Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 1-800-325-8506

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

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

1 ACCOUNT# (Ethics Commission filers)

2 Total pages filed:

OFFICE USE ONLY

Date Received

RECEIVED JUL 8 2003 CITY SECRETARY

Date Hand-delivered or Date Postmarked

Receipt # Amount

Date Processed

Date Imaged

3 CANDIDATE / OFFICEHOLDER NAME

TITLE FIRST MI
Greg A.
NICKNAME LAST SUFFIX
Meyers

4 CANDIDATE / OFFICEHOLDER ADDRESS

☐ Change of Address

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
P.O. Box 941352
Houston, TX 77094-8352

5 CAMPAIGN TREASURER NAME

TITLE FIRST MI
Dr. Charles E.
NICKNAME LAST SUFFIX
Mullins

6 CAMPAIGN TREASURER ADDRESS (Residence or business)

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE
13714 Cottrell Ct.
Houston, TX 77077

7 CAMPAIGN TREASURER PHONE

AREA CODE PHONE NUMBER EXTENSION
(281) 497 - 6322

8 REPORT TYPE

☐ January 15 ☐ 30th day before election ☐ Runoff ☐ 15th day after campaign treasurer appointment (officeholder only)
☒ July 15 ☐ 8th day before election ☐ Exceeded $500 limit ☐ Final report (Attach C/OH - FR)

9 PERIOD COVERED

Month Day Year THROUGH Month Day Year
1 / 1 / 03 6 / 30 / 03

10 ELECTION

ELECTION DATE
Month Day Year
11 / 4 / 03

ELECTION TYPE
☐ Primary ☐ Runoff ☒ General ☐ Special

11 OFFICE

OFFICE HELD (if any)

12 OFFICE SOUGHT (if known)
Houston City Council District G

13 NOTICE OF DIRECT CAMPAIGN EXPENDITURE BY OTHER INDIVIDUALS

** Direct campaign expenditures are campaign expenditures made by others without the candidate's prior consent or approval. Candidates are required to disclose this information only if they receive notification of the direct campaign expenditure. **

Name

Address / PO Box; Apt. / Suite #; City; State; Zip Code

☐ additional pages

GO TO PAGE 2

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 1-800-325-8506

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

14 C/OH NAME: Greg Meyers

15 ACCOUNT # (Ethics Commission filers):

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. **

COMMITTEE TYPE	COMMITTEE NAME
☐ GENERAL	COMMITTEE ADDRESS
☐ SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME
	COMMITTEE CAMPAIGN TREASURER ADDRESS

☐ additional pages

17 NO REPORTABLE ACTIVITY

☐ Check here if no reportable activity occurred during this reporting period. (Sign affidavit below and submit pages 1 and 2 only.)

18 CONTRIBUTION TOTALS

	1. TOTAL POLITICAL CONTRIBUTIONS OF $50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	$ 240.00
	2. **TOTAL POLITICAL CONTRIBUTIONS** (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	$ 16,375.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF $50 OR LESS, UNLESS ITEMIZED	$ 50.00
	4. **TOTAL POLITICAL EXPENDITURES**	$ 11,012.94
OUTSTANDING LOAN TOTALS	5. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	$

19 AFFIDAVIT

BROOKE BLODGETT
NOTARY PUBLIC
STATE OF TEXAS
My Comm. Exp. 02-01-06

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.

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Gregory A. Meyers, this the 8th day of July, 20 03, to certify which, witness my hand and seal of office.

Signature of officer administering oath | Printed name of officer administering oath: Brooke Blodgett | Title of officer administering oath

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 1-800-325-8506

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A1
(FOR FORMS C/OH, C/OH-SS, SC-C/OH, SC-SPAC, SPAC, & SPAC-SS)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this Schedule A1: 15

2 FILER NAME: Greg Meyers

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#:) / 6 Contributor address; City; State; Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
2-8-03	Christopher J. Sullivan [redacted]	$50.00	

9 Principal occupation (Optional) | 10 Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
2-10-03	Billy Wright [redacted]	$100.00	

Principal occupation (Optional) | Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
2-10-03	Dr. Carlos M. DeCastro, Jr. [redacted]	$250.00	

Principal occupation (Optional) | Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
2-11-03	Ann W. Jones [redacted]	$100.00	

Principal occupation (Optional) | Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC (ID#:) / Contributor address; City; State; Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
2-13-03	Donna McNulty Reinbolt [redacted]	$100.00	

Principal occupation (Optional) | Employer (Optional)

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 1-800-325-8506

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A1
(FOR FORMS C/OH, C/OH-SS, SC-C/OH, SC-SPAC, SPAC, & SPAC-SS)

The Instruction Guide explains how to complete this form.

1 Total pages this Schedule A1: 15

2 FILER NAME: Greg Meyers

3 ACCOUNT # (Unless Committee Filers):

4 Date	5 Full name of contributor ☐ out-of-state PAC ID#	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
2-14-03	John Perkins 6 Contributor address, City, State, Zip Code: [redacted]	$100.00	

9 Principal occupation (Optional):

10 Employer (Optional):

Date	Full name of contributor ☐ out-of-state PAC ID#	Amount of contribution ($)	In-kind contribution description (if applicable)
2-15-03	Dr. Harley Rex Contributor address, City, State, Zip Code: [redacted]	$100.00	

Principal occupation (Optional):

Employer (Optional):

Date	Full name of contributor ☐ out-of-state PAC ID#	Amount of contribution ($)	In-kind contribution description (if applicable)
2-15-03	Dr. Jon Van Slate Contributor address, City, State, Zip Code: [redacted]	$100.00	

Principal occupation (Optional):

Employer (Optional):

Date	Full name of contributor ☐ out-of-state PAC ID#	Amount of contribution ($)	In-kind contribution description (if applicable)
2-16-03	Dr. Foster McArthur Contributor address, City, State, Zip Code: [redacted]	$50.00	

Principal occupation (Optional):

Employer (Optional):

Date	Full name of contributor ☐ out-of-state PAC ID#	Amount of contribution ($)	In-kind contribution description (if applicable)
2-16-03	Sue Adcock Contributor address, City, State, Zip Code: [redacted]	$100.00	

Principal occupation (Optional):

Employer (Optional):

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512)463-5800 1-800-325-8506

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A1
(FOR FORMS C/OH, C/OH-SS, SC-C/OH, SC-SPAC, SPAC, & SPAC-SS)

The Instruction Guide explains how to complete this form.

1 Total pages this Schedule A1: 15

2 FILER NAME: Greg Meyers

3 ACCOUNT # (Local Government only):

4 Date	5 Full name of contributor / 6 Contributor address: City, State, Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
2-16-03	Doug Shehan [redacted]	$75.00	
9 Principal occupation (Optional)	10 Employer (Optional)		
2-16-03	Peter Nassab [redacted]	$250.00	
Principal occupation (Optional)	Employer (Optional)		
2-16-03	Rick Weninger [redacted]	$50.00	
Principal occupation (Optional)	Employer (Optional)		
2-16-03	Nestor Caldera [redacted]	$100.00	
Principal occupation (Optional)	Employer (Optional)		
2-16-03	Dr. Tom Vargo [redacted]	$100.00	
Principal occupation (Optional)	Employer (Optional)		

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 1-800-325-8506

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A1
(FOR FORMS C/OH, C/OH-SS, SC-C/OH, SC-SPAC, SPAC, & SPAC-SS)

The Instruction Guide explains how to complete this form.

1 Total Pages this Schedule A1: 25

2 FILER NAME: Greg Meyers

3 ACCOUNT # (if assigned):

4 Date	5 Full name of contributor / 6 Contributor address, City, State, Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
2-16-03	Dr. Mike Nihill [redacted]	$100.00	
9 Principal occupation (Optional)	10 Employer (Optional)		
Date	Full name of contributor / Contributor address, City, State, Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
2-16-03	Vince Morrissette [redacted]	$100.00	
Principal occupation (Optional)	Employer (Optional)		
Date	Full name of contributor / Contributor address, City, State, Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
2-16-03	Dr. Ramesh Krishnan [redacted]	$100.00	
Principal occupation (Optional)	Employer (Optional)		
Date	Full name of contributor / Contributor address, City, State, Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
2-16-03	David Chapman [redacted]	$100.00	
Principal occupation (Optional)	Employer (Optional)		
Date	Full name of contributor / Contributor address, City, State, Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
2-16-03	Judy Sederholm [redacted]	$50.00	
Principal occupation (Optional)	Employer (Optional)		

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 1-800-325-8506

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A1
(FOR FORMS C/OH, C/OH-SS, SC-C/OH, SC-SPAC, SPAC, & SPAC-SS)

The Instruction Guide explains how to complete this form.

1 Total pages this Schedule A1: 15

2 FILER NAME: Greg Meyers

3 ACCOUNT # (Ethics Commission Filers):

4 Date	5 Full name of contributor ☐ out-of-state PAC ID#	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
2-16-03	Nick Vafiadis 6 Contributor address, City, State, Zip Code [redacted]	$100.00	

9 Principal occupation (Optional) | 10 Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC ID#	Amount of contribution ($)	In-kind contribution description (if applicable)
2-16-03	Robert Meyers Contributor address, City, State, Zip Code [redacted]	$1000.00	

Principal occupation (Optional) | Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC ID#	Amount of contribution ($)	In-kind contribution description (if applicable)
2-16-03	Edgar Arthur, JR. Contributor address, City, State, Zip Code [redacted]	$250.00	

Principal occupation (Optional) | Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC ID#	Amount of contribution ($)	In-kind contribution description (if applicable)
2/16/03	Robert L. Erwin Contributor address, City, State, Zip Code [redacted]	$250.00	

Principal occupation (Optional) | Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC ID#	Amount of contribution ($)	In-kind contribution description (if applicable)
2-16-03	Audrey Wasserman Contributor address, City, State, Zip Code [redacted]	$100.00	

Principal occupation (Optional) | Employer (Optional)

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512)463-5800 1-800-325-8506

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A1

(FOR FORMS C/OH, C/OH-SS, SC-C/OH, SC-SPAC, SPAC, & SPAC-SS)

The Instruction Guide explains how to complete this form.

1 Total pages this Schedule A1: 15

2 FILER NAME: Greg Meyers

3 ACCOUNT # (Ethics Commission use only):

4 Date	5 Full name of contributor ☐ out-of-state PAC ID#	6 Contributor address, City, State, Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
2-16-03	Robert W. Mullins	[redacted]	$250.00	

9 Principal occupation (Optional) | 10 Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC ID#	Contributor address, City, State, Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
2-16-03	Frank Louis Marshall	[redacted]	$100.00	

Principal occupation (Optional) | Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC ID#	Contributor address, City, State, Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
2-17-03	Nick Alexander	[redacted]	$100.00	

Principal occupation (Optional) | Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC ID#	Contributor address, City, State, Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
2-17-03	Dr. Charles E. Mullins	[redacted]	$1050.00	

Principal occupation (Optional) | Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC ID#	Contributor address, City, State, Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
2-17-03	Jeannie M. Bollinger	[redacted]	$100.00	

Principal occupation (Optional) | Employer (Optional)

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512)463-5800 1-800-325-8506

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A1
(FOR FORMS C/OH, C/OH-SS, SC-C/OH, SC-SPAC, SPAC, & SPAC-SS)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this Schedule A1: 15

2 FILER NAME: Greg Meyers

3 ACCOUNT # (Filer Commission use):

4 Date	5 Full name of contributor / 6 Contributor address, City, State, Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
2-19-03	Marsha L. Murray [redacted]	$250.00	

9 Principal occupation (Optional) | 10 Employer (Optional)

Date	Full name of contributor / Contributor address, City, State, Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
2-24-03	Dr. Timothy Bricker [redacted]	$250.00	

Principal occupation (Optional) | Employer (Optional)

Date	Full name of contributor / Contributor address, City, State, Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
2-25-03	Dr. Stephen Loebl [redacted]	$150.00	

Principal occupation (Optional) | Employer (Optional)

Date	Full name of contributor / Contributor address, City, State, Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3-1-03	Neil Kentzer [redacted]	$100.00	

Principal occupation (Optional) | Employer (Optional)

Date	Full name of contributor / Contributor address, City, State, Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3-1-03	Richard Haralson [redacted]	$100.00	

Principal occupation (Optional) | Employer (Optional)

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512)463-5800 1-800-325-8506

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A1
(FOR FORMS C/OH, C/OH-SS, SC-C/OH, SC-SPAC, SPAC, & SPAC-SS)

The Instruction Guide explains how to complete this form.

1 Total pages this Schedule A1: 15

2 FILER NAME: Greg Meyers

3 ACCOUNT # (Ethics Commission Filers):

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#) / 6 Contributor address, City, State, Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
3-3-03	Jimmie W. Reed [redacted]	$100.00	

9 Principal occupation (Optional) | 10 Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC (ID#) / Contributor address, City, State, Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3-4-03	Dr. Victor S. Eng [redacted]	$100.00	

Principal occupation (Optional) | Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC (ID#) / Contributor address, City, State, Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3-11-03	Jeannie M. Bollinger [redacted]	$25.00	

Principal occupation (Optional) | Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC (ID#) / Contributor address, City, State, Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3-14-03	Dr. Denton A. Cooley [redacted]	$200.00	

Principal occupation (Optional) | Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC (ID#) / Contributor address, City, State, Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3-18-03	Anne Patterson [redacted]	$100.00	

Principal occupation (Optional) | Employer (Optional)

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 1-800-325-8506

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A1
(FOR FORMS C/OH, C/OH-SS, SC-C/OH, SC-SPAC, SPAC, & SPAC-SS)

The Instruction Guide explains how to complete this form.

1 Total Pages this Schedule A1: 15

2 FILER NAME: Greg Meyers

3 ACCOUNT # (Ethics Commission Filers):

4 Date	5 Full name of contributor ☐ out-of-state PAC (ID#) / 6 Contributor address, City, State, Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
3-25-03	Billy Wright [redacted]	$50.00	

9 Principal occupation (Optional) | 10 Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC (ID#) / Contributor address, City, State, Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3-25-03	Frank Louis Marshall [redacted]	$100.00	

Principal occupation (Optional) | Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC (ID#) / Contributor address, City, State, Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3-25-03	Susan Benner Givens [redacted]	$200.00	

Principal occupation (Optional) | Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC (ID#) / Contributor address, City, State, Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3-25-03	Michael G. Griffin [redacted]	$150.00	

Principal occupation (Optional) | Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC (ID#) / Contributor address, City, State, Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
3-25-03	Delayne M. Petitt [redacted]	$100.00	

Principal occupation (Optional) | Employer (Optional)

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512)463-5800 1-800-325-8506

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A1
(FOR FORMS C/OH, C/OH-SS, SC-C/OH, SC-SPAC, SPAC, & SPAC-SS)

The Instruction Guide explains how to complete this form

1 Total pages this Schedule A1: 15

2 FILER NAME: Greg Meyers

3 ACCOUNT # (Direct Commission filers)

4 Date	5 Full name of contributor ☐ out-of-state PAC ID#	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
3-25-03	Carmelo Mauro 6 Contributor address, City, State, Zip Code [redacted]	$495.00	Food

9 Principal occupation (Optional) | 10 Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC ID#	Amount of contribution ($)	In-kind contribution description (if applicable)
3-26-03	Jeannie M. Bollinger Contributor address, City, State, Zip Code [redacted]	$50.00	

Principal occupation (Optional) | Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC ID#	Amount of contribution ($)	In-kind contribution description (if applicable)
4-4-03	Dr. Lesha Grabowski Contributor address, City, State, Zip Code [redacted]	$100.00	

Principal occupation (Optional) | Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC ID#	Amount of contribution ($)	In-kind contribution description (if applicable)
4-10-03	Dr. Wesley Vick III Contributor address, City, State, Zip Code [redacted]	$250.00	

Principal occupation (Optional) | Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC ID#	Amount of contribution ($)	In-kind contribution description (if applicable)
4-25-03	Reza Shoaee Contributor address, City, State, Zip Code [redacted]	$200.00	

Principal occupation (Optional) | Employer (Optional)

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 1-800-326-8506

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A1
(FOR FORMS C/OH, C/OH-SS, SC-C/OH, SC-SPAC, SPAC, & SPAC-SS)

The Instruction Guide explains how to complete this form.

1 Total pages this Schedule 6: 15

2 FILER NAME: Greg Meyers

3 ACCOUNT # (Ethics Commission Filers):

4 Date	5 Full name of contributor ☐ out-of-state PAC ID# / 6 Contributor address, City, State, Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
4-25-03	Jeff Spencer [redacted]	$100.00	

9 Principal occupation (Optional):

10 Employer (Optional):

Date	Full name of contributor ☐ out-of-state PAC ID# / Contributor address, City, State, Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
4-25-03	Charles Tharp [redacted]	$100.00	

Principal occupation (Optional):

Employer (Optional):

Date	Full name of contributor ☐ out-of-state PAC ID# / Contributor address, City, State, Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
5-2-03	Marianna Cooley [redacted]	$500.00	

Principal occupation (Optional):

Employer (Optional):

Date	Full name of contributor ☐ out-of-state PAC ID# / Contributor address, City, State, Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
5-4-03	Gary Imdieke [redacted]	$100.00	

Principal occupation (Optional):

Employer (Optional):

Date	Full name of contributor ☐ out-of-state PAC ID# / Contributor address, City, State, Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
5-15-03	Dionel E. Aviles [redacted]	$100.00	

Principal occupation (Optional):

Employer (Optional):

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512)463-5800 1-800-325-8506

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A1
(FOR FORMS C/OH, C/OH-SS, SC-C/OH, SC-SPAC, SPAC, & SPAC-SS)

The Instruction Guide explains how to complete this form.

1 Total pages this Schedule A1: 15

2 FILER NAME: Greg Meyers

3 ACCOUNT # (Ethics Commission use only)

4 Date	5 Full name of contributor / 6 Contributor address, City, State, Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
5-18-03	Diana Mosvold [redacted]	$500.00	

9 Principal occupation (Optional) | 10 Employer (Optional)

Date	Full name of contributor / Contributor address, City, State, Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
5-28-03	Aron Amato [redacted]	$200.00	

Principal occupation (Optional) | Employer (Optional)

Date	Full name of contributor / Contributor address, City, State, Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
5-29-03	Lee Whaley [redacted]	$200.00	

Principal occupation (Optional) | Employer (Optional)

Date	Full name of contributor / Contributor address, City, State, Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
5-29-03	Kurt Baerenstecher [redacted]	$50.00	

Principal occupation (Optional) | Employer (Optional)

Date	Full name of contributor / Contributor address, City, State, Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)
5-29-03	Milton Kramer [redacted]	$100.00	

Principal occupation (Optional) | Employer (Optional)

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 1-800-325-8506

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A1
(FOR FORMS C/OH, C/OH-SS, SC-C/OH, SC-SPAC, SPAC, & SPAC-SS)

The Instruction Guide explains how to complete this form.

1 Total pages this Schedule A1: 15

2 FILER NAME: Greg Meyers

3 ACCOUNT # (Ethics Commission use only)

4 Date	5 Full name of contributor / 6 Contributor address, City, State, Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
5-29-03	Charles Tharp [redacted]	$200.00	
Principal occupation (Optional)	Employer (Optional)		
5-29-03	Charles Goff [redacted]	$200.00	
Principal occupation (Optional)	Employer (Optional)		
5-29-03	Thomas Weber [redacted]	$250.00	
Principal occupation (Optional)	Employer (Optional)		
5-29-03	Billy Wright [redacted]	$50.00	
Principal occupation (Optional)	Employer (Optional)		
5-29-03	Jimmie Reed [redacted]	$100.00	
Principal occupation (Optional)	Employer (Optional)		

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 1-800-325-8506

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A1
(FOR FORMS C/OH, C/OH-SS, SC-C/OH, SC-SPAC, SPAC, & SPAC-SS)

The Instruction Guide explains how to complete this form.

1 Total Pages this Schedule A1: 15

2 FILER NAME: Greg Meyers

3 ACCOUNT # (Political Committees):

4 Date	5 Full name of contributor / 6 Contributor address: City, State, Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
5-31-03	Gary D. Lower [redacted]	$100.00	
9 Principal occupation (Optional)	10 Employer (Optional)		
6-19-03	Peter J. White [redacted]	$250.00	
Principal occupation (Optional)	Employer (Optional)		
6-25-03	Kim Erb [redacted]	$100.00	
Principal occupation (Optional)	Employer (Optional)		
6-26-03	Robert Meyers [redacted]	$20.00	
Principal occupation (Optional)	Employer (Optional)		
6-26-03	Dr. Charles E. Mullins [redacted]	$20.00	
Principal occupation (Optional)	Employer (Optional)		

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 1-800-325-8506

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A1
(FOR FORMS C/OH, C/OH-SS, SC-C/OH, SC-SPAC, SPAC, & SPAC-SS)

The Instruction Guide explains how to complete this form.

1 Total on page this Schedule A1: 15

2 FILER NAME: Greg Meyers

3 ACCOUNT # (Ethics Commission use only)

4 Date	5 Full name of contributor ☐ out-of-state PAC ID#	6 Contributor address, City, State, Zip Code	7 Amount of contribution ($)	8 In-kind contribution description (if applicable)
6-28-03	Lloyd G. Button III	[redacted]	$4500.00	Web Services

9 Principal occupation (Optional)	10 Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC ID#	Contributor address, City, State, Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)

Principal occupation (Optional)	Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC ID#	Contributor address, City, State, Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)

Principal occupation (Optional)	Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC ID#	Contributor address, City, State, Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)

Principal occupation (Optional)	Employer (Optional)

Date	Full name of contributor ☐ out-of-state PAC ID#	Contributor address, City, State, Zip Code	Amount of contribution ($)	In-kind contribution description (if applicable)

Principal occupation (Optional)	Employer (Optional)

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 1-800-325-8506

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F: 6

2 FILER NAME: Greg Mayers

3 ACCOUNT # (Ethics Commission Use)

4 Date	5 Payee name / 6 Payee address, City, State, Zip Code	7 Amount ($)
2-26-03	SBC P.O. Box 930170 Dallas, TX 75393	$74.80

8 Purpose of payment (See instructions regarding type of information required.): phone service & Installation

9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:

Date	Payee name / Payee address, City, State, Zip Code	Amount ($)
2-18-03	Houston Area Pastor Council 7401 Katy Freeway Houston, TX 77024	$200.00

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

** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:

Date	Payee name / Payee address, City, State, Zip Code	Amount ($)
2-24-03	Kight Printing 5750 Bintliff #202 Houston, TX 77036	$77.94

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

** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:

Date	Payee name / Payee address, City, State, Zip Code	Amount ($)
2-24-03	Kight Printing 5750 Bintliff #202 Houston, TX 77036	$72.77

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

** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512)463-5800 1-800-325-8506

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F: 6

2 FILER NAME: Greg Meyers

3 ACCOUNT # (Ethics Commission Use)

4 Date	5 Payee name / 6 Payee address: City, State, Zip Code	7 Amount ($)
3-5-03	Kight Printing 5750 Bintliff #202 Houston, TX 77036	$ 650.58

8 Purpose of payment (See instructions regarding type of information required.): Campaign Materials

9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:

Date	Payee name / Payee address: City, State, Zip Code	Amount ($)
3-5-03	E.W. Forbes & Associates P.O. Box 35817 Houston, TX 77235	$ 378.98

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

** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:

Date	Payee name / Payee address: City, State, Zip Code	Amount ($)
3-7-03	Sutter House Printing 14760 Memorial Dr. #305 Houston, TX 77079	$500.65

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

** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:

Date	Payee name / Payee address: City, State, Zip Code	Amount ($)
3-8-03	Postmaster Fleetwood Station Houston, TX 77079	$222.00

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

** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 1-800-325-8506

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F. 6

2 FILER NAME Greg Meyers

3 ACCOUNT # (Ethics Commission files)

4 Date	5 Payee name / 6 Payee address, City, State, Zip Code	7 Amount ($)
3-14-03	Sutter House Printing 14760 Memorial Dr. #305 Houston, TX 77079	$ 72.52

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

9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:

Date	Payee name / Payee address, City, State, Zip Code	Amount ($)
3-14-03	Postmaster Post Wood Station Houston, TX 77079	$ 74.00

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

** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:

Date	Payee name / Payee address, City, State, Zip Code	Amount ($)
3-26-03	SBC P.O. Box 930170 Dallas, TX 75393	$ 49.09

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

** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:

Date	Payee name / Payee address, City, State, Zip Code	Amount ($)
3-25-03	Sutter House Printing 14760 Memorial Dr. #305 Houston, TX 77079	$ 1079.93

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

** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 1-800-325-8506

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F. 6

2 FILER NAME Greg Meyers

3 ACCOUNT # (Ethics Commission Filers)

4 Date	5 Payee name / 6 Payee address, City, State, Zip Code	7 Amount ($)
3-28-03	Kight Printing 5750 Bintliff #202 Houston, TX 77036	$3,932.72

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

9 -- Complete if direct expenditure to benefit C/OH --
Candidate / Officeholder name Office sought Office held

Date	Payee name / Payee address, City, State, Zip Code	Amount ($)
4-28-03	SBC P.O. Box 930170 Dallas, TX 75393	$49.12

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

-- Complete if direct expenditure to benefit C/OH --
Candidate / Officeholder name Office sought Office held

Date	Payee name / Payee address, City, State, Zip Code	Amount ($)
5-1-03	Sutter House Printing 14760 Memorial Dr. #305 Houston, TX 77079	$392.05

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

-- Complete if direct expenditure to benefit C/OH --
Candidate / Officeholder name Office sought Office held

Date	Payee name / Payee address, City, State, Zip Code	Amount ($)
5-11-03	Sarah's Florist 11195 Westheimer Houston, TX 77042	$46.55

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

-- Complete if direct expenditure to benefit C/OH --
Candidate / Officeholder name Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 1-800-325-8506

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F: 6

2 FILER NAME: Greg Meyers

3 ACCOUNT # (Ethics Commission Use)

4 Date	5 Payee name / 6 Payee address: City, State, Zip Code	7 Amount ($)
5-11-03	Big Wing Promotions 10400 Westoffice Dr. #101 Houston, TX 77042	$171.04

8 Purpose of payment (See instructions regarding type of information required.): Campaign Shirts

9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:

Date	Payee name / Payee address: City, State, Zip Code	Amount ($)
5-20-03	Sutter House Printing 14760 Memorial Dr. #305 Houston, TX 77079	$545.39

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

** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:

Date	Payee name / Payee address: City, State, Zip Code	Amount ($)
5-28-03	SBC P.O. Box 930170 Dallas, TX 75393	$49.12

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

** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:

Date	Payee name / Payee address: City, State, Zip Code	Amount ($)
6-12-03	Sarah's Florist 11195 Westheimer Houston, TX 77042	$41.14

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

** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name: Office sought: Office held:

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 1-800-325-8506

POLITICAL EXPENDITURES

SCHEDULE F

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F.
6

2 FILER NAME
Greg Meyers

3 ACCOUNT # (Ethics Commission filers)

4 Date	5 Payee name / 6 Payee address, City, State, Zip Code	7 Amount ($)
6-24-03	SBC P.O. Box 930170 Dallas, TX 75393	$ 49.12

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

Date	Payee name / Payee address, City, State, Zip Code	Amount ($)

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

Date	Payee name / Payee address, City, State, Zip Code	Amount ($)

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

Date	Payee name / Payee address, City, State, Zip Code	Amount ($)

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

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512)463-5800 1-800-325-8506

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule G: 2

2 FILER NAME: Greg Meyers

3 ACCOUNT # (Ethics Commission Filers):

4 Date	5 Payee name / 6 Payee address: City, State, Zip Code / 7 Purpose of expenditure (See instructions regarding type of information required.)	8 Amount ($) / Reimbursement from political contributions intended
10-9-02	Postmaster Fleetwood Station Houston, TX 77079 Post office Box	$38.00 ☒ Reimbursement from political contributions intended
11-8-02	H2E Solutions Provider 10333 Harwin Dr. #685 Houston, TX 77036 Web Hosting	$179.40 ☒ Reimbursement from political contributions intended
1-31-03	Best Specialties & Printing 16840 Barker Springs #305 Houston, TX 77084 Printing	$388.31 ☒ Reimbursement from political contributions intended
1-31-03	Office Max 2320 South Highway 6 Houston, TX 77077 Supplies	$74.23 ☒ Reimbursement from political contributions intended
2-5-03	IDS Promotional & Silk Screen 1419 Upland Dr. Houston, TX 77043 Campaign Materials	$989.53 ☒ Reimbursement from political contributions intended

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 1-800-325-8506

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule G: 2

2 FILER NAME: Greg Meyers

3 ACCOUNT # (Ethics Commission Filers)

4 Date	5 Payee name / 6 Payee address: City, State, Zip Code / 7 Purpose of expenditure (See instructions regarding type of information required.)	8 Amount ($) / Reimbursement from political contributions intended
2-5-03	Tess 1226 International Dr. Eau Claire, WI 54701 Campaign Materials	$411.15 ☒ Reimbursement from political contributions intended
3-30-03	Home Depot 2528 S. Hwy 6 Houston, TX 77082 Campaign Materials	$63.34 ☒ Reimbursement from political contributions intended
3-31-03	Sarah's Florist 11195 Westheimer Houston, TX 77042 Constituent Gift	$35.72 ☒ Reimbursement from political contributions intended
6-4-03	Cookie Bouquet 15622 Highway 3 Webster, TX 77598 Constituent Gift	$53.75 ☒ Reimbursement from political contributions intended
Date	Payee name Payee address: City, State, Zip Code Purpose of expenditure (See instructions regarding type of information required.)	Amount ($) ☐ Reimbursement from political contributions intended

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED