

JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM **JC/OH**
COVER SHEET PG 1

The JC/OH Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00087578	2 Total pages filed: 20				
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Mr.	FIRST John R.	MI MI	OFFICE USE ONLY			
	NICKNAME	LAST Messinger	SUFFIX		Date Received ELECTRONICALLY FILED 07/13/2024		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; 508 Bellaire Oaks Dr. Plugerville, TX 78660		ZIP CODE	Date Hand-delivered or Date Postmarked			
				Receipt # Amount			
				Date Processed			
				Date Imaged			
5 CAMPAIGN TREASURER NAME	MS / MRS / MR Mr.	FIRST Ronald L.	MI MI				
	NICKNAME	LAST Agnew	SUFFIX				
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE						
	529 Tanner Trail Pflugerville, TX 78660						
7 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION				
	(512)	251-0569					
8 REPORT TYPE	<input type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)						
	<input checked="" type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded modified reporting limit <input type="checkbox"/> Final Report (Attach C/OH-FR)						
9 PERIOD COVERED	Month	Day	Year	THROUGH	Month	Day	Year
	01	01	2024		06	30	2024
10 ELECTION	ELECTION DATE		ELECTION TYPE				
	Month	Day	Year	<input type="checkbox"/> Primary	<input type="checkbox"/> Runoff	<input type="checkbox"/> Other	
	11	05	2024	<input checked="" type="checkbox"/> General	<input type="checkbox"/> Special		
11 OFFICE	OFFICE HELD (if any)			12 OFFICE SOUGHT (if known)			
				Court Of Appeals, Justice Place 2 District Third			

GO TO PAGE 2

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH
COVER SHEET PG 2

2 of 20

13 C / OH NAME Messinger, John R. (Mr.) **14** Filer ID (Ethics Commission Filers)
00087578

15 NOTICE FROM POLITICAL COMMITTEE(S)
This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. *These expenditures may have been made without the candidate's or officeholder's knowledge or consent.* Candidates and officeholders are required to report this information only if they receive notice of such expenditures.

Additional Pages

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

16 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$	355.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	7,605.82
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$	1,288.23
	4. TOTAL POLITICAL EXPENDITURES	\$	8,003.48
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	0.00
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	0.00

17 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Mr. John R. Messinger

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office.

Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

SUBTOTALS - JC/OH

18 FILER NAME Messinger, John R. (Mr.)	19 Filer ID (Ethics Commission Filers) 00087578
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20 SCHEDULE SUBTOTALS		SUBTOTAL AMOUNT
NAME OF SCHEDULE		
1. <input checked="" type="checkbox"/> SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)	\$	7,605.82
2. <input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$	
3. <input type="checkbox"/> SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)	\$	
4. <input type="checkbox"/> SCHEDULE E(J): LOANS (JUDICIAL)	\$	
5. <input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	4,084.03
6. <input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$	
7. <input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$	
8. <input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$	
9. <input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$	3,919.45
10. <input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$	
11. <input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	
12. <input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 1/13 Rpt: 4/20
2 FILER NAME Messinger, John R. (Mr.)		3 Filer ID (Ethics Commission Filers) 00087578
4 Date 02/27/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Asghar, Janet	7 Amount of Contribution (\$) \$26.03
	6 Contributor address; City; State; Zip Code Austin, TX 78750	
8 Contributor's Principal Occupation Membership		9 Contributor's Job Title Membership
10 Contributor's employer/law firm Texas Chiropractic Assn		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 05/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bradberry, Tim	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Pflugerville, TX 78660	
Contributor's Principal Occupation Retired		Contributor's Job Title Retired
Contributor's employer/law firm Retired		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 06/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bradberry, Tim	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Pflugerville, TX 78660	
Contributor's Principal Occupation Retired		Contributor's Job Title Retired
Contributor's employer/law firm Retired		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 2/13 Rpt: 5/20
2 FILER NAME Messinger, John R. (Mr.)		3 Filer ID (Ethics Commission Filers) 00087578
4 Date 06/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bradberry, Tim	7 Amount of Contribution (\$) \$104.10
	6 Contributor address; City; State; Zip Code Pflugerville, TX 78660	
8 Contributor's Principal Occupation Retired		9 Contributor's Job Title Retired
10 Contributor's employer/law firm Retired		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 05/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burton, Joseph Howell	Amount of Contribution (\$) \$26.03
	Contributor address; City; State; Zip Code Austin, TX 78723	
Contributor's Principal Occupation Senior Project Manager		Contributor's Job Title Senior Project Manager
Contributor's employer/law firm Jones Lang LaSalle		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 03/01/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Canyon Lake Republican Women	Amount of Contribution (\$) \$750.00
	Contributor address; City; State; Zip Code Canyon Lake, TX 78133	
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 3/13 Rpt: 6/20
2 FILER NAME Messinger, John R. (Mr.)		3 Filer ID (Ethics Commission Filers) 00087578
4 Date 06/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Coco, Cathy	7 Amount of Contribution (\$) \$260.25
6 Contributor address; City; State; Zip Code Austin, TX 78759		
8 Contributor's Principal Occupation Marketing		9 Contributor's Job Title Marketing
10 Contributor's employer/law firm IBM		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 02/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DeCluitt, Kristi	Amount of Contribution (\$) \$520.51
Contributor address; City; State; Zip Code Waco, TX 76710		
Contributor's Principal Occupation Prosecutor		Contributor's Job Title ADA
Contributor's employer/law firm McLennan County		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 06/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edwards, Tamara	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
Contributor's Principal Occupation Homemaker		Contributor's Job Title Homemaker
Contributor's employer/law firm Homemaker		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 4/13 Rpt: 7/20
2 FILER NAME Messinger, John R. (Mr.)		3 Filer ID (Ethics Commission Filers) 00087578
4 Date 06/25/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gay, Marti	7 Amount of Contribution (\$) \$300.00
	6 Contributor address; City; State; Zip Code Pflugerville, TX 78660	
8 Contributor's Principal Occupation Retired		9 Contributor's Job Title Retired
10 Contributor's employer/law firm Retired		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 06/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goodman, Tom	Amount of Contribution (\$) \$52.05
	Contributor address; City; State; Zip Code Austin, TX 78717	
Contributor's Principal Occupation Pastor		Contributor's Job Title Pastor
Contributor's employer/law firm Hillcrest Church		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 06/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Green, Brittany	Amount of Contribution (\$) \$260.25
	Contributor address; City; State; Zip Code Pflugerville, TX 78660	
Contributor's Principal Occupation Executive Director		Contributor's Job Title Executive Director
Contributor's employer/law firm Radiance Women's Center		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 5/13 Rpt: 8/20
2 FILER NAME Messinger, John R. (Mr.)		3 Filer ID (Ethics Commission Filers) 00087578
4 Date 06/29/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Green, Robert <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78756	7 Amount of Contribution (\$) \$20.82
8 Contributor's Principal Occupation Retired		9 Contributor's Job Title Retired
10 Contributor's employer/law firm Retired		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 01/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelsay, Doug <hr/> Contributor address; City; State; Zip Code Bastrop, TX 78602	Amount of Contribution (\$) \$52.05
Contributor's Principal Occupation Retired		Contributor's Job Title Retired
Contributor's employer/law firm Retired		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 06/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Leander Area Republican Women <hr/> Contributor address; City; State; Zip Code Leander, TX 78541	Amount of Contribution (\$) \$250.00
Contributor's Principal Occupation		Contributor's Job Title
Contributor's employer/law firm		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 6/13 Rpt: 9/20
2 FILER NAME Messinger, John R. (Mr.)		3 Filer ID (Ethics Commission Filers) 00087578
4 Date 04/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martinez, George <hr/> 6 Contributor address; City; State; Zip Code Bastrop, TX 78602	7 Amount of Contribution (\$) \$52.05
8 Contributor's Principal Occupation Retired		9 Contributor's Job Title Retired
10 Contributor's employer/law firm Retired		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 03/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McConnell, Gail <hr/> Contributor address; City; State; Zip Code Conroe, TX 77384	Amount of Contribution (\$) \$52.05
Contributor's Principal Occupation Retired		Contributor's Job Title Retired
Contributor's employer/law firm Retired		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 06/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Murray, Bruce <hr/> Contributor address; City; State; Zip Code Austin, TX 78758	Amount of Contribution (\$) \$104.10
Contributor's Principal Occupation Retired		Contributor's Job Title Retired
Contributor's employer/law firm Retired		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 7/13 Rpt: 10/20
2 FILER NAME Messinger, John R. (Mr.)		3 Filer ID (Ethics Commission Filers) 00087578
4 Date 05/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reed, Karen <hr/> 6 Contributor address; City; State; Zip Code Blanco, TX 78606	7 Amount of Contribution (\$) \$104.10
8 Contributor's Principal Occupation Retired		9 Contributor's Job Title Retired
10 Contributor's employer/law firm Retired		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 01/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robinson, Steve <hr/> Contributor address; City; State; Zip Code Dripping Springs, TX 78620	Amount of Contribution (\$) \$1,000.00
Contributor's Principal Occupation Senior housing / long-term care management		Contributor's Job Title Owner / CEO
Contributor's employer/law firm Diversified Provider Services		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 06/13/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, Tonya <hr/> Contributor address; City; State; Zip Code Pflugerville, TX 78660	Amount of Contribution (\$) \$104.10
Contributor's Principal Occupation Freelance writer		Contributor's Job Title Freelance writer
Contributor's employer/law firm self-employed		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 8/13 Rpt: 11/20
2 FILER NAME Messinger, John R. (Mr.)		3 Filer ID (Ethics Commission Filers) 00087578
4 Date 06/18/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rogers, David	7 Amount of Contribution (\$) \$250.00
6 Contributor address; City; State; Zip Code Pflugerville, TX 78660		
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Owner
10 Contributor's employer/law firm Law Office of David Rogers		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 05/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ruiz, Julia	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
Contributor's Principal Occupation Retired		Contributor's Job Title Retired
Contributor's employer/law firm Retired		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 05/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ryan, Melody	Amount of Contribution (\$) \$52.05
Contributor address; City; State; Zip Code Pflugerville, TX 78660		
Contributor's Principal Occupation CPA		Contributor's Job Title CPA
Contributor's employer/law firm Self-employed		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 9/13 Rpt: 12/20
2 FILER NAME Messinger, John R. (Mr.)		3 Filer ID (Ethics Commission Filers) 00087578
4 Date 02/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sanders, Mike	7 Amount of Contribution (\$) \$200.00
	6 Contributor address; City; State; Zip Code Leander, TX 78641	
8 Contributor's Principal Occupation Electrical engineer		9 Contributor's Job Title Sr. Electrical Engineer
10 Contributor's employer/law firm Self-employed		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 01/24/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Savage, Elyn	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Savannah, TX 31419	
Contributor's Principal Occupation Executive Assistant		Contributor's Job Title EA to COO
Contributor's employer/law firm Historic Tours of America, Inc.		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 01/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shelburne, LaQueta	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code San Angelo, TX 76904	
Contributor's Principal Occupation Financial Services Advisor		Contributor's Job Title Financial Services Advisor
Contributor's employer/law firm Shelburne Financial Services		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 10/13 Rpt: 13/20
2 FILER NAME Messinger, John R. (Mr.)		3 Filer ID (Ethics Commission Filers) 00087578
4 Date 06/20/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shelburne, LaQueta <hr/> 6 Contributor address; City; State; Zip Code San Angelo, TX 76904	7 Amount of Contribution (\$) \$500.00
8 Contributor's Principal Occupation Financial Services Advisor		9 Contributor's Job Title Financial Services Advisor
10 Contributor's employer/law firm Shelburne Financial Services		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 06/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Suemnicht, John <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79424	Amount of Contribution (\$) \$200.00
Contributor's Principal Occupation Retired		Contributor's Job Title Retired
Contributor's employer/law firm Retired		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 01/30/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Toben, Beth <hr/> Contributor address; City; State; Zip Code Waco, TX 76712	Amount of Contribution (\$) \$200.00
Contributor's Principal Occupation Prosecutor		Contributor's Job Title Assistant District Attorney
Contributor's employer/law firm Limestone County DA's Office		Law firm of contributor's spouse (if any) Baylor Law School
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 11/13 Rpt: 14/20
2 FILER NAME Messinger, John R. (Mr.)		3 Filer ID (Ethics Commission Filers) 00087578
4 Date 05/15/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wallace, Lee	7 Amount of Contribution (\$) \$104.10
	6 Contributor address; City; State; Zip Code Pflugerville, TX 78660	
8 Contributor's Principal Occupation Retired		9 Contributor's Job Title Retired
10 Contributor's employer/law firm Retired		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 06/18/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wallace, Lee	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Pflugerville, TX 78660	
Contributor's Principal Occupation Retired		Contributor's Job Title Retired
Contributor's employer/law firm Retired		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 06/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wellborn, Earl	Amount of Contribution (\$) \$26.03
	Contributor address; City; State; Zip Code Pflugerville, TX 78660	
Contributor's Principal Occupation Retired		Contributor's Job Title Retired
Contributor's employer/law firm Retired		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 12/13 Rpt: 15/20
2 FILER NAME Messinger, John R. (Mr.)		3 Filer ID (Ethics Commission Filers) 00087578
4 Date 02/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yates, Jonathan	7 Amount of Contribution (\$) \$26.03
6 Contributor address; City; State; Zip Code Van Alstyne, TX 75495		
8 Contributor's Principal Occupation Pastor		9 Contributor's Job Title Pastor
10 Contributor's employer/law firm Family Church		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 03/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yates, Jonathan	Amount of Contribution (\$) \$26.03
Contributor address; City; State; Zip Code Van Alstyne, TX 75495		
Contributor's Principal Occupation Pastor		Contributor's Job Title Pastor
Contributor's employer/law firm Family Church		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 04/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yates, Jonathan	Amount of Contribution (\$) \$26.03
Contributor address; City; State; Zip Code Van Alstyne, TX 75495		
Contributor's Principal Occupation Pastor		Contributor's Job Title Pastor
Contributor's employer/law firm Family Church		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 13/13 Rpt: 16/20
2 FILER NAME Messinger, John R. (Mr.)		3 Filer ID (Ethics Commission Filers) 00087578
4 Date 05/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yates, Jonathan <hr/> 6 Contributor address; City; State; Zip Code Van Alstyne, TX 75495	7 Amount of Contribution (\$) \$26.03
8 Contributor's Principal Occupation Pastor		9 Contributor's Job Title Pastor
10 Contributor's employer/law firm Family Church		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 06/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yates, Jonathan <hr/> Contributor address; City; State; Zip Code Van Alstyne, TX 75495	Amount of Contribution (\$) \$26.03
Contributor's Principal Occupation Pastor		Contributor's Job Title Pastor
Contributor's employer/law firm Family Church		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/3 Rpt: 17/20	2 FILER NAME Messinger, John R. (Mr.)	3 Filer ID (Ethics Commission Filers) 00087578
4 Date 06/17/2024	5 Payee name Custom Ink	
6 Amount (\$) \$861.56	7 Payee address; City; State; Zip Code 2910 District Avenue Fairfax, VA 22031	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense T-shirts
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/17/2024	Payee name Minuteman Press	
Amount (\$) \$1,087.32	Payee address; City; State; Zip Code 19832 Panther Dr Ste 201 Pflugerville, TX 78660	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Push cards
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 01/24/2024	Payee name Minuteman Press	
Amount (\$) \$93.29	Payee address; City; State; Zip Code 19832 Panther Dr Ste 201 Pflugerville, TX 78660	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Table runner and badges
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 2/3 Rpt: 18/20	2 FILER NAME Messinger, John R. (Mr.)	3 Filer ID (Ethics Commission Filers) 00087578
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4 Date 03/26/2024	5 Payee name Minuteman Press
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6 Amount (\$) \$19.49	7 Payee address; City; State; Zip Code 19832 Panther Dr Ste 201 Pflugerville, TX 78660
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Name badge
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 05/14/2024	Payee name Minuteman Press
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Amount (\$) \$86.84	Payee address; City; State; Zip Code 19832 Panther Dr Ste 201 Pflugerville, TX 78660
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Business cards
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 06/04/2024	Payee name Minuteman Press
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Amount (\$) \$359.69	Payee address; City; State; Zip Code 19832 Panther Dr Ste 201 Pflugerville, TX 78660
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Push cards
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 3/3 Rpt: 19/20	2 FILER NAME Messinger, John R. (Mr.)	3 Filer ID (Ethics Commission Filers) 00087578
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4 Date 06/07/2024	5 Payee name Minuteman Press
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6 Amount (\$) \$62.61	7 Payee address; City; State; Zip Code 19832 Panther Dr Ste 201 Pflugerville, TX 78660
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Poster/sign
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 04/09/2024	Payee name Ortiz, Gracie
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Amount (\$) \$225.00	Payee address; City; State; Zip Code 19317 Moorlynch Ave Pflugerville, TX 78660
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Excellent photography
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: Sch: 1/1 Rpt: 20/20	2 FILER NAME Messinger, John R. (Mr.)	3 Filer ID (Ethics Commission Filers) 00087578
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4 Date 02/05/2024	5 Payee name Bank of America
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6 Amount (\$) \$2,499.95 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code P.O. Box 851001 Dallas, TX 75285-1001
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Payment	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Paid bill on consulting/web services purchased Dec. 22, 2023.
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 06/30/2024	Payee name Messinger, John
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Amount (\$) \$1,419.50 <input checked="" type="checkbox"/> Reimbursement from political contributions intended	Payee address; City; State; Zip Code 508 Bellaire Oaks Dr. Pflugerville, TX 78660
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Travel In District	Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense 2,839 miles on my personal vehicle reimbursed at \$.50/mile.
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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