

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH COVER SHEET PG 2

14 C/OH NAME Meurer, W. Jeanne (Hon.)

15 ACCOUNT # (Ethics Commission filers)
00020526

16 NOTICE FROM POLITICAL COMMITTEE(S)

.. This box is for notice of 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. ..

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

17 CONTRIBUTION TOTALS

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$	0.00
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2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	0.00
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EXPENDITURE TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED	\$	0.00
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4. TOTAL POLITICAL EXPENDITURES	\$	15,742.08
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CONTRIBUTION BALANCE

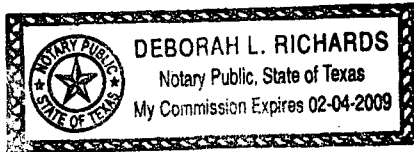
5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	6,697.42
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OUTSTANDING LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	0.00
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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.



W. Jeanne Meurer
 Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said W. Jeanne Meurer, this the 13th day of January, 2009, to certify which, witness my hand and seal of office.

Deborah Richards
 Signature of officer administering oath

Deborah Richards
 Print name of officer administering oath

Notary
 Title of officer administering oath

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 1/4 Report: 3/15

2 FILER NAME Meurer, W. Jeanne (Hon.)**3** ACCOUNT # (Ethics Commission filers)

00020526

4 Date

10/20/2008

5 Payee name

Center for Child Protection

7 Amount

(\$)

\$200.00

6 Payee address; City; State; Zip Code1110 East 32nd Street
Austin, TX 78722**8** Purpose of payment (See instructions regarding type of information required.)

Donation

(If travel outside of Texas, complete Schedule T) **9** ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:

Office held:

Date

07/01/2008

Payee name

City of Austin

Amount

(\$)

\$30.00

Payee address; City; State; Zip Code

P. O. Box 2135
Austin, TX 78769

Purpose of payment (See instructions regarding type of information required.)

Parking

(If travel outside of Texas, complete Schedule T) **** Complete if direct expenditure to benefit Candidate/Officeholder ****
Candidate / Officeholder name:

Office sought:

Office held:

Date

12/05/2008

Payee name

Galan, Velia

Amount

(\$)

\$250.00

Payee address; City; State; Zip Code

1204 Barbara Drive
San Marcos, TX 78666

Purpose of payment (See instructions regarding type of information required.)

Staff Bonus - End of year - Christmas

(If travel outside of Texas, complete Schedule T) **** Complete if direct expenditure to benefit Candidate/Officeholder ****
Candidate / Officeholder name:

Office sought:

Office held:

Date

07/15/2008

Payee name

Kitchens, Deborah (Ms.)

Amount

(\$)

\$500.00

Payee address; City; State; Zip Code

158 FM 86
Red Rock, TX 78662

Purpose of payment (See instructions regarding type of information required.)

Update and prepare semi annual campaign report

(If travel outside of Texas, complete Schedule T) **** Complete if direct expenditure to benefit Candidate/Officeholder ****
Candidate / Officeholder name:

Office sought:

Office held:

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 2/4 Report: 4/15

2 FILER NAME Meurer, W. Jeanne (Hon.)

3 ACCOUNT # (Ethics Commission filers)
00020526

4 Date

12/01/2008

5 Payee name
Kitchens, Deborah (Ms.)

6 Payee address; City; State; Zip Code
158 FM 86
Red Rock, TX 78662

7 Amount
(\$)

\$550.00

8 Purpose of payment (See instructions regarding type of information required.)
Update and prepare semi annual campaign report and to cover expenditures of CLE training seminar

(If travel outside of Texas, complete Schedule T)

9 ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

Date

12/05/2008

Payee name
Kitchens, Deborah (Ms.)

Payee address; City; State; Zip Code
158 FM 86
Red Rock, TX 78662

Amount
(\$)

\$250.00

Purpose of payment (See instructions regarding type of information required.)
Staff Bonus - End of year - Christmas

(If travel outside of Texas, complete Schedule T)

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

Date

12/05/2008

Payee name
Riley, Angela (Ms.)

Payee address; City; State; Zip Code
11901 Swearingen Drive
Austin, TX 78758

Amount
(\$)

\$250.00

Purpose of payment (See instructions regarding type of information required.)
Staff Bonus - End of year - Christmas

(If travel outside of Texas, complete Schedule T)

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

Date

08/01/2008

Payee name
Serna, Bert

Payee address; City; State; Zip Code
408 Candlelight
San Marcos, TX 78666

Amount
(\$)

\$50.00

Purpose of payment (See instructions regarding type of information required.)
Water Bottles for Juvenile office

(If travel outside of Texas, complete Schedule T)

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

Office sought:
Office held:

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 3/4 Report: 5/15

2 FILER NAME Meurer, W. Jeanne (Hon.)

3 ACCOUNT # (Ethics Commission filers)
00020526

4 Date

10/01/2008

5 Payee name
Serna, Bert

.....
6 Payee address; City; State; Zip Code
408 Candlelight
San Marcos, TX 78666

7 Amount (\$)

\$150.00

8 Purpose of payment (See instructions regarding type of information required.)
Office Supplies for Juvenile office

9 ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

(If travel outside of Texas, complete Schedule T)

Office sought:
Office held:

Date

10/08/2008

Payee name
Serna, Bert

.....
Payee address; City; State; Zip Code
408 Candlelight
San Marcos, TX 78666

Amount (\$)

\$100.00

Purpose of payment (See instructions regarding type of information required.)
Reimburse TCDP ticket

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

(If travel outside of Texas, complete Schedule T)

Office sought:
Office held:

Date

12/05/2008

Payee name
Serna, Bert

.....
Payee address; City; State; Zip Code
408 Candlelight
San Marcos, TX 78666

Amount (\$)

\$250.00

Purpose of payment (See instructions regarding type of information required.)
Staff Bonus - End of Year - Christmas

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

(If travel outside of Texas, complete Schedule T)

Office sought:
Office held:

Date

07/01/2008

Payee name
Sprint

.....
Payee address; City; State; Zip Code
P. O. Box 219554
Austin, TX 78767

Amount (\$)

\$136.90

Purpose of payment (See instructions regarding type of information required.)
Cell Phone Bill

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

(If travel outside of Texas, complete Schedule T)

Office sought:
Office held:

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 4/4 Report: 6/15

2 FILER NAME Meurer, W. Jeanne (Hon.)

3 ACCOUNT # (Ethics Commission filers)
00020526

4 Date 08/01/2008	5 Payee name Sprint 6 Payee address; City; State; Zip Code P. O. Box 219554 Austin, TX 78767	7 Amount (\$) \$181.26
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8 Purpose of payment (See instructions regarding type of information required.) Cell Phone Bill (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
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Date 09/01/2008	Payee name Sprint Payee address; City; State; Zip Code P. O. Box 219554 Austin, TX 78767	Amount (\$) \$135.89
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Purpose of payment (See instructions regarding type of information required.) Cell Phone Bill (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
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Date 10/09/2008	Payee name Sprint Payee address; City; State; Zip Code P. O. Box 219554 Austin, TX 78767	Amount (\$) \$138.79
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Purpose of payment (See instructions regarding type of information required.) Cell Phone Bill (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
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Date 11/07/2008	Payee name Sprint Payee address; City; State; Zip Code P. O. Box 219554 Austin, TX 78767	Amount (\$) \$134.35
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Purpose of payment (See instructions regarding type of information required.) Cell Phone Bill (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
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POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 1/7 Report: 7/15

2 FILER NAME Meurer, W. Jeanne (Hon.)

3 ACCOUNT # (Ethics Commission filers)
00020526

4 Date	5 Payee name	8 Amount (\$)
12/01/2008	Austinuts ----- Payee address; City; State; Zip Code 2900 W. Anderson Lane Austin, TX 78757 ----- Purpose of expenditure (See instructions regarding type of information required.) Staff Christmas (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	\$47.55 <input checked="" type="checkbox"/> Reimbursement from political contributions intended
10/21/2008	Belmont ----- Payee address; City; State; Zip Code 305 West 6th Street Austin, TX 78701 ----- Purpose of expenditure (See instructions regarding type of information required.) Meeting Court Administrator (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	\$12.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended
12/02/2008	Belmont ----- Payee address; City; State; Zip Code 305 West 6th Street Austin, TX 78701 ----- Purpose of expenditure (See instructions regarding type of information required.) CPS Model Court Staff Meeting (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	\$81.32 <input checked="" type="checkbox"/> Reimbursement from political contributions intended
12/03/2008	Belmont ----- Payee address; City; State; Zip Code 305 West 6th Street Austin, TX 78701 ----- Purpose of expenditure (See instructions regarding type of information required.) CPS Model Court Staff Dinner (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	\$112.33 <input checked="" type="checkbox"/> Reimbursement from political contributions intended
10/13/2008	Best Buy ----- Payee address; City; State; Zip Code 9607 Research Blvd. Austin, TX 78759 ----- Purpose of expenditure (See instructions regarding type of information required.) Computer/Office supplies (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	\$309.55 <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 PAGE #

Schedule: 2/7 Report: 8/15

2 FILER NAME Meurer, W. Jeanne (Hon.)

3 ACCOUNT #

(Ethics Commission filers)

00020526

4 Date	5 Payee name Best Buy	8 Amount (\$)
11/11/2008	<p>6 Payee address; City; State; Zip Code 9607 Research Blvd. Austin, TX 78759</p> <p>7 Purpose of expenditure (See instructions regarding type of information required.) Blackberry phone (If travel outside of Texas, complete Schedule T) <input type="checkbox"/></p>	<p>\$244.31</p> <p><input checked="" type="checkbox"/> Reimbursement from political contributions intended</p>
11/19/2008	<p>Payee name Best Buy</p> <p>Payee address; City; State; Zip Code 9607 Research Blvd. Austin, TX 78759</p> <p>Purpose of expenditure (See instructions regarding type of information required.) AV Cable (If travel outside of Texas, complete Schedule T) <input type="checkbox"/></p>	<p>\$37.97</p> <p><input checked="" type="checkbox"/> Reimbursement from political contributions intended</p>
11/22/2008	<p>Payee name Best Buy</p> <p>Payee address; City; State; Zip Code 9607 Research Blvd. Austin, TX 78759</p> <p>Purpose of expenditure (See instructions regarding type of information required.) Cabling, plugs, wiring for South office (If travel outside of Texas, complete Schedule T) <input type="checkbox"/></p>	<p>\$1,963.98</p> <p><input checked="" type="checkbox"/> Reimbursement from political contributions intended</p>
11/22/2008	<p>Payee name Best Buy</p> <p>Payee address; City; State; Zip Code 9607 Research Blvd. Austin, TX 78759</p> <p>Purpose of expenditure (See instructions regarding type of information required.) Cabling for new office (If travel outside of Texas, complete Schedule T) <input type="checkbox"/></p>	<p>\$190.41</p> <p><input checked="" type="checkbox"/> Reimbursement from political contributions intended</p>
12/06/2008	<p>Payee name Best Buy</p> <p>Payee address; City; State; Zip Code 9607 Research Blvd. Austin, TX 78759</p> <p>Purpose of expenditure (See instructions regarding type of information required.) Computers, printers, phones, cables, webcam for south ofc transition to new location and furniture (If travel outside of Texas, complete Schedule T) <input type="checkbox"/></p>	<p>\$6,460.76</p> <p><input checked="" type="checkbox"/> Reimbursement from political contributions intended</p>

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 3/7 Report: 9/15

2 FILER NAME Meurer, W. Jeanne (Hon.)

3 ACCOUNT #

(Ethics Commission filers)

00020526

4 Date	5 Payee name County Line on the Lake	8 Amount (\$)
07/01/2008	6 Payee address; City; State; Zip Code 5204 FM 2222 Austin, TX 78731	\$20.00
	7 Purpose of expenditure (See instructions regarding type of information required.) Meeting with Model Court Team (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
07/14/2008	Payee name Delta Airlines Payee address; City; State; Zip Code P. O. Box 20706 Atlanta, GA 30320	\$453.50
	Purpose of expenditure (See instructions regarding type of information required.) (See travel info on Schedule T) (If travel outside of Texas, complete Schedule T) <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
11/14/2008	Payee name Guero's Restaurant Payee address; City; State; Zip Code 1412 S. Congress Ave. Austin, TX 78704	\$17.00
	Purpose of expenditure (See instructions regarding type of information required.) Meeting with Associate Judges (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
12/09/2008	Payee name Guero's Restaurant Payee address; City; State; Zip Code 1412 S. Congress Ave. Austin, TX 78704	\$70.00
	Purpose of expenditure (See instructions regarding type of information required.) Retirement event (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
10/24/2008	Payee name Hyatt Regency Payee address; City; State; Zip Code 575 Hyatt Lost Pines Road Lost Pines, TX 78612	\$424.66
	Purpose of expenditure (See instructions regarding type of information required.) American Board of Trial Lawyers meeting/hotel, meals and travel (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	<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 PAGE #
Schedule: 4/7 Report: 10/15

2 FILER NAME Meurer, W. Jeanne (Hon.)

3 ACCOUNT # (Ethics Commission filers)
00020526

4 Date	5 Payee name	8 Amount (\$)
10/23/2008	Junior League of Austin ----- 6 Payee address; City; State; Zip Code 5416 Parkcrest Austin, TX 78731 7 Purpose of expenditure (See instructions regarding type of information required.) Donation (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	\$450.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended
11/04/2008	Payee name Mars ----- Payee address; City; State; Zip Code 1610 San Antonio St Austin, TX 78701 Purpose of expenditure (See instructions regarding type of information required.) Meeting with Juvenile Associate Judges (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	Amount (\$) \$20.25 <input checked="" type="checkbox"/> Reimbursement from political contributions intended
07/28/2008	Payee name Meurer, W. Jeanne ----- Payee address; City; State; Zip Code 4502 Spanish Oak Trail Austin, TX 78731 Purpose of expenditure (See instructions regarding type of information required.) (See travel info on Schedule T) (If travel outside of Texas, complete Schedule T) <input checked="" type="checkbox"/>	Amount (\$) \$150.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended
07/01/2008	Payee name Roaring Fork ----- Payee address; City; State; Zip Code 701 Congress Austin, TX 78701 Purpose of expenditure (See instructions regarding type of information required.) Meeting Model Court Team (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	Amount (\$) \$42.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended
11/06/2008	Payee name Roaring Fork ----- Payee address; City; State; Zip Code 701 Congress Austin, TX 78701 Purpose of expenditure (See instructions regarding type of information required.) Appreciation Dinner Shelter Staff (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	Amount (\$) \$252.00 <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 PAGE #

Schedule: 5/7 Report: 11/15

2 FILER NAME Meurer, W. Jeanne (Hon.)

3 ACCOUNT #

(Ethics Commission filers)

00020526

4 Date	5 Payee name Roaring Fork	8 Amount (\$)
12/10/2008	6 Payee address; City; State; Zip Code 701 Congress Austin, TX 78701	\$137.25
	7 Purpose of expenditure (See instructions regarding type of information required.) Volunteer Appreciation Dinner (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date	Payee name Sheraton Norfolk	Amount (\$)
08/01/2008	Payee address; City; State; Zip Code 777 Waterside Drive Norfolk, VA 23510	\$375.78
	Purpose of expenditure (See instructions regarding type of information required.) (See travel info on Schedule T) (If travel outside of Texas, complete Schedule T) <input checked="" type="checkbox"/>	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date	Payee name Shoal Creek	Amount (\$)
10/08/2008	Payee address; City; State; Zip Code 909 N. Lamar Blvd. Austin, TX 78701	\$42.00
	Purpose of expenditure (See instructions regarding type of information required.) Meeting Juvenile Associate Judges (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date	Payee name Shoal Creek	Amount (\$)
10/23/2008	Payee address; City; State; Zip Code 909 N. Lamar Blvd. Austin, TX 78701	\$21.00
	Purpose of expenditure (See instructions regarding type of information required.) Docket Meeting (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date	Payee name Target	Amount (\$)
07/11/2008	Payee address; City; State; Zip Code 8601 Research Blvd Austin, TX 78759	\$65.89
	Purpose of expenditure (See instructions regarding type of information required.) Office supplies (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	<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 PAGE #
Schedule: 6/7 Report: 12/15

2 FILER NAME Meurer, W. Jeanne (Hon.)

3 ACCOUNT # (Ethics Commission filers)
00020526

4 Date	5 Payee name Target	8 Amount (\$)
08/13/2008	6 Payee address; City; State; Zip Code 8601 Research Blvd Austin, TX 78759	\$157.47
	7 Purpose of expenditure (See instructions regarding type of information required.) Office supplies/computer (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date	Payee name Target	Amount (\$)
10/12/2008	Payee address; City; State; Zip Code 8601 Research Blvd Austin, TX 78759	\$57.91
	Purpose of expenditure (See instructions regarding type of information required.) Office supplies (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date	Payee name Target	Amount (\$)
12/02/2008	Payee address; City; State; Zip Code 8601 Research Blvd Austin, TX 78759	\$75.00
	Purpose of expenditure (See instructions regarding type of information required.) Staff gift cards Christmas (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date	Payee name Tavern	Amount (\$)
07/16/2008	Payee address; City; State; Zip Code 922 W. 12th Street Austin, TX 78701	\$50.00
	Purpose of expenditure (See instructions regarding type of information required.) Meeting with County Judge (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date	Payee name Tavern	Amount (\$)
08/07/2008	Payee address; City; State; Zip Code 922 W. 12th Street Austin, TX 78701	\$38.00
	Purpose of expenditure (See instructions regarding type of information required.) Meeting with Juvenile Staff (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	<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 PAGE #

Schedule: 7/7 Report: 13/15

2 FILER NAME Meurer, W. Jeanne (Hon.)

3 ACCOUNT #

(Ethics Commission filers)

00020526

4 Date

08/02/2008

5 Payee name
The Grove

6 Payee address; City; State; Zip Code
6317 Bee Caves
Austin, TX 78746

8 Amount (\$)

\$55.00

7 Purpose of expenditure (See instructions regarding type of information required.)
Meeting LBJ student interns

(If travel outside of Texas, complete Schedule T)

Reimbursement from political contributions intended

ASSETS VALUED AT \$500 OR MORE

SCHEDULE M

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #

Schedule: 1/1 Report: 14/15

2 FILER NAME Meurer, W. Jeanne (Hon.)

3 ACCOUNT # (Ethics Commission filers)

00020526

4 Description of Asset

Apple Computer

Description of Asset

Apple Computer

**IN-KIND CONTRIBUTION OR POLITICAL EXPENDITURE
FOR TRAVEL OUTSIDE OF TEXAS****SCHEDULE T**

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 1/1 Report: 15/15
2 FILER NAME Meurer, W. Jeanne (Hon.)		3 ACCOUNT # (Ethics Commission filers) 00020526
4 Name of Contributor / Corporation or Labor Organization / Pledgor / Payee Delta Airlines		
5 Contribution / Expenditure reported on: <input type="checkbox"/> Schedule A <input type="checkbox"/> Schedule B <input type="checkbox"/> Schedule C <input type="checkbox"/> Schedule D <input type="checkbox"/> Schedule F <input checked="" type="checkbox"/> Schedule G <input type="checkbox"/> Schedule H <input type="checkbox"/> Schedule N <input type="checkbox"/> COH-UC <input type="checkbox"/> COH-T <input type="checkbox"/> PAC-T <input type="checkbox"/> SPAC-T		
6 Dates of travel 07/28/2008 07/30/2008	7 Name of person(s) traveling Meurer, W. Jeanne (Ms.)	
	8 Departure city or name of departure location Austin, Texas	
	9 Destination city or name of destination location Norfolk, Va	
10 Means of transportation Airline	11 Purpose of travel (including name of conference, seminar, or other event) Attend the NCJFCJ Conference	
Name of Contributor / Corporation or Labor Organization / Pledgor / Payee Meurer, W. Jeanne		
Contribution / Expenditure reported on: <input type="checkbox"/> Schedule A <input type="checkbox"/> Schedule B <input type="checkbox"/> Schedule C <input type="checkbox"/> Schedule D <input type="checkbox"/> Schedule F <input checked="" type="checkbox"/> Schedule G <input type="checkbox"/> Schedule H <input type="checkbox"/> Schedule N <input type="checkbox"/> COH-UC <input type="checkbox"/> COH-T <input type="checkbox"/> PAC-T <input type="checkbox"/> SPAC-T		
Dates of travel 07/28/2008 07/30/2008	Name of person(s) traveling Meurer, W. Jeanne (Ms.)	
	Departure city or name of departure location Austin, Tx	
	Destination city or name of destination location Norfolk, Va	
Means of transportation Air	Purpose of travel (including name of conference, seminar, or other event) Attending NCJFCJ - Meals expense not covered by county	
Name of Contributor / Corporation or Labor Organization / Pledgor / Payee Sheraton Norfolk		
Contribution / Expenditure reported on: <input type="checkbox"/> Schedule A <input type="checkbox"/> Schedule B <input type="checkbox"/> Schedule C <input type="checkbox"/> Schedule D <input type="checkbox"/> Schedule F <input checked="" type="checkbox"/> Schedule G <input type="checkbox"/> Schedule H <input type="checkbox"/> Schedule N <input type="checkbox"/> COH-UC <input type="checkbox"/> COH-T <input type="checkbox"/> PAC-T <input type="checkbox"/> SPAC-T		
Dates of travel 07/28/2008 07/30/2008	Name of person(s) traveling Meurer, W. Jeanne (Ms.)	
	Departure city or name of departure location Austin, Tx	
	Destination city or name of destination location Norfolk, Va	
Means of transportation Air	Purpose of travel (including name of conference, seminar, or other event) Attending NCJFCJ conference	