Austin TX 78701	8 Amount (\$) 104.00
	7 Purpose of expenditure (See instructions regarding type of information required.) Dinner for Staff	<input checked="" type="checkbox"/> Reimbursement from political contributions intended

# POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

## SCHEDULE G

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages report: 20/24
2 FILER NAME Hon. W. Jeanne Meurer		3 ACCOUNT # (Ethics Commission filers) 00020526
4 Date 04/21/2004	5 Payee name Scottsdale Air Center 6 Payee address; City; State; Zip Code Scottsdale Air Center 78th Way Scottsdale AZ 85260 7 Purpose of expenditure (See instructions regarding type of information required.) Breakfast -Visit Juvenile Justice Facility	8 Amount (\$) 17.18 <input checked="" type="checkbox"/> Reimbursement from political contributions intended
4 Date 01/21/2004	5 Payee name Shoal Creek 6 Payee address; City; State; Zip Code 909 N. Lamar Blvd. Austin TX 78701 7 Purpose of expenditure (See instructions regarding type of information required.) Meeting/dinner/CPS	8 Amount (\$) 34.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended
4 Date 02/21/2004	5 Payee name Shoal Creek 6 Payee address; City; State; Zip Code 909 N. Lamar Blvd. Austin TX 78701 7 Purpose of expenditure (See instructions regarding type of information required.) Meeting/CPS	8 Amount (\$) 54.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended
4 Date 02/21/2004	5 Payee name Shoal Creek 6 Payee address; City; State; Zip Code 909 N. Lamar Blvd. Austin TX 78701 7 Purpose of expenditure (See instructions regarding type of information required.) Meeting/CPS	8 Amount (\$) 27.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended
4 Date 03/21/2004	5 Payee name Shoal Creek 6 Payee address; City; State; Zip Code 909 N. Lamar Blvd. Austin TX 78701 7 Purpose of expenditure (See instructions regarding type of information required.) Meeting with CPS and DA	8 Amount (\$) 53.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended

# POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

## SCHEDULE G

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report:  
21/24

2 FILER NAME

Hon. W. Jeanne Meurer

3 ACCOUNT # (Ethics Commission filers)  
00020526

4 Date 06/28/2004	5 Payee name Shoal Creek	8 Amount (\$) 14.00
	6 Payee address; City; State; Zip Code 909 N. Lamar Blvd.  Austin TX 78701	
	7 Purpose of expenditure (See instructions regarding type of information required.) Meeting regarding CPS issue	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
4 Date 05/21/2004	5 Payee name Shoplet.com	8 Amount (\$) 26.25
	6 Payee address; City; State; Zip Code 55 John Street  New York NY 10038	
	7 Purpose of expenditure (See instructions regarding type of information required.) Office supplies	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
4 Date 05/21/2004	5 Payee name Shoreline Grill	8 Amount (\$) 127.67
	6 Payee address; City; State; Zip Code 98 San Jacinto Blvd.  Austin TX 78701	
	7 Purpose of expenditure (See instructions regarding type of information required.) Trial Lawyers dinner – Courthouse project	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
4 Date 06/21/2004	5 Payee name TGT Direct	8 Amount (\$) 173.21
	6 Payee address; City; State; Zip Code 1000 Nicollet Mall  Minneapolis MN 55403	
	7 Purpose of expenditure (See instructions regarding type of information required.) Office Blinds	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
4 Date 04/21/2004	5 Payee name Target	8 Amount (\$) 32.46
	6 Payee address; City; State; Zip Code 8601 Research Blvd  Austin TX 78759	
	7 Purpose of expenditure (See instructions regarding type of information required.) Coffeepot for Office	<input checked="" type="checkbox"/> Reimbursement from political contributions intended

# POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

## SCHEDULE G

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages report: 22/24
2 FILER NAME Hon. W. Jeanne Meurer		3 ACCOUNT # (Ethics Commission filers) 00020526
4 Date 06/21/2004	5 Payee name Target 6 Payee address; City; State; Zip Code 8601 Research Blvd Austin TX 78759	8 Amount (\$) 23.98
	7 Purpose of expenditure (See instructions regarding type of information required.) Juryroom Coffee Pot	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
4 Date 05/21/2004	5 Payee name Tavern 6 Payee address; City; State; Zip Code 922 W. 12th Street Austin TX 78701	8 Amount (\$) 20.00
	7 Purpose of expenditure (See instructions regarding type of information required.) Meeting CPS	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
4 Date 06/21/2004	5 Payee name Tavern 6 Payee address; City; State; Zip Code 922 W. 12th Street Austin TX 78701	8 Amount (\$) 24.95
	7 Purpose of expenditure (See instructions regarding type of information required.) CPS/A.J. Meeting	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
4 Date 06/21/2004	5 Payee name Tavern 6 Payee address; City; State; Zip Code 922 W. 12th Street Austin TX 78701	8 Amount (\$) 27.55
	7 Purpose of expenditure (See instructions regarding type of information required.) New Judge Reception	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
4 Date 03/21/2004	5 Payee name Thundercloud #10 6 Payee address; City; State; Zip Code 903 W. 12th Street Austin TX 78701	8 Amount (\$) 11.59
	7 Purpose of expenditure (See instructions regarding type of information required.) Staff Lunch	<input checked="" type="checkbox"/> Reimbursement from political contributions intended

# POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

## SCHEDULE G

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report:  
23/24

2 FILER NAME  
Hon. W. Jeanne Meurer

3 ACCOUNT # (Ethics Commission filers)  
00020526

4 Date 01/21/2004	5 Payee name Wolf Camera	8 Amount (\$) 24.85
	6 Payee address; City; State; Zip Code 607 Congress  Austin TX 78701	
	7 Purpose of expenditure (See instructions regarding type of information required.) Filing Dinner photos	<input checked="" type="checkbox"/> Reimbursement from political contributions intended

4 Date 01/21/2004	5 Payee name Wolf Camera	8 Amount (\$) 14.48
	6 Payee address; City; State; Zip Code 607 Congress  Austin TX 78701	
	7 Purpose of expenditure (See instructions regarding type of information required.) Film for Filing Dinner Party	<input checked="" type="checkbox"/> Reimbursement from political contributions intended

# ASSETS VALUED AT \$500 OR MORE

# SCHEDULE M

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages report:

24/24

2 FILER NAME

Hon. W. Jeanne Meurer

3 ACCOUNT # (Ethics Commission filers)

00020526

4 Description of Asset

ACI Omega Notebook Compter

Description of Asset

Desktop Computer - On line Tech Support

Description of Asset

Computer Monitor