FORM JC/OH JUDICIAL CANDIDATE / OFFICEHOLDER **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Total pages filed: Filer ID The JC/OH Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00026739 55 CANDIDATE / MS / MRS / MR **FIRST** MI **OFFICE USE ONLY OFFICEHOLDER** The Honorable John P. NAME Date Received **ELECTRONICALLY FILED** 07/15/2024 NICKNAME LAST **SUFFIX** Devine CANDIDATE / ADDRESS / PO BOX; APT / SUITE #; Date Hand-delivered or Date Postmarked ZIP CODE **OFFICEHOLDER** MAILING Amount Receipt # **ADDRESS** REDACTED PER 254.0313, GOV'T CODE Change of Address Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** The Honorable John P. NAME NICKNAME LAST **SUFFIX** Devine **CAMPAIGN** STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE APT / SUITE #; CITY; STATE: **TREASURER ADDRESS** REDACTED PER 254.0313, GOV'T CODE (Residence or Business) **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (713) 498-9649 **PHONE** REPORT TYPE 30th day before election 15th day after campaign treasurer January 15 Runoff appointment (officeholder only) July 15 8th day before election Exceeded modified Final Report (Attach C/OH-FR) Х reporting limit PERIOD Month Month Day Year Day Year **COVERED THROUGH** 02/25/2024 06/30/2024 10 ELECTION **ELECTION DATE ELECTION TYPE** Day Month Year χ Primary Runoff Other 03/05/2024 General Special OFFICE HELD (if any) 12 OFFICE SOUGHT (if known) 11 OFFICE Supreme Court Justice Place 4 Supreme Court Justice Place 4

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JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH COVER SHEET PG 2

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13 C / OH NAME	Devine, John P. (The	Honorable)	14 Filer ID (00026739	(Ethics Commission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political exp These expenditures may have been made w I officeholders are required to report this info	rithout the candidate's or office	eholder's knowledge or
X Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		
	X GENERAL	Texas Alliance for Life PAC		
		COMMITTEE ADDRESS		
	SPECIFIC	8000 Centre Park Dr		
		Suite 380		
		Austin, TX 78754		
		COMMITTEE CAMPAIGN TREASURER NA	AME	
		Shaw, James		
		COMMITTEE CAMPAIGN TREASURER AL	DDRESS	
		4505 Corazon Cv		
		Round Rock, TX 78681		
16 CONTRIBUTION TOTALS	1	ZED POLITICAL CONTRIBUTIONS(OTHEF ES OF LOANS, OR CONTRIBUTIONS MAD		\$ 0.00
		CAL CONTRIBUTIONS		\$ 63,216.10
EXPENDITURE	· ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` ` `	PLEDGES, LOANS, OR GUARANTEES OF ZED POLITICAL EXPENDITURES	LOANS)	
TOTALS	3. TOTAL UNITEN	ZED POLITICAL EXPENDITORES		\$ 2,319.93
	4. TOTAL POLIT	CAL EXPENDITURES		\$ 122,542.67
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF RIOD	THE LAST DAY OF THE	\$ 15,470.54
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOAI TING PERIOD	NS AS OF THE LAST DAY	\$ 0.00
17 AFFIDAVIT		I swear, or affirm, under true and correct and incl under Title 15, Election C	penalty of perjury, that the acc udes all information required t Code.	companying report is o be reported by me
		The	e Honorable John P. Devin	e
		Signa	ture of Candidate or Officehol	der
AFFIX NO	TARY STAMP / SEAL AB	DVE		
Sworn to and subs	cribed before me, by the s	aid	, this the	day
		ertify which, witness my hand and seal of office		
Signature of offi	cer administering oath	Printed name of officer administering o	ath Title of office	r administering oath

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT SUPPORT & TOTALS

FORM JC/OH ADDENDUM

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				1 age 6 61 66			
C / OH NAME	Devine, John P. (The	Honorable)	Filer ID 00026739	(Ethics Commission Filers)			
17 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					
	X GENERAL	Republican Voters of Texas PAC					
		COMMITTEE ADDRESS					
	SPECIFIC	30310 Charlie Lane					
		Magnolia, TX 77355					
		COMMITTEE CAMPAIGN TREASURER NAME					
		Stuckey, Linda					
		COMMITTEE CAMPAIGN TREASURER ADDRES	SS				
		30310 Charlie Lane					
		Magnolia, TX 77355					
NOTICE FROM POLITICAL COMMITTEE(S)	expenditures may have b	of political expenditures by political committees to so been made without the candidate's or officeholder's d to report this information only if they receive notic	knowledge or co	nsent. Candidates and			
(-)	COMMITTEE TYPE	COMMITTEE NAME					
	X GENERAL	Texas Realtors (TREPAC)					
	I SENERAL	COMMITTEE ADDRESS					
	CDECIFIC	1115 San Jacinto Blvd					
	SPECIFIC	Suite 200					
		Austin, TX 78701					
		COMMITTEE CAMPAIGN TREASURER NAME					
		Cantu, Leslie					
			20				
		COMMITTEE CAMPAIGN TREASURER ADDRES	55				
		1115 San Jacinto Blvd					
		Suite 200					
		Austin, TX 78701					

SUBTOTALS - JC/OH

FORM JC/OH COVER SHEET PG 3

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18 FIL	ER NAN	1E	19 Filer ID	(Ethi	ics Commission Filers)
	vine, J	00026739			
	HEDUL ME OF		SUBTOTAL AMOUNT		
1.	Х	SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)		\$	61,555.00
2.	X	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	1,661.10
3.		SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)		\$	
4.		SCHEDULE E(J): LOANS (JUDICIAL)		\$	
5.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	3	\$	122,542.67
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	DNS	\$	
8.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
9.		SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	
10.		SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS C	OF C/OH	\$	
11.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	DNS	\$	
12.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F TO FILER	RETURNED	\$	
				•	

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	1	Total pages Schedule A(J)1: Sch: 1/21 Rpt: 5/55		
2	FILER NAME Devine, John	n P. (The Honorable)			1	Filer ID (Ethics Commission Filers) 00026739
4	Date 06/18/2024			7 /	Amount of Contribution (\$) \$1,000.00	
		San Antonio, TX 78209				
8		Principal Occupation		9 Contributor's Job Title		
_	Retired			Retired		
10	Retired	employer/law firm		11 Law firm of contributor's sp	oouse	e (IT any)
12	! If contributor is	s a child, law firm of parent(s) (if	any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)	<i> </i>	Amount of Contribution (\$)
	03/02/2024	Allison, Peter Contributor address; City;	State; Zip Code			\$250.00
	0	Conroe, TX 77306		I 0 17 1 1 77		
	Engineer	Principal Occupation		Contributor's Job Title Product Manager		
_		employer/law firm		Law firm of contributor's sp	ากแรก	(if any)
	Wabtec Corp			Law min or contributor 5 of	30430	, (ii ai.y)
		s a child, law firm of parent(s) (if	any)	1		
F	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	06/20/2024	Arlinghaus, Tania				\$25.00
		Contributor address; City; Missouri City, TX 77459				
	Contributor's F	Principal Occupation		Contributor's Job Title		
	Retired			Retired		
		employer/law firm		Law firm of contributor's sp	oouse	e (if any)
	Retired					
	If contributor is	s a child, law firm of parent(s) (if	any)			

	MONET	ARY POLITICAL	CONTRIBUTIO	ONS		SCHEDULE A(J)1
	The Instruction Guide explains how to complete this form.					Total pages Schedule A(J)1: Sch: 2/21 Rpt: 6/55
2	FILER NAME Devine, John	n P. (The Honorable)			3	Filer ID (Ethics Commission Filers) 00026739
4	4 Date 06/24/2024 5 Full name of contributor out-of-state PAC (ID#:) 7 Austin Republican Women PAC 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$) \$3,000.00		
		Austin, TX 78738				
8	Contributor's I	Principal Occupation		9 Contributor's Job Title		
10	Contributor's	employer/law firm		11 Law firm of contributor's sp	oous	se (if any)
12	! If contributor is	s a child, law firm of parent(s) (i	f any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	06/25/2024	Beck Redden LLP Contributor address; City;	<u> </u>		•	\$1,500.00
		Houston, TX 77010				
	Contributor's I	Principal Occupation		Contributor's Job Title		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	If contributor is	s a child, law firm of parent(s) (i	f any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	06/24/2024	Beck, David J				\$1,500.00
		Contributor address; City; Houston, TX 77010	State; Zip Code			
	Contributor's F	I Principal Occupation		Contributor's Job Title	<u> </u>	
	Attorney			Partner		
	Contributor's	employer/law firm		Law firm of contributor's sp	ous	se (if any)
	Beck Redde	n LLP				
	If contributor is	s a child, law firm of parent(s) (i	f any)			

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instruction Guide explains how to complete this form.					Total pages Schedule A(J)1: Sch: 3/21 Rpt: 7/55
2	FILER NAME Devine, John	n P. (The Honorable)			3	Filer ID (Ethics Commission Filers) 00026739
4	Date 04/11/2024			7	Amount of Contribution (\$) \$100.00	
		Lakeway, TX 78734				
8		Principal Occupation		9 Contributor's Job Title		
	Retired			Retired		
10	Contributor's e Retired	employer/law firm		11 Law firm of contributor's sp	oous	se (if any)
12	If contributor is	s a child, law firm of parent(s) (if	any)			
F	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	06/18/2024	Blumberg, Catherine Contributor address; City;	State; Zip Code			\$25.00
		San Antonio, TX 78210		T = 10 - 11 - 11		
	Homemaker	Principal Occupation		Contributor's Job Title Retired		
		employer/law firm		Law firm of contributor's sp	20116	co (if any)
	Retired	employemaw mm		Law IIIII of Contributor 3 3	Jou	se (ii uriy)
	If contributor is	s a child, law firm of parent(s) (if	any)			
F	Date	Full name of contributor	out-of-state PAC (ID#:)	Τ	Amount of Contribution (\$)
	06/11/2024	Boatright, Jason				\$1,000.00
		Contributor address; City; Dallas, TX 75201	State; Zip Code		•	
	Contributor's I	Principal Occupation		Contributor's Job Title	<u> </u>	
	Lawyer			Special Counsel		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	Duane Morri	s LLP				
	If contributor is	s a child, law firm of parent(s) (if	any)			

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instruction Guide explains how to complete this form.					Total pages Schedule A(J)1: Sch: 4/21 Rpt: 8/55
2	FILER NAME Devine, John	n P. (The Honorable)			1	Filer ID (Ethics Commission Filers) 00026739
4	Date 03/05/2024	_ `		7	Amount of Contribution (\$) \$100.00	
		Columbia, MO 65201				
8		Principal Occupation		9 Contributor's Job Title		
	Retired			Retired		
10	Contributor's e Retired	employer/law firm		11 Law firm of contributor's sp	oous	e (if any)
12	If contributor is	s a child, law firm of parent(s) (if	f any)	•		
F	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	06/18/2024	Brink, Robert Contributor address; City;	State; Zip Code			\$25.00
		Houston, TX 77063		1		
		Principal Occupation		Contributor's Job Title		
	Retired			Retired		Ct - m)
	Retired	employer/law firm		Law firm of contributor's sp	oous	e (ii any)
	If contributor is	s a child, law firm of parent(s) (if	f any)	1		
H	Date	Full name of contributor	out-of-state PAC (ID#:	,	T	Amount of Contribution (\$)
	04/01/2024	Butler Snow LLP	U dut di state i Ae (ibii.			\$1,000.00
		Contributor address; City; Ridgeland, MS 39158	State; Zip Code			
\vdash	Contributor's I	Principal Occupation		Contributor's Job Title		
	Contributor's 6	employer/law firm		Law firm of contributor's sp	oous	e (if any)
	If contributor is	s a child, law firm of parent(s) (if	f any)	<u>I</u>		

	MONET	ARY POLITICAL	CONTRIBUTIO	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	1	Total pages Schedule A(J)1: Sch: 5/21 Rpt: 9/55		
2	FILER NAME Devine, John	n P. (The Honorable)			3	Filer ID (Ethics Commission Filers) 00026739
4	Date 5 Full name of contributor out-of-state PAC (ID#:) Cameron, Drake 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$) \$100.00		
		Houston, TX 77070				
8		Principal Occupation		9 Contributor's Job Title		
_	Retired			Retired		
10	Retired	employer/law firm		11 Law firm of contributor's sp	oous	se (If any)
12	If contributor is	s a child, law firm of parent(s) (if	any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	03/05/2024	Canyon Lake Republical Contributor address; City; \$	State; Zip Code			\$750.00
	Cantuila staula I	Canyon Lake, TX 78133		Constribute de Joh Title		
	Contributors	Principal Occupation		Contributor's Job Title		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	If contributor is	s a child, law firm of parent(s) (if	any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	06/24/2024	Carson, Deborah Contributor address; City; \$	State; Zip Code			\$50.00
		Fredericksburg, TX 7862	24			
	Contributor's F	Principal Occupation		Contributor's Job Title	•	
	Retired			Retired		
		employer/law firm		Law firm of contributor's sp	oous	se (if any)
	Retired					
	If contributor is	s a child, law firm of parent(s) (if	any)			

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	1	Total pages Schedule A(J)1: Sch: 6/21 Rpt: 10/55		
2	FILER NAME Devine, John	n P. (The Honorable)			3	Filer ID (Ethics Commission Filers) 00026739
4	Date 5 Full name of contributor out-of-state PAC (ID#:) Carter, Janet 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$) \$85.00		
		Moran, TX 76464				
8		Principal Occupation		9 Contributor's Job Title		
	Retired			Retired		
10	Contributor's e Retired	employer/law firm		11 Law firm of contributor's sp	oous	se (if any)
12	If contributor is	s a child, law firm of parent(s) (if	any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	06/11/2024	Carty, Rob Contributor address; City;				\$100.00
		Spring Branch, TX 7807	0	I		
	Attorney	Principal Occupation		Contributor's Job Title Partner		
		employer/law firm		Law firm of contributor's sp	20116	co (if any)
		Weitzner & Thomas LLP		Law iiiii oi contiibatoi 3 3	Jous	se (ii diiy)
		s a child, law firm of parent(s) (if	fany)			
	Date	Full name of contributor	out-of-state PAC (ID#:)	Π	Amount of Contribution (\$)
	06/18/2024	Cavin III, Wylie	_			\$250.00
		Contributor address; City; Spicewood, TX 78669	State; Zip Code			
	Contributor's I	Principal Occupation		Contributor's Job Title	<u> </u>	
	Retired	morpai Occupation		Retired		
_		employer/law firm		Law firm of contributor's sp	oous	se (if any)
	Retired					· •
	If contributor is	s a child, law firm of parent(s) (if	any)			

	MONET	ARY POLITICAL CO	NTRIBUTIONS		SCHEDULE A(J)1
	The Instru	ction Guide explains how to		1 Total pages Schedule A(J)1: Sch: 7/21 Rpt: 11/55	
2	FILER NAME	ER NAME		3 Filer ID (Ethics Commission Filers)	
	Devine, Joh	n P. (The Honorable)			00026739
4	Date	5 Full name of contributor	out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
	06/18/2024	Cawyer, Carroll			\$50.00
		6 Contributor address; City; State;	Zip Code		
		Stephenville, TX 76401			
8	Contributor's	Principal Occupation	9 Contributo	r's Job Title	
	Retired		Retired		
10	Contributor's	employer/law firm	11 Law firm o	f contributor's spo	ouse (if any)
	Retired				
12	! If contributor i	s a child, law firm of parent(s) (if any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)	Amount of Contribution (\$)
	06/18/2024	Clough, Christopher			\$2,500.00
		Contributor address; City; State;	Zip Code		
		Austin, TX 78701			
	Contributor's	Principal Occupation	Contributo	r's Job Title	
	Attorney		Managing	g Partner	
	Contributor's	employer/law firm	Law firm o	f contributor's spo	ouse (if any)
	Barron Adle	Clough & Oddo, PLLC			
	If contributor i	s a child, law firm of parent(s) (if any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)	Amount of Contribution (\$)
	06/25/2024	Costea, Peter			\$100.00
		Contributor address; City; State;	Zip Code		
		Kingwood, TX 77346			
	Contributor's	Principal Occupation	Contributo	r's Job Title	
	Attorney		Attorney		
	Contributor's	employer/law firm	Law firm o	f contributor's spo	ouse (if any)
	Law Office of	f Peter Costea			
	If contributor i	s a child, law firm of parent(s) (if any)	•		

MONET	ARY POLITICAL C	CONTRIBUTIO	ONS	SCHEDULE A(J)1
The Instru	ction Guide explains how	to complete this f	form.	1 Total pages Schedule A(J)1: Sch: 8/21 Rpt: 12/55
2 FILER NAME				3 Filer ID (Ethics Commission Filers)
Devine, Joh	n P. (The Honorable)			00026739
4 Date	Date 5 Full name of contributor out-of-state PAC (ID#:)			7 Amount of Contribution (\$)
06/18/2024	Crawford, Joseph			\$20.00
	6 Contributor address; City; St Georgetown, TX 78633	ate; Zip Code		
9 Contributoria			9 Contributor's Job Title	1
Retired	Principal Occupation		9 Contributor's Job Title Retired	
	employer/law firm		11 Law firm of contributor's s	nouse (if am)
Retired	етіріоуетлам інті		Law IIIII of Contributor 5 5	pouse (ii ariy)
	s a child, law firm of parent(s) (if a	nny)		
Date	Full name of contributor	out-of-state PAC (ID#:)	Amount of Contribution (\$)
06/07/2024	Devine, Maria			\$50.00
	Contributor address; City; St Dallas, TX 75204	ate; Zip Code		
Contributor's	Principal Occupation		Contributor's Job Title	1
Retired	Thiopai Occupation		Retired	
	employer/law firm		Law firm of contributor's s	pouse (if any)
Retired				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
If contributor i	s a child, law firm of parent(s) (if a	nny)	l	
Date	Full name of contributor	out-of-state PAC (ID#:)	Amount of Contribution (\$)
06/18/2024	Donnelly, Robert			\$50.00
	Contributor address; City; St Midland, TX 79702-3488	ate; Zip Code		·-
Cantuikustaula			Contributor's Job Title	<u> </u>
Landman	Principal Occupation		President	
	employer/law firm			naugo (if any)
	d Oil Company		Law firm of contributor's s	pouse (ii ariy)
	s a child, law firm of parent(s) (if a	unu)		
ii continbutor i	s a criliu, law liriii oi parerii(s) (ii a	ury)		

MC	ONET	ARY POLITICAL CONTRIBUTION	ONS	SCHEDULE A(J)1
The	e Instruc	ction Guide explains how to complete this	1 Total pages Schedule A(J)1: Sch: 9/21 Rpt: 13/55	
	ER NAME vine, John	P. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00026739
4 Date	Date 5 Full name of contributor out-of-state PAC (ID#:) Duda, Robert 6 Contributor address; City; State; Zip Code		7 Amount of Contribution (\$) \$75.00	
		Kyle, TX 78640		
	tributor's P Jineer	rincipal Occupation	9 Contributor's Job Title President	
		mployer/law firm Metal Products, Inc	11 Law firm of contributor's sp	oouse (if any)
12 If co	ntributor is	a child, law firm of parent(s) (if any)	1	
Date 02/2	e 28/2024	Full name of contributor)	Amount of Contribution (\$) \$50.00
		Spring, TX 77379		
Con		rincipal Occupation	Contributor's Job Title Retired	,
	tributor's e	mployer/law firm	Law firm of contributor's sp	pouse (if any)
If co	ntributor is	a child, law firm of parent(s) (if any)		
Date 02/2	e 26/2024	Full name of contributor X out-of-state PAC (ID# Greenberg Traurig P.A. PAC Contributor address; City; State; Zip Code Albany, NY 12207		Amount of Contribution (\$) \$2,500.00
Cont	tributor's P	Principal Occupation	Contributor's Job Title	
Cont	tributor's e	mployer/law firm	Law firm of contributor's sp	pouse (if any)
If co	ntributor is	a child, law firm of parent(s) (if any)		

	MONET	ARY POLITICAL	CONTRIBUTIO	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	ow to complete this t	form.	1	Total pages Schedule A(J)1: Sch: 10/21 Rpt: 14/55
2	FILER NAME Devine, John	n P. (The Honorable)			3	Filer ID (Ethics Commission Filers) 00026739
4	Date 06/18/2024	5 Full name of contributor Hallett & Perrin PC6 Contributor address; City;	out-of-state PAC (ID#:_)	7	Amount of Contribution (\$) \$750.00
L		Dallas, TX 75202		T		
8	Contributor's I	Principal Occupation		9 Contributor's Job Title		
10	10 Contributor's employer/law firm 11 Law firm of contributor's sp			oous	se (if any)	
12	2 If contributor is	s a child, law firm of parent(s) (i	f any)			
	Date Full name of contributor out-of-state PAC (ID#:) Heise, Steve Contributor address; City; State; Zip Code		•	Amount of Contribution (\$) \$25.00		
		Front Royal, VA 22630				
	Contributor's F	Principal Occupation		Contributor's Job Title		
	IT			Systems Engineer		
	Contributor's e Empower Al	employer/law firm		Law firm of contributor's sp	ous	se (if any)
		s a child, law firm of parent(s) (i	f any)			
H	Date	Full name of contributor	out-of-state PAC (ID#:)	Т	Amount of Contribution (\$)
	06/18/2024	Higley, Robert Contributor address; City;	<u> </u>			\$250.00
		Houston, TX 77005				
	Contributor's F	Principal Occupation		Contributor's Job Title	_	
	Investments			Investments Advisor		
		employer/law firm		Law firm of contributor's sp	ous	se (if any)
	Wells Fargo If contributor is	Advisors s a child, law firm of parent(s) (i	f any)			

	MONET	ARY POLITICAL CONTRIBUTI	ONS	SCHEDULE A(J)1
	The Instru	ction Guide explains how to complete this	form.	1 Total pages Schedule A(J)1: Sch: 11/21 Rpt: 15/55
2	FILER NAME Devine, John	n P. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00026739
4	Date 06/18/2024	 Full name of contributor out-of-state PAC (ID# Hook, Joanne Contributor address; City; State; Zip Code Houston, TX 77025 	÷)	7 Amount of Contribution (\$) \$250.00
8	Contributor's F	Principal Occupation	9 Contributor's Job Title	
	Retired		Retired	
10	Contributor's e	employer/law firm	11 Law firm of contributor's sp	pouse (if any)
12	If contributor is	s a child, law firm of parent(s) (if any)		
	Date	Full name of contributor out-of-state PAC (ID#	<i>t</i> :)	Amount of Contribution (\$)
	05/28/2024 Hunton Andrews Kurth Texas PAC Contributor address; City; State; Zip Code			\$5,000.00
	Contributor's I	Houston, TX 77002 Principal Occupation	Contributor's Job Title	
	Continuator 3 i	Tincipal Occupation	Contributor 3 30b Title	
	Contributor's	employer/law firm	Law firm of contributor's sp	pouse (if any)
	If contributor is	s a child, law firm of parent(s) (if any)		
	Date	Full name of contributor ut-of-state PAC (ID#	<i>‡</i> :)	Amount of Contribution (\$)
	O6/24/2024 James, Robert B. Contributor address; City; State; Zip Code Rockport, TX 78382		\$20.00	
	Contributor's F	Principal Occupation	Contributor's Job Title	
	Retired Retired			
Contributor's employer/law firm Law firm of contributor's sp Retired			pouse (if any)	
	If contributor is	s a child, law firm of parent(s) (if any)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS	SCHEDULE A(J)1
	The Instru	ction Guide explains how to complete this	form.	1 Total pages Schedule A(J)1: Sch: 12/21 Rpt: 16/55
2	FILER NAME Devine, John	n P. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00026739
4	Date 06/18/2024	 5 Full name of contributor out-of-state PAC (ID#: Jefferson, Wallace B. 6 Contributor address; City; State; Zip Code Austin, TX 78701 		7 Amount of Contribution (\$) \$2,500.00
8	Contributor's F	I Principal Occupation	9 Contributor's Job Title	
	Attorney		Partner	
10	O Contributor's employer/law firm Alexander Dubose & Jefferson LLP		ouse (if any)	
12	If contributor is	s a child, law firm of parent(s) (if any)		
	Date	Full name of contributor ut-of-state PAC (ID#:)	Amount of Contribution (\$)
	O6/24/2024 Johnson, Trent, West & Taylor, LLP Contributor address; City; State; Zip Code Houston, TX 77002			\$250.00
	Contributor's F	Principal Occupation	Contributor's Job Title	
	Continuator o	Timospai Gocapation	Contains at of 5 cost 1 at o	
	Contributor's	employer/law firm	Law firm of contributor's sp	ouse (if any)
	If contributor is	s a child, law firm of parent(s) (if any)	<u> </u>	
	Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
	06/13/2024	Kaminski, Bryan Contributor address; City; State; Zip Code Dallas, TX 75379		\$500.00 -
	Contributor's F	Principal Occupation	Contributor's Job Title	
	Real estate		President	
Contributor's employer/law firm Law firm of contributor's sp			ouse (if any)	
	Kamco Prop	erty Company		
	If contributor is	s a child, law firm of parent(s) (if any)		

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 13/21 Rpt: 17/55
2	FILER NAME Devine, John	n P. (The Honorable)			3	Filer ID (Ethics Commission Filers) 00026739
4	Date 03/12/2024	5 Full name of contributor Lanier, Becky6 Contributor address; City;	out-of-state PAC (ID#:)	7	Amount of Contribution (\$) \$5,000.00
_		Houston, TX 77070		T		
8	Contributor's Retired	Principal Occupation		9 Contributor's Job Title Retired		
10	0 Contributor's employer/law firm 11 Law firm of contributor's s			11 Law firm of contributor's sp	oous	se (if any)
	Retired The Lanier Law Firm					
12	! If contributor i	s a child, law firm of parent(s) (i	f any)	1		
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	03/12/2024	Lanier, W. Mark Contributor address; City; Houston, TX 77070	State; Zip Code			\$5,000.00
_	Canatuilavitavila			Contributor's Job Title		
	Attorney	Principal Occupation		Founder		
		employer/law firm		Law firm of contributor's sp	20116	co (if any)
	The Lanier L			Law littl of contributors sp	Jous	se (ii aiiy)
_		s a child, law firm of parent(s) (i	f any)			
	ii continuator i	s a cilliu, iaw iiiiii oi pareiii(s) (i	i aliy)			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	06/25/2024	Larose, Guy				\$200.00
		Contributor address; City; Richmond, TX 77469	State; Zip Code			
	Contributor's I	Principal Occupation		Contributor's Job Title	•	
	Retired			Retired		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	Retired					
	If contributor is	s a child, law firm of parent(s) (i	f any)			

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	otal pages Schedule A(J)1: Sch: 14/21 Rpt: 18/55
2	FILER NAME Devine, John	n P. (The Honorable)			1	iler ID (Ethics Commission Filers) 00026739
4	Date 02/25/2024	5 Full name of contributor Lutz, William6 Contributor address; City;	out-of-state PAC (ID#:		7 A	amount of Contribution (\$) \$25.00
		Austin, TX 78727				
8		Principal Occupation		9 Contributor's Job Title		
40	Public service Economist				(t)	
10	10 Contributor's employer/law firm Texas Workforce Commission			oouse	(If any)	
12		s a child, law firm of parent(s) (i	any)	1		
	Date	Full name of contributor	out-of-state PAC (ID#:)	A	Amount of Contribution (\$)
	06/18/2024	Martens, Todd & Leonal Contributor address; City; Austin, TX 78701				\$250.00
	Contributor's F	Principal Occupation		Contributor's Job Title		
	Contributor of	Timoipai Goodpation		Continuator o cos Title		
	Contributor's	employer/law firm		Law firm of contributor's sp	oouse	(if any)
	If contributor is	s a child, law firm of parent(s) (if	any)	1		
	Date	Full name of contributor	out-of-state PAC (ID#:)	Α Δ	Amount of Contribution (\$)
	06/18/2024	Martin, Paul E				\$1,000.00
		Contributor address; City; Montgomery, TX 77316	State; Zip Code			
	Contributor's I	Principal Occupation		Contributor's Job Title	<u> </u>	
	Retired			Retired		
	Contributor's	employer/law firm		Law firm of contributor's sp	oouse	(if any)
	Retired					
	If contributor is	s a child, law firm of parent(s) (if	any)			

	MONET	ARY POLITICAL CO	ONTRIBUTIC	ONS		SCHEDULE A	A(J)1
	The Instru	ction Guide explains how to	o complete this f	orm.	1	ges Schedule A(J)1: /21 Rpt: 19/55	
2	FILER NAME Devine, John	n P. (The Honorable)			3 Filer ID 0002673	(Ethics Commissio	n Filers)
4	Date 06/25/2024	5 Full name of contributor McKibben Martinez Jarvis & 6 Contributor address; City; State Contributor Christi, TV 76404			7 Amount o	of Contribution (\$)	\$250.00
8	Contributor's I	Corpus Christi, TX 76401 Principal Occupation		9 Contributor's Job Title			
10	LO Contributor's employer/law firm 11 Law firm of contributor's sp		oouse (if any)				
12	If contributor is	s a child, law firm of parent(s) (if any)				
	Date O6/18/2024 Full name of contributor out-of-state PAC (ID#:) Moriarty, Michael Contributor address; City; State; Zip Code Houston, TX 77007		Amount o	of Contribution (\$)	\$250.00		
	Contributor's I	Principal Occupation		Contributor's Job Title			
	Attorney	- micipai Occupation		Founder			
	Contributor's e	employer/law firm / Firm s a child, law firm of parent(s) (if any))	Law firm of contributor's sp	oouse (if any)		
	Date	Full name of contributor	out-of-state PAC (ID#:_	1	Amount	of Contribution (\$)	
	02/27/2024	NE Tarrant Tea Party PAC Contributor address; City; State Grapevine, TX 76051	-		, unount (or Contained a on (c)	\$200.00
	Contributor's I	Principal Occupation		Contributor's Job Title			
	Contributor's	employer/law firm		Law firm of contributor's sp	oouse (if any)		
	If contributor is	s a child, law firm of parent(s) (if any))				

	MONET	ARY POLITICAL C	ONTRIBUTIO	ONS	SCHEDULE A(J)1
	The Instru	ction Guide explains how	to complete this f	orm.	1 Total pages Schedule A(J)1: Sch: 16/21 Rpt: 20/55
2	FILER NAME Devine, John	n P. (The Honorable)			3 Filer ID (Ethics Commission Filers) 00026739
4	Date 06/18/2024	8/2024 Nugent, Marie 6 Contributor address; City; State; Zip Code Houston, TX 77084		7 Amount of Contribution (\$) \$25.00	
8	Contributor's F	I Principal Occupation		9 Contributor's Job Title	
	Retired Retired				
10	Contributor's employer/law firm Retired 11 Law firm of contributor's spo		oouse (if any)		
12	If contributor is	s a child, law firm of parent(s) (if an	y)		
	Date	Full name of contributor	out-of-state PAC (ID#:_)	Amount of Contribution (\$)
	O6/25/2024 Putnam, Terrill Contributor address; City; State; Zip Code		\$250.00		
	Contributorio	Georgetown, TX 78633		Contributor's Job Title	
	Retired	Principal Occupation		Retired	
		employer/law firm		Law firm of contributor's sp	oouse (if any)
		s a child, law firm of parent(s) (if an	у)		
	Date	Full name of contributor	out-of-state PAC (ID#:_)	Amount of Contribution (\$)
	06/18/2024	Shamoun & Norman LLP Contributor address; City; Sta Dallas, TX 75234-8944	te; Zip Code		\$1,000.00
	Contributor's I	I Principal Occupation		Contributor's Job Title	
	Contributor's e	employer/law firm		Law firm of contributor's sp	oouse (if any)
	If contributor is	s a child, law firm of parent(s) (if an	y)		

	MONET	ARY POLITICAL CONTE	RIBUTIC	ONS		SCHEDULE A	A(J)1
	The Instru	ction Guide explains how to com	plete this f	orm.	1	ges Schedule A(J)1 /21 Rpt: 21/55	:
2	FILER NAME Devine, John	n P. (The Honorable)			3 Filer ID 0002673	(Ethics Commission (Ethics Commi	on Filers)
4	Date 06/18/2024	 5 Full name of contributor out-of-s Stallings, Kyle 6 Contributor address; City; State; Zip Co Midland, TX 79702 	state PAC (ID#:_)	7 Amount	of Contribution (\$)	\$1,000.00
8	Contributor's F	I Principal Occupation		9 Contributor's Job Title	1		
	Investor-Oil	Investor-Oil & Gas CEO					
10	O Contributor's employer/law firm Desert Royalty Company 11 Law firm of contributor's sp		oouse (if any)				
12	If contributor is	s a child, law firm of parent(s) (if any)					
	Date	Full name of contributor out-of-s	state PAC (ID#:_		Amount	of Contribution (\$)	
	06/12/2024 Stanfield, Craig Contributor address; City; State; Zip Code Houston, TX 77055				\$100.00		
	Contributor's F	I Principal Occupation		Contributor's Job Title	<u> </u>		
	Attorney			Partner			
	Contributor's 6	employer/law firm		Law firm of contributor's sp	oouse (if any)		
		s a child, law firm of parent(s) (if any)					
	Date	Full name of contributor out-of-s	state PAC (ID#:_)	Amount	of Contribution (\$)	
	02/27/2024	Texas Apartment Association PAC Contributor address; City; State; Zip Co Austin, TX 78701	de				\$5,000.00
	Contributor's I	Principal Occupation		Contributor's Job Title	L		
	Contributor's	employer/law firm		Law firm of contributor's sp	oouse (if any)		
	If contributor is	s a child, law firm of parent(s) (if any)					

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDULE	A(J)1
	The Instru	ction Guide explains how to complete this f	iorm.	1	Total pages Schedule A(J): Sch: 18/21 Rpt: 22/55	1:
2	FILER NAME Devine, Johr	n P. (The Honorable)		3	Filer ID (Ethics Commiss 00026739	ion Filers)
4	Date 04/01/2024	 Full name of contributor out-of-state PAC (ID#:_ Texas Association of Business PAC Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$)	\$1,000.00
8	Contributor's I	Austin, TX 78701 Principal Occupation	9 Contributor's Job Title			
_						
10	10 Contributor's employer/law firm 11 Law firm of contributor's sp			pous	se (if any)	
12	If contributor is	s a child, law firm of parent(s) (if any)				
	Date	Full name of contributor out-of-state PAC (ID#:_)	T	Amount of Contribution (\$)	
	03/05/2024 Texas Farm Bureau AgFund Contributor address; City; State; Zip Code					\$5,000.00
L		Waco, TX 76702				
	Contributor's F	Principal Occupation	Contributor's Job Title			
	Contributor's e	employer/law firm	Law firm of contributor's sp	oous	se (if any)	
	If contributor is	s a child, law firm of parent(s) (if any)				
	Date	Full name of contributor out-of-state PAC (ID#:_)	T	Amount of Contribution (\$)	
	03/12/2024	The Lanier Law Firm				\$5,000.00
	Contributor address; City; State; Zip Code Houston, TX 77064					
	Contributor's F	Principal Occupation	Contributor's Job Title	•		
	Contributor's 6	employer/law firm	Law firm of contributor's sp	pous	se (if any)	
	If contributor is	s a child, law firm of parent(s) (if any)				

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this t	form.	1	Total pages Schedule A(J)1: Sch: 19/21 Rpt: 23/55
2	FILER NAME Devine, Johi	n P. (The Honorable)			3	Filer ID (Ethics Commission Filers) 00026739
4	Date 06/25/2024	5 Full name of contributor The Law Office of Domi 6 Contributor address; City;	_		7	Amount of Contribution (\$) \$1,000.00
L		Dallas, TX 75247		I		
8	Contributor's I	Principal Occupation		9 Contributor's Job Title		
10	10 Contributor's employer/law firm 11 Law firm of contributor's sp			oous	se (if any)	
12	2 If contributor is	s a child, law firm of parent(s) (i	f any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)	Τ	Amount of Contribution (\$)
	06/25/2024	Trent and Taylor LLP Contributor address; City;	<u> </u>			\$250.00
		Houston, TX 77002				
	Contributor's I	Principal Occupation		Contributor's Job Title		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	If contributor is	s a child, law firm of parent(s) (i	f any)			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)
	06/18/2024	Van Huff, Albert Contributor address; City;	State; Zip Code			\$250.00
		Houston, TX 77008				
	Contributorio			Contributorio Joh Titlo		
	Attorney	Principal Occupation		Contributor's Job Title Partner		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	Monshauger	n & Van Huff PC				
	If contributor is	s a child, law firm of parent(s) (i	f any)			

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 20/21 Rpt: 24/55
2	FILER NAME Devine, John	n P. (The Honorable)			1	Filer ID (Ethics Commission Filers) 00026739
4	Date 06/19/2024	5 Full name of contributorVartabedian, Robert6 Contributor address; City;	out-of-state PAC (ID#:)	7	Amount of Contribution (\$) \$1,000.00
		Fort Worth, TX 76107				
8	Contributor's I	Principal Occupation		9 Contributor's Job Title		
	Attorney Founding Partner					
10	10 Contributor's employer/law firmVartabedian Hester & Haynes LLP11 Law firm of contributor's sp			oous	e (if any)	
12		s a child, law firm of parent(s) (i	f anv)			
	. Il contributor i	s a crima, law iiiii or parcria(s) (i	i arry)			
F	Date	Full name of contributor	out-of-state PAC (ID#:)	Τ	Amount of Contribution (\$)
	06/18/2024 Webb Jr., Walter Contributor address; City; State; Zip Code			\$5.00		
		Dallas, TX 75216				
	Contributor's I	Principal Occupation		Contributor's Job Title		
	Retired			Retired		
	Contributor's e	employer/law firm		Law firm of contributor's sp	oous	e (if any)
		s a child, law firm of parent(s) (i	f any)			
	ii continuator i	s a criliu, iaw iiiiii oi parerii(s) (i	i arry)			
F	Date	Full name of contributor	out-of-state PAC (ID#:)	Ī	Amount of Contribution (\$)
	06/18/2024	Wilson, Florence	_			\$100.00
		Contributor address; City; Cypress, TX 77433	State; Zip Code			
	Contributor's I	I Principal Occupation		Contributor's Job Title	<u> </u>	
	Retired			Retired		
Г	Contributor's	employer/law firm		Law firm of contributor's sp	oous	e (if any)
	Retired					
	If contributor is	s a child, law firm of parent(s) (i	f any)	•		

	MONET	ARY POLITICAL CONTRIBU	TIONS	SCHEDULE A(J)1
	The Instru	ction Guide explains how to complete th	nis form.	1 Total pages Schedule A(J)1: Sch: 21/21 Rpt: 25/55
2	FILER NAME			3 Filer ID (Ethics Commission Filers)
	Devine, Joh	n P. (The Honorable)		00026739
4	Date	5 Full name of contributor out-of-state PAC	(ID#:)	7 Amount of Contribution (\$)
	06/18/2024	Wilson, William C.		\$100.00
		6 Contributor address; City; State; Zip Code Cypress, TX 77433-6241		
8	Contributor's	I Principal Occupation	9 Contributor's Job Title	
	Retired		Retired	
10	Contributor's	employer/law firm	11 Law firm of contributor's s	spouse (if any)
	Retired			, , , , , , , , , , , , , , , , , , , ,
12	If contributor i	s a child, law firm of parent(s) (if any)		
	Date	Full name of contributor ut-of-state PAC	(ID#:)	Amount of Contribution (\$)
	06/25/2024	Wright Close & Barger LLP		\$2,500.00
		Contributor address; City; State; Zip Code		"
		Houston, TX 77056		
	Contributor's	Principal Occupation	Contributor's Job Title	
	Contributor 3	r incipal occupation	Continuator 3 30b Title	
	Contributor's	employer/law firm	Law firm of contributor's s	spouse (if any)
	If contributor i	is a child, law firm of parent(s) (if any)		

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A2: Sch: 1/1 Rpt: 26/55				
2 FILER NAME		3 Filer ID (Ethics Commission Filers)					
	n P. (The Honorable)		00026739				
4 TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	UTIONS	\$				
5 Date 02/26/2024	6 Full name of contributor ☐ out-of-state PAC (ID#: Denton County Conservative Coalition 7 Contributor address; City; State; Zip Code Flower Mound, TX 75028		8 Amount of solution (\$) In-kind contribution description \$188.96 Voter push cards				
10 Principal occi	upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON	Check if travel outside of Texas. Complete Schedule T. -JUDICIAL) (See instructions)				
10 i illicipai occi	aparion / 30b title (1 OK 14014 30b) CIAL)	Linployer (FOR NON	SOBICIAL) (GGG Managarin)				
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contributor's job title	(FOR JUDICIAL) (See instructions)				
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm of contributo	r's spouse (if any) (FOR JUDICIAL)				
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)						
Date 02/28/2024	Full name of contributor out-of-state PAC (ID#: Denton County Conservative Coalition Contributor address; City; State; Zip Code		Amount of In-kind contribution contribution (\$) description \$1,259.64 Voter postcard mailing				
	Flower Mound, TX 75028		Check if travel outside of Texas. Complete Schedule T.				
Principal occi	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON					
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)				
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contributo	r's spouse (if any) (FOR JUDICIAL)				
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)						
Date 05/23/2024	Full name of contributor out-of-state PAC (ID#: Wintersteen, Marylee Contributor address; City; State; Zip Code		Amount of In-kind contribution contribution (\$) description \$212.50 Booth banners for GOP State Convention				
Dringing con	Rockport, TX 78382	Employer (EQD NON	Check if travel outside of Texas. Complete Schedule T.				
Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) Employer (FOR NON-JUDICIAL) (See instructions)							
Contributor's Retired	principal occupation (FOR JUDICIAL)	Contributor's job title N/A	(FOR JUDICIAL) (See instructions)				
Contributor's N/A	employer/law firm (FOR JUDICIAL)	Law firm of contributo	r's spouse (if any) (FOR JUDICIAL)				
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)						

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Comm

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 1/29 Rpt: 27/55	Devine, John P. (The Honorable) 00026739
4	Date	5 Payee name
	03/22/2024	Amazon
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$3,029.92	410 Terry Ave. N
		Seattle, WA 98109
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Supplies for event booth
		Cappines for event seeking
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	02/28/2024	Anedot
	Amount (\$)	Payee address; City; State; Zip Code
	\$1.30	1340 Poydras St
		Suite 1770
		New Orleans, LA 70112
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
		Credit card service fees
		Credit card service rees
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	03/06/2024	Anedot
	Amount (\$)	Payee address; City; State; Zip Code
	\$11.60	1340 Poydras St
		Suite 1770
		New Orleans, LA 70112
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Credit card service fees
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Oracide to borionic O/O1	•

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	d Co	The Instruction Guide explains how to c	Exper s/Wage	ense Travel Out of District ges/Contract Labor OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2	FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 2/29 Rpt: 28/55		Devine, John P. (The Honorable)		00026739
4	Date	5	Payee name		
	03/07/2024		Anedot		
6	Amount (\$)	7	Payee address; City; State; Zip C	Code	e
	\$4.30		1340 Poydras St		
			Suite 1770		
			New Orleans, LA 70112		
8	PURPOSE	(a)	Category (See Categories listed at the top of this schedule)	(b)	b) Description
	OF EXPENDITURE		Accounting/Banking		Check if travel outside of Texas. Complete Schedule T.
	EXI ENDITORE				Creatit court courting to a
					Credit card service fees
9	Complete ONLY if direct	<u> </u>	Candidate/Officeholder name Office so	l	ht Office held
ภ	expenditure to benefit C/OF		Candidate/Officeriolder Hame Office So	Jugin	office field
	Date		Payee name		
	04/16/2024		Anedot		
	Amount (\$)		Payee address; City; State; Zip C	Code	e
	\$4.30		1340 Poydras St		
			Suite 1770		
			New Orleans, LA 70112		
	PURPOSE	(a)	Category (See Categories listed at the top of this schedule)	(b)	b) Description
	OF EXPENDITURE		Accounting/Banking		Check if travel outside of Texas. Complete Schedule T.
	-				Credit card processing fees
					Credit card processing lees
	Complete ONLY if direct expenditure to benefit C/Oh		Candidate/Officeholder name Office so	l ought	ht Office held
	Date	Г	Payee name		
	06/11/2024		Anedot		
	Amount (\$)	\vdash	Payee address; City; State; Zip C	Code	e
	\$2.30		1340 Poydras St		-
	Ψ2.00		Suite 1770		
			New Orleans, LA 70112		
	PURPOSE	(2)		(h)	b) Description
	OF	(α,	Category (See Categories listed at the top of this schedule) Accounting/Banking	(6)	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE		7.000driting/Bariking		Check if Austin, TX, officeholder living expense
					Credit card processing fees
	Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name Office so	ought	ht Office held
Eor	ms provided by Tayas F	thic	es Commission www.athics state tv	ш	Version V/4.1.0 d278aha0

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 3/29 Rpt: 29/55	Devine, John P. (The Honorable) 00026739
4	Date	5 Payee name
	06/13/2024	Anedot
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$44.60	1340 Poydras St
		Suite 1770
		New Orleans, LA 70112
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Credit card processing fees
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	06/17/2024	Anedot
	Amount (\$)	Payee address; City; State; Zip Code
	\$24.60	1340 Poydras St
		Suite 1770
		New Orleans, LA 70112
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Credit card processing fees
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Date	Davies same
	06/27/2024	Payee name Anedot
	Amount (\$)	Payee address; City; State; Zip Code
	\$8.30	1340 Poydras St
		Suite 1770
		New Orleans, LA 70112
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
		Credit card processing fees
		Credit card processing rees
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Event Expense

Fees

Loan Repayment/Reimbursement
Office Overhead/Rental Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		nittee	Food/Beverage Expens Gift/Awards/Memorials l Legal Services The Instruction Gu	Expense		xpens Vages	e /Contract Labor		Travel in District Travel Out of Dis OTHER (enter a	strict category not listed above)
1	Total pages Schedule F1:	2 F	ILER NAME						3	Filer ID	(Ethics Commission Filers)
L	Sch: 4/29 Rpt: 30/55		Devine, Joh	n P. (The Honor	able)					00026739	
4	Date	5 P	ayee name					•			
	06/25/2024	A	nedot								
6	Amount (\$)	7 P	ayee addres	s; City;	State;	Zip Co	ode				
	\$1.30	1	.340 Poydra	as St							
		S	Suite 1770								
		N	lew Orlean	s, LA 70112							
8	PURPOSE	(a) C	Category (So	e Categories listed at th	o top of this ech	odulo)	(b)	Description			
	OF EXPENDITURE		Accounting/		ie top of this sch	edule)	\	_ ·	outsi	de of Texas. Com	plete Schedule T.
	EXPENDITURE							_		officeholder living	g expense
								Credit card pr	roc	essing fees	
Ļ		<u> </u>				•	<u> </u>				
9	Complete ONLY if direct expenditure to benefit C/O		ındidate/Offic	ceholder name	C	office sou	ıght			Office he	eld
	Date	Р	ayee name								
	06/24/2024	Δ	nedot								
	Amount (\$)	Р	ayee addres	s; City;	State;	Zip Co	ode				
	\$150.30	1	.340 Poydra	as St							
		S	Suite 1770								
		N	lew Orlean	s, LA 70112							
	PURPOSE	(a) C	Category (Se	e Categories listed at th	e ton of this sche	edule)	(b)	Description			
	OF EXPENDITURE		ccounting/l			, aa.o,		`	outsi	de of Texas. Com	plete Schedule T.
	EXPENDITORE			-				_		officeholder living	gexpense
								Credit card pr	roc	essing fees	
		<u> </u>				•					
	Complete ONLY if direct expenditure to benefit C/O		indidate/Offic	eholder name		office sou	ıgnt			Office he	eid
	Date	Р	ayee name								
L	03/21/2024	ЬВ	Bastrop Cou	ınty Conservativ	res		_				
	Amount (\$)	Р	ayee addres	s; City;	State;	Zip Co	ode				
	\$1,000.00	9	06 Main St								
		В	30x 157								
		В	Bastrop, TX	78602							
	PURPOSE	(a) C	Category (Se	e Categories listed at th	e top of this sch	edule)	(b)	Description			
	OF EXPENDITURE	ı	Event Exper			/		Check if travel of			plete Schedule T.
	EXI ENDITORE							_		officeholder living	g expense
								Event sponso	Ν		
	Complete ONLY if alice -		andidate/Offi	oboldor races		office as:	ıab+			Office	
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		ıı ıuıuate/Offic	ceholder name	C	office sou	ıynt			Office he	tiu

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	al Committee Legal Services Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.	OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2 FILER NAME 3	Filer ID (Ethics Commission Filers)
	Sch: 5/29 Rpt: 31/55		00026739
4	Date	5 Payee name	
	04/08/2024	Bastrop County Conservatives	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$650.00	906 Main St	
		Box 157	
		Bastrop, TX 78602	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	L Event Expense	e of Texas. Complete Schedule T.
		,	officeholder living expense
		Event sponsor	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
Ľ	expenditure to benefit C/Ol	H	Office field
	Date	Payee name	
	03/08/2024	Bitelo Brazilian	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$572.72	1850 S Lakeline Blvd	
		Cedar Park, TX 78613	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	1 00d/beverage Expense	e of Texas. Complete Schedule T. officeholder living expense
		Campaign meal	Silveriolder Hvillig experise
Н	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	PH .	
	Date	Payee name	
	03/08/2024	Blakemore & Associates	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$4,974.67	1 Greenway Plaza	
		Suite 225	
		Houston, TX 77046	
\vdash	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
l	OF		e of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, o	officeholder living expense
		Campaign consul	lting services
_			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
_		··	
L			

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)

	Credit Card Payment	The Instruction Guide explains how to comple	ete this form.
1	Total pages Schedule F1: Sch: 6/29 Rpt: 32/55	2 FILER NAME Devine, John P. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00026739
4	Date 03/20/2024	5 Payee name Bryans on 290	I
6	Amount (\$) \$488.45	7 Payee address; City; State; Zip Code 300 E. Main St	
8	PURPOSE OF EXPENDITURE	Johnson City, TX 78636 (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b)	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign meal
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought	Office held
	Date 06/20/2024 Amount (\$)	Payee name Citizens Defending Freedom Payee address; City; State; Zip Code	
	\$3,000.00	PO Box 156 Mulberry, FL 33860	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Event sponsor
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	Date 06/27/2024	Payee name Citizens Defending Freedom	
	Amount (\$) \$248.00	Payee address; City; State; Zip Code PO Box 156	
		Mulberry, FL 33860	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Event tickets
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

O4/22/2024 Color Team LLC 7 Payee address; City; State; Zip Code 19424 Park Row Dr. Suite 190 Houston, TX 77084 (a) Category (See Categories listed at the top of this schedule) OF EXPENDITURE (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign signs		Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)	
Date O4/22/2024 5 Payee name Color Team LLC Se66.82 19424 Park Row Dr. Suite 190 Houston, TX 77084 Sec Category Sec Categories listed at the top of this sederality (b) Description Const. It is well disable of Toxas. Complete Schoolide T. Chest. If asked addition of Toxas Complete Schoolide T. Chest. If asked addition of Toxas Complete Schoolide T. Chest. If asked addition of Toxas Complete Schoolide T. Chest. If asked addition of Toxas Complete Schoolide T. Chest. If asked addition of Toxas Complete Schoolide T. Chest. If asked addition of Toxas Complete Schoolide T. Chest. If asked addition of Toxas Complete Schoolide T. Chest. If asked addition of Toxas Complete Schoolide T. Chest. If asked addition of Toxas Complete Schoolide T. Chest. If asked addition of Toxas Complete Schoolide T. Chest. If asked addition of Toxas Complete Schoolide T. Chest. If asked addition of Toxas Complete Schoolide T. Chest. If asked addition of Toxas Complete Schoolide T. Chest. If asked addition of Toxas Complete Schoolide T. Chest. If asked accessed of Toxas Complete Schoolide T. Chest. If asked accessed of Toxas Complete Schoolide T. Chest. If asked accessed of Toxas Complete Schoolide T. Chest. If asked accessed of Toxas Complete Schoolide T. Chest. If asked accessed of Toxas Complete Schoolide T. Chest. If asked accessed of Toxas Complete Schoolide T. Chest. If asked accessed of Toxas Complete Schoolide T. Chest. If asked accessed of Toxas Complete Schoolide T. Chest. If asked accessed of Toxas Complete Schoolide T. Chest. If asked accessed of Toxas Complete Schoolide T. Chest. If asked accessed of Toxas Complete Schoolide T. Chest. If asked accessed of Toxas Complete Schoolide T. Chest. If asked accessed of Toxas Complete Schoolide T. Chest. If asked accessed of Toxas Complete Schoolide T. Chest. If Asked T. X. officeholide Toxas Complete Schoolide T. Chest. If Asked T. X. officeholide Toxas Complete Schoolide T. Chest. If Asked T. X. officeho	1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)	
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Color Team LLC	4	Date	5 Payee name		
\$666.82		04/22/2024			
\$666.82	6	Amount (\$)	7 Pavee address: Citv: State: Zip Code		
Suite 190 Houston, TX 77084 Category (See Categories listed at the top of this schedule) Category (See Categories listed at the top of this schedule) Category (See Categories listed at the top of this schedule) Category Categories listed at the top of this schedule) Campaign signs		` ,			
Houston, TX 77084		·	Suite 190		
PURPOSE OF EXPENDITURE (a) Category See Categories listed at the top of this schedule) Printing Expense (b) Description Check if Austin, TX, officeholder 1 Texas, Complete Schedule T. Check If Austin, TX, officeholder living expense Campaign signs Office held Payee name Devine, Angelique Amount (\$) Payee address; City; State; Zip Code PURPOSE Salaries/Wages/Contract Labor Complete ONLY if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Complete ONLY if direct expenditure to benefit C/OH Date Payee name Devine, Angelique Complete ONLY if direct expenditure to benefit C/OH Date Payee name Devine, Angelique Amount (\$) Payee address; City; State; Zip Code PO Box 1090 Marble Falls, TX 78654 PURPOSE Payee address; City; State; Zip Code PO Box 1090 Marble Falls, TX 78654 PURPOSE Payee address; City; State; Zip Code PO Box 1090 Marble Falls, TX 78654 PURPOSE Payee address; City; State; Zip Code PO Box 1090 Marble Falls, TX 78654 PURPOSE Payee address; City; State; Zip Code PO Box 1090 Marble Falls, TX 78654 PURPOSE Check if Jaustin, TX, officeholder living expense Campaign work Complete ONLY if direct Candidate/Officeholder name Office Sought Check if Jaustin, TX, officeholder living expense Campaign work Complete ONLY if direct Candidate/Officeholder name Office Sought Check if Jaustin, TX, officeholder living expense Campaign work Complete ONLY if direct Candidate/Officeholder name Office Sought Check if Jaustin, TX, officeholder living expense Campaign work Complete ONLY if direct Candidate/Officeholder name Office Sought Complete ONL					
OF EXPENDITURE Printing Expense Campaign signs Office sought Office held Office held Office held Office held Date Date Date Date Devine, Angelique Amount (\$) Payee address: City; State; Zip Code PO Box 1090 Marble Falls, TX 78654 PURPOSE OF EXPENDITURE Office Sought Candidate/Officeholder name Office sought Office held Office held Office held Office held Payee name Dovine, Angelique Amount (\$) Date 03/25/2024 Devine, Angelique Amount (\$) Payee name Dovine, Angelique Payee name Dovine, Angelique Payee name Dovine, Angelique Amount (\$) Salaries/Wages/Contract Labor Office held	_	BUBBOOF	·		
Complete QNLY if direct expenditure to benefit C/OH	8			outside of Texas, Complete Schedule T	
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Date 03/18/2024 Payee name Devine, Angelique Amount (\$) Payee address; City; State; Zip Code PO Box 1090 Marble Falls, TX 78654 PURPOSE OF EXPENDITURE Candidate/Officeholder name Office sought Office held Payee name Os/125/2024 Date Os/25/2024 Payee name Devine, Angelique Payee name Os/125/2024 Devine, Angelique Amount (\$) Payee address; City; State; Zip Code PO Box 1090 Marble Falls, TX 78654 Devine, Angelique Amount (\$) Payee address; City; State; Zip Code PO Box 1090 Marble Falls, TX 78654 Purpose OF EXPENDITURE (a) Category (see Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Office held Office held Office held Office held (b) Description Office held Office held Office held Office held Complete ONLY if direct Candidate/Officeholder name Office sought Office held Office held Office held Office held Office held			Campaign siç	gns	
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Amount (\$)		Date	Payee name		
\$50.00 PO Box 1090 Marble Falls, TX 78654 PURPOSE OF EXPENDITURE (a) Category (see Categories listed at the top of this schedule) Salaries/Wages/Contract Labor Complete QNLY if direct expenditure to benefit C/OH Date O3/25/2024 Amount (\$) Payee name Devine, Angelique Amount (\$) Payee address; City; State; Zip Code PO Box 1090 Marble Falls, TX 78654 PURPOSE OF EXPENDITURE (a) Category (see Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if ravel outside of Texas. Complete Schedule T. Campaign work (b) Description (b) Description Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder Ining expense Campaign work Complete QNLY if direct Candidate/Officeholder name Office sought Office held		03/18/2024	Devine, Angelique		
Marble Falls, TX 78654 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor Complete ONLY if direct expenditure to benefit C/OH Date Osign Payee name Devine, Angelique Amount (\$) Payee address; City; State; Zip Code PO Box 1090 Marble Falls, TX 78654 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if Austin, TX, officeholder in TX, office		Amount (\$)	Payee address; City; State; Zip Code		
PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if ravel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign work Complete ONLY if direct expenditure to benefit C/OH Date O3/25/2024 Payee name Devine, Angelique Amount (\$) Payee address; City; State; Zip Code PO Box 1090 Marble Falls, TX 78654 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor Complete ONLY if direct Candidate/Officeholder name Office sought Obserciption Check if ravel outside of Texas. Complete Schedule T. Check if ravel outside of Texas. Complete Schedule T. Check if ravel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign work Complete ONLY if direct Candidate/Officeholder name Office sought Office held		\$50.00	PO Box 1090		
PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if ravel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign work Complete ONLY if direct expenditure to benefit C/OH Date 03/25/2024 Payee name Devine, Angelique Amount (\$) Payee address; City; State; Zip Code PO Box 1090 Marble Falls, TX 78654 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor Complete ONLY if direct Candidate/Officeholder name Office sought Office held Office held Office held Office held Office held Office held					
PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if ravel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign work Complete ONLY if direct expenditure to benefit C/OH Date O3/25/2024 Payee name Devine, Angelique Amount (\$) Payee address; City; State; Zip Code PO Box 1090 Marble Falls, TX 78654 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor Complete ONLY if direct Candidate/Officeholder name Office sought Obserciption Check if ravel outside of Texas. Complete Schedule T. Check if ravel outside of Texas. Complete Schedule T. Check if ravel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign work Complete ONLY if direct Candidate/Officeholder name Office sought Office held			Marble Falls, TX 78654		
Complete ONLY if direct expenditure to benefit C/OH Date ONLY if direct expenditure to benefit C/OH Payee name Devine, Angelique Amount (\$) Payee address; City; State; Zip Code Marble Falls, TX 78654 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Campaign work Complete ONLY if direct Candidate/Officeholder name Office sought Office held Office held (b) Description Check if ravel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign work Office held Complete ONLY if direct Candidate/Officeholder name Office sought Office sought Office held		PURPOSE			
Complete ONLY if direct expenditure to benefit C/OH Date O3/25/2024 Payee name Devine, Angelique Amount (\$) Payee address; City; State; Zip Code PO Box 1090 Marble Falls, TX 78654 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Campaign work Complete ONLY if direct Candidate/Officeholder name Office sought Office held Office held		OF		outside of Texas. Complete Schedule T.	
Complete ONLY if direct expenditure to benefit C/OH Date		EXPENDITURE	Check if Austin		
Date 03/25/2024 Payee name Devine, Angelique Amount (\$) Payee address; City; State; Zip Code PO Box 1090 Marble Falls, TX 78654 PURPOSE OF EXPENDITURE (a) Category (see Categories listed at the top of this schedule) Salaries/Wages/Contract Labor Complete ONLY if direct Candidate/Officeholder name Office sought Office held			Campaign wo	ork	
Date 03/25/2024 Payee name Devine, Angelique Amount (\$) Payee address; City; State; Zip Code PO Box 1090 Marble Falls, TX 78654 PURPOSE OF EXPENDITURE (a) Category (see Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign work Complete ONLY if direct Candidate/Officeholder name Office sought Office held					
Date 03/25/2024 Payee name Devine, Angelique Amount (\$) Payee address; City; State; Zip Code PO Box 1090 Marble Falls, TX 78654 PURPOSE OF EXPENDITURE (a) Category (see Categories listed at the top of this schedule) Salaries/Wages/Contract Labor Complete ONLY if direct Candidate/Officeholder name Office sought Office held				Office held	
Devine, Angelique Amount (\$)		expenditure to benefit 6/6/			
Amount (\$) Payee address; City; State; Zip Code PO Box 1090 Marble Falls, TX 78654 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor Complete ONLY if direct Candidate/Officeholder name Office sought Ode Category (See Categories listed at the top of this schedule) Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign work Office held		Date	Payee name		
\$400.00 PO Box 1090 Marble Falls, TX 78654 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor Complete ONLY if direct Candidate/Officeholder name Candidate/Officeholder name Office sought Office held		03/25/2024	Devine, Angelique		
PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign work Complete ONLY if direct Candidate/Officeholder name Office sought Office held		Amount (\$)	Payee address; City; State; Zip Code		
PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign work Complete ONLY if direct Candidate/Officeholder name Office sought Office held		\$400.00	PO Box 1090		
PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign work Complete ONLY if direct Candidate/Officeholder name Office sought Office held					
OF EXPENDITURE Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign work Complete ONLY if direct Candidate/Officeholder name Office sought Office held			Marble Falls, TX 78654		
Salaries/Wages/Contract Labor Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign work Complete ONLY if direct Candidate/Officeholder name Office sought Office held		PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
Campaign work Complete ONLY if direct Candidate/Officeholder name Office sought Office held			_	outside of Texas. Complete Schedule T.	
Complete ONLY if direct Candidate/Officeholder name Office sought Office held		EXPENDITURE			
			Campaign wo	ork	
				Office held	

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense Travel in District Travel Out of District
OTHER (enter a category not listed above)

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
l	Sch: 8/29 Rpt: 34/55	Devine, John P. (The Honorable) 00026739
4	Date	5 Payee name
l	04/11/2024	Devine, Angelique
6	Amount (\$)	7 Payee address; City; State; Zip Code
l	\$200.00	PO Box 1090
l		
l		Marble Falls, TX 78654
8	PURPOSE	
ľ	OF	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Campaign work
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
L	experientare to benefit G/OI	
	Date	Payee name
l	04/22/2024	Devine, Angelique
Г	Amount (\$)	Payee address; City; State; Zip Code
	\$100.00	PO Box 1090
l		
		Marble Falls, TX 78654
Г	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
		Check if Austin, TX, officeholder living expense
		Campaign work
┝	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	y
⊨	Data	Para and a second secon
l	Date 05/24/2024	Payee name Devine, Angelique
┡		
l	Amount (\$) \$250.00	Payee address; City; State; Zip Code PO Box 1090
l	\$250.00	PO B0X 1090
l		M. H. E. II. TV 70054
		Marble Falls, TX 78654
l	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
l	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
l		Campaign work
一	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
H		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 9/29 Rpt: 35/55	Devine, John P. (The Honorable) 00026739
4	Date	5 Payee name
	05/28/2024	Devine, Angelique
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$400.00	PO Box 1090
		Marble Falls, TX 78654
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Campaign work at GOP convention
		Campaigh work at GOT Convention
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	03/14/2024	Devine, John (The Honorable)
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,153.74	201 W. 14th St.
		Suite 104
		Austin, TX 78711
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Mileage reimbursement for campaign/officeholder
		travel
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	04/22/2024	Devine, John (The Honorable)
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,167.14	201 W. 14th St.
		Suite 104
		Austin, TX 78711
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		Mileage reimbursement for campaign/officeholder travel
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

SCHEDULE F1

Advertising Expense Event Expense
Accounting/Banking Fees
Consulting Expense Food/Beverage
Contributions/ Donations Made By - Gift/Awards/Mer

Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	<u> </u>
	Sch: 10/29 Rpt: 36/55	Devine, John P. (The Honorable) 00026739
4	Date	5 Payee name
	06/06/2024	Devine, John (The Honorable)
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,788.56	201 W. 14th St.
		Suite 104
		Austin, TX 78711
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Mileage reimbursement for campaign/officeholder
		travel
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	06/10/2024	Fogo de Chao
	Amount (\$)	Payee address; City; State; Zip Code
	\$152.11	849 E. Commerce St. #393
		San Antonio, TX 78205
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Campaign meal
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	05/23/2024	Fogo de Chao
	Amount (\$)	Payee address; City; State; Zip Code
	\$137.00	849 E. Commerce St. #393
		San Antonio, TX 78205
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Campaign meal
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
ertising Expense Event Expense Loan Repayment/Reimbu

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committe

Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (outer a category pet listed above)

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 11/29 Rpt: 37/55	Devine, John P. (The Honorable) 00026739
4	Date	5 Payee name
	05/28/2024	Grand Hyatt San Antonio
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$4.60	600 E Market St
		San Antonio, TX 78205
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense GOP state convention
		Sol state convention
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
F	Date	Payee name
	06/21/2024	Gringo's Mexican Kitchen-Katy
H	Amount (\$)	Payee address; City; State; Zip Code
	\$130.44	230 W Grand Pkwy S
		Katy, TX 77494
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Campaign meal
		Campaigi mea
Н	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
F	Date	Payee name
	02/26/2024	Gringo's Mexican Kitchen
	Amount (\$)	Payee address; City; State; Zip Code
	\$248.18	27030 Northwest Fwy.
		Cypress, TX 77429
Г	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Campaign meal
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	· · · · · · · · · · · · · · · · · · ·
\vdash		
ı		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense

	Credit Card Payment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:		_
	Sch: 12/29 Rpt: 38/55	Devine, John P. (The Honorable) 00026739	
4	Date	5 Payee name	_
	04/22/2024	Hilton Fort Worth	
6	Amount (\$)	7 Payee address; City; State; Zip Code	_
	\$368.72	815 Main St	
		Fort Worth, TX 76102	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense Hotel	
		Tiolei	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
ľ	expenditure to benefit C/O		
⊨	Date	Davisa nama	_
	03/22/2024	Payee name Hopkins County Republican Party	
L			_
	Amount (\$)	Payee address; City; State; Zip Code	
	\$2,500.00	403 Gilmer St.	
L		Sulphur Springs, TX 75482	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Event sponsor	
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/OI	1	
F	Date	Payee name	_
	04/03/2024	Hurlburt, Rob	
H	Amount (\$)	Payee address; City; State; Zip Code	_
	\$2,000.00	4306 Quinlan Park Rd #4311	
		Austin, TX 78732	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Salaries/Wages/Contract Labor	
	EXI ENDITORE	Check if Austin, TX, officeholder living expense	
		Campaign work	
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	Complete ONLY if direct expenditure to benefit C/O		
\vdash			

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)

	Credit Card Payment	The Instruction Guide explains how to complete this form.	- · · · · · · · · · · · · · · · · · · ·
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 13/29 Rpt: 39/55	Devine, John P. (The Honorable)	00026739
4	Date	5 Payee name	
	04/04/2024	Hurlburt, Rob	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$2,000.00	4306 Quinlan Park Rd #4311	
		Austin, TX 78732	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Salaries/Wages/Contract Labor	outside of Texas. Complete Schedule T.
		,	, TX, officeholder living expense
		Campaign w	JIK.
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
9	expenditure to benefit C/O		Office field
_		T	
	Date	Payee name	
	04/05/2024	Hurlburt, Rob	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$2,000.00	4306 Quinlan Park Rd #4311	
		Austin, TX 78732	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Salaries/Wages/Contract Eabor	outside of Texas. Complete Schedule T.
		Campaign w	, TX, officeholder living expense
		Gumpaign W	
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O		
_	Date	Payee name	
	04/08/2024	Hurlburt, Rob	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$2,000.00	4306 Quinlan Park Rd #4311	
	Ψ2,000.00	4500 Quillan Faik Nu #4511	
		Austin TV 70722	
		Austin, TX 78732	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	outside of Texas. Complete Schedule T.
	EXPENDITURE	Salaries/Wages/Contract Eabor	, TX, officeholder living expense
		Campaign w	
Н	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -Event Expense Fees

Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	Il Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 14/29 Rpt: 40/55	Devine, John P. (The Honorable) 00026739
4	Date	5 Payee name
	04/09/2024	Hurlburt, Rob
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,750.00	4306 Quinlan Park Rd #4311
		Austin, TX 78732
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Campaign work
		Campaign work
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/O	
H	Date	Payee name
	05/02/2024	Hurlburt, Rob
┝	Amount (\$)	Payee address; City; State; Zip Code
	\$2,000.00	4306 Quinlan Park Rd #4311
	Ψ2,000.00	4300 Quillian i aik i a #4311
		Auglia TV 70722
L		Austin, TX 78732
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Campaign work
Г	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1
	Date	Payee name
	05/03/2024	Hurlburt, Rob
	Amount (\$)	Payee address; City; State; Zip Code
	\$2,000.00	4306 Quinlan Park Rd #4311
		Austin, TX 78732
T	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		Campaign work
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	· · · · · · · · · · · · · · · · · · ·
\vdash		
l		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Commit

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Candidate/Officeholder/Politica Credit Card Payment	al Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 15/29 Rpt: 41/55	Devine, John P. (The Honorable) 00026739
4 Date	5 Payee name
03/21/2024	Hurlburt, Rob
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$2,000.00	4306 Quinlan Park Rd #4311
	Austin, TX 78732
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Campaign work
	Cumpaign work
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Date	Payee name
03/12/2024	John Doner & Associates, Inc
Amount (\$)	Payee address; City; State; Zip Code
\$1,331.48	1005 Congress Ave
Ψ1,001.40	Suite 580
	Austin, TX 78701
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Solicitation/Fundraising Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Campaign direct mail
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Date	Payee name
05/13/2024	John Doner & Associates, Inc
Amount (\$)	Payee address; City; State; Zip Code
\$2,922.75	1005 Congress Ave
	Suite 580
	Austin, TX 78701
PURPOSE	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
OF	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign direct mail
OF EXPENDITURE Complete ONLY if direct	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign direct mail Candidate/Officeholder name Office sought Office held
OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign direct mail Candidate/Officeholder name Office sought Office held
OF EXPENDITURE Complete ONLY if direct	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign direct mail Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Event Expense Fees

Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 16/29 Rpt: 42/55	Devine, John P. (The Honorable) 00026739
4	Date	5 Payee name
	03/11/2024	Konnect News
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$200.00	2727 LBJ Fwy #438
		Farmers Branch, TX 75234
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Campaign advertising
		Campaigh advertising
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
\vdash	Data	
	Date	Payee name
	03/04/2024	Korea Town News
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,000.00	PO Box 59975
		Dallas, TX 75229
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Compaign advertising
		Campaign advertising
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Data	
	Date	Payee name
	06/02/2024	Korea World Newspaper
	Amount (\$)	Payee address; City; State; Zip Code
	\$600.00	9610 Long Point Rd
L		Houston, TX 77055
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
		Campaign advertising
		Campaigh advertising
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
vertising Expense Event Expense Loan Repayment/Reimbu

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	
	Sch: 17/29 Rpt: 43/55	Devine, John P. (The Honorable) 00026739
4	Date	5 Payee name
_	03/04/2024	Korean Journal Houston, Inc.
6	Amount (\$) \$600.00	7 Payee address; City; State; Zip Code9355 Long Point Rd
	φ000.00	Suite I
		Houston, TX 77055
8	PURPOSE	
	OF	(a) Category (See Categories listed at the top of this schedule) Advertising Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Campaign advertising
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
,	expenditure to benefit C/O	
	Date	Payee name
	02/28/2024	Lahotsky Keller Cohn LLP
	Amount (\$)	Payee address; City; State; Zip Code
	\$39,060.00	919 Congress Ave
		Austin, TX 78701
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Legal Services Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Election litigation
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/Ol	
	Date	Payee name
	06/21/2024	Morataya, Luis
	Amount (\$)	Payee address; City; State; Zip Code
	\$350.00	1719 E 7th St
		Bastrop, TX 78602
	PURPOSE	
	OF	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Campaign work
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/Ol	U

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Co

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	y - al Cor	nmittee	Legal Serv				ages.	/Contract Labor		Travel O		strict category not listed above)
L		_			ruction Gui	ae explains	now to co	mple	te this form.	_			
1	Total pages Schedule F1:	2								3	Filer ID		(Ethics Commission Filers)
	Sch: 18/29 Rpt: 44/55		Devine, Joh	ın P. (T	he Honora	able)					00026	739	
4	Date	5	Payee name										
L	04/29/2024		Omni Houst	ton									
6	Amount (\$)	7	Payee addre	ss; (City;	State	; Zip Co	de					
	\$487.20		4 Riverway										
			Houston, T	K 77056	i								
8	PURPOSE	(a)	Category (Se	ee Categor	es listed at the	top of this sch	nedule)	(b)	Description				
	OF EXPENDITURE		Travel In Di				-,			outsi	de of Texa	ıs. Com	plete Schedule T.
	EVLENDIIOKE	1							Check if Austin	, TX,	officehold	er living	gexpense
		1							Hotel				
L													
9	Complete ONLY if direct		Candidate/Offi	ceholde	name	(Office sou	ght			Off	fice he	eld
	expenditure to benefit C/OI	H 											
	Date		Payee name										
	04/29/2024		Omni Hous	ton									
	Amount (\$)		Payee addre	ss; (City;	State	; Zip Co	de					
	\$80.62		4 Riverway										
			Houston, T	K 77056	6								
	PURPOSE	(a)	Category (Se	ee Categor	es listed at the	top of this sch	nedule)	(b)	Description				
	OF EXPENDITURE		Food/Bever						=				plete Schedule T.
									Check if Austin				
									Meal during o	an	ıpaıgn '	ıravel	I
_													
	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Offi	ceholdei	name	(Office sou	ght			Off	fice he	eia
	·	_											
	Date		Payee name										
	04/22/2024		Our Take B	ack									
	Amount (\$)		Payee addre	ss; (City;	State	; Zip Co	de					
	\$284.60		20004 Sies	ta Shor	es Dr								
			Spicewood,	TX 786	669								
	PURPOSE	(a)	Category (Se	ee Categor	es listed at the	top of this sch	nedule)	(b)	Description				
	OF EXPENDITURE		Event Expe			*			브				plete Schedule T.
	LAFENDITURE		•						Check if Austin	, TX,	officehold	er living	g expense
									Event tickets				
	Complete ONLY if direct		Candidate/Offi	ceholde	name	(Office sou	ght			Off	fice he	eld
	expenditure to benefit C/OI	_											

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Event Expense Fees

Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Credit Card Payment	The Instruction Guide explains how to complete	· · · · · · · · · · · · · · · · · · ·
1	Total pages Schedule F1:		3 Filer ID (Ethics Commission Filers)
	Sch: 19/29 Rpt: 45/55	Devine, John P. (The Honorable)	00026739
4	Date	5 Payee name	<u> </u>
	04/09/2024	Patriot Academy	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$5,000.00	1103 US-87	
		Comfort, TX 78013	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
	OF EXPENDITURE	Event Expense	Check if travel outside of Texas. Complete Schedule T.
	EXPENDITORE		Check if Austin, TX, officeholder living expense
			Event sponsorship
_			25
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	03/27/2024	Republican Party of Texas	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$5,000.00	1108 Lavaca	
		Suite 500	
		Austin, TX 78701	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b)	Description
	OF EXPENDITURE	Event Expense	Check if travel outside of Texas. Complete Schedule T.
	EXI ENDITORE		Check if Austin, TX, officeholder living expense
			State GOP Convention booth
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O		Office field
	Data		
	Date 03/11/2024	Payee name	
		Royers Round Top Cafe	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$277.80	105 Main St	
		Round Top, TX 78954	
	PURPOSE OF	, , ,	Description
	EXPENDITURE	Food/Beverage Expense	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
			Campaign meal
			. •
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O		
_			

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries (Contract Labor Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (order a category pet listed above)

	Credit Card Payment	The Instruction Guide explains how to comp	_	, , , , ,
1	Total pages Schedule F1:	2 FILER NAME	_	3 Filer ID (Ethics Commission Filers)
	Sch: 20/29 Rpt: 46/55	Devine, John P. (The Honorable)		00026739
4	Date	5 Payee name		·
	05/24/2024	Ruth Chris Steak House		
6	Amount (\$)	7 Payee address; City; State; Zip Code	е	
	\$500.12	600 E. Market St		
		Grand Hyatt San Antonio		
		San Antonio, TX 78205		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	b)	Description
	OF EXPENDITURE	Food/Beverage Expense	[Check if travel outside of Texas. Complete Schedule T.
	LAFENDITORE		[Check if Austin, TX, officeholder living expense
			(Campaign meal during GOP Convention
_	Operation ONLY if allowed	Condition (Office had been asset	- 4	Office health
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sough	nt	Office held
	Date	Payee name		
	05/28/2024	Ruth Chris Steak House		
	Amount (\$)	Payee address; City; State; Zip Code	е	
	\$224.74	600 E. Market St		
		Grand Hyatt San Antonio		
		San Antonio, TX 78205		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	b)	Description
	OF EXPENDITURE	Food/Beverage Expense	Į	Check if travel outside of Texas. Complete Schedule T.
			L	Check if Austin, TX, officeholder living expense Campaign meal during GOP Convention
				campaign mear during Got Convention
_	Complete ONLY if direct	Candidate/Officeholder name Office sough	nt .	Office held
	expenditure to benefit C/O	•		Cinico Hold
-	Date	Payee name		
	06/10/2024	Payee name Ruth Chris Steak House		
	Amount (\$) \$850.85	Payee address; City; State; Zip Code 600 E. Market St	е	
	Φ00.00			
		Grand Hyatt San Antonio		
		San Antonio, TX 78205		
	PURPOSE OF	, (************************************	b)	Description
	EXPENDITURE	Food/Beverage Expense	ļ	Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
			L	Meals for campaign event
	Complete ONLY if direct	Candidate/Officeholder name Office sough	nt	Office held
	expenditure to benefit C/OI	•		

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries (Contract Labor Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (order a category pet listed above)

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	
_	Sch: 21/29 Rpt: 47/55	Devine, John P. (The Honorable) 00026739
4	Date	5 Payee name
	04/08/2024	SP Brazilian Steakouse
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$286.20	900 Ranch Rd 620S
		Lakeway, TX 78734
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Court staff lunch
		Court stail functi
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/OI	the state of the s
_		
	Date	Payee name
	02/29/2024	Salt Traders Coastal Cooking
	Amount (\$)	Payee address; City; State; Zip Code
	\$128.20	1101 S Mopac Expy
		Austin, TX 78746
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		Court staff lunch
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	· · · · · · · · · · · · · · · · · · ·
	Date	Payee name
	03/14/2024	Salt Traders Coastal Cooking
	Amount (\$)	Payee address; City; State; Zip Code
	\$175.72	1101 S Mopac Expy
		Austin, TX 78746
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense
		Check if Austin, TX, officeholder living expense Court staff lunch
		Court Stail Iulich
	Complete ONII V if direct	Condidate/Officeholder name Office cought
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salarice Magnet/Contract Labor Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (order a category pet listed above)

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	
	Sch: 22/29 Rpt: 48/55	Devine, John P. (The Honorable) 00026739
4	Date	5 Payee name
	03/20/2024	Salt Traders Coastal Cooking
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$153.26	1101 S Mopac Expy
		Austin, TX 78746
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Court staff lunch
		Court Stair functi
_	Complete ONLY if direct	Condidate/Officeholder name Office cought Office hold
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	06/11/2024	Salt Traders Coastal Cooking
	Amount (\$)	Payee address; City; State; Zip Code
	\$147.58	1101 S Mopac Expy
		Austin, TX 78746
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
	EXPENDITORE	Check if Austin, TX, officeholder living expense
		Court staff lunch
	Opening the ONE Wife Street	Our did at 10 % as hald a manual of the annual of the shall of the sha
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	05/28/2024	San Antonio Marriott
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,194.44	101 Bowie St
		San Antonio, TX 78205
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
	LXI LINDITORL	Check if Austin, TX, officeholder living expense
		Hotel stay during GOP convention
	Occupation Children	Overstidets/Officebolder results
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	- parametra 20 20.10.11 0/01	

SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries (Contract Labor

bursement Solicitation/Fundraising Expense
Il Expense Transportation Equipment & Related Expense
Travel in District
Travel Out of District
ott Labor OTHER (enter a category not listed above)

	Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 23/29 Rpt: 49/55	Devine, John P. (The Honorable) 00026739
4	Date	5 Payee name
	05/28/2024	San Antonio Marriott
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,258.23	101 Bowie St
		San Antonio, TX 78205
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Hotel stay during GOP convention
		Hotel stay during COL convention
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
⊨	Date	Payee name
	05/28/2024	San Antonio Marriott
	Amount (\$)	Payee address; City; State; Zip Code
	\$236.91	101 Bowie St
	Ψ230.91	101 bowle St
		San Antonio, TX 78205
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Meals during GOP state convention
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
-	Data	Pausa noma
	Date 05/28/2024	Payee name San Antonio Marriott
	Amount (\$)	Payee address; City; State; Zip Code
	\$236.91	101 Bowie St
		San Antonio, TX 78205
	PURPOSE	
	OF	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Meals during GOP state convention
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
L	expenditure to benefit C/OI	1
1		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Commi

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 24/29 Rpt: 50/55	Devine, John P. (The Honorable) 00026739
4	Date	5 Payee name
	05/28/2024	San Antonio Marriott
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$12.72	101 Bowie St
		San Antonio, TX 78205
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Meals during GOP state convention
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Date	Payee name
	06/10/2024	San Antonio Marriott
	Amount (\$)	Payee address; City; State; Zip Code
	\$718.72	101 Bowie St
	Ψ110.12	101 Bowle Ct
		San Antonio, TX 78205
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Hotel
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
-	Date	Payee name
	06/10/2024	San Antonio Marriott
	Amount (\$)	Payee address; City; State; Zip Code
	\$37.00	101 Bowie St
	Ψ31.00	101 Bowle St
		San Antonio, TX 78205
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Meals at hotel
		iviedis di fiolei
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office hold
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 25/29 Rpt: 51/55	Devine, John P. (The Honorable) 00026739
4	Date	5 Payee name
	06/10/2024	San Antonio Marriott
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$294.86	101 Bowie St
		San Antonio, TX 78205
_	DUDDOCE	
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Meals at hotel
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	1
	Date	Payee name
	04/03/2024	Shoal Creek Saloon
	Amount (\$)	Payee address; City; State; Zip Code
	\$200.76	909 N Lamar Blvd
		Austin, TX 78703
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense
	LXI LINDITORE	Check if Austin, TX, officeholder living expense
		Court staff lunch
	Computate ONLY if direct	Condidate/Officeholder name
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	03/12/2024	Temu.com
	Amount (\$)	Payee address; City; State; Zip Code
	\$301.54	31 St. James Ave
		Suite 355
		Boston, MA 02116
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Supplies for campaign events
		Supplies for earribuight events
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission File	arc)
1	Sch: 26/29 Rpt: 52/55	Devine, John P. (The Honorable) 00026739	713)
4	Date	5 Payee name	
	03/14/2024	Temu.com	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$634.52	31 St. James Ave	
		Suite 355	
		Boston, MA 02116	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF	Event Expense Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Check if Austin, TX, officeholder living expense	
		Supplies for campaign events	
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
	Date	Payee name	
	06/05/2024	Trademarks	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$924.55	11333 Todd St	
	**=		
		Houston, TX 77055	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.	
		Campaign promotional items	
		Campaign promotional items	
	0 1: 01 1/4 1		
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	
	Date	Payee name	
	03/04/2024	Tru by Hilton Euless	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$494.14	2570 SH-121	
		Euless, TX 76039	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense Hotel	
		I IOICI	
	Complete ONLY 'C. "	Condidate Office helder name	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Commit

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 27/29 Rpt: 53/55	Devine, John P. (The Honorable) 00026739
4	Date	5 Payee name
	03/27/2024	True Texas Project
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,000.00	1220-G Airport Fwy
		#602
		Bedford, TX 76022
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense
	EXPENDITORE	Check if Austin, TX, officeholder living expense
		Event sponsor
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	04/24/2024	True Texas Project
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,000.00	1220-G Airport Fwy
		#602
		Bedford, TX 76022
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Event Expense
		Check if Austin, TX, officeholder living expense
		Event sponsor
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	o
_	Date	Douge name
	05/17/2024	Payee name Trulucks
	Amount (\$)	Payee address; City; State; Zip Code
	\$650.00	400 Colorado St.
		Austin, TX 78701
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Campaign meal
		Sampaign mea
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Credit Card Payment

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Printing Expense Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District
OTHER (enter a category not listed above)

l	The Instruction Guide explains how to complete this form.								
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)					
	Sch: 28/29 Rpt: 54/55	Devine, John P. (The Honorable)		00026739					
4	Date	5 Payee name		·					
	03/19/2024	Turner, Kathie							
6	Amount (\$)	7 Payee address; City; State; Zip Coo	de						
	\$10,000.00	14430 Reissen Lane							
		Houston, TX 77069							
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description					
	OF EXPENDITURE	Advertising Expense		Check if travel outside of Texas. Complete Schedule T.					
	-			Check if Austin, TX, officeholder living expense Research and media production					
				Research and media production					
9	Complete ONLY if direct	Candidate/Officeholder name Office souc	ht	Office held					
ľ	expenditure to benefit C/OI		,	Since hold					
H	Date	Payee name							
	06/05/2024	Turning Point USA							
┝	Amount (\$)	Payee address; City; State; Zip Cod	de						
	\$1,322.36	4940 E. Beverly Rd							
	, -,								
		Phoenix, AZ 85044							
	PURPOSE		(b)	Description					
	OF	(a) Category (See Categories listed at the top of this schedule) Event Expense	(~)	Check if travel outside of Texas. Complete Schedule T.					
	EXPENDITURE			Check if Austin, TX, officeholder living expense					
				YWLS event tickets (San Antonio)					
L									
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office soug	ght	Office held					
L									
	Date	Payee name							
L	05/10/2024	USPS Marble Falls							
	Amount (\$)	Payee address; City; State; Zip Coo	de						
	\$17.99	1212 N US Highway 281							
		M							
L		Marble Falls, TX 78654							
	PURPOSE OF	,	(b)	Description Check if travel outside of Texas. Complete Schedule T.					
	EXPENDITURE	Office Overhead/Rental Expense		Check if Austin, TX, officeholder living expense					
				Postage/shipping campaign materials					
Г	Complete ONLY if direct	Candidate/Officeholder name Office soug	ght	Office held					
L	expenditure to benefit C/OI	1							

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	, ₋ I Coi	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense mmittee Legal Services The Instruction Guide exp	<u>:</u>	Office Overh Polling Expe Printing Exp Salaries/Wa	ense ges/Contract Labor		Travel in District Travel Out of Dis	quipment & Related Expense	
┡	Total pages Schedule F1:	_	· ·	Jiumo m			12	Filer ID	(Ethics Commission Filers)	\dashv
	Sch: 29/29 Rpt: 55/55	2	Devine, John P. (The Honorable)				3	00026739	(Ethics Commission Filers)	
4	Date	5	Payee name				<u> </u>			\dashv
	02/27/2024		USPS Marble Falls							
6	Amount (\$) \$342.00	7	Payee address; City; 1212 N US Highway 281 Marble Falls, TX 78654	State;	Zip Cod	9				
8	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of Office Overhead/Rental Expense	this sched	dule) (I			ide of Texas. Com , officeholder living		
9	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Officeholder name	Of	ffice sougl	nt		Office he	eld	