

C/OH REPORT OF UNEXPENDED CONTRIBUTIONS AND EXPENDITURES

FORM **C/OH-UC**

6458

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

PAGE #
Page 2 of 2

8 C/OH NAME Meyer, Howard Frederick (Mr.)

9 ACCOUNT # (Ethics Commission filers)
00057836

10 Date

08/15/2006

11 Payee name
Ecology Action

12 Payee address: City: State: Zip Code
707 East 9th Street
Austin, TX 78701

13 Amount (\$)

\$30.00

TRAVIS COUNTY CLERK
AUG 19 2006 2:02 PM

14 Purpose of expenditure

Payment for travel outside Texas (complete boxes 16-22)

15 Is expenditure a contribution to a candidate, officeholder, or political committee?

Yes
 No

16 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)

17 Departure city / location

18 Departure date

19 Destination city / location

20 Arrival date

21 Means of transportation

22 Purpose of travel

10 Date

08/15/2006

11 Payee name
Habitat for Humanity

12 Payee address: City: State: Zip Code
310 Comal Street
Austin, TX 78701

13 Amount (\$)

\$50.00

14 Purpose of expenditure

Payment for travel outside Texas (complete boxes 16-22)

15 Is expenditure a contribution to a candidate, officeholder, or political committee?

Yes
 No

16 Name of person(s) traveling on whose behalf the expenditure for travel was made (attach additional pages if necessary)

17 Departure city / location

18 Departure date

19 Destination city / location

20 Arrival date

21 Means of transportation

22 Purpose of travel

CANDIDATE / OFFICEHOLDER REPORT OF UNEXPENDED CONTRIBUTIONS

FORM C/OH-UC
COVER SHEET

#6458

Page 1 of 2

The C/OH-UC INSTRUCTION GUIDE explains how to complete this form.

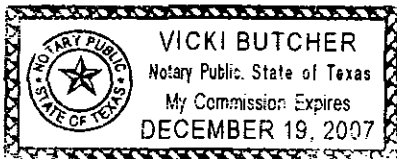
1 ACCOUNT # (Ethics Commission files)

00057836

2 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Mr.	FIRST Howard Frederick	MI	OFFICE USE ONLY		
	NICKNAME Buddy	LAST Meyer	SUFFIX			Date Received
3 CANDIDATE / OFFICEHOLDER ADDRESS <input type="checkbox"/> Change of address	ADDRESS / PO BOX P.O. Box 2043 Austin, TX 78768-2043	APT./SUITE #.	CITY:	STATE,	ZIP CODE	
	Date Hand-delivered or Date Postmarked					
4 REPORT TYPE	<input type="checkbox"/> Annual <input checked="" type="checkbox"/> Final Disposition			Receipt #	Amount	
5 PERIOD COVERED	Month	Day	Year	Month	Day	Year
	07/01/2006			THROUGH	12/31/2006	
6 TOTALS	1. TOTAL AMOUNT OF UNEXPENDED POLITICAL CONTRIBUTIONS AS OF DEC. 31 OF PREVIOUS YEAR			\$	0.00	
	2. TOTAL AMOUNT OF INTEREST AND OTHER INCOME EARNED ON UNEXPENDED POLITICAL CONTRIBUTIONS DURING THE PREVIOUS YEAR.			\$	0.00	

7 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.



howard f meyer

Howard F. Meyer
Signature of Candidate or Officeholder

1.19.07

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Howard F. Meyer, this the 19th day of January, 2007, to certify which, witness my hand and seal of office.

Vicki Butcher
Signature of officer administering oath

Vicki Butcher
Printed name of officer administering oath

Sr. Legal Secretary
Title of officer administering oath