

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: 21
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR <input checked="" type="checkbox"/> MR	FIRST JASON	MI
	NICKNAME Meeker	LAST	SUFFIX
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> change of address	ADDRESS / PO BOX: PO Box 201802	APT / SUITE #:	CITY: Austin TX STATE: TX ZIP CODE: 78720
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE (512)	PHONE NUMBER 982-0501	EXTENSION
6 CAMPAIGN TREASURER NAME	MS / MRS / MR <input checked="" type="checkbox"/> MR	FIRST ALLAN	MI
	NICKNAME McMURTRY	LAST	SUFFIX E.
7 CAMPAIGN TREASURER ADDRESS (residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 2412 GREENLAWN PARKWAY Austin Texas 78757		
8 CAMPAIGN TREASURER PHONE	AREA CODE (512)	PHONE NUMBER 452-9765	EXTENSION
9 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input checked="" type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final report (Attach C/OH - FR)		
10 PERIOD COVERED	Month Day Year THROUGH Month Day Year 1 / 1 / 2014 6 / 30 / 2014		
11 ELECTION	ELECTION DATE Month Day Year 11 / 4 / 2014		ELECTION TYPE <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input checked="" type="checkbox"/> General <input type="checkbox"/> Special
12 OFFICE	OFFICE HELD (if any)		
	OFFICE SOUGHT (if known) City Council Place 10		
GO TO PAGE 2			

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

14 C/OH NAME JASON MEEKER 15 ACCOUNT # (Ethics Commission Filers)

16 NOTICE FROM POLITICAL COMMITTEE(S)

THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE 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	\$ 1,100
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 10,550
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$
	4. TOTAL POLITICAL EXPENDITURES	\$ 3,267.04
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 10,550
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 3,267.04

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.

Jason Meeker
Signature of Candidate or Officeholder

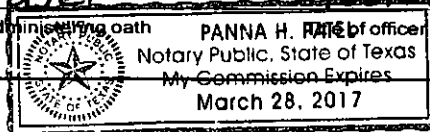
AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Jason Meeker, this the 15th day of July, 20 14, to certify which, witness my hand and seal of office.

Panna H. Patel
Signature of officer administering oath

Panna H. Patel
Printed name of officer administering oath

Notary
PANNA H. PATEL, Notary Public, State of Texas
My Commission Expires March 28, 2017



POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

1/14

2 FILER NAME

JASON Meeker

3 ACCOUNT# (Ethics Commission Filers)

4 Date

6-23-2014

5 Full name of contributor

☐ out-of-state PAC (ID#)

THOMAS & EDNA MAST

Contributor address; City; State; Zip Code

5714 PAINTED VALLEY

AUSTIN, TX 78759

7 Amount of
contribution (\$)

35.00

8 In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

6-23-2014

Full name of contributor

☐ out-of-state PAC (ID#)

MATTHEW & JANE KOVACS

Contributor address; City; State; Zip Code

4003 GREYSTONE DR

AUSTIN, TX 78731

Amount of
contribution (\$)

50.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

6-23-2014

Full name of contributor

☐ out-of-state PAC (ID#)

MARY LUSCHIN

Contributor address; City; State; Zip Code

1816 TREADWELL ST

AUSTIN, TX 78704

Amount of
contribution (\$)

350.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

6-23-2014

Full name of contributor

☐ out-of-state PAC (ID#)

DON & ANDI REAVES

Contributor address; City; State; Zip Code

6505 RAIN CREEK PKWY

AUSTIN, TX 78759

Amount of
contribution (\$)

100.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

6-23-2014

Full name of contributor

☐ out-of-state PAC (ID#)

JAMES & KATY DUNCAN

Contributor address; City; State; Zip Code

360 Nueces ST, Apt 2701

AUSTIN, TX 78701

Amount of
contribution (\$)

700.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A

2/14

2 FILER NAME

JASON MECKER

3 ACCOUNT # (Ethics Commission Filers)

4 Date

6-23-14

5 Full name of contributor

☐ out-of-state PAC (ID#)

Michael & Elizabeth Sorenson

6 Contributor address; City; State; Zip Code

10207 SAUSALITO DR
AUSTIN, TX 78759

7 Amount of contribution (\$)

350.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

6-23-14

Full name of contributor

☐ out-of-state PAC (ID#)

JAMES JACK

Contributor address; City; State; Zip Code

3008 B Rabb Glen
Austin TX 78704

Amount of contribution (\$)

350.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

6-23-14

Full name of contributor

☐ out-of-state PAC (ID#)

DOUG YOUNG

Contributor address; City; State; Zip Code

2904 KASSARINE PASS
Austin, TX 78704

Amount of contribution (\$)

200.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

6-23-14

Full name of contributor

☐ out-of-state PAC (ID#)

ANNEMARIE MECCRACKEN

Contributor address; City; State; Zip Code

6520 COMANCHE DR
CHEYENNE, WY 82009

Amount of contribution (\$)

50.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

6-23-14

Full name of contributor

☐ out-of-state PAC (ID#)

JIM & SHIRLEY MECKER

Contributor address; City; State; Zip Code

1712 WILSON ROAD
HUMBLE, TX 77396

Amount of contribution (\$)

500.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:
3/14

2 FILER NAME

JASON MECKER

3 ACCOUNT # (Ethics Commission Filers)

4 Date

6-23-14

5 Full name of contributor

☐ out-of-state PAC (ID#)

DURWARD ME CRACKEN

6 Contributor address: City: State: Zip Code

6403 Edinborough
SAN ANTONIO, TX 78238

7 Amount of
contribution (\$)

100.00

8 In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

6-23-14

Full name of contributor

☐ out-of-state PAC (ID#)

Bob Conkright

Contributor address: City: State: Zip Code

11909 ARABIAN TRAIL
AUSTIN, TX 78759

Amount of
contribution (\$)

40.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

6-23-14

Full name of contributor

☐ out-of-state PAC (ID#)

Gabe Rojas

Contributor address: City: State: Zip Code

10306 QUAIL VALLEY Blvd
AUSTIN, TX 78758

Amount of
contribution (\$)

50.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

6-30-14

Full name of contributor

☐ out-of-state PAC (ID#)

Michele NAJAR

Contributor address: City: State: Zip Code

6207 AVERY ISLAND Ave
AUSTIN, TX 78727

Amount of
contribution (\$)

25.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

6-30-14

Full name of contributor

☐ out-of-state PAC (ID#)

Hope MORRISON

Contributor address: City: State: Zip Code

8109 ASMAR DR
AUSTIN, TX 78750

Amount of
contribution (\$)

100.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

4/14

2 FILER NAME

JASON Meeker

3 ACCOUNT # (Ethics Commission Filers)

4 Date

6-30-14

5 Full name of contributor

☐ out-of-state PAC (ID#)

DON Clinchy

6 Contributor address: City: State: Zip Code

4409 Bellvue Ave
Austin, TX 78756

7 Amount of contribution (\$)

50.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

6-30-14

Full name of contributor

☐ out-of-state PAC (ID#)

KATHY H CORREA

Contributor address: City: State: Zip Code

7809 GAULT ST
Austin, TX 78757

Amount of contribution (\$)

50.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

6-30-14

Full name of contributor

☐ out-of-state PAC (ID#)

TOM FORNOFF

Contributor address: City: State: Zip Code

2601 BRIDLE PATH
Austin, TX 78703

Amount of contribution (\$)

350.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

6-30-14

Full name of contributor

☐ out-of-state PAC (ID#)

KIM HAMMOND

Contributor address: City: State: Zip Code

5711 GLADEHILL DR
KINGWOOD, TX 77345

Amount of contribution (\$)

250.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

6-30-14

Full name of contributor

☐ out-of-state PAC (ID#)

Kristin Dougherty

Contributor address: City: State: Zip Code

24262 Tahoe Ct
LAGUNA NIGUEL CA 92653

Amount of contribution (\$)

25.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

5/14

2 FILER NAME

JASON MEEKEA

3 ACCOUNT # (Ethics Commission Filers)

4 Date

6-30-14

5 Full name of contributor

☐ out-of-state PAC (ID#)

Elizabeth Brooks

6 Contributor address; City; State; Zip Code

1010 MILAM PI

Austin, TX 78704

7 Amount of contribution (\$)

50.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

6-30-14

Full name of contributor

☐ out-of-state PAC (ID#)

Michael Wright

Contributor address; City; State; Zip Code

5710 PAINTED VALLEY DR

Austin, TX 78759

Amount of contribution (\$)

350.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

6-30-14

Full name of contributor

☐ out-of-state PAC (ID#)

TRACY WAYSON

Contributor address; City; State; Zip Code

1424 No. 57th St

Milwaukee, WI 53208

Amount of contribution (\$)

50.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

6-30-14

Full name of contributor

☐ out-of-state PAC (ID#)

TRACY WAYSON

Contributor address; City; State; Zip Code

1424 No 57th St

Milwaukee, WI 53208

Amount of contribution (\$)

50.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

6-30-14

Full name of contributor

☐ out-of-state PAC (ID#)

PEARL BARBOUR

Contributor address; City; State; Zip Code

1143 Hidden Valley Ranch Rd

Johnson City, TX 78636

Amount of contribution (\$)

350.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

6/14

2 FILER NAME

JASON Meeker

3 ACCOUNT # (Ethics Commission Filers)

4 Date

6-30-14

5 Full name of contributor

☐ out-of-state PAC (ID#)

SHARON Bluth

6 Contributor address: City: State: Zip Code

9206 BRIGADON COVE

AUSTIN, TX 78750

7 Amount of contribution (\$)

100.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

VOID

Full name of contributor

☐ out-of-state PAC (ID#)

JANE KOVACS

Contributor address: City: State: Zip Code

4003 GREYSTONE DR Apt 2701

Austin, TX 78731

Amount of contribution (\$)

50.00

In-kind contribution description (if applicable)

Duplicate

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

VOID

Full name of contributor

☐ out-of-state PAC (ID#)

JAMES DUNCAN

Contributor address: City: State: Zip Code

366 Nueces Apt 2701

Austin, TX 78701

Amount of contribution (\$)

350.00

In-kind contribution description (if applicable)

Duplicate

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

6-30-14

Full name of contributor

☐ out-of-state PAC (ID#)

GARRETT MARTIN

Contributor address: City: State: Zip Code

2405 DORMARION LN

Austin, TX 78703

Amount of contribution (\$)

350.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

6-30-14

Full name of contributor

☐ out-of-state PAC (ID#)

ALYSSA MARTIN

Contributor address: City: State: Zip Code

2405 DORMARION LN

Austin, TX 78703

Amount of contribution (\$)

350.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A

7/14

2 FILER NAME **JASON Meeker**

3 ACCOUNT # (Ethics Commission Filers)

4 Date

6-30-14

5 Full name of contributor

☐ out-of-state PAC (ID#)**Cindy Fisher**

6 Contributor address; City; State; Zip Code

**1812 VALLEJO ST
Austin, TX 78757**7 Amount of
contribution (\$)**250.00**8 In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

6-30-14

Full name of contributor

☐ out-of-state PAC (ID#)**Rebecca Geier**

Contributor address; City; State; Zip Code

**3400 AMBERLY PLACE
Austin, TX 78759**Amount of
contribution (\$)**50.00**In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

6-30-14

Full name of contributor

☐ out-of-state PAC (ID#)**Adrienne Donahue**

Contributor address; City; State; Zip Code

**6809 Jester Wild Dr
Austin, TX 78750**Amount of
contribution (\$)**250.00**In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

6-30-14

Full name of contributor

☐ out-of-state PAC (ID#)**Elisha Moore**

Contributor address; City; State; Zip Code

**1217 W St Johns Ave
Austin, TX 78757**Amount of
contribution (\$)**350.00**In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

6-30-14

Full name of contributor

☐ out-of-state PAC (ID#)**SHAWN HARRINGTON**

Contributor address; City; State; Zip Code

**4009 North Hls
Austin, TX 78731**Amount of
contribution (\$)**100.00**In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The instruction guide explains how to complete this form.

1 Total pages Schedule A: 8/14

2 FILER NAME

JASON MECKER

3 ACCOUNT # (Ethics Commission Filers)

4 Date

6-30-14

5 Full name of contributor

☐ out-of-state PAC (ID#)

AMY MENULTY

6 Contributor address: City: State: Zip Code

17402 COPPELFIELD DR

AUSTIN, TX 78753

7 Amount of contribution (\$)

10.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

6-30-14

Full name of contributor

☐ out-of-state PAC (ID#)

PATRICIA SEEGER

Contributor address: City: State: Zip Code

6705 WINTERBERRY DR

AUSTIN, TX 78750

Amount of contribution (\$)

100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

6-30-14

Full name of contributor

☐ out-of-state PAC (ID#)

BRIAN RODGERS

Contributor address: City: State: Zip Code

1112 W. 9TH ST

AUSTIN, TX 78703

Amount of contribution (\$)

350.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

6-30-14

Full name of contributor

☐ out-of-state PAC (ID#)

TIM HAYDEN

Contributor address: City: State: Zip Code

6702 HARDY DR

AUSTIN, TX 78751

Amount of contribution (\$)

100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

6-30-14

Full name of contributor

☐ out-of-state PAC (ID#)

ALLAN MEMMURY

Contributor address: City: State: Zip Code

5901 CARR DR

AUSTIN, TX 78757

Amount of contribution (\$)

350.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

9/14

2 FILER NAME

JASON Meeker

3 ACCOUNT # (Ethics Commission Filers)

4 Date

6-30-14

5 Full name of contributor

☐ out-of-state PAC (ID#)

KIRSTEN JOHNSON

6 Contributor address, City, State, Zip Code

275 So OAKLAND #104

PASADENA, CA 91101

7 Amount of
contribution (\$)

100.00

8 In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

6-30-14

Full name of contributor

☐ out-of-state PAC (ID#)

John B. Stokes

Contributor address, City, State, Zip Code

7706 Peaceful Hill LN

Austin, TX 78748

Amount of
contribution (\$)

100.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

6-30-14

Full name of contributor

☐ out-of-state PAC (ID#)

Charles Walton

Contributor address, City, State, Zip Code

1701 Bouldin Ave

Austin, TX 78704

Amount of
contribution (\$)

100.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

6-30-14

Full name of contributor

☐ out-of-state PAC (ID#)

CARRIE Weikert

Contributor address, City, State, Zip Code

11003 GRAPEVINE LN

Austin, TX 78759

Amount of
contribution (\$)

75.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

6-30-14

Full name of contributor

☐ out-of-state PAC (ID#)

SHANNON Schulz

Contributor address, City, State, Zip Code

6200 Quail Hollow

Austin, TX 78750

Amount of
contribution (\$)

100.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A: 10/14

2 FILER NAME

JASON Meeker

3 ACCOUNT # (Ethics Commission Filers)

4 Date

6-30-14

5 Full name of contributor

☐ out-of-state PAC (ID#)

FRANK B Falkstein

6 Contributor address; City; State; Zip Code

6104 Amberly Pl

Austin, TX 78759

7 Amount of
contribution (\$)

100.00

8 In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

6-30-14

Full name of contributor

☐ out-of-state PAC (ID#)

MARY Wright

Contributor address; City; State; Zip Code

5710 Painted Valley Dr

Austin, TX 78759

Amount of
contribution (\$)

350.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

6-30-14

Full name of contributor

☐ out-of-state PAC (ID#)

DON Wade

Contributor address; City; State; Zip Code

806 Kemp Hills Dr

Austin, TX 78781

Amount of
contribution (\$)

25.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

6-30-14

Full name of contributor

☐ out-of-state PAC (ID#)

TROY BRUNT

Contributor address; City; State; Zip Code

11606 D-K Ranch

Austin, TX 78759

Amount of
contribution (\$)

25.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

6-30-14

Full name of contributor

☐ out-of-state PAC (ID#)

Richard BRIMER

Contributor address; City; State; Zip Code

6417 YANPON DR

Austin, TX 78759

Amount of
contribution (\$)

50.00

In-kind contribution
description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A: 11/14

2 FILER NAME

JASON Meeker

3 ACCOUNT# (Ethics Commission Filers)

4 Date

6-30-14

5 Full name of contributor

☐ out-of-state PAC (ID#)

JONATHAN Secklen

6 Contributor address: City: State: Zip Code

304 Stone Wall Ln
Austin, TX 78746

7 Amount of contribution (\$)

50.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

6-30-14

Full name of contributor

☐ out-of-state PAC (ID#)

Lisa Kirsch

Contributor address: City: State: Zip Code

2203 Matternhorn Ln
Austin, TX 78704

Amount of contribution (\$)

50.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

6-30-14

Full name of contributor

☐ out-of-state PAC (ID#)

BRAD Rockwell

Contributor address: City: State: Zip Code

1910 Edgeware Dr
Austin, TX 78704

Amount of contribution (\$)

100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

6-30-14

Full name of contributor

☐ out-of-state PAC (ID#)

~~BRAD~~ KAREN SIRONI

Contributor address: City: State: Zip Code

6402 Cedar Cove
Austin, TX 78731

Amount of contribution (\$)

100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

6-30-14

Full name of contributor

☐ out-of-state PAC (ID#)

JENNIFER TAYLOR

Contributor address: City: State: Zip Code

14812 AVERY RANCH Blvd Apt 73
Austin, TX 78717

Amount of contribution (\$)

25.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

12/14

2 FILER NAME

JASON Meeker

3 ACCOUNT # (Ethics Commission Filers)

4 Date

6-30-14

5 Full name of contributor

☐ out-of-state PAC (ID#)

JANET SCHNEIDER

6 Contributor address; City; State; Zip Code

8413 ASMARIA DR

Austin, TX 78750

7 Amount of contribution (\$)

40.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

6-30-14

Full name of contributor

☐ out-of-state PAC (ID#)

KATHY HANSON CORREA

Contributor address; City; State; Zip Code

7809 GAUTH ST

Austin, TX 78757

Amount of contribution (\$)

50.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

6-30-14

Full name of contributor

☐ out-of-state PAC (ID#)

Theophilus Ulmer

Contributor address; City; State; Zip Code

900 JUANITA ST

Austin, TX 78704

Amount of contribution (\$)

50.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

6-30-14

Full name of contributor

☐ out-of-state PAC (ID#)

PETER BALINAS

Contributor address; City; State; Zip Code

7711 O'CONNOR DR #109

Round Rock, TX 78681

Amount of contribution (\$)

50.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

6-30-14

Full name of contributor

☐ out-of-state PAC (ID#)

JASON FRANZ

Contributor address; City; State; Zip Code

6803 RUSTLING OAKS TR1

Austin, TX 78759

Amount of contribution (\$)

350.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

13/14

2 FILER NAME

JASON Meeker

3 ACCOUNT # (Ethics Commission Filers)

4 Date

6-30-14

5 Full name of contributor

☐ out-of-state PAC (ID#)

Philip Colicchio

6 Contributor address; City; State; Zip Code

2609 Lightfoot Trail

Austin, TX 78745

7 Amount of contribution (\$)

25.00

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

6-30-14

Full name of contributor

☐ out-of-state PAC (ID#)

JASON Shepherd

Contributor address; City; State; Zip Code

903 E Riverside Dr

Austin, TX 78704

Amount of contribution (\$)

100.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

6-30-14

Full name of contributor

☐ out-of-state PAC (ID#)

William Bunch

Contributor address; City; State; Zip Code

1307 Oxford Ave

Austin, TX 78704

Amount of contribution (\$)

200.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

6-30-14

Full name of contributor

☐ out-of-state PAC (ID#)

Beverly Hopkins

Contributor address; City; State; Zip Code

33635

Pinehurst, TX 77362

Amount of contribution (\$)

200.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

6-30-14

Full name of contributor

☐ out-of-state PAC (ID#)

Joe Gallehugh

Contributor address; City; State; Zip Code

7514 SARAH MARIE DR

Summerfield, NC 27358

Amount of contribution (\$)

150.00

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: <u>14/14</u>	
2 FILER NAME		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <u>6-30-14</u>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <u>BRYAN Smith</u> 6 Contributor address; City; State; Zip Code <u>8429 Etienne Cove</u> <u>Austin, TX 78757</u>	7 Amount of contribution (\$) <u>350.00</u>	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date <u>6-30-14</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <u>AMY Woodul</u> Contributor address; City; State; Zip Code <u>8303 LONGDRAW</u> <u>Round Rock, TX 78681</u>	Amount of contribution (\$) <u>50.00</u>	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <u>6-30-14</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <u>Megan Smith</u> Contributor address; City; State; Zip Code <u>8429 Etienne Cove</u> <u>Austin TX 78759</u>	Amount of contribution (\$) <u>350.00</u>	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 6-30-14 <u>Void</u>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: LOAN Wells Contributor address; City; State; Zip Code 105 McConnell <u>Austin, TX 78746</u>	Amount of contribution (\$) 350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Contributor address; City; State; Zip Code	Amount of contribution (\$)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

PLEDGED CONTRIBUTIONS**SCHEDULE B**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule B: ↓	
2 FILER NAME JASON Meeker		3 ACCOUNT # (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED PLEDGES: ⇒ ⇒ ⇒ ⇒ ⇒ ⇒		\$ 0	

5 Date 6-1-14	6 Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID# _____) LORI Walls	8 Amount of pledge (\$) 350.00	9 In-kind description (if applicable) LD90 Design
7 Pledgor address; City; State; Zip Code 8429 Etienne Cove Austin, TX 78746		(If travel outside of Texas, complete Schedule T)	
10 Principal occupation / Job title (See Instructions) Advertising Design		11 Employer (See Instructions) Self	

Date	Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID# _____) Pledgor address; City; State; Zip Code	Amount of pledge (\$)	In-kind description (if applicable)
		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

Date	Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID# _____) Pledgor address; City; State; Zip Code	Amount of pledge (\$)	In-kind description (if applicable)
		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

Date	Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID# _____) Pledgor address; City; State; Zip Code	Amount of pledge (\$)	In-kind description (if applicable)
		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

Date	Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID# _____) Pledgor address; City; State; Zip Code	Amount of pledge (\$)	In-kind description (if applicable)
		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

LOANS**SCHEDULE E**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule E:

1

2 FILER NAME

JASON Meeker

3 ACCOUNT # (Ethics Commission Filers)

4

TOTAL OF UNITEMIZED LOANS: ⇒ ⇒ ⇒ ⇒ ⇒ ⇒

\$

5 Date of loan

5-28-2014

7 Name of lender

JASON Meeker

☐ out-of-state PAC (ID#: _____)

9 Loan Amount (\$)

3,267.04

6 Is lender
a financial
institution?

Y

☒ N

8 Lender address; City; State; Zip Code

PO Box 201802

Austin, TX 78720

10 Interest rate

0

11 Maturity date

6-30-2015

12 Principal occupation / Job title (See Instructions)

advertising / PR consultant

13 Employer (See Instructions)

Meeker MACOM

14 Description of Collateral

☒ none

15 Check if personal funds were deposited into political account

☒16 GUARANTOR
INFORMATION

17 Name of guarantor

19 Amount Guaranteed (\$)

☒ not applicable

18 Guarantor address; City; State; Zip Code

20 Principal Occupation (See Instructions)

21 Employer (See Instructions)

Date of loan

Name of lender

☐ out-of-state PAC (ID#: _____)

Loan Amount (\$)

Is lender
a financial
institution?

Y

N

Lender address; City; State; Zip Code

Interest rate

Maturity date

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Description of Collateral

☐ none

Check if personal funds were deposited into political account

☐GUARANTOR
INFORMATION

Name of guarantor

Amount Guaranteed (\$)

☐ not applicable

Guarantor address; City; State; Zip Code

Principal Occupation (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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

POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By
Event Expense	Polling Expense	Travel Out Of District	Candidate/Officeholder/Political Committee
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 3	2 FILER NAME JASON Meeker	3 ACCOUNT # (Ethics Commission Filers)
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4 Date 06-23-14	5 Payee name Office Max
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6 Amount (\$) 87.82	7 Payee address; City; State; Zip Code 10001 Research Blvd #300 Austin, TX
-------------------------------	--

8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Advertising	(b) Description (If travel outside of Texas, complete Schedule T)
--------------------------	--	---

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 06-28-14	Payee name FedEx Kinkos
-------------------------	-----------------------------------

Amount (\$) 108.24	Payee address; City; State; Zip Code 9727 Burnet Rd Austin, TX 78758
------------------------------	--

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising	Description (If travel outside of Texas, complete Schedule T)
------------------------	--	---

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 06-17-14	Payee name FASTSIGNS #11601
-------------------------	---------------------------------------

Amount (\$) 149.30	Payee address; City; State; Zip Code 8820 Burnet Rd Austin, TX 78757
------------------------------	--

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Advertising	Description (If travel outside of Texas, complete Schedule T)
------------------------	--	---

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 06-17-14	Payee name Dirt Cheap Signs
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Amount (\$) 737.18	Payee address; City; State; Zip Code 7301 BAR K RANCH ROAD LAGO VISTA, TX
------------------------------	---

PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
------------------------	--	---

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
Fees

Gift/Awards/Memorials Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing Expense

Salaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental Expense

Loan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 3 08-27-2014		2 FILER NAME JASON Meeker		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 5-27-14		5 Payee name University Federal Credit Union			
6 Amount (\$) 19.50		7 Payee address; City; State; Zip Code 3305 Steck Ave Austin, TX 78757			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) Acct/BANK		(b) Description (If travel outside of Texas, complete Schedule T)	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 6-11-14		Payee name Nationbuilder			
Amount (\$) 58.00		Payee address; City; State; Zip Code 448 So Hill St #200 Los Angeles, CA 90013			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Advertising		Description (If travel outside of Texas, complete Schedule T)	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 5-29-14		Payee name Register.COM			
Amount (\$) 38.00		Payee address; City; State; Zip Code 17808 GRAN BAY PKWY JACKSONVILLE, FL 32258			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) Advertising		Description (If travel outside of Texas, complete Schedule T)	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 06-05-2014		Payee name SASHA HAAGENSEN Photography			
Amount (\$) 200.00		Payee address; City; State; Zip Code http://SASHA HAAGENSEN.COM			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) PRINTING		Description (If travel outside of Texas, complete Schedule T)	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED					

POLITICAL EXPENDITURES**SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By
Event Expense	Polling Expense	Travel Out Of District	Candidate/Officeholder/Political Committee
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 3	2 FILER NAME JASON Meeker	3 ACCOUNT # (Ethics Commission Filers)
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4 Date 6-1-14	5 Payee name Google Inc
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6 Amount (\$) 20.00	7 Payee address; City; State; Zip Code 1600 Amphitheatre Pkwy Mountain View, CA 94043
-------------------------------	---

8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Internet	(b) Description (If travel outside of Texas, complete Schedule T)
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 6-25-14	Payee name JAY Matthew Consulting
------------------------	---

Amount (\$) 1650.00	Payee address; City; State; Zip Code 104 FOUNTAIN OAKS Circle #137 SACRAMENTO, CA 95831
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) CONSULTING	Description (If travel outside of Texas, complete Schedule T)
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date	Payee name
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Amount (\$)	Payee address; City; State; Zip Code
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
------------------------	--	---

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

Amount (\$)	Payee address; City; State; Zip Code
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
------------------------	--	---

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED