CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction (Guide explains how to complete		1 Filer ID (Ethics Commi 00069589		2 Total pages fil	
3 CANDIDATE /	MS / MRS / MR	FIRST		MI	OFFICE U	JSE ONLY
OFFICEHOLDER NAME	The Honorable	John H.			Date Received	
I WWE					ELECTRONICA	U I V EII ED
						ALLI FILED
		_AST		SUFFIX	07/15/2024	
	[Bucy		III		
4 CANDIDATE /	ADDRESS / PO BOX; APT / S	SUITE#; CIT	Υ;	ZIP CODE	Date Hand-delivered or	Date Postmarked
OFFICEHOLDER MAILING	P.O. Box 536					
ADDRESS					Receipt #	Amount
Change of Address	Austin, TX 78767					
	Austin, 1X 10101				Date Processed	
					Date Imaged	
5 CAMPAIGN TREASURER		IRST		MI		
NAME	Mrs.	leather Sande	ers			
	NICKNAME L	AST		SUFFIX		
	J	efts				
6 CAMPAIGN	STREET ADDRESS (NO PO B	OX PLEASE);	AP ⁻	Γ / SUITE #; CITY	; STA	TE; ZIP CODE
TREASURER ADDRESS	1202 Willowbrook Dr.					
(Residence or Business)	Cedar Park , TX 78613					
	Cedai i aik, ix 10015					
7 CAMPAIGN	AREA CODE PHONE	NUMBER E	EXTENSION			
TREASURER PHONE	(512) 529-4987					
PHONE						
8 REPORT						
TYPE	January 15	30th day before	election	Runoff	15th day after car	
		Other hartens			appointment (office	
	X July 15	8th day before 6	election	Exceeded modified reporting limit	Final Report (Atta	cn C/OH-FR)
2 DEDICE	14 d 5 V					
9 PERIOD COVERED	Month Day Year	TU	IDOLICII	Month Day	Year	
	01/01/2024	IH	ROUGH	06/30/202	24	
10 51 5071011	EL ESTION - :			EL FOTION TOT		
10 ELECTION	ELECTION DATE		*	ELECTION TYPE	□ out	
	Month Day Year		rimary	Runoff	Other	
	11/05/2024	ΧG	eneral	Special		
11 OFFICE	OFFICE HELD (if any)			12 OFFICE SOUGH	Γ (if known)	
	State Representative Distric	t 136		State Represen	tative District 136	
	!			1		
			O DAGE 6			
		GOT	O PAGE 2			

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH COVER SHEET PG 2

2 of 155

13 C / OH NAME	Bucy III, John H. (The	e Honorable)	14 Filer ID (I 00069589	Ethics Commission Filers)			
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditu These expenditures may have been made without a dofficeholders are required to report this information	the candidate's or office	holder's knowledge or			
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME					
	GENERAL						
		COMMITTEE ADDRESS					
	SPECIFIC						
		COMMITTEE CAMPAIGN TREASURER NAME					
		COMMITTEE CAMPAIGN TREASURER ADDRES	SS				
16 CONTRIBUTION TOTALS	N PLEDGES, LOANS, CTRONICALLY)	\$ 0.00					
		AL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS	5)	\$ 64,791.00			
EXPENDITURE TOTALS							
	4. TOTAL POLITIC	AL EXPENDITURES		\$ 64,782.88			
CONTRIBUTION BALANCE	REPORTING PE			\$ 55,308.31			
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS TING PERIOD	OF THE LAST DAY	\$ 36,375.00			
17 AFFIDAVIT		I swear, or affirm, under penalty true and correct and includes a under Title 15, Election Code.					
		The Hono	orable John H. Bucy II	II			
		Signature of	Candidate or Officehold	der			
AFFIX NO	TARY STAMP / SEAL AB	DVE					
Sworn to and subso	cribed before me, by the s	aid	, this the	day			
of	, 20, to co	ertify which, witness my hand and seal of office.					
Signature of office	cer administering	Printed name of officer administering	Title of officer	administering oath			

SUBTOTALS - C/OH

FORM C/OH **COVER SHEET PG 3**

					3 of 155
	ER NAN	ME ohn H. (The Honorable)	19 Filer ID 00069589	(Eth	nics Commission Filers)
		E SUBTOTALS SCHEDULE			SUBTOTAL AMOUNT
1.	Х	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	63,816.00
2.	Х	\$	975.00		
3.		\$			
4.		\$			
5.	Х	\$	64,782.88		
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
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	OF C/OH	\$	
11.	. 🔲	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	
12.	. X	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS FOR TO FILER	RETURNED	\$	517.53

	MONEI	ARY POLITICAL C	ONTRIBUTIO	NS		SCHEDUL	E A1
	The Instru	ction Guide explains how	to complete this fo	rm.	1	Total pages Schedule A1: Sch: 1/91 Rpt: 4/155	
2	FILER NAME				3	Filer ID (Ethics Commission	n Filers)
	-	n H. (The Honorable)	_		L	00069589	
4	Date 06/26/2024	5 Full name of contributorAdair, Dwight6 Contributor address; City; Sta	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	\$4.00
8	Principal occu	Austin, TX 78759 pation / Job title (See Instructions)) [g	Employer (See Instructions	<u>s)</u>		
•	Not Employe			N/A	-,		
	Date 02/12/2024	Full name of contributor Albert, David Contributor address; City; Sta	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$100.00
		Austin, TX 78741			Ĺ		
	Principal occupation / Job title (See Instructions) Austin Community College			Employer (See Instructions	5)		
				Professor	_		
	Date 06/30/2024	Full name of contributor Aleman, Monica Contributor address; City; Sta	out-of-state PAC (ID#:)	•	Amount of Contribution (\$)	\$10.00
		Austin, TX 78717					
	Principal occu	pation / Job title (See Instructions))	Employer (See Instructions	<u>L</u> S)		
	Employee			Government	,		
	Date 05/01/2024	Full name of contributor Alonso, Victor Contributor address; City; Sta	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$25.00
	Principal occu Not Employe	pation / Job title (See Instructions) ed		Employer (See Instructions N/A	s)		
	Date 05/14/2024	Full name of contributor Alonso, Victor Contributor address; City; Sta	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$80.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions N/A	S)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS	SCHEDULE	■ A1		
	The Instru	ction Guide explains how to complete this fo	orm.	1 Total pages Schedule A1: Sch: 2/91 Rpt: 5/155			
2	FILER NAME Bucy III, Joh	n H. (The Honorable)		3 Filer ID (Ethics Commission 00069589	Filers)		
4	Date 06/18/2024	Full name of contributor		7 Amount of Contribution (\$)	\$400.00		
8	Principal occu	Austin, TX 78701 pation / Job title (See Instructions)	9 Employer (See Instructions				
_	i inioipai ooda	pation 7 cos title (ecc metadatoris)	2 Employer (Gee mondone)	,			
	Date 05/21/2024	Full name of contributor out-of-state PAC (ID#:_Anderson, Mark Contributor address; City; State; Zip Code		Amount of Contribution (\$)	\$500.00		
	Deinsinal assu	Colorado Springs, CO 80919	Franks on (Cas Instructions	Y			
	Software Tes	pation / Job title (See Instructions) ster	Employer (See Instructions Indio Technologies / App				
	Date 06/26/2024	Full name of contributor out-of-state PAC (ID#:_Anderson, Mark Contributor address; City; State; Zip Code)	Amount of Contribution (\$)	\$40.00		
		Colorado Springs, CO 80919					
	Principal occu Software Te	pation / Job title (See Instructions) ster	Employer (See Instructions Indio Technologies / App	•			
	Date 04/18/2024	Full name of contributor out-of-state PAC (ID#:_Andrews, Sheila Contributor address; City; State; Zip Code Cedar Park, TX 78613		Amount of Contribution (\$)	\$100.00		
	Principal occu Office Mana	pation / Job title (See Instructions) ger	Employer (See Instructions TIADA)			
	Date 06/04/2024	Full name of contributor out-of-state PAC (ID#:_ Apodaca, Michelle Contributor address; City; State; Zip Code Austin, TX 78763)	Amount of Contribution (\$)	\$250.00		
	Principal occu Lobbyist	pation / Job title (See Instructions)	Employer (See Instructions Apodaca Advocacy Gro				

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 3/91 Rpt: 6/155	
2	FILER NAME Bucy III, Joh	n H. (The Honorable)		3	Filer ID (Ethics Commission 00069589	on Filers)
4	Date 02/15/2024	 Full name of contributor out-of-state PAC (ID#:_Arnold Public Affairs Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$)	\$500.00
8	Principal occu	Austin, TX 78701 spation / Job title (See Instructions)	9 Employer (See Instructions			
_	r ilicipai occu	pation / 300 title (See instructions)	Employer (See Instructions,			
	Date 02/27/2024	Full name of contributor x out-of-state PAC (ID#:_Atmos Energy Corporation PAC Contributor address; City; State; Zip Code Dallas, TX 75240	C00381954)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions))		
	Date 06/09/2024	Full name of contributor out-of-state PAC (ID#:_Avey, Melinda Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$50.00
	Principal occu	Round Rock, TX 78664 pation / Job title (See Instructions)	Employer (See Instructions)		
	Not Employe	•	N/A			
	Date 03/05/2024	Full name of contributor out-of-state PAC (ID#:_Baker, Mary Contributor address; City; State; Zip Code Austin, TX 78726)		Amount of Contribution (\$)	\$100.00
	Principal occu Not Employe	pation / Job title (See Instructions) ed	Employer (See Instructions))		
	Date 06/26/2024	Full name of contributor out-of-state PAC (ID#:_Ball, Natalie Contributor address; City; State; Zip Code Liberty Hill, TX 78642			Amount of Contribution (\$)	\$20.00
	Principal occu Not Employe	pation / Job title (See Instructions)	Employer (See Instructions))		

	MONET	ARY POLITICAL CONTRIBUT	ION	IS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete thi	s for	m.	1	Total pages Schedule A1: Sch: 4/91 Rpt: 7/155	
2	FILER NAME Bucy III, Joh	n H. (The Honorable)			3	Filer ID (Ethics Commission 00069589	n Filers)
4	Date 06/30/2024	 5 Full name of contributor out-of-state PAC (II Balla, Laura 6 Contributor address; City; State; Zip Code 			7	Amount of Contribution (\$)	\$100.00
8	Principal occu Marketing	Austin, TX 78717 pation / Job title (See Instructions)	9	Employer (See Instructions Cedar Park Regional	<u> </u> s)		
	Date 04/18/2024	Full name of contributor out-of-state PAC (II Barbini, Charlotte Contributor address; City; State; Zip Code Round Rock, TX 78681)		Amount of Contribution (\$)	\$40.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 01/17/2024	Full name of contributor out-of-state PAC (II Barron, Joe Contributor address; City; State; Zip Code	D#:			Amount of Contribution (\$)	\$25.00
	Deignaignal	Georgetown, TX 78628		Fandavar (Caa Instruction			
	Not Employe	pation / Job title (See Instructions) ed		Employer (See Instructions N/A	»)		
	Date 02/17/2024	Full name of contributor out-of-state PAC (II Barron, Joe Contributor address; City; State; Zip Code Georgetown, TX 78628				Amount of Contribution (\$)	\$25.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions N/A	<u>I</u> S)		
	Date 03/17/2024	Full name of contributor out-of-state PAC (II Barron, Joe Contributor address; City; State; Zip Code Georgetown, TX 78628				Amount of Contribution (\$)	\$25.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions N/A	5)		
			•				

	MONET	ARY POLITICAL CON	TRIBUTION	S		SCHEDULE	■ A1
	The Instruc	ction Guide explains how to co	omplete this forr	n.	1	Total pages Schedule A1: Sch: 5/91 Rpt: 8/155	
2	FILER NAME Bucy III, Joh	n H. (The Honorable)			3	Filer ID (Ethics Commission 00069589	Filers)
4	Date 04/17/2024	 5 Full name of contributor out- Barron, Joe 6 Contributor address; City; State; Zip 	of-state PAC (ID#:)	7	Amount of Contribution (\$)	\$25.00
8	Principal occu	Georgetown, TX 78628 pation / Job title (See Instructions)	lg	Employer (See Instructions) 		
Ü	Not Employe		ľ	N/A	')		
	Date 05/17/2024	Full name of contributor out- Barron, Joe Contributor address; City; State; Zip	of-state PAC (ID#:)		Amount of Contribution (\$)	\$25.00
		Georgetown, TX 78628					
			Employer (See Instructions N/A	5)			
	Date 06/30/2024	Full name of contributor out- Barron, Mark Contributor address; City; State; Zip	of-state PAC (ID#:)		Amount of Contribution (\$)	\$25.00
		Austin, TX 78729					
		pation / Job title (See Instructions) ions Manager		Employer (See Instructions UT-Austin	s)		
	Date 01/14/2024	Berry, Robin)		Amount of Contribution (\$)	\$25.00
	Principal occu Editor/Publis	pation / Job title (See Instructions) her		Employer (See Instructions TCEQ	5)		
	Date 02/14/2024	Berry, Robin	of-state PAC (ID#:)		Amount of Contribution (\$)	\$25.00
	Principal occu Editor/Publis	pation / Job title (See Instructions) her		Employer (See Instructions TCEQ	5)		
			•				

	MONET	ARY POLITICAL CONTRIBU	TION	IS		SCHEDULI	E A1
	The Instruc	ction Guide explains how to complete th	his for	m.	1	Total pages Schedule A1: Sch: 6/91 Rpt: 9/155	
2	FILER NAME Bucy III, Joh	n H. (The Honorable)			3	Filer ID (Ethics Commission 00069589	n Filers)
4	Date 03/14/2024	 5 Full name of contributor out-of-state PAC out-of-stat			7	Amount of Contribution (\$)	\$25.00
8	Principal occu Editor/Publis	Austin, TX 78729 pation / Job title (See Instructions)	9	Employer (See Instructions	<u> </u> s)		
	Date 04/14/2024	Full name of contributor out-of-state PAC Berry, Robin				Amount of Contribution (\$)	\$25.00
	Principal occupation / Job title (See Instructions) Employer (S Editor/Publisher TCEQ		Employer (See Instructions TCEQ	5)			
	Date 05/14/2024	Full name of contributor out-of-state PAC Berry, Robin Contributor address; City; State; Zip Code	(ID#:)	•	Amount of Contribution (\$)	\$25.00
	•	Austin, TX 78729 pation / Job title (See Instructions)	\top	Employer (See Instructions	<u> </u> s)		
Date Full name of contributor out-of-state PAC (ID 06/14/2024 Berry, Robin Contributor address; City; State; Zip Code			TCEQ	•	Amount of Contribution (\$)	\$25.00	
	Principal occu Editor/Publis	Austin, TX 78729 pation / Job title (See Instructions) ther		Employer (See Instructions	<u> </u> s)		
	Date 03/23/2024	Full name of contributor out-of-state PAC Billingsley, Joshua Contributor address; City; State; Zip Code Round Rock, TX 78665)		Amount of Contribution (\$)	\$20.00
	Principal occu Data Scientis	pation / Job title (See Instructions) st		Employer (See Instructions BAE Systems	5)		
			•				

	MONET	ARY POLITICAL (CONTRIBUTIO	N	S		SCHEDUI	E A1
	The Instruc	ction Guide explains hov	v to complete this fo	orr	n.	1	Total pages Schedule A1: Sch: 7/91 Rpt: 10/155	
2	FILER NAME Bucy III, Johi	n H. (The Honorable)				3	Filer ID (Ethics Commission 00069589	on Filers)
4		5 Full name of contributor Bingman, Rebecca6 Contributor address; City; S	out-of-state PAC (ID#:_ tate; Zip Code			7	Amount of Contribution (\$)	\$50.00
8	Principal occup	Austin, TX 78750 pation / Job title (See Instructionsed	s)	9	Employer (See Instructions N/A	<u> </u> s)		
	Date 06/21/2024	Full name of contributor Blackridge Contributor address; City; S Austin, TX 78701				•	Amount of Contribution (\$)	\$5,000.00
	Principal occu	pation / Job title (See Instructions	5)		Employer (See Instructions	<u> </u> s)		
	Date 05/08/2024	Full name of contributor Blackson, Stephen Contributor address; City; S	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$100.00
		Austin, TX 78750-2111 pation / Job title (See Instructions	5)		Employer (See Instructions	<u> </u> s)		
	Not Employe Date 06/30/2024	Full name of contributor Blackson, Steve Contributor address; City; S Austin, TX 78750			N/A)		Amount of Contribution (\$)	\$50.00
	Principal occup	pation / Job title (See Instruction: Design	5)			Employer (See Instructions) Windy Point Garden Railroads		
	Date 06/30/2024	Full name of contributor Blaney, Kaci Contributor address; City; S Austin, TX 78729					Amount of Contribution (\$)	\$10.00
	Principal occu Gis analyst	pation / Job title (See Instructions	5)		Employer (See Instructions Foreflight	s)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 8/91 Rpt: 11/155	
2	FILER NAME Bucy III, Joh	n H. (The Honorable)		3	Filer ID (Ethics Commission 00069589	n Filers)
4	Date 01/19/2024	 Full name of contributor out-of-state PAC (ID#:_ Bordas, Mark Contributor address; City; State; Zip Code 		7	Amount of Contribution (\$)	\$500.00
8	Principal occu	Austin, TX 78746 pation / Job title (See Instructions)	9 Employer (See Instructions			
<u> </u>	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions)) 		
	Date 01/30/2024	Full name of contributor out-of-state PAC (ID#:_ Bratton, Barbara Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$25.00
		Leander, TX 78641				
	CPA	pation / Job title (See Instructions)	Employer (See Instructions Self-Employed)		
	Date 02/29/2024	Full name of contributor out-of-state PAC (ID#:_ Bratton, Barbara Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$25.00
		Leander, TX 78641				
	Principal occu CPA	pation / Job title (See Instructions)	Employer (See Instructions Self-Employed)		
	Date 03/30/2024	Full name of contributor out-of-state PAC (ID#:_ Bratton, Barbara Contributor address; City; State; Zip Code Leander, TX 78641)		Amount of Contribution (\$)	\$25.00
	Principal occu CPA	pation / Job title (See Instructions)	Employer (See Instructions Self-Employed)		
	Date 04/30/2024	Full name of contributor out-of-state PAC (ID#:_ Bratton, Barbara Contributor address; City; State; Zip Code Leander, TX 78641)		Amount of Contribution (\$)	\$25.00
	Principal occu CPA	pation / Job title (See Instructions)	Employer (See Instructions Self-Employed)		

	MONET	ARY POLITICAL CO	NTRIBUTION	S		SCHEDUL	E A1
	The Instruc	ction Guide explains how to	complete this form	n.	1	Total pages Schedule A1: Sch: 9/91 Rpt: 12/155	
2	FILER NAME Bucy III, Joh	n H. (The Honorable)			3	Filer ID (Ethics Commission 00069589	n Filers)
4	Date 05/30/2024	5 Full name of contributorBratton, Barbara6 Contributor address; City; State;			7	Amount of Contribution (\$)	\$25.00
_	5	Leander, TX 78641					
8	CPA	pation / Job title (See Instructions)		Employer (See Instructions Self-Employed)		
	Date 06/30/2024	Full name of contributor Bratton, Barbara Contributor address; City; State;	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$25.00
	Principal occu	Leander, TX 78641 pation / Job title (See Instructions)		Employer (See Instructions)		
	СРА	,		Self-Employed	•		
	Date 02/27/2024	Full name of contributor Braunagel-Brown, Mary Contributor address; City; State;	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$100.00
		Austin, TX 78736					
	Principal occu Not employe	pation / Job title (See Instructions)		Employer (See Instructions N/A)		
	Date 06/04/2024	Full name of contributor Braunagel-Brown, Mary Contributor address; City; State; Austin, TX 78736)		Amount of Contribution (\$)	\$100.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions N/A)		
	Date 06/11/2024	Full name of contributor Brittain, Judy Contributor address; City; State; Austin, TX 78750	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$10.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions N/A)		
			·				

	MONET	ARY POLITICAL CONTRIBU	JTION	IS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete t	this for	m.	1	Total pages Schedule A1: Sch: 10/91 Rpt: 13/155	
2	FILER NAME Bucy III, John	n H. (The Honorable)			3	Filer ID (Ethics Commission 00069589	n Filers)
4	Date 06/01/2024	 Full name of contributor out-of-state PAC Brittian, Judy Contributor address; City; State; Zip Code 	C (ID#:		7	Amount of Contribution (\$)	\$100.00
8	Principal occu Not Employe	Austin, TX 78729 pation / Job title (See Instructions)	9	Employer (See Instructions N/A	<u> </u> s)		
	Date 02/01/2024	Full name of contributor out-of-state PAC Brotherhood of Locomotive Engineers & T Contributor address; City; State; Zip Code Decatur, TX 76234	rainmen	Texas State		Amount of Contribution (\$)	\$250.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u>		
	Date 06/18/2024	Full name of contributor out-of-state PAC Bucy II, John Contributor address; City; State; Zip Code	C (ID#:)		Amount of Contribution (\$)	\$160.00
	Principal occur	Austin, TX 78723 pation / Job title (See Instructions)		Employer (See Instructions	<u>:)</u>		
	Attorney	pation / cos title (ese metadotono)		Self-Employed	"		
	Date 04/19/2024	Full name of contributor out-of-state PAC Burke, Cecelia (The Honorable) Contributor address; City; State; Zip Code Austin, TX 78731)		Amount of Contribution (\$)	\$125.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions N/A	5)		
	Date 06/09/2024	Full name of contributor out-of-state PAC Burke, Cecelia (The Honorable) Contributor address; City; State; Zip Code Austin, TX 78731	C (ID#:)	•	Amount of Contribution (\$)	\$100.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions N/A	5)		

	MONET	ARY POLITICAL C	ONTRIBUTIO	N	S		SCHEDUL	E A1
	The Instruc	ction Guide explains how t	o complete this fo	rn	n.	1	Total pages Schedule A1: Sch: 11/91 Rpt: 14/155	
2	FILER NAME Bucy III, Joh	n H. (The Honorable)				3	Filer ID (Ethics Commission 00069589	ı Filers)
4	Date 03/26/2024	5 Full name of contributor Eutcher, Michelle6 Contributor address; City; State	out-of-state PAC (ID#: e; Zip Code			7	Amount of Contribution (\$)	\$15.00
8	Principal occu	Round Rock, TX 78681 pation / Job title (See Instructions)	ļ <u> </u>	9	Employer (See Instructions	 - s)		
	Not Employe Date 04/26/2024	Full name of contributor Eutcher, Michelle Contributor address; City; State			N/A		Amount of Contribution (\$)	\$15.00
	Principal occu Not Employe	pation / Job title (See Instructions)			Employer (See Instructions N/A	<u> </u> s)		
	Date 05/26/2024	Full name of contributor Butcher, Michelle Contributor address; City; Stat	out-of-state PAC (ID#:				Amount of Contribution (\$)	\$15.00
	Principal occu Not Employe	Round Rock, TX 78681 pation / Job title (See Instructions)			Employer (See Instructions N/A	<u> </u> s)		
	Date 06/26/2024	Full name of contributor E Butcher, Michelle Contributor address; City; State Round Rock, TX 78681	out-of-state PAC (ID#: e; Zip Code)		Amount of Contribution (\$)	\$15.00
	Principal occu Not Employe	pation / Job title (See Instructions)			Employer (See Instructions N/A	<u> </u>		
	Date 06/06/2024	Full name of contributor CWA - COPE PCC Contributor address; City; State Washington, DC 20001	out-of-state PAC (ID#: Ct	00	002089	•	Amount of Contribution (\$)	\$250.00
	Principal occu	pation / Job title (See Instructions)			Employer (See Instructions	5)		

	MONET	ARY POLITICAL (CONTRIBUTIO	Ν	S		SCHEDUL	E A1
	The Instruc	ction Guide explains hov	to complete this fo	orr	n.	1	Total pages Schedule A1: Sch: 12/91 Rpt: 15/155	
2	FILER NAME Bucy III, Joh	n H. (The Honorable)				3	Filer ID (Ethics Commission 00069589	n Filers)
4	Date 06/26/2024	Full name of contributor Cacciola, Jeanette Contributor address; City; S	out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	\$20.00
8	Principal occu	Leander, TX 78641 pation / Job title (See Instructions	s)	9	Employer (See Instructions	<u> </u> s)		
	Not Employe		,		N/A	,		
	Date 06/18/2024	Full name of contributor Cain, Randy C. Contributor address; City; S)		Amount of Contribution (\$)	\$250.00
		Austin, TX 78763						
	•	pation / Job title (See Instructions & Legislative Affairs Consulti	*		Employer (See Instructions Self-Employed	s)		
	Date 06/26/2024	Full name of contributor Campos Benz, Olga Contributor address; City; S	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$40.00
		Austin, TX 78729						
	Principal occu Public Relati	pation / Job title (See Instructions ions Director	s) 		Employer (See Instructions Bloom Communications			
	Date 01/11/2024	Full name of contributor Carden, Constance Contributor address; City; S Georgetown, TX 78633					Amount of Contribution (\$)	\$100.00
	Principal occu Not Employe	pation / Job title (See Instructions	5)		Employer (See Instructions N/A	5)		
	Date 06/09/2024	Full name of contributor Cardon, Alice Contributor address; City; S Leander, TX 78641	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$25.00
	Principal occu Not Employe	pation / Job title (See Instructions	s)		Employer (See Instructions N/A	s)		

	MONET	ARY POLITICAL CO	ONTRIBUTION	S		SCHEDUL	E A1
	The Instruc	ction Guide explains how to	o complete this forr	n.	1	Total pages Schedule A1: Sch: 13/91 Rpt: 16/155	
2	FILER NAME Bucy III, Joh	n H. (The Honorable)			3	Filer ID (Ethics Commission 00069589	n Filers)
4	Date 06/17/2024	5 Full name of contributor Castanon, Luis	out-of-state PAC (ID#: e; Zip Code)	7	Amount of Contribution (\$)	\$50.00
_	Dringing age	Santa Monica, CA 90403	lo.	Employer (See Instructions	<u>, </u>		
8	Quality Assu	pation / Job title (See Instructions) rance	9	Employer (See Instructions Friends Outside in LA C		nty	
	Date 06/17/2024	Full name of contributor Castillo, Olivo Contributor address; City; State	e; Zip Code)		Amount of Contribution (\$)	\$250.00
	Principal occu	Round Rock, TX 78681-247 pation / Job title (See Instructions)	7	Employer (See Instructions	<u> </u> ;)		
	Commercial			Sierra Commercial	,		
	Date 06/18/2024	Full name of contributor Cavanaugh, Nina Contributor address; City; State	out-of-state PAC (ID#:; z; Zip Code)		Amount of Contribution (\$)	\$50.00
		Cedar Park, TX 78613					
	Principal occu Not Employe	pation / Job title (See Instructions) ed		Employer (See Instructions N/A	5)		
	Date 06/17/2024	Full name of contributor Cavanaugh, Stefanie Contributor address; City; State Austin, TX 78729	out-of-state PAC (ID#:e; Zip Code)		Amount of Contribution (\$)	\$500.00
	Principal occu CPA	pation / Job title (See Instructions)		Employer (See Instructions Giving Home Health Ca	•		
	Date 01/17/2024	Full name of contributor Chmeleck, Marianne Contributor address; City; State Georgetown, TX 78633	out-of-state PAC (ID#:;			Amount of Contribution (\$)	\$25.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions N/A	5)		

	MONET	ARY POLITICAL (CONTRIBUTIO	N	IS .		SCHEDUL	E A1
	The Instruc	ction Guide explains hov	v to complete this fo	orı	n.	1	Total pages Schedule A1: Sch: 14/91 Rpt: 17/155	
2	FILER NAME Bucy III, Joh	n H. (The Honorable)				3	Filer ID (Ethics Commission 00069589	n Filers)
4	Date 02/17/2024	5 Full name of contributor Chmeleck, Marianne6 Contributor address; City; S	out-of-state PAC (ID#:_ tate; Zip Code)	7	Amount of Contribution (\$)	\$25.00
8	Principal occu	Georgetown, TX 78633 pation / Job title (See Instructions	3)	9	Employer (See Instructions	?) 		
•	Not Employe		-)		N/A	-,		
	Date 03/17/2024	Full name of contributor Chmeleck, Marianne Contributor address; City; S	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$25.00
	D: : 1	Georgetown, TX 78633			5 1 (0 1 1 1	<u></u>		
	Not Employe	pation / Job title (See Instructionsed	5)		Employer (See Instructions N/A	5)		
	Date 04/17/2024	Full name of contributor Chmeleck, Marianne Contributor address; City; S	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$25.00
		Georgetown, TX 78633						
	Principal occu Not Employe	pation / Job title (See Instructions ed	5)		Employer (See Instructions N/A	5)		
	Date 04/18/2024	Full name of contributor Chmeleck, Marianne Contributor address; City; S Georgetown, TX 78633)		Amount of Contribution (\$)	\$125.00
	Principal occu Not Employe	pation / Job title (See Instructions	s)		Employer (See Instructions N/A	5)		
	Date 05/17/2024	Full name of contributor Chmeleck, Marianne Contributor address; City; S Georgetown, TX 78633	out-of-state PAC (ID#:_				Amount of Contribution (\$)	\$25.00
	Principal occu Not Employe	pation / Job title (See Instructions	5)		Employer (See Instructions N/A	5)		

	MONET	ARY POLITICAL (CONTRIBUTIO	Ν	S		SCHEDUL	E A1
	The Instruc	ction Guide explains hov	to complete this fo	orr	n.	1	Total pages Schedule A1: Sch: 15/91 Rpt: 18/155	
2	FILER NAME Bucy III, Joh	n H. (The Honorable)				3	Filer ID (Ethics Commission 00069589	n Filers)
4	Date 06/17/2024	6 Contributor address; City; S	out-of-state PAC (ID#:			7	Amount of Contribution (\$)	\$25.00
8	Principal occu	Georgetown, TX 78633 pation / Job title (See Instructions	s)	9	Employer (See Instructions	 ;)		
	Date 06/13/2024	Full name of contributor Clark, Mike Contributor address; City; S			N/A		Amount of Contribution (\$)	\$250.00
	Principal occu Consultant	Georgetown, TX 78628 pation / Job title (See Instructions	s)		Employer (See Instructions Self-Employed	 		
	Date 04/28/2024	Full name of contributor Clein, Catherine Contributor address; City; S	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$125.00
	Principal occu Attorney	Cedar Park, TX 78613 pation / Job title (See Instructions	s)		Employer (See Instructions The Clein Law Firm	<u> </u> 5)		
	Date 06/19/2024	Full name of contributor Collier-Brown, Carrie Contributor address; City; S)		Amount of Contribution (\$)	\$100.00
	Principal occu Attorney	Austin, TX 78746 pation / Job title (See Instructions	5)		Employer (See Instructions Locke Lord LLP	<u> </u> ;)		
	Date 04/21/2024	Full name of contributor Cook, Terry (The Honora Contributor address; City; S Round Rock, TX 78681					Amount of Contribution (\$)	\$290.00
	Principal occu Elected Offic	pation / Job title (See Instructions cial	5)		Employer (See Instructions Williamson County	s)		

	MONET	ARY POLITICAL CONTRIBUTION	DNS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 16/91 Rpt: 19/155	
2	FILER NAME Bucy III, Joh	nn H. (The Honorable)		3	Filer ID (Ethics Commission 00069589	n Filers)
4	Date 04/21/2024	5 Full name of contributor out-of-state PAC (ID#:_ Cook, Terry (The Honorable) 6 Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$)	\$290.00
8	Principal occu	Round Rock, TX 78681 spation / Job title (See Instructions)	9 Employer (See Instructions			
0	Elected Offic		Williamson County	,		
	Date 06/30/2024	Full name of contributor out-of-state PAC (ID#:_ Costello, Kathy Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$50.00
	Principal occu	Austin, TX 78729 upation / Job title (See Instructions)	Employer (See Instructions)		
	Not Employe		N/A			
	Date 03/22/2024	Full name of contributor out-of-state PAC (ID#:_ Covar, Nani Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$20.00
		Austin, TX 78717				
	Principal occu Not Employe	upation / Job title (See Instructions) ed	Employer (See Instructions N/A)		
	Date 05/15/2024	Full name of contributor out-of-state PAC (ID#:_ Covar, Nani Contributor address; City; State; Zip Code Austin, TX 78717			Amount of Contribution (\$)	\$125.00
	Principal occu Not Employe	upation / Job title (See Instructions) ed	Employer (See Instructions N/A)		
	Date 06/05/2024	Full name of contributor out-of-state PAC (ID#:_ Crowder, Ryan Contributor address; City; State; Zip Code Austin, TX 78757			Amount of Contribution (\$)	\$40.00
		upation / Job title (See Instructions) urtistic Director	Employer (See Instructions Penfold Theatre)		

	MONET	ARY POLITICAL C	CONTRIBUTIO	N	S		SCHEDUI	E A1
	The Instru	ction Guide explains how	to complete this fo	rn	n.	1	Total pages Schedule A1: Sch: 17/91 Rpt: 20/155	
2	FILER NAME Bucy III, Joh	n H. (The Honorable)				3	Filer ID (Ethics Commission 00069589	on Filers)
4	Date 05/15/2024	5 Full name of contributorCruz, Brenda6 Contributor address; City; St	out-of-state PAC (ID#: ate; Zip Code			7	Amount of Contribution (\$)	\$125.00
8	Principal occu	Laredo, TX 78045 pation / Job title (See Instructions	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		Employer (See Instructions	·/		
0		litical Manager	,		Texas Democratic Party			
	Date 02/02/2024	Full name of contributor D Piner, Elizabeth Contributor address; City; St)		Amount of Contribution (\$)	\$25.00
	Principal occu	Austin, TX 78729 pation / Job title (See Instructions)		Employer (See Instructions	;) 		
	Not Employe		,		N/A	,		
	Date 03/02/2024	Full name of contributor D Piner, Elizabeth Contributor address; City; St	out-of-state PAC (ID#:				Amount of Contribution (\$)	\$25.00
		Austin, TX 78729				Ĺ		
	Not Employe	pation / Job title (See Instructions ed)		Employer (See Instructions N/A	5)		
	Date 03/14/2024	Full name of contributor D Piner, Elizabeth Contributor address; City; St Austin, TX 78729	out-of-state PAC (ID#: ate; Zip Code)		Amount of Contribution (\$)	\$50.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions N/A	5)		
	Date 02/09/2024	Full name of contributor DECPAC Contributor address; City; St Oklahoma City, OK 73102	. ,				Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions			Employer (See Instructions	5)		
			1					

	MONET	ARY POLITICAL C	ONTRIBUTION	IS		SCHEDULI	E A1
	The Instruc	ction Guide explains how t	to complete this for	n.	1	Total pages Schedule A1: Sch: 18/91 Rpt: 21/155	
2	FILER NAME Bucy III, Joh	n H. (The Honorable)			3	Filer ID (Ethics Commission 00069589	n Filers)
4	Date 06/17/2024	5 Full name of contributor	out-of-state PAC (ID#: te; Zip Code		7	Amount of Contribution (\$)	\$250.00
_		Austin, TX 78702	la la	5 1 (0 1 1 1	<u></u>		
8	Legislative D	pation / Job title (See Instructions) pirector	9	Employer (See Instructions Texas House of Repres		atives	
	Date 01/03/2024	Full name of contributor DuTeil, Norma Diane Contributor address; City; State	out-of-state PAC (ID#: te; Zip Code)		Amount of Contribution (\$)	\$5.00
	Principal occu	Round Rock, TX 78665 pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> ;)		
	Not Employe	ed		N/A			
	Date 02/03/2024	Full name of contributor [DuTeil, Norma Diane Contributor address; City; Stat	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$5.00
		Round Rock, TX 78665					
	Principal occu Not Employe	pation / Job title (See Instructions) ed		Employer (See Instructions N/A	s)		
	Date 03/03/2024	Full name of contributor DuTeil, Norma Diane Contributor address; City; Stat Round Rock, TX 78665	out-of-state PAC (ID#:te; Zip Code			Amount of Contribution (\$)	\$5.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions N/A	5)		
	Date 04/03/2024	Full name of contributor DuTeil, Norma Diane Contributor address; City; Stat Round Rock, TX 78665	out-of-state PAC (ID#: te; Zip Code)		Amount of Contribution (\$)	\$5.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions N/A	5)		

	MONET	ARY POLITICAL CONTRIBUTION	DNS		SCHEDULE	■ A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 19/91 Rpt: 22/155	
2	FILER NAME Bucy III, Joh	ın H. (The Honorable)		3	Filer ID (Ethics Commission 00069589	Filers)
4	Date 05/03/2024	5 Full name of contributor out-of-state PAC (ID#:_ DuTeil, Norma Diane 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$5.00
_	Dringing Loon	Round Rock, TX 78665	Constant (See Instructions			
8	Not Employe	pation / Job title (See Instructions) ed	Employer (See Instructions N/A)		
	Date 06/03/2024	Full name of contributor out-of-state PAC (ID#:_ DuTeil, Norma Diane Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$5.00
	Principal occu	Round Rock, TX 78665 upation / Job title (See Instructions)	Employer (See Instructions	5)		
	Not Employe	ed	N/A			
	Date 02/27/2024	Full name of contributor out-of-state PAC (ID#:_ Ducharme, Jacalyn Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$10.00
		Austin, TX 78717	_			
	Principal occu Not Employe	pation / Job title (See Instructions) ed	Employer (See Instructions N/A	i)		
	Date 06/11/2024	Full name of contributor out-of-state PAC (ID#:_ Ducharme, Jacalyn Contributor address; City; State; Zip Code Austin, TX 78717			Amount of Contribution (\$)	\$80.00
	Principal occu Not Employe	ipation / Job title (See Instructions) ed	Employer (See Instructions N/A)		
	Date 06/24/2024	Full name of contributor out-of-state PAC (ID#:_ Ducharme, Jacalyn Contributor address; City; State; Zip Code Austin, TX 78717)		Amount of Contribution (\$)	\$20.00
	Principal occu Not Employe	upation / Job title (See Instructions) ed	Employer (See Instructions N/A	5)		

	MONET	ARY POLITICAL (CONTRIBUTIO	N	S		SCHEDUL	E A1
	The Instruc	ction Guide explains how	to complete this fo	orr	n.	1	Total pages Schedule A1: Sch: 20/91 Rpt: 23/155	
2	FILER NAME Bucy III, John	n H. (The Honorable)				3	Filer ID (Ethics Commission 00069589	n Filers)
4		5 Full name of contributor Dulaney, Mary6 Contributor address; City; S	out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	\$50.00
8	Principal occur	Cedar Park, TX 78613 pation / Job title (See Instructions	3)	9	Employer (See Instructions	<u>;)</u>		
•	Not Employe		-,		N/A	-,		
	Date 06/26/2024	Full name of contributor Duncan, Sue Contributor address; City; S)		Amount of Contribution (\$)	\$40.00
	Dringing! aggs	Round Rock, TX 78681-3			Employer (See Instructions	<u></u>		
	Not Employe	pation / Job title (See Instructions ed	5)		Employer (See Instructions N/A	5)		
	Date 06/30/2024	Full name of contributor Durham, Michelle Contributor address; City; S	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$50.00
		Austin, TX 78729						
	Principal occu Health care	pation / Job title (See Instructions	s)		Employer (See Instructions CPRMC	5)		
	Date 05/30/2024	Full name of contributor Emmick Jr., Robert Contributor address; City; S Austin, TX 78704					Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions	5)		Employer (See Instructions	5)		
	Date 06/04/2024	Full name of contributor Enyart, Katherine Contributor address; City; S Austin, TX 78750	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$40.00
	Principal occu Not Employe	pation / Job title (See Instructions	(5)		Employer (See Instructions N/A	5)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUI	LE A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 21/91 Rpt: 24/155	
2	FILER NAME Bucy III, Joh	ın H. (The Honorable)		3	Filer ID (Ethics Commission 00069589	on Filers)
4	Date 02/20/2024	 Full name of contributor out-of-state PAC (ID#:_Epstein, Robert Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$)	\$1,000.00
_	Dringing	Austin, TX 78701	O Frankrig (Coo looks of coo			
8	Chairman	ipation / Job title (See Instructions)	Employer (See Instructions Circuit of the Americas	5)		
	Date 01/30/2024	Full name of contributor out-of-state PAC (ID#:_ Erskine, Patricia Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$5.00
	Principal occu	Round Rock, TX 78665 upation / Job title (See Instructions) ed	Employer (See Instructions N/A	<u>;</u>)		
	Date 02/29/2024	Full name of contributor out-of-state PAC (ID#:_ Erskine, Patricia Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$5.00
		Round Rock, TX 78665 upation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 03/30/2024	Full name of contributor out-of-state PAC (ID#:_ Erskine, Patricia Contributor address; City; State; Zip Code	N/A		Amount of Contribution (\$)	\$5.00
	Principal occu	Round Rock, TX 78665 upation / Job title (See Instructions) ed	Employer (See Instructions N/A	j)		
	Date 05/30/2024	Full name of contributor out-of-state PAC (ID#:_ Erskine, Patricia Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$5.00
	Principal occu Not Employe	upation / Job title (See Instructions) ed	Employer (See Instructions N/A	()		

	MONEI	ARY POLITICAL (CONTRIBUTIO)NS			SCHEDUL	E A1
	The Instru	ction Guide explains how	to complete this fo	orm.		1	Total pages Schedule A1: Sch: 22/91 Rpt: 25/155	
2	FILER NAME					3	Filer ID (Ethics Commission	n Filers)
	Bucy III, Joh	n H. (The Honorable)					00069589	
4	Date 06/30/2024	5 Full name of contributorErskine, Patricia6 Contributor address; City; S	out-of-state PAC (ID#:			7	Amount of Contribution (\$)	\$5.00
_		Round Rock, TX 78665						
8	Principal occu Not Employe	pation / Job title (See Instructionsed	s)		mployer (See Instructions I/A	5)		
	Date 01/03/2024	Full name of contributor Evans, Brian Contributor address; City; S	out-of-state PAC (ID#:				Amount of Contribution (\$)	\$500.00
		Austin, TX 78759						
	Principal occu Professor	pation / Job title (See Instructions	5)		mployer (See Instructions The University of Texas		Δuetin	
				- 1	The Offiversity of Texas	aı		
	Date 03/27/2024	Full name of contributor Fahey, Dennis Contributor address; City; S	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$5.00
		Denver, CO 80238						
	Principal occu	pation / Job title (See Instructions	s)	E	mployer (See Instructions	<u> </u>		
	Not Employe		<i>'</i>		I/A	,		
	Date 04/17/2024	Full name of contributor Falk, Jessica Contributor address; City; S Cedar Park, TX 78613	out-of-state PAC (ID#:				Amount of Contribution (\$)	\$25.00
	Principal occu	pation / Job title (See Instructions	5)	E	mployer (See Instructions	5)		
	Government			E	DA- U.S. Dept. of Com	ıme	erce	
	Date 06/13/2024	Full name of contributor Falk, Jessica Contributor address; City; S	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$25.00
		Cedar Park, TX 78613						
	Principal occu Government	pation / Job title (See Instructions	5)		mployer (See Instructions DA- U.S. Dept. of Com		erce	

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUI	LE A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 23/91 Rpt: 26/155	
2	FILER NAME Bucy III, Joh	n H. (The Honorable)		3	Filer ID (Ethics Commission 00069589	on Filers)
4	Date 01/19/2024	 Full name of contributor out-of-state PAC (ID#:_Family Emergency Rooms LLC Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$)	\$1,000.00
_	Deignaignal annu	Cedar Park, TX 78613	O Frankriger (Cook hoster attende			
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions))		
	Date 06/12/2024	Full name of contributor out-of-state PAC (ID#:_Ferris, David Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$250.00
	Principal occu	Round Rock, TX 78681 pation / Job title (See Instructions)	Employer (See Instructions)		
	Not Employe	ed	N/A			
	Date 06/30/2024	Full name of contributor out-of-state PAC (ID#:_ Ferris, David Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$100.00
		Round Rock, TX 78681				
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions N/A)		
	Date 06/30/2024	Full name of contributor out-of-state PAC (ID#:_Fetsch, Erin Contributor address; City; State; Zip Code Austin, TX 78717)		Amount of Contribution (\$)	\$10.00
	Principal occu Consultant S	pation / Job title (See Instructions) Science	Employer (See Instructions Self-Employed)		
	Date 06/30/2024	Full name of contributor out-of-state PAC (ID#:_Fiduk III, Kenneth Contributor address; City; State; Zip Code Austin, TX 78729)		Amount of Contribution (\$)	\$25.00
	Principal occu Software En	pation / Job title (See Instructions) gineer	Employer (See Instructions Amazon)		

	MONET	ARY POLITICAL C	CONTRIBUTION	IS		SCHEDUI	LE A1
	The Instru	ction Guide explains how	to complete this for	m.	1	Total pages Schedule A1: Sch: 24/91 Rpt: 27/155	
2	FILER NAME Bucy III, Joh	n H. (The Honorable)			3	Filer ID (Ethics Commission 00069589	on Filers)
4	Date 05/08/2024	5 Full name of contributor Flannigan, Jimmy (The Ho6 Contributor address; City; St)	7	Amount of Contribution (\$)	\$125.00
8	Drincinal occu	Austin, TX 78729 pation / Job title (See Instructions) Ta	Employer (See Instructions	·/_		
0	Administration		,	Austin Convention Enter		ses Inc.	
	Date 06/24/2024	Full name of contributor Flynn, Michael Contributor address; City; St				Amount of Contribution (\$)	\$35.00
	Dringinal accu	Austin, TX 78717 pation / Job title (See Instructions	, T	Employer (See Instructions	·/-		
	Not Employe			N/A)		
	Date 06/28/2024	Full name of contributor Franks, Elizabeth Contributor address; City; St	out-of-state PAC (ID#: ate; Zip Code)		Amount of Contribution (\$)	\$100.00
	Dringing Lagra	Cedar Park, TX 78613	, T	Franksian (Caa laatuustiana	<u></u>		
	Principal occu Pricing Cons	pation / Job title (See Instructions sultant)	Employer (See Instructions Secureworks	5)		
	Date 06/18/2024	Full name of contributor Fred Shannon LLC Contributor address; City; St Austin, TX 78701	out-of-state PAC (ID#: ate; Zip Code)		Amount of Contribution (\$)	\$1,500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 02/28/2024	Full name of contributor Friends of the University F Contributor address; City; St Austin, TX 78763)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		

	MONET	ARY POLITICAL CONTRIBUTION	N	IS		SCHEDULE	A1
	The Instru	ction Guide explains how to complete this f	orı	m.	1	Total pages Schedule A1: Sch: 25/91 Rpt: 28/155	
2	FILER NAME Bucy III, Joh	n H. (The Honorable)			3	Filer ID (Ethics Commission 00069589	Filers)
4	Date 06/10/2024	5 Full name of contributor out-of-state PAC (ID#:_Gaede, Tacy 6 Contributor address; City; State; Zip Code			7	Amount of Contribution (\$)	\$50.00
_		San Francisco, CA 94107	_	5 1 (0 1 1 1	<u></u>		
8	Principal occu Producer	pation / Job title (See Instructions)	9	Employer (See Instructions Self-Employed	5)		
	Date 06/11/2024	Full name of contributor out-of-state PAC (ID#:_Gallini, Raquel Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$25.00
	Deinsinal assu	Mckinney, TX 75072		Franks on (Cook bathwetis no			
	Office Mana	pation / Job title (See Instructions) ger		Employer (See Instructions Highlander Partners	5)		
	Date 01/08/2024	Full name of contributor out-of-state PAC (ID#:_Gandaria-Escamilla, Sara Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$25.00
		Round Rock, TX 78664					
	Principal occu Teacher	pation / Job title (See Instructions)		Employer (See Instructions Round Rock ISD	5)		
	Date 01/20/2024	Full name of contributor out-of-state PAC (ID#:_ Gandaria-Escamilla, Sara Contributor address; City; State; Zip Code Round Rock, TX 78664				Amount of Contribution (\$)	\$25.00
	Principal occu Teacher	pation / Job title (See Instructions)		Employer (See Instructions Round Rock ISD	<u> </u>		
	Date 02/08/2024	Full name of contributor out-of-state PAC (ID#:_ Gandaria-Escamilla, Sara Contributor address; City; State; Zip Code Round Rock, TX 78664				Amount of Contribution (\$)	\$25.00
	Principal occu Teacher	pation / Job title (See Instructions)		Employer (See Instructions	;)		

	MONET	ARY POLITICAL CONTRIBUTIO	N	IS		SCHEDULE	■ A1
	The Instru	ction Guide explains how to complete this fo	orı	m.	1	Total pages Schedule A1: Sch: 26/91 Rpt: 29/155	
2	FILER NAME Bucy III, Joh	n H. (The Honorable)			3	Filer ID (Ethics Commission 00069589	Filers)
4	Date 02/20/2024	 Full name of contributor)	7	Amount of Contribution (\$)	\$25.00
8	Principal occu Teacher	Round Rock, TX 78664 pation / Job title (See Instructions)	9	Employer (See Instructions Round Rock ISD	s)		
	Date 03/08/2024	Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$25.00
	Principal occu Teacher	Round Rock, TX 78664 pation / Job title (See Instructions)		Employer (See Instructions Round Rock ISD	<u> </u> s)		
	Date 03/20/2024	Full name of contributor out-of-state PAC (ID#:_ Gandaria-Escamilla, Sara Contributor address; City; State; Zip Code			•	Amount of Contribution (\$)	\$25.00
	Principal occu	Round Rock, TX 78664 pation / Job title (See Instructions)		Employer (See Instructions	 s)		
	Teacher			Round Rock ISD			
	Date 04/08/2024	Full name of contributor out-of-state PAC (ID#:_Gandaria-Escamilla, Sara Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$25.00
	Principal occu Teacher	Round Rock, TX 78664 pation / Job title (See Instructions)		Employer (See Instructions Round Rock ISD	<u> </u> s)		
	Date 04/20/2024	Full name of contributor out-of-state PAC (ID#:_ Gandaria-Escamilla, Sara Contributor address; City; State; Zip Code Round Rock, TX 78664)		Amount of Contribution (\$)	\$25.00
	Principal occu Teacher	pation / Job title (See Instructions)		Employer (See Instructions Round Rock ISD	s)		
		•					

	MONET	ARY POLITICAL CONTRIBUTION	7(IS		SCHEDULE	■ A1
	The Instru	ction Guide explains how to complete this fo	or	m.	1	Total pages Schedule A1: Sch: 27/91 Rpt: 30/155	
2	FILER NAME Bucy III, Joh	n H. (The Honorable)			3	Filer ID (Ethics Commission 00069589	Filers)
4	Date 05/08/2024	 Full name of contributor)	7	Amount of Contribution (\$)	\$25.00
8	Principal occu Teacher	Round Rock, TX 78664 pation / Job title (See Instructions)	9	Employer (See Instructions Round Rock ISD	<u> </u> s)		
	Date 05/20/2024	Contributor address; City; State; Zip Code)	•	Amount of Contribution (\$)	\$25.00
	Principal occu Teacher	Round Rock, TX 78664 pation / Job title (See Instructions)		Employer (See Instructions Round Rock ISD	<u> </u> s)		
	Date 06/08/2024	Full name of contributor out-of-state PAC (ID#:_ Gandaria-Escamilla, Sara Contributor address; City; State; Zip Code			•	Amount of Contribution (\$)	\$25.00
	Dringinal occu	Round Rock, TX 78664 pation / Job title (See Instructions)		Employer (See Instructions	<u>''</u>		
	Teacher	pation 7 Jub title (See Instructions)		Round Rock ISD	»)		
	Date 06/20/2024	Full name of contributor out-of-state PAC (ID#:_ Gandaria-Escamilla, Sara Contributor address; City; State; Zip Code Round Rock, TX 78664			•	Amount of Contribution (\$)	\$25.00
	Principal occu Teacher	pation / Job title (See Instructions)		Employer (See Instructions Round Rock ISD	<u>l</u> S)		
	Date 06/30/2024	Full name of contributor out-of-state PAC (ID#:_ Gen, Virginia Contributor address; City; State; Zip Code Austin, TX 78717			•	Amount of Contribution (\$)	\$25.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions N/A	5)		

	MONET	ARY POLITICAL C	CONTRIBUTIO	N	S		SCHEDUL	E A1
	The Instruc	ction Guide explains how	to complete this fo	rn	n.	1	Total pages Schedule A1: Sch: 28/91 Rpt: 31/155	
2	FILER NAME Bucy III, Joh	n H. (The Honorable)				3	Filer ID (Ethics Commission 00069589	ı Filers)
4	Date 06/26/2024	5 Full name of contributor Gilbert, Karen6 Contributor address; City; St	out-of-state PAC (ID#:			7	Amount of Contribution (\$)	\$100.00
8	Principal occu	Georgetown, TX 78633 pation / Job title (See Instructions) [9	<u> </u>	Employer (See Instructions	<u> </u> 5)		
	Date 05/08/2024	Full name of contributor Gilby, Kim (The Honorable Contributor address; City; St			N/A)		Amount of Contribution (\$)	\$125.00
	Principal occu Not Employe	Cedar Park, TX 78613 pation / Job title (See Instructions d)		Employer (See Instructions N/A	<u> </u> ;)		
	Date 01/17/2024	Full name of contributor Giner, Maria-Elena Contributor address; City; St	out-of-state PAC (ID#:ate; Zip Code				Amount of Contribution (\$)	\$10.00
	Principal occu	Austin, TX 78717 pation / Job title (See Instructions)		Employer (See Instructions	 - s)		
	PhD student				UT LBJ Public Public Af	faiı	S	
	Date 02/17/2024	Full name of contributor Giner, Maria-Elena Contributor address; City; St	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$10.00
	Principal occu PhD Student	Austin, TX 78717 pation / Job title (See Instructions			Employer (See Instructions UT LBJ Public Public Af		s	
	Date 03/17/2024	Full name of contributor Giner, Maria-Elena Contributor address; City; St Austin, TX 78717	out-of-state PAC (ID#:				Amount of Contribution (\$)	\$10.00
	Principal occu PhD Student	pation / Job title (See Instructions)		Employer (See Instructions UT LBJ Public Public Af		s	
			<u>'</u>					

	MONET	ARY POLITICAL CO	ONTRIBUTION	S		SCHEDUL	E A1
	The Instruc	ction Guide explains how to	o complete this forn	n.	1	Total pages Schedule A1: Sch: 29/91 Rpt: 32/155	
2	FILER NAME Bucy III, John	n H. (The Honorable)			3	Filer ID (Ethics Commission 00069589	n Filers)
4	Date 04/17/2024	5 Full name of contributor Giner, Maria-Elena6 Contributor address; City; State	out-of-state PAC (ID#:e; Zip Code		7	Amount of Contribution (\$)	\$10.00
		Austin, TX 78717					
8	Principal occu PhD Student	pation / Job title (See Instructions)		Employer (See Instructions UT LBJ School of Public		ffairs	
	Date 05/17/2024	Full name of contributor Giner, Maria-Elena Contributor address; City; State	out-of-state PAC (ID#:e; Zip Code			Amount of Contribution (\$)	\$10.00
	Deire sin al access	Austin, TX 78717		Farabasa (Osabasa tanati	$\overline{\Gamma}$		
	PhD student	pation / Job title (See Instructions)		Employer (See Instructions UT LBJ School of Public		ffairs	
	Date 06/17/2024	Full name of contributor Giner, Maria-Elena Contributor address; City; State	out-of-state PAC (ID#:e; Zip Code)		Amount of Contribution (\$)	\$10.00
		Austin, TX 78717					
	Principal occu PhD student	pation / Job title (See Instructions)		Employer (See Instructions UT LBJ School of Public		fairs	
	Date 02/27/2024	Full name of contributor Ginther, Risa Contributor address; City; State Austin, TX 78717	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$30.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions St. Edward's University	<u>(</u>		
	Date 05/08/2024	Full name of contributor Gonzalez, Manuel Contributor address; City; State Austin, TX 78729	out-of-state PAC (ID#:e; Zip Code			Amount of Contribution (\$)	\$125.00
		pation / Job title (See Instructions) egional Operations		Employer (See Instructions Western Governors Univ		sitv	
	22010. 01 11	-0				- 9	

	MONET	ARY POLITICAL CONTRIBU	TION	IS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete th	nis for	m.	1	Total pages Schedule A1: Sch: 30/91 Rpt: 33/155	
2	FILER NAME Bucy III, Johi	n H. (The Honorable)			3	Filer ID (Ethics Commission 00069589	n Filers)
4		 Full name of contributor out-of-state PAC (Gordon, Anita Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$)	\$40.00
8	Principal occur	Midlothian, VA 23112 pation / Job title (See Instructions)	9	Employer (See Instructions	s)		
	Not Employe			N/A	-,		
	Date 06/18/2024	Contributor address; City; State; Zip Code			•	Amount of Contribution (\$)	\$10.00
	Principal occur	Austin, TX 78751 pation / Job title (See Instructions)		Employer (See Instructions	<u>s)</u>		
	Not Employe			N/A	-,		
	Date 06/26/2024	Full name of contributor out-of-state PAC (Grady, Brent Contributor address; City; State; Zip Code	(ID#:)		Amount of Contribution (\$)	\$200.00
		Lake Jackson, TX 77566					
	Principal occup	pation / Job title (See Instructions)		Employer (See Instructions Self-Employed	5)		
	Date 06/30/2024	Full name of contributor out-of-state PAC (Grampp, Fred (The Honorable) Contributor address; City; State; Zip Code Austin, TX 78750)	•	Amount of Contribution (\$)	\$50.00
	Principal occup	pation / Job title (See Instructions) d		Employer (See Instructions N/A	5)		
	Date 06/30/2024	Full name of contributor out-of-state PAC (Grampp, Karen Contributor address; City; State; Zip Code Austin, TX 78750			•	Amount of Contribution (\$)	\$50.00
	Principal occup	pation / Job title (See Instructions)		Employer (See Instructions N/A	5)		
			1				

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this t	form.	1	Total pages Schedule A1: Sch: 31/91 Rpt: 34/155	
2	FILER NAME Bucy III, Joh	n H. (The Honorable)		3	Filer ID (Ethics Commission 00069589	n Filers)
4	Date 06/17/2024	 Full name of contributor out-of-state PAC (ID#: Griffin, Sheila Contributor address; City; State; Zip Code 		7	Amount of Contribution (\$)	\$25.00
_		Austin, TX 78717	I			
8	Caretaker	pation / Job title (See Instructions)	9 Employer (See Instructions Family)		
	Date 06/17/2024	Full name of contributor out-of-state PAC (ID#:_ Griffin, Wanda Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$40.00
	Principal occu	Round Rock, TX 78664 pation / Job title (See Instructions) ed	Employer (See Instructions N/A)		
	Date 06/30/2024	Full name of contributor out-of-state PAC (ID#:_ Groff, Sara Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$250.00
	Dringing occu	Cedar Park, TX 78613 pation / Job title (See Instructions)	Employer (See Instructions			
	N/A	pation / 300 title (See instructions)	N/A			
	Date 06/15/2024	Full name of contributor out-of-state PAC (ID#: Gunter, Jan Contributor address; City; State; Zip Code Austin, TX 78717			Amount of Contribution (\$)	\$40.00
	Principal occu Real Estate	pation / Job title (See Instructions) Agent	Employer (See Instructions Keller Williams)		
	Date 05/12/2024	Full name of contributor out-of-state PAC (ID#:_Haben, Michelle Contributor address; City; State; Zip Code Austin, TX 78727)		Amount of Contribution (\$)	\$80.00
	Principal occu Not Employe	pation / Job title (See Instructions) ed	Employer (See Instructions N/A)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 32/91 Rpt: 35/155	
2	FILER NAME Bucy III, Joh	in H. (The Honorable)		3	Filer ID (Ethics Commission 00069589	n Filers)
4	Date 06/12/2024	5 Full name of contributor out-of-state PAC (ID#:_ Hadley, Janet 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$100.00
0	Dringing occu	Newport Beach, CA 92660	0 Employer (See Instructions			
8	Not Employe	pation / Job title (See Instructions) ed	9 Employer (See Instructions N/A)		
	Date 01/23/2024	Full name of contributor out-of-state PAC (ID#:_ Haralson, David Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$10.00
	Principal occu	Round Rock, TX 78681 upation / Job title (See Instructions)	Employer (See Instructions			
	Corporate Ti		Applied Materials	,		
	Date 02/23/2024	Full name of contributor out-of-state PAC (ID#:_ Haralson, David Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$10.00
		Round Rock, TX 78681				
	Principal occu Corporate Ti	pation / Job title (See Instructions) raining	Employer (See Instructions Applied Materials)		
	Date 03/23/2024	Full name of contributor out-of-state PAC (ID#:_ Haralson, David Contributor address; City; State; Zip Code Round Rock, TX 78681)		Amount of Contribution (\$)	\$10.00
	Principal occu Corporate Tr	I Ipation / Job title (See Instructions)	Employer (See Instructions Applied Materials)		
	Date 04/23/2024	Full name of contributor out-of-state PAC (ID#:_ Haralson, David Contributor address; City; State; Zip Code Round Rock, TX 78681			Amount of Contribution (\$)	\$10.00
	Principal occu Corporate Tr	raining	Employer (See Instructions Applied Materials)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 33/91 Rpt: 36/155	
2	FILER NAME Bucy III, Joh	in H. (The Honorable)		3	Filer ID (Ethics Commission 00069589	n Filers)
4	Date 05/23/2024	5 Full name of contributor out-of-state PAC (ID#:_ Haralson, David 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$10.00
_	<u> </u>	Round Rock, TX 78681				
8	Corporate Ti	pation / Job title (See Instructions) raining	9 Employer (See Instructions Applied Materials)		
	Date 06/23/2024	Full name of contributor out-of-state PAC (ID#:_ Haralson, David Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$10.00
	Dringing occu	Round Rock, TX 78681 pation / Job title (See Instructions)	Employer (See Instructions			
	Corporate Ti		Applied Materials)		
	Date 04/18/2024	Full name of contributor out-of-state PAC (ID#:_ Hayes-McMahon, Shellie Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$125.00
		Cedar Park, TX 78613				
	Principal occu Executive Di	pation / Job title (See Instructions) irector	Employer (See Instructions PPTV)		
	Date 06/11/2024	Full name of contributor out-of-state PAC (ID#:_ Haynes, Phillip Contributor address; City; State; Zip Code Charlotte, NC 28277			Amount of Contribution (\$)	\$50.00
	Principal occu Not Employe	pation / Job title (See Instructions)	Employer (See Instructions N/A)		
	Date 06/17/2024	Full name of contributor out-of-state PAC (ID#:_ Hecker, Marvin Contributor address; City; State; Zip Code Austin, TX 78746			Amount of Contribution (\$)	\$40.00
	Principal occu Not Employe	upation / Job title (See Instructions) ed	Employer (See Instructions N/A)		

	MONET	ARY POLITICAL CONTRIBUTION	DNS	SCHEDULE A			
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 34/91 Rpt: 37/155		
2	FILER NAME Bucy III, Joh	ın H. (The Honorable)		3	Filer ID (Ethics Commission 00069589	Filers)	
4	Date 06/30/2024	 Full name of contributor out-of-state PAC (ID#:_Held, Eileen Contributor address; City; State; Zip Code 		7	Amount of Contribution (\$)	\$25.00	
_		Austin, TX 78729					
8	Principal occu Sales	pation / Job title (See Instructions)	9 Employer (See Instructions AHFH)			
	Date 06/30/2024	Full name of contributor out-of-state PAC (ID#:_ Hembree, Susan Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$20.00	
	Principal occu	Cedar Park, TX 78613 upation / Job title (See Instructions)	Employer (See Instructions N/A)			
	Date 06/30/2024	Full name of contributor out-of-state PAC (ID#:_ Hergert, Brooke Contributor address; City; State; Zip Code Cedar Park, TX 78613			Amount of Contribution (\$)	\$50.00	
	Principal occu Physician	pation / Job title (See Instructions)	Employer (See Instructions Ascension)			
	Date 06/13/2024	Full name of contributor out-of-state PAC (ID#:_ Hill, Donna Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$50.00	
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions N/A)			
	Date 04/18/2024	Full name of contributor out-of-state PAC (ID#:_ Hockaday, Wendy Contributor address; City; State; Zip Code Austin, TX 78717			Amount of Contribution (\$)	\$80.00	
	Principal occu Not Employe	upation / Job title (See Instructions) ed	Employer (See Instructions N/A)			

	MONET	ARY POLITICAL CONTRIBUTION	DNS	SCHEDULE A			
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 35/91 Rpt: 38/155		
2	FILER NAME Bucy III, Joh	n H. (The Honorable)		3	Filer ID (Ethics Commission 00069589	n Filers)	
4	Date 01/01/2024	 Full name of contributor out-of-state PAC (ID#:_Hooper, Hanna Contributor address; City; State; Zip Code 		7	Amount of Contribution (\$)	\$35.00	
8	Principal occu	Georgetown, TX 78633 pation / Job title (See Instructions)	9 Employer (See Instructions				
•	Not employe		N/A	·)			
	Date 02/01/2024	Full name of contributor out-of-state PAC (ID#:_ Hooper, Hanna Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$35.00	
	Principal occu	Georgetown, TX 78633 pation / Job title (See Instructions)	Employer (See Instructions	 ;)			
	Not employe		N/A				
	Date 03/01/2024	Full name of contributor out-of-state PAC (ID#:_ Hooper, Hanna Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$35.00	
		Georgetown, TX 78633					
	Principal occu Not employe	pation / Job title (See Instructions) ed	Employer (See Instructions N/A	5)			
	Date 04/01/2024	Full name of contributor out-of-state PAC (ID#:_ Hooper, Hanna Contributor address; City; State; Zip Code Georgetown, TX 78633			Amount of Contribution (\$)	\$50.00	
	Principal occu Not Employe	pation / Job title (See Instructions) ed	Employer (See Instructions N/A	5)			
	Date 05/01/2024	Full name of contributor out-of-state PAC (ID#:_ Hooper, Hanna Contributor address; City; State; Zip Code Georgetown, TX 78633			Amount of Contribution (\$)	\$50.00	
	Principal occu Not Employe	pation / Job title (See Instructions) ed	Employer (See Instructions N/A	5)			

	MONET	ARY POLITICAL CONTRIBUTION	SCHEDULE A1				
	The Instruc	ction Guide explains how to complete this	for	m.	1	Total pages Schedule A1: Sch: 36/91 Rpt: 39/155	
2	FILER NAME Bucy III, John	n H. (The Honorable)			3	Filer ID (Ethics Commission 00069589	Filers)
4	Date 06/01/2024	 Full name of contributor out-of-state PAC (ID#: Hooper, Hanna Contributor address; City; State; Zip Code 			7	Amount of Contribution (\$)	\$50.00
_	Dringing! aggr	Georgetown, TX 78633	١,	Employer (Coo Instructions	<u></u>		
8	Not Employe	pation / Job title (See Instructions) ed	9	Employer (See Instructions N/A	5)		
	Date 03/23/2024	Full name of contributor out-of-state PAC (ID#: Horick, Hannah Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$15.00
		Georgetown, TX 78626	_				
		pation / Job title (See Instructions) ommunications and Partnerships		Employer (See Instructions Crisis Center of West To		ıs	
	Date 06/24/2024	Full name of contributor out-of-state PAC (ID#: Horton, Harriet Contributor address; City; State; Zip Code)	•	Amount of Contribution (\$)	\$10.00
		Cedar Park, TX 78613	_				
	Principal occu Not Employe	pation / Job title (See Instructions) ed		Employer (See Instructions N/A	s)		
	Date 06/30/2024	Full name of contributor out-of-state PAC (ID#: Horton, Harriet Contributor address; City; State; Zip Code Cedar Park, TX 78613)		Amount of Contribution (\$)	\$10.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions N/A	<u> </u>		
	Date 05/08/2024	Full name of contributor out-of-state PAC (ID#: Houston, Carrie & Joshua (Rev.) Contributor address; City; State; Zip Code Austin, TX 78757				Amount of Contribution (\$)	\$40.00
	Principal occu Minister	pation / Job title (See Instructions)		Employer (See Instructions First Baptist Church of A		tin	
			•				

	MONET	ARY POLITICAL CONTRIBUTION	IS		SCHEDULE A1	
	The Instruc	ction Guide explains how to complete this f	orı	m.	1	Total pages Schedule A1: Sch: 37/91 Rpt: 40/155
2	FILER NAME Bucy III, Joh	n H. (The Honorable)			3	Filer ID (Ethics Commission Filers) 00069589
4	Date 06/26/2024	 Full name of contributor out-of-state PAC (ID#:_ Hunter, Christina Contributor address; City; State; Zip Code 			7	Amount of Contribution (\$) \$40.00
8	Principal occu	Cedar Park, TX 78613 pation / Job title (See Instructions)	l _a	Employer (See Instructions	·,	
•	Realtor	pation 7 Job title (See Instructions)	9	Self-Employed	•)	
	Date 06/18/2024	Full name of contributor				Amount of Contribution (\$) \$1,000.00
	Deinsinal sass	Dallas, TX 75201	_	Family on (Cas Instructions		
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)	
	Date 06/05/2024	Full name of contributor out-of-state PAC (ID#:_ Jalbert, Caden Contributor address; City; State; Zip Code)		Amount of Contribution (\$) \$10.00
	Dringing! aggs	Round Rock, TX 78681	_	Employer (Cool patruations	<u></u>	
	Not Employe	pation / Job title (See Instructions) ed		Employer (See Instructions N/A	·)	
	Date 05/06/2024	Full name of contributor out-of-state PAC (ID#:_ Jefts, Heather (The Honorable) Contributor address; City; State; Zip Code Cedar Park, TX 78613)		Amount of Contribution (\$) \$250.00
	Principal occu Not Employe	pation / Job title (See Instructions) ed		Employer (See Instructions N/A	5)	
	Date 06/26/2024	Full name of contributor out-of-state PAC (ID#:_ Jefts, Heather (The Honorable) Contributor address; City; State; Zip Code Cedar Park, TX 78613)		Amount of Contribution (\$) \$40.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions N/A	s)	

	MONET	ARY POLITICAL CO		SCHEDUL	E A1		
	The Instruc	ction Guide explains how to	complete this form	n.	1	Total pages Schedule A1: Sch: 38/91 Rpt: 41/155	
2	FILER NAME Bucy III, Joh	n H. (The Honorable)			3	Filer ID (Ethics Commission 00069589	n Filers)
4	Date 06/26/2024	5 Full name of contributor Jerkins, Nathan	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	\$100.00
_	Deinsinal assu	Austin, TX 78757	la-	Frankrian (Cookarational	_		
8	Theatre Proc	pation / Job title (See Instructions) ducer	9	Employer (See Instructions Penfold Theatre Compa			
	Date 06/05/2024	Johnson, Jeffrey Contributor address; City; State;)		Amount of Contribution (\$)	\$40.00
	Principal occu	Austin, TX 78729 pation / Job title (See Instructions)		Employer (See Instructions	<u> </u>		
	Quality Engi			Flex	,		
	Date 01/09/2024	Full name of contributor Jones, Robert Contributor address; City; State;	out-of-state PAC (ID#: Zip Code			Amount of Contribution (\$)	\$10.00
		Dallas, TX 75218					
	Principal occu Investor	pation / Job title (See Instructions)		Employer (See Instructions Self-Employed	i)		
	Date 02/09/2024	Jones, Robert Contributor address; City; State;	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$10.00
	Principal occu	Dallas, TX 75218 pation / Job title (See Instructions)		Employer (See Instructions Self-Employed	5)		
	Date 03/09/2024	Full name of contributor Jones, Robert Contributor address; City; State; Dallas, TX 75218	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$10.00
	Principal occu Investor	pation / Job title (See Instructions)		Employer (See Instructions Self-Employed	()		
			·				

	MONET	ARY POLITICAL CONTRIBUTION	ONS	SCHEDULE A			
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 39/91 Rpt: 42/155		
2	FILER NAME Bucy III, Joh	n H. (The Honorable)		3	Filer ID (Ethics Commission 00069589	n Filers)	
4	Date 04/09/2024	 Full name of contributor out-of-state PAC (ID#:_ Jones, Robert Contributor address; City; State; Zip Code 		7	Amount of Contribution (\$)	\$10.00	
		Dallas, TX 75218					
8	Principal occu Investor	pation / Job title (See Instructions)	9 Employer (See Instructions) Self-Employed)			
	Date 05/09/2024	Full name of contributor out-of-state PAC (ID#:_ Jones, Robert Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$10.00	
	Dringing! goog	Dallas, TX 75218	Employer (Co.) Instructions				
	Investor	pation / Job title (See Instructions)	Employer (See Instructions Self-Employed)			
	Date 06/09/2024	Full name of contributor out-of-state PAC (ID#:_ Jones, Robert Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$10.00	
		Dallas, TX 75218					
	Principal occu Investor	pation / Job title (See Instructions)	Employer (See Instructions Self-Employed)			
	Date 06/26/2024	Full name of contributor out-of-state PAC (ID#:_ Jones, Robert Contributor address; City; State; Zip Code Dallas, TX 75218)		Amount of Contribution (\$)	\$20.00	
	Principal occu Investor	pation / Job title (See Instructions)	Employer (See Instructions Self-Employed)			
	Date 06/11/2024	Full name of contributor out-of-state PAC (ID#:_ Jones, Sammie Contributor address; City; State; Zip Code Houston, TX 77064)		Amount of Contribution (\$)	\$50.00	
	Principal occu Psychothera	pation / Job title (See Instructions) pist	Employer (See Instructions Houston Psychotherapis				

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDULE A1
	The Instruc	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 40/91 Rpt: 43/155
2	FILER NAME Bucy III, Joh	n H. (The Honorable)		3	Filer ID (Ethics Commission Filers) 00069589
4	Date 06/17/2024	 Full name of contributor		7	Amount of Contribution (\$) \$2,500.00
Ω	Principal occu	Farmers Branch, TX 75234 pation / Job title (See Instructions)	9 Employer (See Instructions		
0	Fillicipal occu	pation / 30b title (See Instructions)	3 Employer (See instructions	')	
	Date 06/08/2024	Full name of contributor out-of-state PAC (ID#: Keller, Roni Contributor address; City; State; Zip Code			Amount of Contribution (\$) \$11.00
	Principal occu	Newbury Park, CA 91320 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>	
	Attorney	,	Self-Employed	,	
	Date 05/17/2024	Full name of contributor)		Amount of Contribution (\$) \$100.00
		Cedar Park, TX 78613			
	Principal occu Not Employe	pation / Job title (See Instructions) ed	Employer (See Instructions N/A	5)	
	Date 01/09/2024	Full name of contributor out-of-state PAC (ID#: King, Henry Contributor address; City; State; Zip Code Round Rock, TX 78664			Amount of Contribution (\$) \$10.00
	Principal occu Technician	pation / Job title (See Instructions)	Employer (See Instructions Hulk Automotive	5)	
	Date 02/09/2024	Full name of contributor out-of-state PAC (ID#: King, Henry Contributor address; City; State; Zip Code Round Rock, TX 78664			Amount of Contribution (\$) \$10.00
	Principal occu Technician	pation / Job title (See Instructions)	Employer (See Instructions Hulk Automotive)	

	MONET	ARY POLITICAL CONTR	SCHEDULE A				
	The Instru	ction Guide explains how to compl	lete this form	n.	1	Total pages Schedule A1: Sch: 41/91 Rpt: 44/155	
2	FILER NAME Bucy III, Joh	n H. (The Honorable)			3	Filer ID (Ethics Commission 00069589	r Filers)
4	Date 03/09/2024	 Full name of contributor out-of-star	e)	7	Amount of Contribution (\$)	\$10.00
_	Deignaignal	Round Rock, TX 78664	lo.	Franks or (Cook batturations			
8	Technician	pation / Job title (See Instructions)	9	Employer (See Instructions Hulk Automotive	5)		
	Date 04/09/2024	King, Henry				Amount of Contribution (\$)	\$10.00
	Principal occu	Round Rock, TX 78664 pation / Job title (See Instructions)	-	Employer (See Instructions	·/		
	Technician	pation / Job title (See Instituctions)		Hulk Automotive))		
	Date 05/09/2024	King, Henry				Amount of Contribution (\$)	\$10.00
		Round Rock, TX 78664					
	Principal occu Technician	pation / Job title (See Instructions)		Employer (See Instructions Hulk Automotive	5)		
	Date 06/09/2024	King, Henry				Amount of Contribution (\$)	\$10.00
	Principal occu Technician	pation / Job title (See Instructions)		Employer (See Instructions Hulk automotive	<u>l</u> 5)		
	Date 06/10/2024	King, Robert)		Amount of Contribution (\$)	\$10.00
	Principal occu Therapist	pation / Job title (See Instructions)		Employer (See Instructions Harris Health	s)		
	<u> </u>		l				

	MONET	ARY POLITICAL CONTR	S		SCHEDUL	E A1	
	The Instruc	ction Guide explains how to compl	lete this forr	n.	1	Total pages Schedule A1: Sch: 42/91 Rpt: 45/155	
2	FILER NAME Bucy III, Joh	n H. (The Honorable)			3	Filer ID (Ethics Commission 00069589	n Filers)
4	Date 05/21/2024	 5 Full name of contributor out-of-sta)	7	Amount of Contribution (\$)	\$40.00
8		Austin, TX 78757 pation / Job title (See Instructions)	9	Employer (See Instructions Tech Ranch	 i)		
	Date 06/26/2024	Full name of contributor out-of-sta Lannen, Virginia Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$500.00
	Principal occu	Dallas, TX 75223 pation / Job title (See Instructions)		Employer (See Instructions Pegasus School	<u> </u> 5)		
	Date 06/30/2024	Largent, Bill Contributor address; City; State; Zip Code	e)		Amount of Contribution (\$)	\$25.00
		pation / Job title (See Instructions)		Employer (See Instructions The Georgetown Projec	•		
Program Director Date Full name of contributor out-of-state PAC (ID# 06/18/2024 Lars, Max Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$100.00	
	Principal occu Policy Adviso	Austin, TX 78729 pation / Job title (See Instructions) or		Employer (See Instructions City Of Austin	<u> </u> s)		
	Date 06/30/2024	Full name of contributor out-of-state Lawrence, Charlotte Contributor address; City; State; Zip Code Austin, TX 78750	tte PAC (ID#:			Amount of Contribution (\$)	\$10.00
	Principal occu Sales Lead	pation / Job title (See Instructions)		Employer (See Instructions Chicos	s)		
			•				

	MONET	ARY POLITICAL CO		SCHEDULE	■ A1		
	The Instruc	ction Guide explains how to	complete this form	n.	1	Total pages Schedule A1: Sch: 43/91 Rpt: 46/155	
2	FILER NAME Bucy III, John	n H. (The Honorable)			3	Filer ID (Ethics Commission 00069589	ı Filers)
4	Date 01/28/2024	Lester, Brigid	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	\$10.00
_	Deinainal assu	Cedar Park, TX 78613	la-	Frankrije (Coo kookujetia pa			
8	Not Employe	pation / Job title (See Instructions) d		Employer (See Instructions N/A	5)		
	Date 02/28/2024	Full name of contributor Lester, Brigid Contributor address; City; State;				Amount of Contribution (\$)	\$10.00
		Cedar Park, TX 78613					
	Not Employe	pation / Job title (See Instructions) d		Employer (See Instructions N/A	5)		
	Date 03/28/2024	Full name of contributor Lester, Brigid Contributor address; City; State;	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$10.00
		Cedar Park, TX 78613					
	Principal occu Not Employe	pation / Job title (See Instructions) d		Employer (See Instructions N/A	i)		
Date Full name of contributor out-of-state PAC (ID#:_04/28/2024 Lester, Brigid Contributor address; City; State; Zip Code		out-of-state PAC (ID#:			Amount of Contribution (\$)	\$10.00	
	Principal occu Not Employe	Cedar Park, TX 78613 pation / Job title (See Instructions) d		Employer (See Instructions N/A	<u> </u>		
	Date 05/28/2024	Full name of contributor Lester, Brigid Contributor address; City; State; Cedar Park, TX 78613	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$10.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions N/A	5)		
			L				

	MONEI	ARY POLITICAL C		SCHEDULE A1			
	The Instru	ction Guide explains how	to complete this fo	rm.	1	Total pages Schedule A1: Sch: 44/91 Rpt: 47/155	
2	FILER NAME	n H. (The Honorable)			3	Filer ID (Ethics Commission 00069589	n Filers)
4	Date Date	5 Full name of contributor	7)	-	Amount of Contribution (\$)	
4	06/28/2024	Lester, Brigid 6 Contributor address; City; Sta	out-of-state PAC (ID#: te; Zip Code		 	Amount of Contribution (5)	\$10.00
•	Dringing aggr	Cedar Park, TX 78613	lo.	Employer (Coe Instructional			
8	Not Employe	pation / Job title (See Instructions) ed	9	Employer (See Instructions N/A	5)		
	Date 06/26/2024	Full name of contributor Lester, Jason Contributor address; City; Sta	out-of-state PAC (ID#: te; Zip Code			Amount of Contribution (\$)	\$40.00
	Deinsinal assu	Georgetown, TX 78628		Francis vou (Coo la structions	<u></u>		
		pation / Job title (See Instructions) ashion/Apparel		Employer (See Instructions Self-Employed	5)		
	Date 03/04/2024	Full name of contributor [Levin, Andi Contributor address; City; Sta	out-of-state PAC (ID#: te; Zip Code)		Amount of Contribution (\$)	\$25.00
		Redmond, WA 98052					
	Principal occu Project Mana	pation / Job title (See Instructions) ager		Employer (See Instructions Self-Employed	5)		
		out-of-state PAC (ID#:		•	Amount of Contribution (\$)	\$25.00	
	Principal occu Librarian	pation / Job title (See Instructions)		Employer (See Instructions Round Rock ISD	5)		
	Date 02/12/2024	Full name of contributor Liberal Austin Democrats Contributor address; City; Sta Austin, TX 78765	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$100.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		

	MONEI	ARY POLITICAL C		SCHEDULE A1			
	The Instru	ction Guide explains how	to complete this for	m.	1	Total pages Schedule A1: Sch: 45/91 Rpt: 48/155	
2	FILER NAME				3	Filer ID (Ethics Commission	Filers)
	Bucy III, Joh	n H. (The Honorable)				00069589	
4	Date 06/17/2024	5 Full name of contributor [Litwin, Stuart6 Contributor address; City; Sta	out-of-state PAC (ID#: te; Zip Code)	7	Amount of Contribution (\$)	\$80.00
		Round Rock, TX 78681					
8	Principal occu Consultant	pation / Job title (See Instructions)	9	Employer (See Instructions Self-Employed	5)		
	Date 01/01/2024	Full name of contributor [Lutes, Lavern Contributor address; City; Sta	out-of-state PAC (ID#: te; Zip Code			Amount of Contribution (\$)	\$25.00
		Austin, TX 78729			_		
	Electrical En	pation / Job title (See Instructions)		Employer (See Instructions Psemi Corporation	5)		
	Date Full name of contributor out-of-state PAC (ID#:		, com corporation		Amount of Contribution (\$)		
02/01/2024		Lutes, Lavern				Amount of Contribution (\$)	\$25.00
		Austin, TX 78729					
	Principal occu Electrical En	pation / Job title (See Instructions) gineer		Employer (See Instructions Psemi Corporation	i)		
			out-of-state PAC (ID#: te; Zip Code)		Amount of Contribution (\$)	\$25.00
	Principal occu Electrical En	pation / Job title (See Instructions) gineer		Employer (See Instructions Psemi Corporation	5)		
	Date 03/23/2024	Full name of contributor Lutes, Lavern Contributor address; City; Sta Austin, TX 78729	out-of-state PAC (ID#: te; Zip Code			Amount of Contribution (\$)	\$30.00
	Principal occu Electrical En	pation / Job title (See Instructions) gineer		Employer (See Instructions Psemi Corporation)		

	MONEI	ARY POLITICAL C	CONTRIBUTIO	NS		SCHEDULI	E A1
	The Instruc	ction Guide explains how	to complete this fo	rm.	1	Total pages Schedule A1: Sch: 46/91 Rpt: 49/155	
2	FILER NAME Bucv III. Joh	n H. (The Honorable)			3	Filer ID (Ethics Commission 00069589	r Filers)
4	Date 03/23/2024	5 Full name of contributor Lutes, Lavern6 Contributor address; City; St	out-of-state PAC (ID#:ate; Zip Code)	7	Amount of Contribution (\$)	\$25.00
8	Electrical En			Employer (See Instructions Psemi Corporation	<u> </u> s)		
	Date 04/01/2024	Full name of contributor Lutes, Lavern Contributor address; City; St Austin, TX 78729	out-of-state PAC (ID#: ate; Zip Code)		Amount of Contribution (\$)	\$25.00
	Principal occu Electrical En	pation / Job title (See Instructions gineer)	Employer (See Instructions Psemi Corporation	5)		
	Date 05/01/2024	Full name of contributor Lutes, Lavern Contributor address; City; St	out-of-state PAC (ID#:)	•	Amount of Contribution (\$)	\$25.00
		Austin, TX 78729			<u>_</u>		
	Electrical En	pation / Job title (See Instructions gineer)	Employer (See Instructions Psemi Corporation	5)		
	Date 05/10/2024	Full name of contributor Lutes, Lavern Contributor address; City; St Austin, TX 78729	out-of-state PAC (ID#:		•	Amount of Contribution (\$)	\$80.00
	Principal occu Electrical En	pation / Job title (See Instructions gineer		Employer (See Instructions Psemi Corporation	5)		
	Date 06/01/2024	Full name of contributor Lutes, Lavern Contributor address; City; St Austin, TX 78729	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$25.00
	Principal occu Electrical En	pation / Job title (See Instructions gineer)	Employer (See Instructions Psemi Corporation	s)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 47/91 Rpt: 50/155	
2	FILER NAME Bucy III, Joh	ın H. (The Honorable)		3	Filer ID (Ethics Commission 00069589	n Filers)
4	Date 06/27/2024	Full name of contributor)	7	Amount of Contribution (\$)	\$100.00
_	Discipal	Austin, TX 78729	D. Faralana (Garalantina)			
8	Electrical En	pation / Job title (See Instructions) ngineer	9 Employer (See Instructions Psemi Corporation	<u></u>		
	Date 06/12/2024	Full name of contributor out-of-state PAC (ID#:_Lytton, Lynn Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$25.00
	Dringing occu	Austin, TX 78750-1764 upation / Job title (See Instructions)	Employer (See Instructions			
	Physician Physician	pation / Job title (See Instructions)	MAPS for Recovery	')		
	Date 01/10/2024	Full name of contributor out-of-state PAC (ID#:_ Manning, Dr. Sam Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$10.00
		Round Rock, TX 78664				
	Principal occu Not Employe	upation / Job title (See Instructions) ed	Employer (See Instructions N/A	i)		
	Date 03/14/2024	Full name of contributor out-of-state PAC (ID#:_ Manning, Dr. Sam Contributor address; City; State; Zip Code Round Rock, TX 78664			Amount of Contribution (\$)	\$10.00
	Principal occu	Ipation / Job title (See Instructions)	Employer (See Instructions N/A	<u>;</u>)		
	Date 04/24/2024	Full name of contributor out-of-state PAC (ID#:_Manning, Sam (Dr.) Contributor address; City; State; Zip Code Round Rock, TX 78664			Amount of Contribution (\$)	\$25.00
	Principal occu Not Employe	upation / Job title (See Instructions) ed	Employer (See Instructions N/A)		

	MONET	ARY POLITICAL (CONTRIBUTIO	N	IS		SCHEDULE	■ A1
	The Instruc	ction Guide explains hov	v to complete this f	orı	m.	1	Total pages Schedule A1: Sch: 48/91 Rpt: 51/155	
2	FILER NAME Bucy III, John	n H. (The Honorable)				3	Filer ID (Ethics Commission 00069589	Filers)
4	Date 05/06/2024	5 Full name of contributor Manning, Sam (Dr.)6 Contributor address; City; S	out-of-state PAC (ID#:_ tate; Zip Code			7	Amount of Contribution (\$)	\$10.00
8	Principal occu	Round Rock, TX 78664 pation / Job title (See Instruction:	s)	9	Employer (See Instructions	 s)		
	Not Employe				N/A			
	Date 06/01/2024	Full name of contributor Manning, Sam (Dr.) Contributor address; City; S	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$10.00
	Principal occur	Round Rock, TX 78664 pation / Job title (See Instruction	3)		Employer (See Instructions	s) 		
	Not Employe		-)		N/A	•)		
	Date 01/30/2024	Full name of contributor Martin, Elizabeth Contributor address; City; S	out-of-state PAC (ID#:_				Amount of Contribution (\$)	\$50.00
		Georgetown, TX 78628						
	Principal occu Not Employe	pation / Job title (See Instruction ed	5)		Employer (See Instructions N/A	s)		
	Date 02/29/2024	Full name of contributor Martin, Elizabeth Contributor address; City; S Georgetown, TX 78628)	•	Amount of Contribution (\$)	\$50.00
	Principal occu Not Employe	pation / Job title (See Instructionadd	5)		Employer (See Instructions N/A	5)		
	Date 03/30/2024	Full name of contributor Martin, Elizabeth Contributor address; City; S Georgetown, TX 78628	out-of-state PAC (ID#:_				Amount of Contribution (\$)	\$50.00
	Principal occu Not Employe	pation / Job title (See Instructionard	5)		Employer (See Instructions N/A	5)		

	MONET	ARY POLITICAL (CONTRIBUTIO	N	S		SCHEDUI	E A1
	The Instruc	ction Guide explains hov	v to complete this f	orı	n.	1	Total pages Schedule A1: Sch: 49/91 Rpt: 52/155	
2	FILER NAME Bucy III, John	n H. (The Honorable)				3	Filer ID (Ethics Commission 00069589	on Filers)
4	Date 04/30/2024	5 Full name of contributor Martin, Elizabeth6 Contributor address; City; S	out-of-state PAC (ID#:_ tate; Zip Code			7	Amount of Contribution (\$)	\$50.00
8	Principal occur	Georgetown, TX 78628 pation / Job title (See Instructions	3)	9	Employer (See Instructions	<u>;)</u>		
	Not Employe		-)		N/A	-,		
	Date 05/30/2024	Full name of contributor Martin, Elizabeth Contributor address; City; S	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$50.00
	Daine in all an ann	Georgetown, TX 78628			Faralassa (Osa lastrustisas	<u></u>		
	Not Employe	pation / Job title (See Instructions d	5)		Employer (See Instructions N/A	5)		
	Date 06/30/2024	Full name of contributor Martin, Elizabeth Contributor address; City; S	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$50.00
		Georgetown, TX 78628				<u></u>		
	Not Employe	pation / Job title (See Instructions d	5)		Employer (See Instructions N/A	S)		
	Date 03/05/2024	Full name of contributor Martin, Maria Contributor address; City; S Cedar Park, TX 78613	out-of-state PAC (ID#:_)	•	Amount of Contribution (\$)	\$1,000.00
	Principal occu Not employe	pation / Job title (See Instructions	5)		Employer (See Instructions N/A	5)		
	Date 05/31/2024	Full name of contributor Mason, Barbara Contributor address; City; S Austin, TX 78726	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$40.00
	Principal occup Not Employe	pation / Job title (See Instructions	5)		Employer (See Instructions N/A	s)		

	MONET	ARY POLITICAL CONTRIBUTION	DNS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 50/91 Rpt: 53/155	
2	FILER NAME Bucy III, Joh	in H. (The Honorable)		3	Filer ID (Ethics Commission 00069589	n Filers)
4	Date 05/29/2024	 Full name of contributor out-of-state PAC (ID#:_Mattingly, Jennifer Contributor address; City; State; Zip Code 		7	Amount of Contribution (\$)	\$125.00
_		Round Rock, TX 78681	T			
8	Principal occu Lawyer	pation / Job title (See Instructions)	Employer (See Instructions Self-Employed	5)		
	Date 06/11/2024	Full name of contributor out-of-state PAC (ID#:_ McCullen, Carter Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$40.00
	Principal occu	Del Valle, TX 78617 Ipation / Job title (See Instructions) gement	Employer (See Instructions	5)		
	Date 06/17/2024	Full name of contributor out-of-state PAC (ID#:_McKenzie, Glen Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$40.00
	Principal occu	Cedar Park, TX 78613-6208 upation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Not Employe		N/A	,		
	Date 05/09/2024	Full name of contributor out-of-state PAC (ID#:_ Mcnary, Meenal Contributor address; City; State; Zip Code Round Rock, TX 78664			Amount of Contribution (\$)	\$40.00
	Principal occu Dentist	pation / Job title (See Instructions)	Employer (See Instructions Mneg	5)		
	Date 05/21/2024	Full name of contributor out-of-state PAC (ID#:_Melendrez, Eli Contributor address; City; State; Zip Code Austin, TX 78705			Amount of Contribution (\$)	\$125.00
	Principal occu Researcher	pation / Job title (See Instructions)	Employer (See Instructions Texas AFT	()		

	MONET	ARY POLITICAL CO	ONTRIBUTION	S		SCHEDUL	E A1
	The Instruc	ction Guide explains how to	complete this form	n.	1	Total pages Schedule A1: Sch: 51/91 Rpt: 54/155	
2	FILER NAME Bucy III, John	n H. (The Honorable)			3	Filer ID (Ethics Commission 00069589	n Filers)
4	Date 06/12/2024	5 Full name of contributor Miller, Jeff6 Contributor address; City; State	out-of-state PAC (ID#:; Zip Code)	7	Amount of Contribution (\$)	\$250.00
8	Dringing aggr	Austin, TX 78732 pation / Job title (See Instructions)	lo.	Employer (See Instructions			
0	Government		9	Old Stone Strategy	')		
	Date 06/24/2024	Full name of contributor Miller, Kent (Rev.) Contributor address; City; State Austin, TX 78729				Amount of Contribution (\$)	\$100.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Not Employe	ed		N/A			
	Date 06/30/2024	Full name of contributor Miller, Kent (Rev.) Contributor address; City; State	out-of-state PAC (ID#: ; Zip Code)		Amount of Contribution (\$)	\$100.00
	Principal occur	Austin, TX 78729 pation / Job title (See Instructions)		Employer (See Instructions	·/		
	Not Employe	, , , , , , , , , , , , , , , , , , , ,		N/A	')		
	Date 06/30/2024	Full name of contributor Miller, Luanne Contributor address; City; State Leander, TX 78641	out-of-state PAC (ID#:; Zip Code)		Amount of Contribution (\$)	\$50.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions N/A	()		
	Date 01/18/2024	Full name of contributor Mitchell, John Contributor address; City; State Austin, TX 78756	out-of-state PAC (ID#:; Zip Code)		Amount of Contribution (\$)	\$25.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions N/A	i)		

	MONET	ARY POLITICAL C	ONTRIBUTION	IS		SCHEDULI	E A1
	The Instruc	ction Guide explains how	to complete this for	m.	1	Total pages Schedule A1: Sch: 52/91 Rpt: 55/155	
2	FILER NAME Bucy III, John	n H. (The Honorable)			3	Filer ID (Ethics Commission 00069589	ı Filers)
4	Date 02/18/2024	5 Full name of contributor Mitchell, John6 Contributor address; City; Sta	out-of-state PAC (ID#: ate; Zip Code		7	Amount of Contribution (\$)	\$25.00
8	Principal occu	Austin, TX 78756 pation / Job title (See Instructions)	9	Employer (See Instructions	 s)		
	Not Employe			N/A	,		
	Date 03/18/2024	Full name of contributor Mitchell, John Contributor address; City; Sta				Amount of Contribution (\$)	\$25.00
	Dringinal occur	Austin, TX 78756 pation / Job title (See Instructions)		Employer (See Instructions	<u>'</u>		
	Not Employe			N/A	>)		
	Date 04/18/2024	Full name of contributor Mitchell, John Contributor address; City; Sta	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$25.00
		Austin, TX 78756					
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions N/A	5)		
	Date 05/18/2024	Full name of contributor Mitchell, John Contributor address; City; Sta	out-of-state PAC (ID#:ate; Zip Code)	•	Amount of Contribution (\$)	\$25.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions N/A	5)		
	Date 06/18/2024	Full name of contributor Mitchell, John Contributor address; City; Sta	out-of-state PAC (ID#:		•	Amount of Contribution (\$)	\$25.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions N/A	5)		

	MONET	ARY POLITICAL CONTRIBUTION	DNS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 53/91 Rpt: 56/155	
2	FILER NAME Bucy III, Joh	in H. (The Honorable)		3	Filer ID (Ethics Commission 00069589	n Filers)
4	Date 06/17/2024	 Full name of contributor out-of-state PAC (ID#:_Montgomery, Hilda (The Honorable) Contributor address; City; State; Zip Code 		7	Amount of Contribution (\$)	\$125.00
_	Deignaignal annu	Round Rock, TX 78681	In Francisco (Con Instructions			
8	Retired	pation / Job title (See Instructions)	Employer (See Instructions N/A			
	Date 06/30/2024	Full name of contributor out-of-state PAC (ID#:_ Morales, James Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$50.00
		Round Rock, TX 78664 pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Tech		Big Tech Co			
	Date 01/30/2024	Full name of contributor out-of-state PAC (ID#:_ Morgan, Paul Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$25.00
		Houston, TX 77064-4273				
	Principal occu Not Employe	pation / Job title (See Instructions) ed	Employer (See Instructions N/A	5)		
	Date 02/29/2024	Full name of contributor out-of-state PAC (ID#:_ Morgan, Paul Contributor address; City; State; Zip Code Houston, TX 77064-4273			Amount of Contribution (\$)	\$25.00
	Principal occu Not Employe	I pation / Job title (See Instructions)	Employer (See Instructions N/A	5)		
	Date 03/30/2024	Full name of contributor out-of-state PAC (ID#:_Morgan, Paul Contributor address; City; State; Zip Code Houston, TX 77064-4273			Amount of Contribution (\$)	\$25.00
	Principal occu Not Employe	upation / Job title (See Instructions) ed	Employer (See Instructions N/A	<u> </u>		

	MONET	ARY POLITICAL CONTRIB	UTION	IS		SCHEDULI	E A1
	The Instruc	ction Guide explains how to complete	this for	m.	1	Total pages Schedule A1: Sch: 54/91 Rpt: 57/155	
2	FILER NAME Bucy III, Johi	n H. (The Honorable)			3	Filer ID (Ethics Commission 00069589	n Filers)
4	Date 04/30/2024	 Full name of contributor out-of-state PA Morgan, Paul Contributor address; City; State; Zip Code 			7	Amount of Contribution (\$)	\$25.00
8	Principal occur	Houston, TX 77064-4273	ام	Employer (See Instruction	<u></u>		
0	Not Employe	oation / Job title (See Instructions) d	9	Employer (See Instructions N/A	>)		
	Date 05/30/2024	Full name of contributor out-of-state PA Morgan, Paul Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$25.00
	Deirechart	Houston, TX 77064-4273	1	Faralas an (Cara la struction	<u> </u>		
	Not Employe	oation / Job title (See Instructions) d		Employer (See Instructions N/A	S)		
	Date 06/30/2024	Full name of contributor out-of-state PA Morgan, Paul Contributor address; City; State; Zip Code	AC (ID#:			Amount of Contribution (\$)	\$25.00
		Houston, TX 77064-4273					
	Principal occup Not Employe	pation / Job title (See Instructions) d		Employer (See Instructions N/A	5)		
	Date 02/27/2024	Full name of contributor out-of-state PA Murphy, Kevin Contributor address; City; State; Zip Code Leander, TX 78641)		Amount of Contribution (\$)	\$50.00
	Principal occup	pation / Job title (See Instructions)		Employer (See Instructions N/A	5)		
	Date 01/23/2024	Full name of contributor out-of-state PAMuse, Walter Contributor address; City; State; Zip Code Austin, TX 78727				Amount of Contribution (\$)	\$25.00
	Principal occup	pation / Job title (See Instructions)		Employer (See Instructions State of Texas	s)		
	-						

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDULI	E A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 55/91 Rpt: 58/155	
2	FILER NAME Bucy III, Joh	n H. (The Honorable)		3	Filer ID (Ethics Commission 00069589	n Filers)
4	Date 02/23/2024	5 Full name of contributor out-of-state PAC (ID#:_ Muse, Walter 6 Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$)	\$25.00
_	<u></u>	Austin, TX 78727				
8	Attorney	pation / Job title (See Instructions)	9 Employer (See Instructions) State of Texas)		
	Date 06/18/2024	Full name of contributor out-of-state PAC (ID#:_ Muse, Walter Contributor address; City; State; Zip Code Austin, TX 78727			Amount of Contribution (\$)	\$45.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 03/23/2024	Full name of contributor out-of-state PAC (ID#:_ Muse, Walter Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$25.00
		Austin, TX 78727				
	Attorney	pation / Job title (See Instructions)	Employer (See Instructions) State of Texas)		
	Date 04/23/2024	Full name of contributor out-of-state PAC (ID#:_ Muse, Walter Contributor address; City; State; Zip Code Austin, TX 78727)		Amount of Contribution (\$)	\$25.00
	Principal occu Attorney	pation / Job title (See Instructions)	Employer (See Instructions State of Texas)		
	Date 05/23/2024	Full name of contributor out-of-state PAC (ID#:_Muse, Walter Contributor address; City; State; Zip Code Austin, TX 78727			Amount of Contribution (\$)	\$25.00
	Principal occu Attorney	pation / Job title (See Instructions)	Employer (See Instructions State of Texas)		

	MONET	ARY POLITICAL C	ONTRIBUTION	IS		SCHEDUL	E A1
	The Instru	ction Guide explains how	to complete this for	m.	1	Total pages Schedule A1: Sch: 56/91 Rpt: 59/155	
2	FILER NAME Bucy III, Joh	n H. (The Honorable)			3	Filer ID (Ethics Commission 00069589	n Filers)
4	Date 06/23/2024	5 Full name of contributor Muse, Walter	out-of-state PAC (ID#: te; Zip Code)	7	Amount of Contribution (\$)	\$25.00
8	Principal occu	Austin, TX 78727 pation / Job title (See Instructions)	<u> </u>	Employer (See Instructions	<u>s)</u>		
Ū	Attorney	pation 7 oob title (Oce motivetions)		State of Texas	٠,		
	Date 06/04/2024	Full name of contributor Naranjo, Katie (The Honora Contributor address; City; Sta	······)		Amount of Contribution (\$)	\$250.00
	Principal occu	Austin, TX 78731 pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> s)		
	CEO	,		A Pineywoods Home He		h Care Inc.	
	Date 06/04/2024	Full name of contributor Nations, Julia Contributor address; City; Sta	out-of-state PAC (ID#: te; Zip Code)	•	Amount of Contribution (\$)	\$25.00
		Cedar Park, TX 78613					
	Principal occu Not Employe	pation / Job title (See Instructions) ed		Employer (See Instructions N/A	S)		
	Date 06/05/2024	Full name of contributor Nilson, Margaret Contributor address; City; Sta	out-of-state PAC (ID#: te; Zip Code)	•	Amount of Contribution (\$)	\$130.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions N/A	5)		
	Date 01/04/2024	Full name of contributor Oliver, Jesse Contributor address; City; Sta	out-of-state PAC (ID#:)	•	Amount of Contribution (\$)	\$100.00
	Principal occu Attorney	pation / Job title (See Instructions)		Employer (See Instructions Self-Employed	5)		
			<u>'</u>				

	MONET	ARY POLITICAL CONTRII	BUTION	S		SCHEDUI	E A1
	The Instruc	ction Guide explains how to comple	ete this forn	n.	1	Total pages Schedule A1: Sch: 57/91 Rpt: 60/155	
2	FILER NAME Bucy III, Joh	n H. (The Honorable)			3	Filer ID (Ethics Commission 00069589	on Filers)
4	Date 06/17/2024	 Full name of contributor out-of-state Oliver, Jesse (The Honorable) Contributor address; City; State; Zip Code 			7	Amount of Contribution (\$)	\$200.00
8	Principal occu	Dallas, TX 75224 pation / Job title (See Instructions)	9	Employer (See Instructions) ()		
Ŭ	Attorney	pation / vob tale (oce mondetions)		Self-Employed	')		
	Date 06/11/2024	Olson, Lyndon)		Amount of Contribution (\$)	\$500.00
	Dringing aggr	Waco, TX 76710		Employer (See Instructions	_		
	Not Employe	pation / Job title (See Instructions) d		Employer (See Instructions N/A)		
	Date 04/15/2024	Full name of contributor out-of-state Oncor Texas State PAC Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$1,500.00
		Dallas, TX 75202					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	i)		
	Date 06/17/2024	Oney, Thomas)		Amount of Contribution (\$)	\$500.00
	Principal occu External Affa	pation / Job title (See Instructions) irs		Employer (See Instructions LCRA)		
	Date 06/10/2024	Full name of contributor out-of-state Orozco, Andrea Contributor address; City; State; Zip Code Brownsville, TX 78520				Amount of Contribution (\$)	\$25.00
	Principal occu Advocacy Le	pation / Job title (See Instructions)		Employer (See Instructions Interfaith Power & Light		1V	
			L_			•	

	MONET	NETARY POLITICAL CONTRIBUTIONS				SCHEDULE A1			
	The Instruc	ction Guide explains how to complete t	this for	m.	1	Total pages Schedule A1: Sch: 58/91 Rpt: 61/155			
2	FILER NAME Bucy III, Joh	n H. (The Honorable)			3	Filer ID (Ethics Commission 00069589	n Filers)		
4	Date 03/01/2024	 Full name of contributor out-of-state PAC Orr, Anita Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$)	\$150.00		
_	Dringing Loon	Round Rock, TX 78681	اما	Employer (Coa Instructions	_				
0	Principal occu	pation / Job title (See Instructions)	٩	Employer (See Instructions)				
	Date 06/18/2024	Full name of contributor out-of-state PAC Ortega, Francisco (The Honorable) Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$250.00		
	Principal occu	Round Rock, TX 78664 pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> ;)				
	Realtor			Keller Williams Realty	,				
	Date 06/16/2024	Full name of contributor out-of-state PAC Packard, Karen Contributor address; City; State; Zip Code	C (ID#:)		Amount of Contribution (\$)	\$50.00		
		Cedar Park, TX 78613							
	Principal occu Retired	pation / Job title (See Instructions)		Employer (See Instructions N/A	s)				
	Date 06/18/2024	Full name of contributor out-of-state PAC Parker, James Contributor address; City; State; Zip Code Austin, TX 78701				Amount of Contribution (\$)	\$20.00		
	•	pation / Job title (See Instructions) Relations Associate		Employer (See Instructions Public Blueprint	5)				
	Date 05/08/2024	Full name of contributor out-of-state PAC Pelosi, Jan Contributor address; City; State; Zip Code Austin, TX 78717)		Amount of Contribution (\$)	\$500.00		
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions N/A	5)				
			,						

	MONET	ETARY POLITICAL CONTRIBUTIONS				SCHEDULE A1			
	The Instruc	ction Guide explains how	to complete this fo	orı	n.	1	Total pages Schedule A1: Sch: 59/91 Rpt: 62/155		
2	FILER NAME Bucy III, John	n H. (The Honorable)				3	Filer ID (Ethics Commission 00069589	n Filers)	
4	Date 05/22/2024	5 Full name of contributorPfeil, Rick6 Contributor address; City; S	out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	\$160.00	
8	Principal occur	Taylor, TX 76574 pation / Job title (See Instructions	.)	a	Employer (See Instructions	;) 			
0	Not Employe		,,	3	N/A	P)			
	Date 01/02/2024	Full name of contributor Piner, Elizabeth Contributor address; City; S					Amount of Contribution (\$)	\$25.00	
	Delicalization	Austin, TX 78729	,		For all and a Constructions	<u></u>			
	Not Employe	pation / Job title (See Instructions ed	5)		Employer (See Instructions N/A	5)			
	Date 01/14/2024	Full name of contributor Piner, Elizabeth Contributor address; City; S	out-of-state PAC (ID#:_)	•	Amount of Contribution (\$)	\$50.00	
		Austin, TX 78729							
	Principal occu Not Employe	pation / Job title (See Instructionsed	;)		Employer (See Instructions N/A	s)			
	Date 01/29/2024	Full name of contributor Piner, Elizabeth Contributor address; City; S Austin, TX 78729)		Amount of Contribution (\$)	\$25.00	
	Principal occu Not Employe	pation / Job title (See Instructions	5)		Employer (See Instructions N/A	5)			
	Date 02/14/2024	Full name of contributor Piner, Elizabeth Contributor address; City; S Austin, TX 78729	out-of-state PAC (ID#:_				Amount of Contribution (\$)	\$50.00	
	Principal occu Not Employe	pation / Job title (See Instructions	;)		Employer (See Instructions N/A	5)			

	MONET	ARY POLITICAL CO	NTRIBUTION	S		SCHEDULE	■ A1
	The Instruc	ction Guide explains how to	complete this forr	n.	1	Total pages Schedule A1: Sch: 60/91 Rpt: 63/155	
2	FILER NAME Bucy III, John	n H. (The Honorable)			3	Filer ID (Ethics Commission 00069589	Filers)
4	Date 02/29/2024	5 Full name of contributor Piner, Elizabeth6 Contributor address; City; State;			7	Amount of Contribution (\$)	\$25.00
8	Principal occur	Austin, TX 78729 pation / Job title (See Instructions)		Employer (See Instructions) 		
	Not Employe			N/A	''		
	Date 02/29/2024	Full name of contributor Piner, Elizabeth Contributor address; City; State;	out-of-state PAC (ID#:; Zip Code			Amount of Contribution (\$)	\$50.00
		Austin, TX 78729					
	Principal occup	pation / Job title (See Instructions) sistant		Employer (See Instructions NJ Pinelands Commissi			
	Date 03/29/2024	Full name of contributor Piner, Elizabeth Contributor address; City; State;	out-of-state PAC (ID#:;			Amount of Contribution (\$)	\$25.00
		Austin, TX 78729					
	Principal occu Not Employe	pation / Job title (See Instructions) d		Employer (See Instructions N/A	s)		
	Date 03/30/2024	Full name of contributor Piner, Elizabeth Contributor address; City; State; Austin, TX 78729	out-of-state PAC (ID#: ; Zip Code			Amount of Contribution (\$)	\$50.00
	Principal occu Planning Ass	pation / Job title (See Instructions) sistant		Employer (See Instructions NJ Pinelands Commissi			
	Date 04/02/2024	Full name of contributor Piner, Elizabeth Contributor address; City; State; Austin, TX 78729	out-of-state PAC (ID#:; Zip Code			Amount of Contribution (\$)	\$25.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions N/A	5)		
			'				

	MONET	ETARY POLITICAL CONTRIBUTIONS					SCHEDUL	E A1
	The Instruc	ction Guide explains how	to complete this fo	rr	n.	1	Total pages Schedule A1: Sch: 61/91 Rpt: 64/155	
2	FILER NAME Bucy III, Johi	n H. (The Honorable)				3	Filer ID (Ethics Commission 00069589	n Filers)
4		5 Full name of contributor Piner, Elizabeth	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	\$50.00
8	Principal occu	Austin, TX 78729 pation / Job title (See Instructions	s)	9	Employer (See Instructions	s)		
	Not Employe		,		N/A	,		
	Date 04/29/2024	Full name of contributor Piner, Elizabeth Contributor address; City; St)	•	Amount of Contribution (\$)	\$25.00
	Principal occur	Austin, TX 78729 pation / Job title (See Instructions			Employer (See Instructions	;) 		
	Not Employe)		N/A	P)		
	Date 04/29/2024	Full name of contributor Piner, Elizabeth Contributor address; City; St	out-of-state PAC (ID#:_			•	Amount of Contribution (\$)	\$165.00
		Austin, TX 78729						
	Principal occup	pation / Job title (See Instructions ed	s)		Employer (See Instructions N/A	s)		
	Date 04/30/2024	Full name of contributor Piner, Elizabeth Contributor address; City; St Austin, TX 78729	out-of-state PAC (ID#:_)	•	Amount of Contribution (\$)	\$50.00
	Principal occup	pation / Job title (See Instructions sistant	5)		Employer (See Instructions NJ Pinelands Commissi	•		
	Date 05/02/2024	Full name of contributor Piner, Elizabeth Contributor address; City; St Austin, TX 78729	out-of-state PAC (ID#:_				Amount of Contribution (\$)	\$25.00
	Principal occup Not Employe	pation / Job title (See Instructions	5)		Employer (See Instructions N/A	s)		
			,					

	MONET	ARY POLITICAL (CONTRIBUTIO	N	S		SCHEDULE	■ A1
	The Instruc	ction Guide explains how	to complete this fo	rr	n.	1	Total pages Schedule A1: Sch: 62/91 Rpt: 65/155	
2	FILER NAME Bucy III, Johi	n H. (The Honorable)				3	Filer ID (Ethics Commission 00069589	Filers)
4	Date 05/14/2024	5 Full name of contributor Piner, Elizabeth6 Contributor address; City; St	out-of-state PAC (ID#:ate; Zip Code			7	Amount of Contribution (\$)	\$50.00
8	Principal occur	Austin, TX 78729 pation / Job title (See Instructions	<u>, </u>	<u> </u>	Employer (See Instructions	=)		
•	Not Employe		,	J	N/A	P)		
	Date 05/29/2024	Full name of contributor Piner, Elizabeth Contributor address; City; St)		Amount of Contribution (\$)	\$25.00
	Deinsinal assu	Austin, TX 78729	, I		Franksian (Cookastanations	<u></u>		
	Not Employe	pation / Job title (See Instructions d)		Employer (See Instructions N/A	5)		
	Date 05/30/2024	Full name of contributor Piner, Elizabeth Contributor address; City; St	out-of-state PAC (ID#:_)	•	Amount of Contribution (\$)	\$50.00
		Austin, TX 78729						
	Principal occup	pation / Job title (See Instructions sistant)		Employer (See Instructions NJ Pinelands Commiss			
	Date 06/02/2024	Full name of contributor Piner, Elizabeth Contributor address; City; St Austin, TX 78729	out-of-state PAC (ID#:)	•	Amount of Contribution (\$)	\$25.00
	Principal occup	pation / Job title (See Instructions d)		Employer (See Instructions N/A	5)		
	Date 06/14/2024	Full name of contributor Piner, Elizabeth Contributor address; City; St Austin, TX 78729	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$50.00
	Principal occup	pation / Job title (See Instructions d)		Employer (See Instructions N/A	5)		
			,					

	MONEI	ARY POLITICAL (CONTRIBUTIO	N	S		SCHEDUL	E A1
	The Instru	ction Guide explains how	to complete this fo	orr	n.	1	Total pages Schedule A1: Sch: 63/91 Rpt: 66/155	
2	FILER NAME					3	Filer ID (Ethics Commission	n Filers)
	Bucy III, Joh	n H. (The Honorable)					00069589	
4	Date 06/18/2024	5 Full name of contributor Piner, Elizabeth6 Contributor address; City; S	out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	\$15.00
0	Dringing Local	Austin, TX 78729 pation / Job title (See Instructions	.) I	0	Employer /See Instructionary			
0	Not Employe		b)	9	Employer (See Instructions N/A	s)		
	Date 06/26/2024	Full name of contributor Piner, Elizabeth Contributor address; City; S	out-of-state PAC (ID#:_				Amount of Contribution (\$)	\$100.00
		Austin, TX 78729	. 1					
	Not Employe	pation / Job title (See Instructionsed	5)		Employer (See Instructions N/A	5)		
	Date	Full name of contributor	D and of state DAC (ID)		14//	_	Amount of Contribution (\$)	
	06/29/2024	Piner, Elizabeth Contributor address; City; S	out-of-state PAC (ID#:_				Amount of Contribution (4)	\$25.00
		Austin, TX 78729						
		pation / Job title (See Instructions	5)		Employer (See Instructions	5)		
	Not Employe	ed 			N/A			
	Date 06/30/2024	Full name of contributor Piner, Elizabeth Contributor address; City; S Austin, TX 78729	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$50.00
	Principal occu	pation / Job title (See Instructions	3)		Employer (See Instructions	5)		
	Planning Ass	sistant			NJ Pinelands Commissi	on		
	Date 01/30/2024	Full name of contributor Piner, elizabeth Contributor address; City; S	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$50.00
	Dringing!	Austin, TX 78729	.,		Employer (See Instructions	, 		
	Principal occu Planning Ass	pation / Job title (See Instructions sistant) 		Employer (See Instructions NJ Pinelands Commissi			

	MONET	ARY POLITICAL (SCHEDU	LE A1		
	The Instru	ction Guide explains how	to complete this for	m.	1	Total pages Schedule A1: Sch: 64/91 Rpt: 67/155	
2	FILER NAME Bucy III, Joh	n H. (The Honorable)			3	Filer ID (Ethics Commission 00069589	on Filers)
4	Date 06/26/2024	5 Full name of contributor Pittman, Suzanne6 Contributor address; City; St	out-of-state PAC (ID#:tate; Zip Code		7	Amount of Contribution (\$)	\$50.00
8	Principal occu	Austin, TX 78729 pation / Job title (See Instructions	<u>.</u>	Employer (See Instruction) 		
0	Instructional		3	Intertek Alchemy	13)		
	Date 01/27/2024	Full name of contributor Pitts, Robert Contributor address; City; Si				Amount of Contribution (\$)	\$100.00
	Deinsinal assu	Cedar Park, TX 78613		Frankrija (Caa kastrijatia	<u></u>		
	Planner	pation / Job title (See Instructions	5)	Employer (See Instruction City of Austin	is)		
	Date 06/28/2024	Full name of contributor Polk, Douglas Contributor address; City; Si	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$1,000.00
		Austin, TX 78738					
	Principal occu Business Ov	pation / Job title (See Instructions vner	3)	Employer (See Instruction Self-Employed	าร)		
	Date 06/10/2024	Full name of contributor Preston, Lauren Contributor address; City; Si Lafayette, CO 80026	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$25.00
	Principal occu Caregiver	pation / Job title (See Instructions	5)	Employer (See Instruction Self-Employed	ns)		
	Date 04/18/2024	Full name of contributor Probe, Shannon Contributor address; City; Si Round Rock, TX 78664	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$80.00
	Principal occu Not Employe	pation / Job title (See Instructions ed	s)	Employer (See Instruction N/A	ns)		
			,				

	MONET	IETARY POLITICAL CONTRIBUTIONS				SCHEDUL	E A1
	The Instruc	ction Guide explains how	to complete this for	rm.	1	Total pages Schedule A1: Sch: 65/91 Rpt: 68/155	
2	FILER NAME Bucy III, Joh	n H. (The Honorable)			3	Filer ID (Ethics Commission 00069589	n Filers)
4	Date 06/18/2024	6 Contributor address; City; Sta	out-of-state PAC (ID#: atte; Zip Code)	7	Amount of Contribution (\$)	\$15.00
8		Round Rock, TX 78664 pation / Job title (See Instructions)	9	Employer (See Instruction	s)		
	Date 04/30/2024	Full name of contributor Ravey, Tim Contributor address; City; Sta		N/A		Amount of Contribution (\$)	\$80.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instruction N/A	<u> </u> s)		
	Date 06/13/2024	Full name of contributor Ray, Beth Ann Contributor address; City; Sta				Amount of Contribution (\$)	\$25.00
	•	Austin, TX 78717 pation / Job title (See Instructions)		Employer (See Instruction	s)		
	Date 01/13/2024	Full name of contributor Ray, Jodi Contributor address; City; Sta	out-of-state PAC (ID#:	City of Cedar Park		Amount of Contribution (\$)	\$10.00
	Principal occu Not Employe	Cedar Park, TX 78613 pation / Job title (See Instructions)		Employer (See Instruction N/A	s)		
	Date 05/21/2024	Full name of contributor Reames, Joan Contributor address; City; Sta	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$100.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instruction N/A	s)		

	MONET	ARY POLITICAL C		SCHEDUL	E A1		
	The Instruc	ction Guide explains how	to complete this for	n.	1	Total pages Schedule A1: Sch: 66/91 Rpt: 69/155	
2	FILER NAME Bucy III, Joh	n H. (The Honorable)			3	Filer ID (Ethics Commission 00069589	n Filers)
4	Date 05/15/2024	5 Full name of contributor [Reber, Douglas6 Contributor address; City; Sta	out-of-state PAC (ID#: te; Zip Code		7	Amount of Contribution (\$)	\$40.00
_	Dringing Loon	Austin, TX 78717	lo.	Employer (Coa Instructions			
8	Engineer	pation / Job title (See Instructions)	9	Employer (See Instructions NXP Semiconductor Inc			
	Date 06/30/2024	Full name of contributor [Reedholm, Joe Contributor address; City; Sta				Amount of Contribution (\$)	\$100.00
	Principal occu	Georgetown, TX 78633 pation / Job title (See Instructions)		Employer (See Instructions	<u> </u>		
	Not Employe			N/A	,		
	Date 04/27/2024	Full name of contributor [Reedholm, Joseph Contributor address; City; Sta	out-of-state PAC (ID#: te; Zip Code			Amount of Contribution (\$)	\$120.00
		Georgetown, TX 78633					
	Principal occu Not Employe	pation / Job title (See Instructions) ed		Employer (See Instructions N/A	5)		
	Date 06/30/2024	Full name of contributor Remschel, Charlotta Contributor address; City; Sta Round Rock, TX 78664	out-of-state PAC (ID#: te; Zip Code			Amount of Contribution (\$)	\$10.00
	Principal occu Nurse	pation / Job title (See Instructions)		Employer (See Instructions BSW	()		
	Date 06/30/2024	Full name of contributor [Richards, Joanne Contributor address; City; Sta	out-of-state PAC (ID#: te; Zip Code			Amount of Contribution (\$)	\$50.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions N/A	i)		
			<u>, </u>				

	MONEI	ARY POLITICAL CONTR	IBUTION	IS	SC	CHEDULE A	1
	The Instru	ction Guide explains how to comp	lete this for	m.	1 Total pages Sched Sch: 67/91 Rpt:		
2	FILER NAME				3 Filer ID (Ethics C	Commission Filers	s)
	Bucy III, Joh	n H. (The Honorable)			00069589		
4	Date 01/13/2024	 5 Full name of contributor	ate PAC (ID#:)	7 Amount of Contrib	. ,	0.00
Ω	Principal occu	Round Rock, TX 78681-4055 pation / Job title (See Instructions)	la.	Employer (See Instructions	ne)		
0		Founder Consultancy	ا	Carrie Richardson dba			
		·		- Carrie Menardson aba (
	Date 02/13/2024	Full name of contributor out-of-star Richardson, Carrie Contributor address; City; State; Zip Cod	ate PAC (ID#:)	Amount of Contrib		0.00
		Round Rock, TX 78681-4055					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	ns)		
	President &	Founder Consultancy		Carrie Richardson dba	CWR Strategies		
	Date 03/13/2024	Full name of contributor out-of-sta Richardson, Carrie Contributor address; City; State; Zip Cod	ate PAC (ID#:)	Amount of Contrib		0.00
		Round Rock, TX 78681-4055					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	ns)		
	President &	Founder Consultancy		Carrie Richardson dba	CWR Strategies		
	Date 04/13/2024	Full name of contributor out-of-star Richardson, Carrie Contributor address; City; State; Zip Cod	ate PAC (ID#:)	Amount of Contrib		0.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	ns)		
	President &	Founder Consultancy		Carrie Richardson dba	CWR Strategies		
	Date 05/13/2024	Full name of contributor out-of-star Richardson, Carrie Contributor address; City; State; Zip Cod	ate PAC (ID#:)	Amount of Contrib		0.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	ns)		
	President &	Founder Consultancy		Carrie Richardson dba	CWR Strategies		
			•				

	MONET	ARY POLITICAL CON	TRIBUTION	S		SCHEDUL	E A1
	The Instruc	ction Guide explains how to co	omplete this form	n.	1	Total pages Schedule A1: Sch: 68/91 Rpt: 71/155	
2	FILER NAME Bucy III, Joh	n H. (The Honorable)			3	Filer ID (Ethics Commission 00069589	n Filers)
4	Date 06/13/2024	 5 Full name of contributor out Richardson, Carrie 6 Contributor address; City; State; Zip 	c-of-state PAC (ID#:		7	Amount of Contribution (\$)	\$10.00
_	Daine in a la casa	Round Rock, TX 78681-4055		Farada a (Cara la decetica de			
8		pation / Job title (See Instructions) Founder Consultancy	9	Employer (See Instructions Carrie Richardson dba (R Strategies	
	Date 06/04/2024	Richardson, Corrine Contributor address; City; State; Zip)		Amount of Contribution (\$)	\$125.00
	Principal occu	Cedar Park, TX 78613-4815 pation / Job title (See Instructions)		Employer (See Instructions	<u> </u>		
	Finance Ass	istant		Texas Democratic Party	,		
	Date 05/08/2024	Full name of contributor out Richardson, Sharon Contributor address; City; State; Zip	c-of-state PAC (ID#:			Amount of Contribution (\$)	\$80.00
		Cedar Park, TX 78613					
		pation / Job title (See Instructions) ourmet Pralines		Employer (See Instructions Self-Employed	5)		
	Date 02/05/2024	Rickel, Pamela	-of-state PAC (ID#: o Code)		Amount of Contribution (\$)	\$100.00
	Principal occu REALTOR	pation / Job title (See Instructions)		Employer (See Instructions Self-Employed)		
	Date 06/13/2024	Rickel, Pamela	o Code)		Amount of Contribution (\$)	\$125.00
	Principal occu REALTOR	pation / Job title (See Instructions)		Employer (See Instructions 98th Meridian Real Esta		Sales	

	MONET	ARY POLITICAL CO	NTRIBUTION	S		SCHEDUL	E A1
	The Instruc	ction Guide explains how to	complete this form	n.	1	Total pages Schedule A1: Sch: 69/91 Rpt: 72/155	
2	FILER NAME Bucy III, Joh	n H. (The Honorable)			3	Filer ID (Ethics Commission 00069589	on Filers)
4	Date 06/18/2024	Rodriguez, Marc	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	\$1,000.00
_	Delicalization	Austin, TX 78701	la la	English (On Instruction	Ĺ		
8	Lobbyist	pation / Job title (See Instructions)		Employer (See Instructions Offices of Marc A. Rodri		ez	
	Date 05/08/2024	Rodriguez, Marc A. Contributor address; City; State;	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	Austin, TX 78701 pation / Job title (See Instructions)		Employer (See Instructions	<u> </u>		
	Lobbyist			Offices of Marc A. Rodri	gu	ez	
	Date 04/18/2024	Roquemore, Wade Contributor address; City; State;	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$250.00
	Delevie de la com	Georgetown, TX 78628		Faradaya (Osa kasharatiya	_		
	Not Employe	pation / Job title (See Instructions) ed		Employer (See Instructions N/A	5)		
	Date 06/30/2024	Full name of contributor Rubin, Miriam Contributor address; City; State; Austin, TX 78729	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$50.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions N/A)		
	Date 06/30/2024	Full name of contributor Rundell, Judy Contributor address; City; State; Austin, TX 78729	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$50.00
	Principal occu IT	pation / Job title (See Instructions)		Employer (See Instructions State of Texas	()		
			·				

	MONET	ARY POLITICAL C	CONTRIBUTIO	N	S		SCHEDULE	■ A1
	The Instruc	ction Guide explains how	to complete this for	orr	n.	1	Total pages Schedule A1: Sch: 70/91 Rpt: 73/155	
2	FILER NAME Bucy III, Joh	n H. (The Honorable)				3	Filer ID (Ethics Commission 00069589	Filers)
4	Date 01/08/2024	5 Full name of contributor Rushin, Camron	out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	\$25.00
8	Principal occu	Austin, TX 78729 pation / Job title (See Instructions)	9	Employer (See Instructions	<u>)</u>		
	Software En		,		Ixia	-,		
	Date 02/08/2024	Full name of contributor Rushin, Camron Contributor address; City; St)	•	Amount of Contribution (\$)	\$25.00
		Austin, TX 78729				<u> </u>		
	Principal occu Software Eng	pation / Job title (See Instructions gineer)		Employer (See Instructions Ixia	s)		
	Date 03/08/2024	Full name of contributor Rushin, Camron Contributor address; City; St	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$25.00
		Austin, TX 78729						
	Principal occu Software En	pation / Job title (See Instructions gineer)		Employer (See Instructions Ixia	s)		
	Date 04/08/2024	Full name of contributor Rushin, Camron Contributor address; City; St Austin, TX 78729)	•	Amount of Contribution (\$)	\$25.00
	Principal occu Software Eng	pation / Job title (See Instructions gineer)		Employer (See Instructions	5)		
	Date 05/08/2024	Full name of contributor Rushin, Camron Contributor address; City; St Austin, TX 78729	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$25.00
	Principal occu Software En	pation / Job title (See Instructions gineer)		Employer (See Instructions Ixia	5)		

	MONET	ARY POLITICAL C	ONTRIBUTIO	N	S		SCHEDUL	E A1
	The Instru	ction Guide explains how	to complete this fo	rn	n.	1	Total pages Schedule A1: Sch: 71/91 Rpt: 74/155	
2	FILER NAME Bucy III, Joh	n H. (The Honorable)				3	Filer ID (Ethics Commission 00069589	n Filers)
4	Date 06/08/2024	5 Full name of contributor [Rushin, Camron	out-of-state PAC (ID#: te; Zip Code)	7	Amount of Contribution (\$)	\$25.00
8		Austin, TX 78729 pation / Job title (See Instructions)	[5	<u> </u>	Employer (See Instructions	<u> </u> s)		
	Date 06/09/2024	Full name of contributor Russell, Tara Contributor address; City; Star			lxia)	•	Amount of Contribution (\$)	\$100.00
	Principal occu Not Employe	pation / Job title (See Instructions) ed			Employer (See Instructions N/A	5)		
	Date 06/12/2024	Full name of contributor Sacratini, Rick Contributor address; City; Sta	out-of-state PAC (ID#: te; Zip Code)		Amount of Contribution (\$)	\$25.00
	Principal occu	Round Rock, TX 78664 pation / Job title (See Instructions)	1		Employer (See Instructions	-, 		
	Manager	pation / 300 title (See Instructions)			Texas Department of St	′	Health Services	
	Date 06/05/2024	Full name of contributor [Sanchez, Doris Contributor address; City; State Austin, TX 78729	out-of-state PAC (ID#: te; Zip Code)		Amount of Contribution (\$)	\$40.00
		pation / Job title (See Instructions) tions/Office Coordinator			Employer (See Instructions Williamson County	5)		
	Date 06/10/2024	Full name of contributor Sauer, Kevin Contributor address; City; Star Austin, TX 78701	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$40.00
	Principal occu Attorney	pation / Job title (See Instructions)			Employer (See Instructions State of Texas	5)		

	MONEI	ARY POLITICAL CONTRIBU	JIION	15		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete t	this for	m.	1	Total pages Schedule A1: Sch: 72/91 Rpt: 75/155	
2	FILER NAME				3	Filer ID (Ethics Commission	n Filers)
		n H. (The Honorable)			L	00069589	
4	Date 06/26/2024	 5 Full name of contributor	C (ID#:)	7	Amount of Contribution (\$)	\$50.00
		Round Rock, TX 78681					
8		pation / Job title (See Instructions)	9	Employer (See Instructions	5)		
	Not Employe			N/A			
	Date	Full name of contributor ut-of-state PAC	C (ID#:)		Amount of Contribution (\$)	#25.00
	06/10/2024	Schenk, Martin					\$25.00
		Contributor address; City; State; Zip Code					
		Portland, OR 97206			Ĺ		
	Archaeologis	pation / Job title (See Instructions)		Employer (See Instructions Martin Schenk	5)		
			2 / 12 //	Waturi Scherik	_	Assessment of Countries there (\$\dagger\$)	
	Date 05/22/2024	Full name of contributor ut-of-state PAC out-of-state PAC	J (ID#:)		Amount of Contribution (\$)	\$250.00
	00/11/101	Contributor address; City; State; Zip Code			ł		+=00.00
		, , , , , , , , , , , , , , , , , , ,					
		Austin, TX 78703-1428			Ĺ		
	Principal occu Consultant	pation / Job title (See Instructions)		Employer (See Instructions Bruce Scott Consulting	-		
				Bruce Scott Consulting	LLV		
	Date 06/26/2024	Full name of contributor out-of-state PAC	C (ID#:)		Amount of Contribution (\$)	¢4.00
	00/20/2024	Shelton, Kristin			ł		\$4.00
		Contributor address; City; State; Zip Code					
		Austin, TX 78717					
		pation / Job title (See Instructions)		Employer (See Instructions	s)		
	Teacher			Round Rock ISD			
	Date	Full name of contributor ut-of-state PAC	C (ID#:)		Amount of Contribution (\$)	
	06/10/2024	Shepherd, Julianne					\$50.00
		Contributor address; City; State; Zip Code					
		Georgetown, TX 78628					
		pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Not Employe	ed		N/A			

	MONET	ARY POLITICAL CONTRIBUT	TION	IS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete th	nis for	m.	1	Total pages Schedule A1: Sch: 73/91 Rpt: 76/155	
2	FILER NAME Bucy III, Joh	n H. (The Honorable)			3	Filer ID (Ethics Commission 00069589	n Filers)
4	Date 06/09/2024	 Full name of contributor)	7	Amount of Contribution (\$)	\$25.00
8	Principal occu	Tobaccoville, NC 27050 pation / Job title (See Instructions)	9	Employer (See Instructions	<u> </u> s)		
	Date 06/12/2024	Full name of contributor out-of-state PAC (Simons, Vicki Contributor address; City; State; Zip Code Georgetown, TX 78633		Forsyth County DS NC		Amount of Contribution (\$)	\$40.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions N/A	<u> </u> 5)		
	Date 05/21/2024	Full name of contributor	(ID#:)		Amount of Contribution (\$)	\$40.00
	Principal occu Not Employe	Georgetown, TX 78628 pation / Job title (See Instructions)		Employer (See Instructions N/A	<u> </u> s)		
	Date 06/06/2024	Full name of contributor out-of-state PAC (Smith, Marie Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$40.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions N/A	<u> </u> s)		
	Date 06/09/2024	Full name of contributor out-of-state PAC (Smith, Marie Contributor address; City; State; Zip Code Georgetown, TX 78628)		Amount of Contribution (\$)	\$100.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions N/A	s)		

	MONET	ARY POLITICAL CONTRIBUTION	NS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 74/91 Rpt: 77/155	
2	FILER NAME Bucy III, Joh	nn H. (The Honorable)		3	Filer ID (Ethics Commission 00069589	n Filers)
4	Date 06/18/2024	 Full name of contributor)	7	Amount of Contribution (\$)	\$250.00
_	Deignaignal annu	Georgetown, TX 78628	O Franksia (Cas Instructions			
8	Principal occu	ipation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 06/09/2024	Full name of contributor out-of-state PAC (ID#:_Smith, Meg Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$10.00
	Principal occu	Flower Mound, TX 75028 upation / Job title (See Instructions)	Employer (See Instructions)		
	Not Employe		N/A			
	Date 06/10/2024	Full name of contributor out-of-state PAC (ID#:_ Snead, Sarah Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$25.00
		Williamsburg, VA 23185				
	Principal occu Registered N	pation / Job title (See Instructions) Nurse	Employer (See Instructions Sentara)		
	Date 06/27/2024	Full name of contributor out-of-state PAC (ID#:_ Snodderly, Jami Snodderly Contributor address; City; State; Zip Code Cedar Park, TX 78613)		Amount of Contribution (\$)	\$8.00
	Principal occu Not Employe	upation / Job title (See Instructions) ed	Employer (See Instructions N/A)		
	Date 06/12/2024	Full name of contributor out-of-state PAC (ID#:_Sofinowski, Richard Contributor address; City; State; Zip Code Austin, TX 78717)		Amount of Contribution (\$)	\$10.00
	Principal occu Not Employe	upation / Job title (See Instructions) ed	Employer (See Instructions N/A)		

	MONET	ARY POLITICAL CO	NTRIBUTION	S		SCHEDUL	E A1
	The Instruc	ction Guide explains how to	complete this form	n.	1	Total pages Schedule A1: Sch: 75/91 Rpt: 78/155	
2	FILER NAME Bucy III, John	n H. (The Honorable)			3	Filer ID (Ethics Commission 00069589	n Filers)
4		5 Full name of contributor Soliz, Jesse	out-of-state PAC (ID#: ; Zip Code		7	Amount of Contribution (\$)	\$125.00
8	Principal occu	Cedar Park, TX 78613 pation / Job title (See Instructions)	9	Employer (See Instructions	 - s)		
	Not Employe			N/A			
	Date 06/19/2024	Full name of contributor Somers, Gloria Contributor address; City; State	out-of-state PAC (ID#:; Zip Code			Amount of Contribution (\$)	\$10.00
		Austin, TX 78750			Ĺ		
	Not Employe	pation / Job title (See Instructions)		Employer (See Instructions N/A	5)		
	Date 01/18/2024	Full name of contributor Stempko, Jessica Contributor address; City; State	out-of-state PAC (ID#:; Zip Code			Amount of Contribution (\$)	\$25.00
		Round Rock, TX 78681	į				
	Not Employe	pation / Job title (See Instructions) ed		Employer (See Instructions N/A	5)		
	Date 02/18/2024	Full name of contributor Stempko, Jessica Contributor address; City; State Round Rock, TX 78681	out-of-state PAC (ID#:; Zip Code			Amount of Contribution (\$)	\$25.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions N/A	5)		
	Date 03/18/2024	Full name of contributor Stempko, Jessica (The Hono Contributor address; City; State Round Rock, TX 78681				Amount of Contribution (\$)	\$25.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions N/A	5)		
			•				

	MONET	ARY POLITICAL CONTRIBUTION	ΟN	IS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete this 1	or	m.	1	Total pages Schedule A1: Sch: 76/91 Rpt: 79/155	
2	FILER NAME Bucy III, Joh	n H. (The Honorable)			3	Filer ID (Ethics Commission 00069589	n Filers)
4	Date 04/18/2024	 Full name of contributor out-of-state PAC (ID#:_Stempko, Jessica (The Honorable) Contributor address; City; State; Zip Code 			7	Amount of Contribution (\$)	\$25.00
8	Principal occu	Round Rock, TX 78681 pation / Job title (See Instructions)	9	Employer (See Instructions	<u> </u>		
	Not Employe			N/A	,		
	Date 05/18/2024	Full name of contributor out-of-state PAC (ID#:_Stempko, Jessica (The Honorable) Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$25.00
	Dringinal accu	Round Rock, TX 78681 pation / Job title (See Instructions)	_	Employer (See Instructions	·/-		
	Not Employe			N/A	·)		
	Date 06/18/2024	Full name of contributor out-of-state PAC (ID#:_Stempko, Jessica (The Honorable) Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$25.00
		Round Rock, TX 78681					
	Principal occu Not Employe	pation / Job title (See Instructions) ed		Employer (See Instructions N/A	s)		
	Date 05/10/2024	Full name of contributor out-of-state PAC (ID#:_Stempko, Paul Contributor address; City; State; Zip Code Round Rock, TX 78681)		Amount of Contribution (\$)	\$125.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions N/A	5)		
	Date 06/30/2024	Full name of contributor out-of-state PAC (ID#:_Stempko, Paul Contributor address; City; State; Zip Code Round Rock, TX 78681)	•	Amount of Contribution (\$)	\$10.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions N/A	5)		
			•				

	MONET	ARY POLITICAL (CONTRIBUTIO	N	S		SCHEDULE	A1
	The Instruc	ction Guide explains how	to complete this fo	rr	m.	1	Total pages Schedule A1: Sch: 77/91 Rpt: 80/155	
2	FILER NAME Bucy III, John	n H. (The Honorable)				3	Filer ID (Ethics Commission 00069589	Filers)
4		5 Full name of contributor Stoddard, Mark	out-of-state PAC (ID#:ate; Zip Code)	7	Amount of Contribution (\$)	\$5.00
8	Principal occur	Austin, TX 78723 pation / Job title (See Instructions	<u> </u>	<u> </u>	Employer (See Instructions	·/		
0	Not Employe		,	Ð	N/A	·)		
	Date 01/30/2024	Full name of contributor Stoddard, Mark Contributor address; City; St)		Amount of Contribution (\$)	\$5.00
	Principal occur	Austin, TX 78723 pation / Job title (See Instructions)		Employer (See Instructions	;) 		
	Not Employe		,		N/A	,,		
	Date 02/14/2024	Full name of contributor Stoddard, Mark Contributor address; City; St	out-of-state PAC (ID#:ate; Zip Code)		Amount of Contribution (\$)	\$5.00
		Austin, TX 78723						
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions N/A	<u>(</u> 5)		
	Date 02/29/2024	Full name of contributor Stoddard, Mark Contributor address; City; St Austin, TX 78723	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$5.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions N/A	5)		
	Date 03/14/2024	Full name of contributor Stoddard, Mark Contributor address; City; St Austin, TX 78723	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$5.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions N/A	5)		

	MONET	ARY POLITICAL C	ONTRIBUTION	IS		SCHEDULE	A1
	The Instruc	ction Guide explains how	to complete this for	m.	1	Total pages Schedule A1: Sch: 78/91 Rpt: 81/155	
2	FILER NAME Bucy III, John	n H. (The Honorable)			3	Filer ID (Ethics Commission 00069589	Filers)
4		5 Full name of contributor Stoddard, Mark	out-of-state PAC (ID#:ate; Zip Code		7	Amount of Contribution (\$)	\$5.00
8	Principal occu	Austin, TX 78723 pation / Job title (See Instructions)	9	Employer (See Instructions	 s)		
	Not Employe	d		N/A			
	Date 04/14/2024	Full name of contributor Stoddard, Mark Contributor address; City; Sta)		Amount of Contribution (\$)	\$5.00
	Delicate at a second	Austin, TX 78723	1	Farada a va (O a a la atau atia a a	<u>Γ</u>		
	Not Employe	pation / Job title (See Instructions)		Employer (See Instructions N/A	5)		
	Date Full name of contributor out-of-state PAC (ID#:		,	Г	Amount of Contribution (\$)		
	04/30/2024	Stoddard, Mark Contributor address; City; Sta		,		, and an extraction (4)	\$5.00
		Austin, TX 78723					
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions	<u>I</u> S)		
					_		
	Date 05/14/2024	Full name of contributor Stoddard, Mark Contributor address; City; Sta Austin, TX 78723	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$5.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions N/A	5)		
	Date 05/30/2024	Full name of contributor Stoddard, Mark Contributor address; City; Sta	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$5.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions N/A	5)		

	MONET	ARY POLITICAL CONTRIBUTION	DNS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 79/91 Rpt: 82/155	
2	FILER NAME Bucy III, Joh	ın H. (The Honorable)		3	Filer ID (Ethics Commission 00069589	n Filers)
4	Date 06/14/2024	Full name of contributor		7	Amount of Contribution (\$)	\$5.00
_	Dringing! goog	Austin, TX 78723	0 Employer (See Instructions			
8	Not Employe	pation / Job title (See Instructions) ed	Employer (See Instructions N/A)		
	Date 06/10/2024	Full name of contributor out-of-state PAC (ID#:_ Stonewall Democrats of Austin PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00
	Principal occu	Austin, TX 78704 upation / Job title (See Instructions)	Employer (See Instructions)		
	Date 06/14/2024	Full name of contributor out-of-state PAC (ID#:_ Storie, William Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00
	Principal occu	Round Rock, TX 78681 upation / Job title (See Instructions)	Employer (See Instructions)		
	Retired Lawy	yer	N/A			
	Date 06/30/2024	Full name of contributor out-of-state PAC (ID#:_ Storie, William Contributor address; City; State; Zip Code Round Rock, TX 78681			Amount of Contribution (\$)	\$50.00
	Principal occu Retired Lawy	pation / Job title (See Instructions) yer	Employer (See Instructions N/A)		
	Date 05/21/2024	Full name of contributor out-of-state PAC (ID#:_ Sussman, William Contributor address; City; State; Zip Code New York, NY 10023			Amount of Contribution (\$)	\$125.00
	Principal occu Not Employe	upation / Job title (See Instructions) ed	Employer (See Instructions N/A)		

	MONET	ARY POLITICAL CONTRIBU	UTION	S		SCHEDU	LE A1
	The Instru	ction Guide explains how to complete	this forr	n.	1	Total pages Schedule A1: Sch: 80/91 Rpt: 83/155	
2	FILER NAME Bucy III, Joh	n H. (The Honorable)			3	Filer ID (Ethics Commission 00069589	on Filers)
4	Date 06/26/2024	 Full name of contributor			7	Amount of Contribution (\$)	\$40.00
8		Austin, TX 78729 coation / Job title (See Instructions)	9	Employer (See Instructions N/A	<u> </u> ;)		
	Not Employe Date 02/13/2024	Full name of contributor out-of-state PA Texas AFT COPE Fund)		Amount of Contribution (\$)	\$250.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> 5)		
	Date 06/05/2024	Full name of contributor out-of-state PA Texas Apartment Association PAC Contributor address; City; State; Zip Code	AC (ID#:)		Amount of Contribution (\$)	\$750.00
	Principal occu	Austin, TX 78701 pation / Job title (See Instructions)		Employer (See Instructions	 - s)		
	Date 06/18/2024	Full name of contributor out-of-state PA Texas Lobby Partners LLP Contributor address; City; State; Zip Code Austin, TX 78701)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u>I</u> 5)		
	Date 06/07/2024	Full name of contributor out-of-state PA Texas Sands PAC Contributor address; City; State; Zip Code Austin, TX 78701	AC (ID#:			Amount of Contribution (\$)	\$4,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
			I				

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUI	LE A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 81/91 Rpt: 84/155	
2	FILER NAME Bucy III, Joh	ın H. (The Honorable)		3	Filer ID (Ethics Commission 00069589	on Filers)
4	Date 02/20/2024	Full name of contributor)	7	Amount of Contribution (\$)	\$1,500.00
_	Deignaignal annu	Austin, TX 78766	O Frankright (Cook keets et in 19			
8	Principal occu	ipation / Job title (See Instructions)	9 Employer (See Instructions)		
	Date 06/14/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Trial Lawyers Association PAC Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$2,500.00
	Principal occu	Austin, TX 78701 Ipation / Job title (See Instructions)	Employer (See Instructions)		
	Date 01/01/2024	Full name of contributor out-of-state PAC (ID#:_ Thompson, Dianne Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$10.00
	Dringing occu	Round Rock, TX 78664 spation / Job title (See Instructions)	Employer (See Instructions			
	Not Employe		N/A	<i>)</i>		
	Date 02/01/2024	Full name of contributor out-of-state PAC (ID#:_ Thompson, Dianne Contributor address; City; State; Zip Code Round Rock, TX 78664			Amount of Contribution (\$)	\$10.00
	Principal occu	I Ipation / Job title (See Instructions)	Employer (See Instructions)		
	Date 03/01/2024	Full name of contributor out-of-state PAC (ID#:_ Thompson, Dianne Contributor address; City; State; Zip Code Round Rock, TX 78664			Amount of Contribution (\$)	\$10.00
	Principal occu Not Employe	upation / Job title (See Instructions) ed	Employer (See Instructions N/A)		

	MONET	ARY POLITICAL (SCHEDULE A1				
	The Instruc	ction Guide explains hov	v to complete this f	orı	n.	1	Total pages Schedule A1: Sch: 82/91 Rpt: 85/155	
2	FILER NAME Bucy III, Joh	n H. (The Honorable)				3	Filer ID (Ethics Commission 00069589	ı Filers)
4	Date 04/01/2024	5 Full name of contributor Thompson, Dianne6 Contributor address; City; S	out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	\$10.00
8	Principal occu	Round Rock, TX 78664 pation / Job title (See Instructions	2)	l a	Employer (See Instructions	;) 		
0	Not Employe		5)	٦	N/A	·)		
	Date 05/01/2024	Full name of contributor Thompson, Dianne Contributor address; City; S	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$10.00
	Deinsinal assu	Round Rock, TX 78664		_	Franksian (Cook Instructions	<u></u>		
	Not Employe	pation / Job title (See Instructionsed	5)		Employer (See Instructions N/A	5)		
	Date 06/01/2024	Full name of contributor Thompson, Dianne Contributor address; City; S	out-of-state PAC (ID#:_				Amount of Contribution (\$)	\$10.00
		Round Rock, TX 78664						
	Principal occu Not Employe	pation / Job title (See Instructionsed	5)		Employer (See Instructions N/A	5)		
	06/17/2024 Thompson, Dianne					•	Amount of Contribution (\$)	\$50.00
	Principal occu Not Employe	pation / Job title (See Instructionsed	5)		Employer (See Instructions N/A	5)		
	Date Full name of contributor out-of-state PAC (ID#:) 06/30/2024 Thompson, George Contributor address; City; State; Zip Code Austin, TX 78729						Amount of Contribution (\$)	\$10.00
		pation / Job title (See Instructionstion Programmer	5)		Employer (See Instructions RVH Solutions Inc	5)		
	wen Applica	and the regulation of the second			TOTAL SOLUTIONS INC.			

	MONET	ARY POLITICAL (SCHEDUL	E A1			
	The Instruc	ction Guide explains how	to complete this f	orr	n.	1	Total pages Schedule A1: Sch: 83/91 Rpt: 86/155	
2	FILER NAME Bucy III, Joh	n H. (The Honorable)				3	Filer ID (Ethics Commission 00069589	n Filers)
4	Date 06/30/2024	5 Full name of contributor Thompson, Milena6 Contributor address; City; St	out-of-state PAC (ID#:_ ate; Zip Code			7	Amount of Contribution (\$)	\$100.00
8	Principal occu	Round Rock, TX 78681 pation / Job title (See Instructions	·)	9	Employer (See Instructions	<u> </u> s)		
	Date 01/20/2024	Full name of contributor Touchet, Stephen Contributor address; City; S			N/A		Amount of Contribution (\$)	\$10.00
	Principal occu Teacher	Austin, TX 78729 pation / Job title (See Instructions)		Employer (See Instructions Retired	<u> </u> s)		
	Date Full name of contributor out-of-state PAC (ID#:) 02/23/2024 Touchet, Stephen Contributor address; City; State; Zip Code					•	Amount of Contribution (\$)	\$10.00
	Principal occu	Austin, TX 78729 pation / Job title (See Instructions	·)		Employer (See Instructions	 s)		
	Teacher				Retired			
	03/06/2024 Touchet, Stephen		out-of-state PAC (ID#:_ ate; Zip Code)	•	Amount of Contribution (\$)	\$10.00
	Principal occu Teacher	Austin, TX 78729 pation / Job title (See Instructions)		Employer (See Instructions Retired	<u> </u> s)		
	Date Full name of contributor out-of-state PAC (ID#:) 04/05/2024 Touchet, Stephen Contributor address; City; State; Zip Code Austin, TX 78729						Amount of Contribution (\$)	\$10.00
	Principal occu Retired Teac	pation / Job title (See Instructions ther)		Employer (See Instructions N/A	s)		

	MONEI	ARY POLITICAL C	SCHEDULE A1				
	The Instru	ction Guide explains how	to complete this fo	orm.	1	Total pages Schedule A1: Sch: 84/91 Rpt: 87/155	
2	FILER NAME	n H. (The Henerable)			3	Filer ID (Ethics Commission 00069589	on Filers)
		n H. (The Honorable)			L		
4	Date 06/11/2024	5 Full name of contributorTravis, Clayton6 Contributor address; City; St	out-of-state PAC (ID#:	_	7	Amount of Contribution (\$)	\$80.00
_		Austin, TX 78754					
8		pation / Job title (See Instructions)	9 Employer (See Instructions			
	Policy Advoc	cate		Texas Pediatric Society			
	Date 06/12/2024	Full name of contributor VOTE PAC Contributor address; City; St	out-of-state PAC (ID#: ate; Zip Code)		Amount of Contribution (\$)	\$2,000.00
		Austin, TX 78731					
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date	Full name of contributor	out-of-state PAC (ID#:)	Π	Amount of Contribution (\$)	
	06/18/2024	Van de Putte, Leticia (The	—				\$250.00
		Contributor address; City; St San Antonio, TX 78213	ate; Zip Code				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>. </u>		
	consultant/pl		,	Andrade-Van de Putte &		ssociates	
	<u>.</u>				<u> </u>		
	Date 06/06/2024	Full name of contributor Vasudevan, Vera Contributor address; City; St Cedar Park, TX 78613	out-of-state PAC (ID#: ate; Zip Code			Amount of Contribution (\$)	\$100.00
	Principal occu Educator	pation / Job title (See Instructions)	Employer (See Instructions Self-Employed	5)		
	Date	Full name of contributor	out-of-state PAC (ID#:)	Π	Amount of Contribution (\$)	
	06/30/2024	Vaughan, Christopher	_				\$25.00
		Contributor address; City; St Austin, TX 78720	ate; Zip Code				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	IT Consultan	t		TX Government			

	MONET	ARY POLITICAL CONTRIBUTION	ONS	SCHEDULE A1				
	The Instru	ction Guide explains how to complete this 1	form.	1	Total pages Schedule A1: Sch: 85/91 Rpt: 88/155			
2	FILER NAME Bucy III, Joh	ın H. (The Honorable)		3	Filer ID (Ethics Commissio 00069589	n Filers)		
4	Date 06/17/2024	 Full name of contributor out-of-state PAC (ID#:_Vo, Melissa Contributor address; City; State; Zip Code 		7	Amount of Contribution (\$)	\$250.00		
0	Dringing occu	Cedar Park, TX 78613 upation / Job title (See Instructions)	Employer (See Instructions					
8	Not Employe		Employer (See Instructions N/A)				
	Date 06/17/2024	Full name of contributor out-of-state PAC (ID#:_ Waite, Barbara Contributor address; City; State; Zip Code		Amount of Contribution (\$)	\$50.00			
	Principal occu	Georgetown, TX 78633 upation / Job title (See Instructions)	Employer (See Instructions	()				
	Not Employe		N/A	,				
	Date 06/26/2024	Full name of contributor out-of-state PAC (ID#:_ Walker, Nancy Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$40.00		
		Austin, TX 78749						
	Principal occu Not Employe	pation / Job title (See Instructions) ed	Employer (See Instructions N/A	5)				
	Date 04/18/2024	Full name of contributor out-of-state PAC (ID#:_ Walker, Nathaniel Contributor address; City; State; Zip Code Austin, TX 78752			Amount of Contribution (\$)	\$250.00		
	Principal occu Lobbyist	pation / Job title (See Instructions)	Employer (See Instructions Self-Employed)				
	Date 05/13/2024	Full name of contributor out-of-state PAC (ID#:_Walker, Nathaniel Contributor address; City; State; Zip Code Austin, TX 78752)		Amount of Contribution (\$)	\$250.00		
	Principal occu Lobbyist	pation / Job title (See Instructions)	Employer (See Instructions Self-Employed	()				

	MONET	ARY POLITICAL C	SCHEDULE A				
	The Instru	ction Guide explains how	to complete this form	m.	1	Total pages Schedule A1: Sch: 86/91 Rpt: 89/155	
2	FILER NAME Bucy III, Joh	n H. (The Honorable)			3	Filer ID (Ethics Commission 00069589	n Filers)
4	Date 06/18/2024	5 Full name of contributor [Warford, Lucas6 Contributor address; City; Sta	out-of-state PAC (ID#: te; Zip Code		7	Amount of Contribution (\$)	\$250.00
8	Principal occu	Austin, TX 78703	a	Employer (See Instructions	.)		
•	Consultant	pation / Job title (See Instructions)	9	Self-Employed	·)		
	Date Full name of contributor out-of-state PAC (ID#:) 06/26/2024 Warriner, George Contributor address; City; State; Zip Code Austin, TX 78717					Amount of Contribution (\$)	\$4.00
		pation / Job title (See Instructions)		Employer (See Instructions	<u>)</u>		
	Not Employed N/A						
	Date 06/26/2024	Full name of contributor [Warriner, George Contributor address; City; Sta)		Amount of Contribution (\$)	\$40.00	
		Austin, TX 78717					
	Principal occu Not Employe	pation / Job title (See Instructions) ed		Employer (See Instructions N/A	i)		
	Date 06/30/2024	Full name of contributor Warriner, George Contributor address; City; Sta	out-of-state PAC (ID#: te; Zip Code)		Amount of Contribution (\$)	\$50.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions N/A	()		
	Date 06/08/2024	Full name of contributor Weems, Jeff Contributor address; City; Sta Wimberley, TX 78676)		Amount of Contribution (\$)	\$250.00	
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions N/A	i)		
			•				

	MONET	ARY POLITICAL CO		SCHEDULE A1				
	The Instru	ction Guide explains how to	complete this forn	n.	1	Total pages Schedule A1: Sch: 87/91 Rpt: 90/155		
2	FILER NAME Bucy III, Joh	n H. (The Honorable)			3	Filer ID (Ethics Commission 00069589	on Filers)	
4	Date 06/05/2024	Full name of contributor White, DavidContributor address; City; State;)	7	Amount of Contribution (\$)	\$2,500.00	
8	Principal occu	Austin, TX 78746 pation / Job title (See Instructions)	la la	Employer (See Instructions				
•	CEO	pation 7 300 title (See Instructions)		Public Blueprint	,			
	Date 01/18/2024	Full name of contributor White, Patricia Contributor address; City; State;	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$150.00	
		Cedar Park, TX 78613						
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)			
	Date Full name of contributor out-of-state PAC (ID#:					Amount of Contribution (\$)	\$10.00	
		Austin, TX 78717						
	Principal occu Veterinarian	pation / Job title (See Instructions)		Employer (See Instructions) Thrive Pet Healthcare				
	Date 02/10/2024	Wilby, Eliza)		Amount of Contribution (\$)	\$10.00	
	Principal occu Veterinarian	pation / Job title (See Instructions)		Employer (See Instructions Thrive Pet Healthcare)			
	Date 03/10/2024	Full name of contributor Wilby, Eliza Contributor address; City; State; Austin, TX 78717)		Amount of Contribution (\$)	\$10.00		
	Principal occu Veterinarian	pation / Job title (See Instructions)		Employer (See Instructions Thrive Pet Healthcare)			

	MONET	ARY POLITICAL COI		SCHEDULE A1			
	The Instru	ction Guide explains how to	complete this forn	n.	1	Total pages Schedule A1: Sch: 88/91 Rpt: 91/155	
2	FILER NAME Bucy III, Joh	n H. (The Honorable)			3	Filer ID (Ethics Commission 00069589	ı Filers)
4	Date 04/10/2024	5 Full name of contributor	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	\$10.00
8	Principal occu	Austin, TX 78717 pation / Job title (See Instructions)	9	Employer (See Instructions)		
	Veterinarian			Thrive Pet Healthcare			
	Date 05/10/2024	Full name of contributor Contributor Contributor address; City; State; 2	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$10.00
		Austin, TX 78717					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Veterinarian			Thrive Pet Healthcare			
	Date 06/10/2024	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$10.00
		Austin, TX 78717					
	Principal occu Veterinarian	pation / Job title (See Instructions)		Employer (See Instructions Thrive Pet Healthcare)		
		Full resume of exceptibilities.				Assessment of Oscatalla time (d)	
	Date 06/30/2024	Williams, Kevin	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$25.00
	Principal occu Teacher	pation / Job title (See Instructions)		Employer (See Instructions Round Rock ISD)		
	Date 06/26/2024	Full name of contributor Company of Contributor address; City; State; 2 Cedar Park, TX 78613			Amount of Contribution (\$)	\$25.00	
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Freelance W	riter		Self-Employed			

	MONET	ARY POLITICAL CONTRIB		SCHEDULE A1			
	The Instruc	ction Guide explains how to complet	e this for	m.	1	Total pages Schedule A1: Sch: 89/91 Rpt: 92/155	
2	FILER NAME Bucy III, Joh	n H. (The Honorable)			3	Filer ID (Ethics Commission 00069589	ı Filers)
4	Date 06/30/2024	 Full name of contributor out-of-state F Wills, Shannon Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$)	\$10.00
_		Cedar Park, TX 78613			L		
8		pation / Job title (See Instructions) impliance Consultant	9	Employer (See Instructions Self-Employed	5)		
	Date 06/30/2024	Full name of contributor out-of-state F Wishard, Kevin Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$25.00
	Deinsinal assu	Austin, TX 78717		Frankrijer (Cookrativistiere	<u></u>		
		pation / Job title (See Instructions) iions Strategist		Employer (See Instructions State Farm Insurance	5)		
	Date Full name of contributor out-of-state PAC (ID#:					Amount of Contribution (\$)	\$10.00
		Georgetown, TX 78628					
	Principal occu Not Employe	pation / Job title (See Instructions) ed		Employer (See Instructions N/A	5)		
	Date Full name of contributor out-of-state PAC (02/01/2024 Woodard, Owen Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$10.00
	Principal occu Not Employe	Georgetown, TX 78628 pation / Job title (See Instructions)		Employer (See Instructions N/A	<u>l</u> s)		
	Date Full name of contributor out-of-state PAC (ID#:) 03/01/2024 Woodard, Owen Contributor address; City; State; Zip Code Georgetown, TX 78628					Amount of Contribution (\$)	\$10.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions N/A	5)		

	MONET	ARY POLITICAL CONTRIBUTION		SCHEDULE A1		
	The Instru	ction Guide explains how to complete this t	form.	1	Total pages Schedule A1: Sch: 90/91 Rpt: 93/155	
2	FILER NAME Bucy III, Joh	ın H. (The Honorable)		3	Filer ID (Ethics Commission 00069589	n Filers)
4	Date 04/01/2024	5 Full name of contributor out-of-state PAC (ID#:_ Woodard, Owen 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$10.00
_	Deignigal	Georgetown, TX 78628	In Employer (Con Instructions			
8	Not Employe	pation / Job title (See Instructions) ed	Employer (See Instructions N/A	5)		
	Date 05/01/2024	Full name of contributor out-of-state PAC (ID#:_ Woodard, Owen Contributor address; City; State; Zip Code		Amount of Contribution (\$)	\$10.00	
	Principal occu	Georgetown, TX 78628 upation / Job title (See Instructions)	Employer (See Instructions	 - s)		
	Not Employe		N/A			
	Date 06/01/2024	Full name of contributor out-of-state PAC (ID#:_ Woodard, Owen Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$10.00
		Georgetown, TX 78628				
	Principal occu Not Employe	pation / Job title (See Instructions) ed	Employer (See Instructions N/A	s)		
	Date 06/17/2024	Full name of contributor out-of-state PAC (ID#:_Yawn, Gail & Larry Contributor address; City; State; Zip Code Round Rock, TX 78681			Amount of Contribution (\$)	\$125.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>(</u>		
	Date 02/12/2024	Full name of contributor out-of-state PAC (ID#:_Zachry Corporation PAC Contributor address; City; State; Zip Code San Antonio, TX 78265	<u>, </u>		Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		

The Instruction Guide explains how to complete this form. 1 Total pages Schedule A1: Sch: 91/91 Rpt: 94/155 2 FILER NAME Bucy III, John H. (The Honorable) 3 Filer ID (Ethics Commission 00069589 4 Date 06/09/2024 5 Full name of contributor out-of-state PAC (ID#: 7 Amount of Contribution (\$) Zeller, Charles 6 Contributor address; City; State; Zip Code Austin, TX 78733 8 Principal occupation / Job title (See Instructions) Not Employed Page Full name of contributor out-of-state PAC (ID#:	51,000.00
Bucy III, John H. (The Honorable) 4 Date	51,000.00
06/09/2024 Zeller, Charles 6 Contributor address; City; State; Zip Code Austin, TX 78733 8 Principal occupation / Job title (See Instructions) Not Employed Pate Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$)	
8 Principal occupation / Job title (See Instructions) Not Employed Pate Pull name of contributor Out-of-state PAC (ID#:) Amount of Contribution (\$)	
Not Employed N/A Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$)	
Contributor address; City; State; Zip Code	\$50.00
Austin, TX 78729	
Principal occupation / Job title (See Instructions) Senior Technical Editor Employer (See Instructions) HP Inc	

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instru	ction Guide explains how to complete this t	form.	1 Total pages Schedule A2: Sch: 1/1 Rpt: 95/155
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
	nn H. (The Honorable)		00069589
⁴ TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	SUTIONS	\$
5 Date	6 Full name of contributor out-of-state PAC (ID#:)	8 Amount of 9 In-kind contribution contribution (\$) description
06/18/2024			\$375.00 Koozies
	7 Contributor address; City; State; Zip Code		<u> </u>
			;
	Austin, TX 78729		Check if travel outside of Texas. Complete Schedule T.
10 Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON	N-JUDICIAL) (See instructions)
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 contribute	or's spouse (if any) (FOR JUDICIAL)
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
16 II CONTINUTOR	is a clind, law littl of pareful(s) (if any) (FOR JODICIAL)		
Date	Full name of contributor out-of-state PAC (ID#:		Amount of In-kind contribution
05/16/2024	Kelly, Rusty		contribution (\$) description
	Contributor address; City; State; Zip Code		\$350.00 Emails
	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
			l ;
Dein ein el e e e	Austin, TX 78701	F(FOR NON	Check if travel outside of Texas. Complete Schedule T.
Principal occi	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	N-JUDICIAL) (See instructions)
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)	1	
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of In-kind contribution
06/18/2024	Texas Realtors PAC		contribution (\$) description
	Contributor address; City; State; Zip Code		\$250.001Emails
			ļ
	Austin, TX 78768		
Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	Check if travel outside of Texas. Complete Schedule T. J-JUDICIAL) (See instructions)
		1 17 (1	, .
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contribute	or's spouse (if any) (FOR JUDICIAL)
12	the skill have from the state of No.		
It contributor i	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

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/Political Committee Credit Card Payment			mmittee	Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.						Travel Out of District OTHER (enter a category not listed above)				
		_			ruction Guid	le explains	how to co	mple	ete this form.	_				
1	Total pages Schedule F1:	2	FILER NAME	Ξ						3	Filer ID	(Ethics Comr	nission Filers)	
	Sch: 1/58 Rpt: 96/155		Bucy III, Jo	hn H. (T	he Honora	able)					00069589			
4	Date	5	Payee name											
	01/07/2024		ActBlue											
6	Amount (\$)	7	Payee addre	ss; (City;	State	; Zip Co	de						
	\$28.07		380 Summe		•		•							
	,													
			Somerville,	MA 021	L44									
8	PURPOSE	(a)	Category (S	oo Cotogor	oc listed at the	ton of this coh	odulo)	(b)	Description					
	OF	``	Accounting			top of this sch	edule)	()		outsi	de of Texas. Com	plete Schedule T.		
	EXPENDITURE		7.000uming	, Danian	ย				Check if Austin	ı, TX,	officeholder living	g expense		
									Credit card p	roc	essing fees			
9	Complete ONLY if direct		Candidate/Off	iceholdei	name	(Office sou	ght			Office h	eld		
	expenditure to benefit C/OI	Н												
	Date		Payee name											
	01/14/2024		ActBlue											
	Amount (\$)		Payee addre	ss; (City;	State	; Zip Co	de						
	\$11.50		381 Summ		•		•							
	,													
			Somerville,	MA 021	L44									
	PURPOSE	(a)	Category (S	ee Categor	es listed at the	top of this sch	edule)	(b)	Description					
	OF		Accounting				,		_	outsi	de of Texas. Com	plete Schedule T		
	EXPENDITURE		J		5				Check if Austin	ı, TX,	officeholder living	g expense		
									Credit card p	roc	essing fees			
	Complete ONLY if direct		Candidate/Off	iceholde	name	(Office sou	ght			Office h	eld		
	expenditure to benefit C/O	Н												
	Date		Payee name											
	01/21/2024		ActBlue											
	Amount (\$)	H	Payee addre	ss. (City;	State	; Zip Co	de						
	\$5.75		382 Summe		J.Ly ,	Oldio	, <u>Lip</u> 00	uo						
	Ψ3.13		JOZ Julilin	Si St										
			Somerville,	MA 021	L44									
	PURPOSE OF	(a)	Category (S	ee Categor	es listed at the	top of this sch	edule)	(b)	Description					
	EXPENDITURE		Accounting	/Bankin	g							plete Schedule T		
											officeholder living	g expense		
									Credit card p	ıuc	essing lees			
	Complete ONLY if direct expenditure to benefit C/OH		Candidate/Off	iceholde	name	(Office sou	ght			Office h	eld		
	experiorare to benefit C/Of	_												

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

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

	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: 2/58 Rpt: 97/155	Bucy III, John H. (The Honorable) 00069589
4	Date	5 Payee name
	01/28/2024	ActBlue
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$5.74	383 Summer St
		Somerville, MA 02144
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Credit card processing fees
		Ground data processing root
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
\vdash	Data	
	Date	Payee name
	02/04/2024	ActBlue
	Amount (\$)	Payee address; City; State; Zip Code
	\$11.70	384 Summer St
		Somerville, MA 02144
	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	
_	_	
	Date	Payee name
	02/11/2024	ActBlue
	Amount (\$)	Payee address; City; State; Zip Code
	\$7.13	385 Summer St
		Somerville, MA 02144
	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.
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		Credit card processing fees
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held
	onponditure to benefit 6/01	•

SCHEDULE F1

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

	Credit Card Payment The Instruction Guide explains how to complete this form.					
1	Total pages Schedule F1: Sch: 3/58 Rpt: 98/155	FILER NAME Bucy III, John H. (The Honorable)			Filer ID 00069589	(Ethics Commission Filers)
4	Date 02/18/2024	5 Payee name ActBlue				
6	Amount (\$) \$15.83	7 Payee address; City; State; Zip Code 386 Summer St				
8	PURPOSE OF EXPENDITURE	Somerville, MA 02144 (a) Category (See Categories listed at the top of this schedule) Accounting/Banking	Che	ck if travel outsic	de of Texas. Com officeholder living essing fees	plete Schedule T. g expense
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sough	t		Office he	eld
	Date 02/25/2024	Payee name ActBlue				
	Amount (\$) \$2.78	Payee address; City; State; Zip Code 387 Summer St				
	PURPOSE OF EXPENDITURE	Somerville, MA 02144 (a) Category (See Categories listed at the top of this schedule) Accounting/Banking	Che	ck if travel outsic	de of Texas. Com officeholder living essing fees	plete Schedule T. J expense
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sough	t		Office he	eld
	Date 03/03/2024	Payee name ActBlue				
	Amount (\$) \$21.60	Payee address; City; State; Zip Code 388 Summer St				
		Somerville, MA 02144				
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	Che	ck if travel outsic	de of Texas. Com officeholder living essing fees	plete Schedule T. J expense
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sough	t		Office he	eld

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense

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. Total pages Schedule F1: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 4/58 Rpt: 99/155 Bucy III, John H. (The Honorable) 00069589 4 Date Payee name 03/05/2024 ActBlue 6 Amount (\$) Payee address; City; State; Zip Code 389 Summer St \$44.44 Somerville, MA 02144 8 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Accounting/Banking **EXPENDITURE** 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/OH Date Payee name 03/10/2024 ActBlue Amount (\$) Payee address; City; State; Zip Code \$3.58 389 Summer St Somerville, MA 02144 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Accounting/Banking **EXPENDITURE** 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/OH Date Payee name 03/17/2024 ActBlue Amount (\$) Payee address: City; State; Zip Code \$6.35 390 Summer St Somerville, MA 02144 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Accounting/Banking **EXPENDITURE** 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/OH

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

	Credit Card Payment The Instruction Guide explains how to complete this form.				
1	Total pages Schedule F1: Sch: 5/58 Rpt:	2 FILER NAME Bucy III, John H. (The Honorable) 3 Filer ID (Ethics Commission Filers) 00069589			
4	Date 03/24/2024	5 Payee name ActBlue			
6	Amount (\$) \$8.72	7 Payee address; City; State; Zip Code 391 Summer St			
		Somerville, MA 02144			
8	PURPOSE OF EXPENDITURE	(a) Category (see Categories listed at the top of this schedule) Accounting/Banking (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Credit card processing fees			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held			
	Date 03/31/2024	Payee name ActBlue			
	Amount (\$) \$8.53	Payee address; City; State; Zip Code 392 Summer St			
		Somerville, MA 02144			
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Credit card processing fees			
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held			
	Date 04/07/2024	Payee name ActBlue			
	Amount (\$) \$5.36	Payee address; City; State; Zip Code 393 Summer St			
		Somerville, MA 02144			
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Credit card processing fees			
	Complete ONLY if direct expenditure to benefit C/O	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 Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

	Credit Card Payment The Instruction Guide explains how to complete this form.			
1	Total pages Schedule F1: Sch: 6/58 Rpt:	2 FILER NAME Bucy III, John H. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00069589
4	Date 04/14/2024	5 Payee name ActBlue		·
6	Amount (\$) \$6.75	7 Payee address; City; State; Zip Co 394 Summer St Somerville, MA 02144	de	
8	PURPOSE OF EXPENDITURE	(a) Category (see Categories listed at the top of this schedule) Accounting/Banking	(b)	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Credit card processing fees
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sou	ght	Office held
	Date 04/21/2024	Payee name ActBlue		
	Amount (\$) \$75.69	Payee address; City; State; Zip Co 395 Summer St Somerville, MA 02144	de	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b)	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Credit card processing fees
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	ght	Office held
	Date 04/28/2024	Payee name ActBlue		
	Amount (\$) \$13.06	Payee address; City; State; Zip Co 396 Summer St	de	
		Somerville, MA 02144		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b)	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Credit card processing fees
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	ght	Office held

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

l	oroun oura'r aymoni	The Instruction Guide explains how to complete this	s form.
1	Total pages Schedule F1: Sch: 7/58 Rpt:	2 FILER NAME Bucy III, John H. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00069589
4	Date 05/05/2024	5 Payee name ActBlue	I
6	Amount (\$) \$22.76	7 Payee address; City; State; Zip Code 397 Summer St Somerville, MA 02144	
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking (b) Description:	cription theck if travel outside of Texas. Complete Schedule T. theck if Austin, TX, officeholder living expense dit card processing fees
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	Date 05/12/2024	Payee name ActBlue	
	Amount (\$) \$114.00	Payee address; City; State; Zip Code 398 Summer St	
		Somerville, MA 02144	
	PURPOSE OF EXPENDITURE	7.ccounting/Euriking	Cription Theck if travel outside of Texas. Complete Schedule T. Theck if Austin, TX, officeholder living expense dit card processing fees
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought	Office held
	Date 05/19/2024	Payee name ActBlue	
	Amount (\$) \$36.38	Payee address; City; State; Zip Code 399 Summer St	
		Somerville, MA 02144	
	PURPOSE OF EXPENDITURE		Cription Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Country of the Card processing fees
	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
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

	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: 8/58 Rpt:	Bucy III, John H. (The Honorable)	00069589
4	Date	5 Payee name	
	05/26/2024	ActBlue	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$55.92	400 Summer St	
		Somerville, MA 02144	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	/ tocounting/ Burning	outside of Texas. Complete Schedule T.
			n, TX, officeholder living expense rocessing fees
		0.000.000.00	.00000
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O		
_	Date	Payee name	
	06/02/2024	ActBlue	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$23.36	401 Summer St	
	,		
		Somerville, MA 02144	
	PURPOSE		
	OF		outside of Texas. Complete Schedule T.
	EXPENDITURE	/ Ccounting/Danking	n, TX, officeholder living expense
		Credit card p	rocessing fees
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	experiditure to beliefit C/OI	'	
	Date	Payee name	
	06/09/2024	ActBlue	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$214.79	402 Summer St	
		Somerville, MA 02144	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	/ lecounting/ Banking	outside of Texas. Complete Schedule T.
			n, TX, officeholder living expense rocessing fees
		Great card p	rocessing ices
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O		Cinice ficial
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

l	Credit Card Payment The Instruction Guide explains how to complete this form.			
1	Total pages Schedule F1: Sch: 9/58 Rpt:	2 FILER NAME Bucy III, John H. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00069589
4	Date 06/16/2024	5 Payee name ActBlue		·
6	Amount (\$) \$100.83	7 Payee address; City; State; Zip Co 403 Summer St Somerville, MA 02144	de	
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b)	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Credit card processing fees
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sou	ght	Office held
	Date 06/23/2024	Payee name ActBlue		
	Amount (\$) \$151.39	Payee address; City; State; Zip Co 404 Summer St Somerville, MA 02144	ode	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b)	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Credit card processing fees
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	ght	Office held
	Date 06/30/2024	Payee name ActBlue		
	Amount (\$) \$198.11	Payee address; City; State; Zip Co 405 Summer St	de	
		Somerville, MA 02144		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b)	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Credit card processing fees
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	ght	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 Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salarice Magnet/Contract Labor

	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: 10/58 Rpt:	Bucy III, John H. (The Honorable) 00069589		
4	Date	5 Payee name		
	01/26/2024	Action Network		
6	Amount (\$)	7 Payee address; City; State; Zip Code		
	\$10.00	1900 L St NW		
		#900		
		Washington, DC 20036		
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
	OF EXPENDITURE	Advertising Expense		
	EXI ENDITORE	Check if Austin, TX, officeholder living expense Email service		
		Email Service		
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
3	expenditure to benefit C/O			
_	Date	Davida nama		
	02/26/2024	Payee name Action Network		
	Amount (\$)	Payee address; City; State; Zip Code		
	\$10.00	1900 L St NW		
		#900		
		Washington, DC 20036		
	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. Check if Austin, TX, officeholder living expense		
		Email service		
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
	expenditure to benefit C/OI	H		
	Date	Payee name		
	03/26/2024	Action Network		
	Amount (\$)	Payee address; City; State; Zip Code		
	\$10.00	1900 L St NW		
		#900		
		Washington, DC 20036		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description		
	OF	Advertising Expense Check if travel outside of Texas. Complete Schedule T.		
	EXPENDITURE	Check if Austin, TX, officeholder living expense		
		Email service		
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held		
	experialitate to beliefit 6/01			

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political C Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expens Legal Services 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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1:	
	Sch: 11/58 Rpt:	Bucy III, John H. (The Honorable) 00069589
4	Date	5 Payee name
	04/26/2024	Action Network
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$10.00	1900 L St NW
		#900
		Washington, DC 20036
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 Email service
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	05/28/2024	Action Network
	Amount (\$)	Payee address; City; State; Zip Code
	\$12.00	1900 L St NW
		#900
		Washington, DC 20036
	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
		Email service
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	06/26/2024	Action Network
	Amount (\$)	Payee address; City; State; Zip Code
	\$34.00	1900 L St NW
		#900
		Washington, DC 20036
	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. Check if Austin, TX, officeholder living expense
		Email service
-	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	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 Comm

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 Travel Out of District

	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: 12/58 Rpt:	Bucy III, John H. (The Honorable) 00069589			
4	Date	5 Payee name			
	04/02/2024	Alan Simms for Round Rock City Council Campaign			
6	Amount (\$)	7 Payee address; City; State; Zip Code			
	\$250.00	2052 Saint Andrews Dr			
		Round Rock, TX 78664			
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.			
		Candidate/Officeholder/Political Committee			
		Campaign continuution			
_	0 1: 0:11:4"				
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held			
	Date	Payee name			
	01/26/2024	Amazon			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$99.92	410 Terry Ave N			
		Seattle, WA 98109			
	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.			
		Coffee Coffee			
		Collee			
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held			
	Date	Payee name			
	02/14/2024	Amazon			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$18.39	410 Terry Ave N			
		Seattle, WA 98109			
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	OF EXPENDITURE	Office Overhead/Rental Expense			
	LAFENDITORE	Check if Austin, TX, officeholder living expense			
		Frames			
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held			
L	expenditure to benefit C/OH				

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

	Credit Card Payment	The Instruc	ction Guide explains how to c	omple	elete this form.
1	Total pages Schedule F1:	FILER NAME			3 Filer ID (Ethics Commission Filers)
	Sch: 13/58 Rpt:	Bucy III, John H. (The	e Honorable)		00069589
4	Date	Payee name			·
	02/16/2024	Amazon			
6	Amount (\$)	Payee address; City	y; State; Zip C	ode	
	\$71.43	410 Terry Ave N			
		Seattle, WA 98109			
8	PURPOSE	Category (See Categories	listed at the top of this schedule)	(b)) Description
	OF EXPENDITURE	Office Overhead/Ren	tal Expense		Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
					Flag pins
					- 5 1
9	Complete ONLY if direct	Candidate/Officeholder na	ame Office so	ught	t Office held
	expenditure to benefit C/OF				
	Date	Payee name			
	06/30/2024	Anna for LISD			
	Amount (\$)	Payee address; City	y; State; Zip C	ode	
	\$250.00	2300 Twisted Willow	Ln		
	!				
	!	Leander, TX 78641			
Г	PURPOSE	Category (See Categories	listed at the top of this schedule)	(b)) Description
	OF EXPENDITURE	Contributions/Donation	ons Made By		Check if travel outside of Texas. Complete Schedule T.
	· · · · · · · · · · · · · · · · · · ·	Candidate/Officehold	er/Political Committee		Check if Austin, TX, officeholder living expense Campaign contribution
	!				Cumpaign contribution
H	Complete ONLY if direct	Candidate/Officeholder na	ame Office so	<u>l</u> ught	t Office held
	expenditure to benefit C/OF				
	Date	Payee name			
	06/18/2024	Austin, Raphina			
	Amount (\$)	Payee address; City	y; State; Zip C	ode	
	\$1,000.00	3932 Kristencreek Ln	I		
		Round Rock, TX 7868	81		
	PURPOSE	Category (See Categories	listed at the top of this schedule)	(b)) Description
	OF EXPENDITURE	Salaries/Wages/Cont			Check if travel outside of Texas. Complete Schedule T.
					Check if Austin, TX, officeholder living expense Band for event
					Band for event
	Complete ONLY if direct	Candidate/Officeholder na	ame Office so	uaht	t Office held
	expenditure to benefit C/O	yanaraato, omoonoraan n	21110	agiit	C mod mola

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 Committee

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

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

	Candidate/Officeholder/Politica			Gitt/Awards/Memoria Legal Services	us Expense	Salaries/V		se s/Contract Labor		OTHER (enter a	category not listed above)	
	Credit Card Payment			The Instruction	Guide explai	ns how to co	mple	ete this form.				
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	(Ethics Commission Fi	lers)
	Sch: 14/58 Rpt:		Bucy III, Joh	ın H. (The Hoı	norable)					00069589		
4	Date	5	Payee name					•	_			
	03/19/2024			Beer & Kolach	nes							
6	Amount (\$)	7	Payee addres	ss; City;	Sta	ate; Zip Co	ode					
	\$13.38		3220 Manor	Rd								
			Austin, TX 7	8723								
8	PURPOSE	(a)					(b)	Description				
ľ	OF	(س)		e Categories listed a age Expense	t the top of this	schedule)	(5)	_ :	outsi	de of Texas. Com	plete Schedule T.	
	EXPENDITURE		1 OOU/Dever	age Expense						officeholder living	•	
								Food/bev at e	eve	nt		
9	Complete ONLY if direct		Candidate/Offic	ceholder name		Office sou	ıght			Office h	eld	
	expenditure to benefit C/OI	Н										
	Date		Payee name									
	01/24/2024		Black Austin	Democrats P	AC							
	Amount (\$)		Payee addres	ss; City;	Sta	ate; Zip Co	ode					
	\$1,122.27		P.O. Box 30	0142								
			Austin, TX 7	8703								
	PURPOSE	(a)		e Categories listed a	t the ten of this	aabadula)	(b)	Description				
	OF	'		e Calegories listed a s/Donations N		scriedule)	'		outsi	de of Texas. Com	plete Schedule T.	
	EXPENDITURE			Officeholder/Po	,	nmittee		Check if Austin,	, TX,	officeholder living	g expense	
								Event sponso	orsł	nip		
	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Offic	ceholder name		Office sou	ıght			Office h	eld	
	experioration benefit C/O											
	Date		Payee name									
	02/02/2024		Blue Victory	Communicati	ons, LLC							
	Amount (\$)		Payee addres	ss; City;	Sta	ate; Zip Co	ode					
	\$1,250.00		P.O. Box 30	0628								
			Austin, TX 7	8705								
	PURPOSE	(a)	Category (Se	e Categories listed a	t the top of this	schedule)	(b)	Description				
	OF EXPENDITURE		Consulting E		•	•					plete Schedule T.	
	LAFENDITORE									officeholder living	g expense	
								Communicati	ons	5		
	Complete ONII V if allow	Ļ	Opendidet - 10 m			O#:				Office	ماما	
	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Offic	enoider name		Office sou	ignt			Office h	eiu	

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: 15/58 Rpt:	Bucy III, John H. (The Honorable) 00069589
4	Date	5 Payee name
	03/01/2024	Blue Victory Communications, LLC
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,250.00	P.O. Box 300628
		Austin, TX 78705
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Communications
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
F	Date	Payee name
	03/19/2024	Blue Victory Communications, LLC
H	Amount (\$)	Payee address; City; State; Zip Code
	\$1,250.00	P.O. Box 300628
		Austin, TX 78705
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Communications
		Communications
⊢	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
F	Date	Payee name
	05/17/2024	Blue Victory Communications, LLC
H	Amount (\$)	Payee address; City; State; Zip Code
	\$1,250.00	P.O. Box 300626
	Ψ1,200.00	1.0. Box 600020
		Austin, TX 78705
H	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Consulting Expense
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Communications
L	0 1. 0	
	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 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	
_	Total marca Cabadula E1.	2 Files ID (Files Commission Files)
1	Total pages Schedule F1: Sch: 16/58 Rpt:	2 FILER NAME Bucy III, John H. (The Honorable) 3 Filer ID (Ethics Commission Filers) 00069589
4	Date	5 Payee name
	01/05/2024	Boost Mobile
6	Amount (\$) \$35.00	7 Payee address; City; State; Zip Code9060 Irvine Center Dr
		Irvine, CA 92618
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
		Check if Austin, TX, officeholder living expense
		Campaign phone
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	02/06/2024	Boost Mobile
	Amount (\$)	Payee address; City; State; Zip Code
	\$35.00	9060 Irvine Center Dr
		Irvine, CA 92618
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Campaign phone
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	03/06/2024	Boost Mobile
	Amount (\$)	Payee address; City; State; Zip Code
	\$35.00	9060 Irvine Center Dr
		Irvine, CA 92618
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
	-	Check if Austin, TX, officeholder living expense
		Campaign phone
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
L		<u> </u>

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1: Sch: 17/58 Rpt:	2 FILER NAME Bucy III, John H. (The Honorable) 3 Filer ID (Ethics Commission Filers) 00069589	
4	Date 04/08/2024	5 Payee name Boost Mobile	
6	Amount (\$) \$35.00	7 Payee address; City; State; Zip Code 9060 Irvine Center Dr	
8	PURPOSE OF EXPENDITURE	Irvine, CA 92618 (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign phone	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held H	
	Date 05/06/2024	Payee name Boost Mobile	
	Amount (\$) \$35.00	Payee address; City; State; Zip Code 9060 Irvine Center Dr Irvine, CA 92618	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign phone	
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held	
	Date 06/06/2024	Payee name Boost Mobile	
	Amount (\$) \$35.00	Payee address; City; State; Zip Code 9060 Irvine Center Dr	
		Irvine, CA 92618	
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign phone	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held	_

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Food/Beverage Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

	Candidate/Officeholder/Politica Credit Card Payment							ges/Contract Labor OTHER (enter a category not listed above)						
		_		The Instruction C	Suide explain	s how to co	mple	te this form.	_					
1	Total pages Schedule F1:	2	FILER NAME						3	File	er ID	(Ethics (Commission File	rs)
	Sch: 18/58 Rpt:		Bucy III, Joh	n H. (The Hor	orable)					00	069589			
4	Date	5	Payee name											
	01/31/2024		Burke, Kyle											
6	Amount (\$)	7	Payee addres	s; City;	Stat	e; Zip Co	de							
	\$500.00		2203 Marcus	s Abrams Blvd										
			Austin, TX 7	8748										
_	DUDDOCE	(0)				Ī	(b)	5	_					
8	PURPOSE OF	(a)		e Categories listed at		chedule)	(D)	Description Check if travel of	nutei	de of	Tayas Cor	nnlete Scher	tulo T	
	EXPENDITURE		Salaries/wa	ges/Contract t	ontract Labor			Check if Austin,					Juic 1.	
								Legislative sa	ılar	y sı	uppleme	ent		
9	Complete ONLY if direct		Candidate/Offic	eholder name		Office sou	aht		_		Office h	eld		
	expenditure to benefit C/OI						9							
	Date	Т	Dayoo nama						_					
	02/28/2024		Payee name Burke, Kyle											
			-						_					
	Amount (\$)		Payee addres			e; Zip Co	ae							
	\$500.00		2203 Marcus	s Abrams Blvd										
			Austin, TX 7	8748										
	PURPOSE	(a)	Category (Se	e Categories listed at	the top of this s	chedule)	(b)	Description						
	OF EXPENDITURE			ges/Contract l				Check if travel of					dule T.	
								Check if Austin, TX, officeholder living expense Legislative salary supplement						
								Legislative sa	ııar	y Si	ıppıeme	ent		
	2 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	L	- "						_					
	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Offic	enolder name		Office sou	gnt				Office h	iela		
	<u>'</u>	_							_					
	Date		Payee name											
	03/26/2024		Burke, Kyle											
	Amount (\$)		Payee addres	s; City;	Stat	e; Zip Co	de							
	\$500.00		2203 Marcus	s Abrams Blvd										
			Austin, TX 7	8748										
	PURPOSE	(a)	Category (Se	e Categories listed at	the top of this s	chedule)	(b)	Description	_					
	OF EXPENDITURE			ges/Contract l				Check if travel of	outsir	de of	Texas. Cor	nplete Sched	dule T.	
	EXPENDITORE							Check if Austin,						
								Legislative sa	ılar	y sı	ıppleme	ent		
	Complete ONLY if direct expenditure to benefit C/OH		Candidate/Offic	eholder name		Office sou	ght				Office h	ield		
	experialitate to beliefft C/Of	'												
_														

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Event Expense Loan Repayment/Reimbursement
Fees Office Overhead/Rental Expense
Food/Beverage Expense Polling Expense
Gitt/Awards/Memorials Expense Printing Expense
Leaal Services Salaries/Waacs/Contract Labor

	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: 19/58 Rpt:	Bucy III, John H. (The Honorable) 00069589
4	Date	5 Payee name
	04/30/2024	Burke, Kyle
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$500.00	2203 Marcus Abrams Blvd
		Austin, TX 78748
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 Legislative salary supplement
		Legislative salary supplement
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/OI	
F	Date	Payee name
	05/31/2024	Burke, Kyle
H	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	2203 Marcus Abrams Blvd
		Austin, TX 78748
	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 Legislative salary supplement
		Legislative salary supplement
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
H	Date	Payee name
	06/30/2024	Burke, Kyle
H	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	2203 Marcus Abrams Blvd
		Austin, TX 78748
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
	2/11/2/10/12	Check if Austin, TX, officeholder living expense
		Legislative salary supplement
\vdash	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
I	expenditure to benefit C/OI	· · · · · · · · · · · · · · · · · · ·
\vdash		
ı		

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			Food/Beverage Expense Gift/Awards/Memorials Ex Legal Services The Instruction Guid			xpens Vages	e /Contract Labor		Travel in District Travel Out of Dis OTHER (enter a	trict category not listed above)
1	Total pages Schedule F1:	2							3	Filer ID	(Ethics Commission Filers)
L	Sch: 20/58 Rpt:	L	Bucy III, Joh	n H. (The Honor	able)				L	00069589	
4	Date	5	Payee name								
L	05/28/2024		Cedar Park	Chamber of Com	imerce						
6	Amount (\$)	7	Payee addres	ss; City;	State;	Zip Co	ode				
	\$300.00		1460 E. Wh	itestone Blvd							
			Ste. 180								
			Cedar Park,	TX 78613							
8	PURPOSE	(a)	Category (Se	e Categories listed at the	top of this sche	edule)	(b)	Description			
	OF EXPENDITURE		Office Overl	nead/Rental Expe	ense			=		de of Texas. Comp	
								Chamber due		officeholder living	expense
								Criainber due	,,		
9	Complete ONLY if direct		Candidate/Offic	ceholder name		Office sou	l ıaht			Office he	eld
Ĺ	expenditure to benefit C/OI										
	Date		Payee name								
	01/22/2024		Chuy for RF								
	Amount (\$)		Payee addres	•	State;	Zip Co	ode				
	\$250.00		13304 Marr	ero Dr							
			Austin, TX 7	8729							
	PURPOSE OF	(a)	Category (Se	e Categories listed at the	top of this sche	edule)	(b)	Description			
	EXPENDITURE			s/Donations Mad Officeholder/Politic		ittoo		—		de of Texas. Comp officeholder living	
			Candidate/C	Jiiicerioidei/Poilti	cai Comm	illee		Campaign co			схренае
								, 5			
	Complete ONLY if direct		Candidate/Offic	ceholder name	C	Office sou	ıght			Office he	eld
	expenditure to benefit C/OI	Н									
	Date		Payee name								
	02/07/2024		•	General Store							
	Amount (\$)		Payee addres	ss; City;	State;	Zip Co	ode				
	\$197.05		53710 TX-1	18							
			Terlingua, T	X 79852					_		
	PURPOSE	(a)	Category (Se	e Categories listed at the	top of this sche	edule)	(b)	Description			
	OF EXPENDITURE		Office Overl	nead/Rental Expe	ense			ш		de of Texas. Comp officeholder living	
								Supplies for s			елрепве
	Complete ONLY if direct		Candidate/Offic	ceholder name	C	Office sou	ıght			Office he	eld
	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	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: 21/58 Rpt:	Bucy III, John H. (The Honorable) 00069589
4	Date	5 Payee name
	02/09/2024	Cottonwood General Store
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$70.05	53710 TX-118
		Terlingua, TX 79852
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Supplies for staff retreat
		Supplies for stall retreat
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/OI	
⊨	Date	Power name
	02/21/2024	Payee name
		Cupprimo
	Amount (\$)	Payee address; City; State; Zip Code
	\$28.58	8650 Spicewood Springs Rd
		#105
		Austin, TX 78759
	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 Cupcakes for staff
		Cupcakes for stail
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
_	Date	Davies same
	06/17/2024	Payee name
		Cupprimo
	Amount (\$)	Payee address; City; State; Zip Code
	\$188.05	8650 Spicewood Springs Rd
		#105
		Austin, TX 78759
	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.
	-	Cupcakes for event
		Cupcakes for event
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	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 Committe Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing 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)
Ĺ	Sch: 22/58 Rpt:	Bucy III, John H. (The Honorable)
4	Date	5 Payee name
	01/11/2024	Donna Howard Campaign
6	Amount (\$) \$240.00	7 Payee address; City; State; Zip Code P.O. Box 5375
		Austin, TX 78763
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
		Candidate/Officeholder/Political Committee
		Costshare of giftcards for Central Texas Foodbank
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	05/24/2024	El Alma
	Amount (\$)	Payee address; City; State; Zip Code
	\$231.67	1025 Barton Springs Rd
		Austin, TX 78704
	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
		Staff lunch
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	02/05/2024	Esme for Leander
	Amount (\$)	Payee address; City; State; Zip Code
	\$250.00	4300 Valley Oaks
		Leander, TX 78641
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T.
		Candidate/Officeholder/Political Committee
		Campaign continuuton
-	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	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 Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to comple	ete this form.
1	Total pages Schedule F1: Sch: 23/58 Rpt:	2 FILER NAME Bucy III, John H. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00069589
4	Date 04/10/2024	5 Payee name Facebook	
6	Amount (\$) \$39.83	7 Payee address; City; State; Zip Code 1 Hacker Way	
8	PURPOSE OF EXPENDITURE	Menlo Park, CA 94025 (a) Category (See Categories listed at the top of this schedule) Advertising Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Social media ads
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought	Office held
	Date 01/25/2024	Payee name Fresh Plus	
	Amount (\$) \$23.26	Payee address; City; State; Zip Code 1221 W. Lynn St Austin, TX 78703	
	PURPOSE OF EXPENDITURE		Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Office snacks and drinks
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought	Office held
	Date 01/04/2024	Payee name Gannett	
	Amount (\$) \$15.86	Payee address; City; State; Zip Code 7950 Jones Branch Dr	
		McLean, VA 22107	
	PURPOSE OF EXPENDITURE	Office Overhead/Rental Expense	Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Newspaper subscription
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held

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	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: 24/58 Rpt:	Bucy III, John H. (The Honorable) 00069589
4	Date	5 Payee name
	02/08/2024	Gannett
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$15.86	7950 Jones Branch Dr
		McLean, VA 22107
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
		Check if Austin, TX, officeholder living expense
		Newspaper subscription
_		
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	03/07/2024	Gannett
	Amount (\$)	Payee address; City; State; Zip Code
	\$15.86	7950 Jones Branch Dr
		McLean, VA 22107
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Newspaper subscription
		νενσράρει σαυστηριίου
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	
	Date	Payee name
	04/04/2024	Gannett
	Amount (\$)	Payee address; City; State; Zip Code
	\$15.86	7950 Jones Branch Dr
		McLean, VA 22107
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Newspaper subscription
	Commission ONE V. C. P.	Condidate/Officeholder name
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held
	Oriana.o to borioni O/Oi	

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	I Committee Legal Services Salaries/Wages/Contract Labor						OTHER (enter a category not listed above)				
	Credit Card Payment			The Instruction (Guide explains h	now to co	mple	te this form.				
1	Total pages Schedule F1:	2 F	ILER NAME						3	Filer ID	(Ethics Commiss	sion Filers)
	Sch: 25/58 Rpt:	E	Bucy III, Joh	n H. (The Hor	orable)					00069589		
4	Date	5 F	Payee name									
	05/10/2024	(Gannett									
6	Amount (\$)	7 F	Payee addres	s; City;	State:	Zip Co	de					
Ŭ	\$15.86	l	7950 Jones		Otato,	Z.p 00	uo					
	420.00											
		Ι,	Mal aan \/A	22107								
		-	McLean, VA									
8	PURPOSE OF			e Categories listed at		edule)	(b)	Description				
	EXPENDITURE	(Office Overh	nead/Rental Ex	kpense			느		officeholder living	plete Schedule T.	
								Newspaper s			g expense	
9	Complete ONLY if direct	Ca	andidate/Offic	eholder name	0	office sou	aht			Office he	eld	
-	expenditure to benefit C/OI				_		5 ···					
_	Date	_	20100									
	06/06/2024	l	Payee name Gannett									
	Amount (\$)	l	Payee addres		State;	Zip Co	ae					
	\$15.86	′	7950 Jones	Branch Dr								
			McLean, VA	22107								
	PURPOSE OF	(a) (Category (Se	e Categories listed at	the top of this sche	edule)	(b)	Description				
	EXPENDITURE	(Office Overh	nead/Rental E	kpense					de of Texas. Com officeholder living	plete Schedule T.	
			L				Newspaper s			у ехрепзе		
								. 10110papo. 0	0.10	, , , , , , , , , , , , , , , , , , ,		
	Complete ONLY if direct	l Ca	andidate/Offic	eholder name	0	office sou	aht			Office he	eld	
	expenditure to benefit C/OI						5 ····					
	Date		Dayaa nama									
	03/21/2024	l	Payee name Generation S	SED\/E								
					Chahai	7:- 0-	-1 -					
	Amount (\$) \$150.00	l	Payee addres 5555 N. Lan		State;	Zip Co	ue					
	Φ150.00	l		iai bivu								
		l	:123									
		<i>P</i>	Austin, TX 7	8751								
	PURPOSE OF			e Categories listed at		edule)	(b)	Description				
	EXPENDITURE			s/Donations M		i++		ш		de of Texas. Com officeholder living	nplete Schedule T.	
			Januluale/C	Officeholder/Po	illicai Commi	lliee		Charitable do			g expense	
								Criamasio do	,,,,,			
	Complete ONLY if direct	l Ca	andidate/∩ffic	eholder name		office sou	aht			Office he	eld	
	expenditure to benefit C/OI		andidate/Offic	onolder Hallie	O	moc sou	9111			Cilice III	oi a	

SCHEDULE F1

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

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

	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: 26/58 Rpt:	Bucy III, John H. (The Honorable) 00069589	
4	Date	5 Payee name	
	01/02/2024	Google LLC	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$19.19	1600 Amphitheatre Pkwy	
		Mountain View, CA 94043	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense Google Workspace	
		Coogie Workspace	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
ľ	expenditure to benefit C/O		
_	Date	Payeo namo	
	02/01/2024	Payee name Google LLC	
		-	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$19.19	1600 Amphitheatre Pkwy	
		Mountain View, CA 94043	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Google Workspace	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/OI		
H	Date	Payee name	
	03/01/2024	Google LLC	
_	Amount (\$)	Payee address; City; State; Zip Code	
	\$19.19	1600 Amphitheatre Pkwy	
	Ψ13.19	1000 / Milphidicade I Kwy	
		Mountain View, CA 04042	
	BUDE 2 2 -	Mountain View, CA 94043	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
		Google Workspace	
	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)

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

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	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: 27/58 Rpt:	Bucy III, John H. (The Honorable) 00069589			
4	Date	5 Payee name			
	04/01/2024	Google LLC			
6	Amount (\$)	7 Payee address; City; State; Zip Code			
	\$20.67	1600 Amphitheatre Pkwy			
		Mountain View, CA 94043			
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	OF EXPENDITURE	Office Overhead/Rental Expense			
		Check if Austin, TX, officeholder living expense Google Workspace			
		Google Workspace			
_	Occupated ONLY if alice at	Our did to 10 ff as had done as many			
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held			
	Date	Payee name			
	05/01/2024	Google LLC			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$23.03	1600 Amphitheatre Pkwy			
		Mountain View, CA 94043			
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense			
		Google Workspace			
		Coogie Workspace			
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held			
	expenditure to benefit C/O	- · · · · · · · · · · · · · · · · · · ·			
_	Data				
	Date	Payee name			
	06/03/2024	Google LLC			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$23.03	1600 Amphitheatre Pkwy			
		Mountain View, CA 94043			
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	OF EXPENDITURE	Office Overhead/Rental Expense			
		Check if Austin, TX, officeholder living expense			
		Google Workspace			
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held			
	Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH				

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	I Committee	Legal Services The Instruction Guide	Salaries/\	Wages	s/Contract Labor		OTHER (enter a	category not listed above)
1	Total pages Schedule F1:	2 FILER NAM	 ИЕ				3	Filer ID	(Ethics Commission	Filers)
	Sch: 28/58 Rpt:		John H. (The Honora	ble)				00069589		-
4	Date	5 Payee nam	ne							
	06/13/2024	Graze Cra	aze							
6	Amount (\$)	7 Payee add	lress; City;	State; Zip Co	ode					
	\$1,412.40	8650 Spic	cewood Springs Rd							
		#124								
		Austin, T	< 78759							
8	PURPOSE	(a) Category	(See Categories listed at the to	op of this schedule)	(b)	Description				
	OF EXPENDITURE	Food/Bev	rerage Expense			_		de of Texas. Comp		
						_		officeholder living	expense	
						Catering for e	eve	ΠL		
					<u> </u>					
9	Complete ONLY if direct expenditure to benefit C/OF		Officeholder name	Office sou	ught			Office he	eld	
	Date	Payee nan	ne							
	01/06/2024	HEB								
	Amount (\$)	Payee add	ress; City;	State; Zip Co	ode					
	\$38.26	1000 E. 4	1st St							
		Austin, T	K 78751							
	PURPOSE OF	(a) Category	(See Categories listed at the to	op of this schedule)	(b)	Description				
	EXPENDITURE	Food/Bev	rerage Expense					de of Texas. Com		
						Office snacks		officeholder living	expense	
						Office Stracks	al	iu uninks		
	Complete ONLY if direct	Candidate/C	Officeholder name	Office sou	l ught			Office he	eld	
	expenditure to benefit C/O	1								
	Date	Payee nam	пе							
	01/06/2024	HEB								
	Amount (\$)	Payee add	ress; City;	State; Zip Co	ode					
	\$87.13	2701 E. 7	th St							
		Austin, T	< 78702							
	PURPOSE OF		(See Categories listed at the to	op of this schedule)	(b)	Description				
	EXPENDITURE	Food/Bev	erage Expense			ш		de of Texas. Comp		
						Office snacks		officeholder living	expense	
						Onice Stracks	o al	iu uiiiiKS		
L	Complete ONLY if direct	Condidate (C	Office holder norma	Office	lap+			Office I	J.d	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Officeholder name	Office sou	ugnt			Office he	eiu	

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

	Credit Card Payment	The Instruction Guide explains how to co	mple	ete this form.
1	Total pages Schedule F1: Sch: 29/58 Rpt:	2 FILER NAME Bucy III, John H. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00069589
4	Date 01/16/2024	5 Payee name HEB		·
6	Amount (\$) \$74.17	7 Payee address; City; State; Zip Co 5808 Burnet Rd Austin, TX 78756	de	
8	PURPOSE OF EXPENDITURE	(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 Office snacks and drinks
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	ght	Office held
	Date 02/21/2024	Payee name HEB		
	Amount (\$) \$135.23	Payee address; City; State; Zip Co 2701 E. 7th St Austin, TX 78702	de	
	PURPOSE OF EXPENDITURE	(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 Office snacks and drinks
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	ght	Office held
	Date 03/12/2024	Payee name HEB		
	Amount (\$) \$188.17	Payee address; City; State; Zip Co 1000 E. 41st St	de	
		Austin, TX 78751		
	PURPOSE OF EXPENDITURE	(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 Office snacks and drinks
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	ght	Office held

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1: Sch: 30/58 Rpt:	2 FILER NAME Bucy III, John H. (The Honorable) 3 Filer ID (Ethics Commission Filers) 00069589
4	Date 04/17/2024	5 Payee name HEB
6	Amount (\$) \$116.08	7 Payee address; City; State; Zip Code 1000 E. 41st St
L		Austin, TX 78751
8	PURPOSE OF EXPENDITURE	(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 Office snacks and drinks
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
L	05/22/2024	HEB
	Amount (\$) \$164.09	Payee address; City; State; Zip Code 1000 E. 41st St
		Austin, TX 78751
	PURPOSE OF EXPENDITURE	(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 Office snacks and drinks
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date 06/12/2024	Payee name HEB
	Amount (\$) \$56.35	Payee address; City; State; Zip Code 5808 Burnet Rd
		Austin, TX 78756
	PURPOSE OF EXPENDITURE	(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 Office snacks and drinks
	Complete ONLY if direct expenditure to benefit C/O	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 Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

	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: 31/58 Rpt:	Bucy III, John H. (The Honorable)	00069589
4	Date	5 Payee name	•
	02/12/2024	Hampton Inn & Suites	
6	Amount (\$) \$152.55	7 Payee address; City; State; Zip Code 2607 US-90	
L		Alpine, TX 79830	
8	PURPOSE OF EXPENDITURE	Check if A	avel outside of Texas. Complete Schedule T. ustin, TX, officeholder living expense McDonald's Observatory
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	02/12/2024	Hampton Inn & Suites	
	Amount (\$) \$152.55	Payee address; City; State; Zip Code 2608 US-90	
		Alpine, TX 79830	
	PURPOSE OF EXPENDITURE	Check if Ar	avel outside of Texas. Complete Schedule T. ustin, TX, officeholder living expense McDonald's Observatory
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	Date 02/12/2024	Payee name Hampton Inn & Suites	
	Amount (\$) \$227.55	Payee address; City; State; Zip Code 2609 US-90	
		Alpine, TX 79830	
	PURPOSE OF EXPENDITURE	Check if Ai	avel outside of Texas. Complete Schedule T. ustin, TX, officeholder living expense IcDonald's Observatory
	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
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

	Credit Cara r dyment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 32/58 Rpt:	Bucy III, John H. (The Honorable)	00069589
4	Date	5 Payee name	
	02/12/2024	Hampton Inn & Suites	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$169.50	2610 US-90	
	l		
		Alpine, TX 79830	
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	1 1 1 1 1 1 Town Commission Cohodula T
	EXPENDITURE	Traver ear or Biotriot	el outside of Texas. Complete Schedule T. tin, TX, officeholder living expense
	l		cDonald's Observatory
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI		
	Date	Payee name	
	01/15/2024	Heinrich, Allison	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$1,000.00	2301 Ohlen Rd	
	l	#107	
		Austin, TX 78757	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	Consider Cohodule T
	EXPENDITURE	Consuming Expense	el outside of Texas. Complete Schedule T. tin, TX, officeholder living expense
	l	,	management/consulting
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	1	
	Date	Payee name	
	01/31/2024	Heinrich, Allison	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$500.00	2301 Ohlen Rd	
	l	#107	
		Austin, TX 78757	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	the state of the s
	EXPENDITURE	Jaianes/ Wages/Contract Eabor	el outside of Texas. Complete Schedule T. tin, TX, officeholder living expense
	l		salary supplement
	l		
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	d	
Г			

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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1: Sch: 33/58 Rpt:	2 FILER NAME Bucy III, John H. (The Honorable) 3 Filer ID (Ethics Commission Filers) 00069589
4 Date 02/15/2024	5 Payee name Heinrich, Allison
6 Amount (\$) \$1,000.00	7 Payee address; City; State; Zip Code 2301 Ohlen Rd #107 Austin, TX 78757
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign management/consulting
9 Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H
Date 02/28/2024	Payee name Heinrich, Allison
Amount (\$) \$500.00	Payee address; City; State; Zip Code 2301 Ohlen Rd #107 Austin, TX 78757
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 Legislative salary supplement
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H
Date 03/15/2024	Payee name Heinrich, Allison
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code 2301 Ohlen Rd #107 Austin, TX 78757
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign management/consulting
Complete ONLY if direct expenditure to benefit C/O	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 Lenal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Candidate/Officenoider/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: 34/58 Rpt:	Bucy III, John H. (The Honorable) 00069589
4	Date	5 Payee name
	03/26/2024	Heinrich, Allison
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$500.00	2301 Ohlen Rd
	!	#107
	!	Austin, TX 78757
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 Legislative salary supplement
	!	Logislative salary supplement
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
-	expenditure to benefit C/O	
	Date	Payee name
	04/15/2024	Heinrich, Allison
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,000.00	2301 Ohlen Rd
	. ,	#107
	!	Austin, TX 78757
_	PURPOSE	
	OF	(a) Category (See Categories listed at the top of this schedule) Consulting Expense (b) Description Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Consulting Expense Check if Austin, TX, officeholder living expense
	!	Campaign management/consulting
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OF	<u> </u>
	Date	Payee name
	04/30/2024	Heinrich, Allison
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	2301 Ohlen Rd
	!	#107
	!	Austin, TX 78757
	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.
	<u> </u>	Check if Austin, TX, officeholder living expense Legislative salary supplement
	!	Legislative salary supplement
-	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 Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1: Sch: 35/58 Rpt:	2 FILER NAME Bucy III, John H. (The Honorable) 3 Filer ID (Ethics Commission Filers) 00069589
4	Date 05/15/2024	5 Payee name Heinrich, Allison
6	Amount (\$) \$1,000.00	7 Payee address; City; State; Zip Code 2301 Ohlen Rd #107 Austin, TX 78757
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign management/consulting
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date 05/31/2024	Payee name Heinrich, Allison
	Amount (\$) \$500.00	Payee address; City; State; Zip Code 2301 Ohlen Rd #107 Austin, TX 78757
	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 Legislative salary supplement
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date 06/15/2024	Payee name Heinrich, Allison
	Amount (\$) \$1,000.00	Payee address; City; State; Zip Code 2301 Ohlen Rd #107 Austin, TX 78757
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign management/consulting
	Complete ONLY if direct expenditure to benefit C/O	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 Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

	Credit Card Payment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1: Sch: 36/58 Rpt:	2 FILER NAME Bucy III, John H. (The Honorable)	3 Filer ID (Ethics Commission Filers) 00069589
4	Date 06/30/2024	5 Payee name Heinrich, Allison	
6	Amount (\$) \$500.00	7 Payee address; City; State; Zip Code 2301 Ohlen Rd #107 Austin, TX 78757	
8	PURPOSE OF EXPENDITURE	Check if Austin	outside of Texas. Complete Schedule T. n, TX, officeholder living expense alary supplement
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held
	Date 06/07/2024	Payee name Hotel Paso Del Norte	
	Amount (\$) \$1,053.98	Payee address; City; State; Zip Code 10 Henry Trost Ct	
		El Paso, TX 79901	
	PURPOSE OF EXPENDITURE	Check if Austin	outside of Texas. Complete Schedule T. n, TX, officeholder living expense P Convention
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held
	Date 06/10/2024	Payee name Hotel Paso Del Norte	
	Amount (\$) \$160.64	Payee address; City; State; Zip Code 10 Henry Trost Ct	
		El Paso, TX 79901	
	PURPOSE OF EXPENDITURE	1 000/Beverage Expense	outside of Texas. Complete Schedule T. n, TX, officeholder living expense
	Complete ONLY if direct expenditure to benefit C/O	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 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: 37/58 Rpt:	Bucy III, John H. (The Honorable) 00069589			
4	Date	5 Payee name			
	06/10/2024	Hotel Paso Del Norte			
6	Amount (\$)	7 Payee address; City; State; Zip Code			
	\$8.56	10 Henry Trost Ct			
		El Paso, TX 79901			
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense			
		Incidentals			
		in old of the late			
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held			
	expenditure to benefit C/OI	- · · · · · · · · · · · · · · · · · · ·			
\vdash	Data				
	Date	Payee name			
	01/22/2024	Jack and Jill of America, Inc., Dallas Chapter			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$250.00	10917 Carissa Dr			
		Dallas, TX 75218			
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	OF EXPENDITURE	Contributions/Donations Made By			
	ZA ZIIDII GIAZ	Candidate/Officeholder/Political Committee			
		Charitable donation			
	Complete ONLY if direct	Condidate/Office helds name Office accepts			
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held			
	· 				
	Date	Payee name			
	06/30/2024	Kenneth Guerrero Campaign			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$250.00	226 Altamont St			
		Hutto, TX 78634			
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
	OF EXPENDITURE	Contributions/Donations Made By			
	ZA ZIIDII GIAZ	Candidate/Officeholder/Political Committee			
		Campaign contribution			
	Commission ONU Wife allows	Condidate/Officeholder name			
	Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH				

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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: 38/58 Rpt:	Bucy III, John H. (The Honorable) 00069589
4	Date	5 Payee name
	05/19/2024	Krista Laine Campaign
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$450.00	13359 N. Hwy 183
		Ste. 406B-599
		Austin, TX 78750
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
		Candidate/Officeholder/Political Committee Campaign contribution
		Campaigh contribution
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/OI	
	Date	Payee name
	03/06/2024	Kristian Carranza for Texas
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,000.00	P.O. Box 831436
		San Antonio, TX 78283
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense
		Candidate/Officeholder/Political Committee Campaign contribution
		Campaign contribution
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	04/03/2024	Laurel for Texas
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,000.00	P.O.Box 6866
		San Antonio, TX 78209
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
		Candidate/Officeholder/Political Committee
		Campaign contribution
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	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 Committ

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: 39/58 Rpt:	Bucy III, John H. (The Honorable) 00069589
4	Date	5 Payee name
	02/06/2024	Little Burro Country Store
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$91.26	51491 TX-118
		Alpine, TX 79830
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
		Check if Austin, TX, officeholder living expense Supplies for staff retreat
		Supplies for stall retreat
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	H Office sought Office near Office sought
_	Date	Davies same
	02/08/2024	Payee name
		Little Burro Country Store
	Amount (\$)	Payee address; City; State; Zip Code
	\$82.47	51491 TX-118
		Alpine, TX 79830
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
		Check if Austin, TX, officeholder living expense
		Supplies for staff retreat
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	
_	_	
	Date	Payee name
	02/12/2024	McDonald's Observatory
	Amount (\$)	Payee address; City; State; Zip Code
	\$100.00	3640 Dark Sky Dr
		Fort Davis, TX 79734
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense Event tickets
		Event tickets
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
ising 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
Legal Services

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: 40/58 Rpt:	Bucy III, John H. (The Honorable) 00069589
4	Date	5 Payee name
	05/30/2024	Michael Gleason for Sheriff
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$500.00	604 Palo Alto Ln
		Cedar Park, TX 78613
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T.
		Candidate/Officeholder/Political Committee
		Campaign contribution
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/OI	- · · · · · · · · · · · · · · · · · · ·
_		
	Date	Payee name
	01/25/2024	Michael's
	Amount (\$)	Payee address; City; State; Zip Code
	\$161.83	10225 Research Blvd
		Ste. 2000
		Austin, TX 78759
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
	ZA ZIIDII GIAZ	Check if Austin, TX, officeholder living expense
		Frames
	Complete ONLY if direct	Condidate/Office helds name Office accepts
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	· 	
	Date	Payee name
	01/25/2024	Michael's
	Amount (\$)	Payee address; City; State; Zip Code
	\$15.78	10225 Research Blvd
		Ste. 2000
		Austin, TX 78759
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
	LA LIBITORE	Check if Austin, TX, officeholder living expense
		Frames
	Complete ONLY if alias -t	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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1: Sch: 41/58 Rpt:	2 FILER NAME Bucy III, John H. (The Honorable) 3 Filer ID (Ethics Commission Filers) 00069589
4 Date 01/25/2024	5 Payee name Michael's
6 Amount (\$) \$15.78	7 Payee address; City; State; Zip Code 10225 Research Blvd Ste. 2000 Austin, TX 78759
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Frames
9 Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H
Date 06/30/2024	Payee name Mihaela Plesa Campaign
Amount (\$) \$500.00	Payee address; City; State; Zip Code P.O. Box 796311 Dallas, TX 75248
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign contribution
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date 01/02/2024	Payee name NGPVan, Inc
Amount (\$) \$341.12	Payee address; City; State; Zip Code 655 15th St. NW Ste. 650 Washington, DC 20005
PURPOSE 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 Database software
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Mac Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		mmittee Le	egal Services	emonals Expens stion Guide e			/ages	/Contract Labor		OTHER (enter a	istrict a category not listed	above)
_	T	1_								1_		(Eul.) - 0	·
1	Total pages Schedule F1:	2								3	Filer ID	(Ethics Comm	ission Filers)
	Sch: 42/58 Rpt:		Bucy III, Johr	H. (The	Honorable	e) 					00069589		
4	Date	5	Payee name										
	02/02/2024		NGPVan, Inc										
6	Amount (\$)	7	Payee address	; City	<i>r</i> ;	State;	Zip Co	de					
	\$341.12		655 15th St. I	W									
			Ste. 650										
			Washington,	DC 2000	15								
Ļ	DUDDOCE	(-)						/l=\					
8	PURPOSE OF	(a)	Category (See				dule)	(a)	Description	oto	ide of Toyon Con	anlata Cabadula T	
	EXPENDITURE		Solicitation/F	undraisir	ng Expense	9			_		, officeholder livin	nplete Schedule T.	
									Database so			g expense	
									Database so		ar c		
9	Complete ONLY if direct	<u> </u>	Candidate/Office	holdor na	amo	0	ffice sou	aht			Office h	old	
١	expenditure to benefit C/OI		candidate/Onice	illoluel lie	ame	0	ince sou	giit			Office fi	eiu	
	Date	Π	Payee name										
	03/04/2024		NGPVan, Inc										
	Amount (\$)	T	Payee address	; City	<i>'</i> ;	State;	Zip Co	de					
	\$341.12		655 15th St. I	٧W									
			Ste. 650										
			Washington,	DC 2000	15								
	P. P. C.	ļ.,						<i>a</i> >					
	PURPOSE OF	(a)	Category (See				dule)	(b)	Description				
	EXPENDITURE		Solicitation/F	undraisir	ng Expense	Э			=		, officeholder livin	nplete Schedule T.	
									Database so			g expense	
									Database so	1000	arc		
	Complete ONLY if direct		Candidate/Office	holder na	ame	0	ffice sou	ght			Office h	eld	
	expenditure to benefit C/OI	Н						•					
	Date	Π	Payee name										
	04/02/2024		NGPVan, Inc										
		_											
	Amount (\$)		Payee address		/ ;	State;	Zip Co	de					
	\$341.12		655 15th St. I	ΛW									
			Ste. 650										
			Washington,	DC 2000)5								
	PURPOSE	(a)	Category (See	Categories I	isted at the top o	of this sche	dule)	(b)	Description				
	OF EXPENDITURE		Solicitation/F						Check if travel	outs	ide of Texas. Con	nplete Schedule T.	
	EXPENDITURE				•						, officeholder livin	g expense	
									Database so	ftw	are		
	Complete ONLY if direct		Candidate/Office	holder na	ame	0	ffice sou	ght			Office h	eld	
	expenditure to benefit C/OI	H											

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	y - al Con	nmittee	Legal Sen		•		/ages	ete this form.		Travel Out o OTHER (en		trict category not listed above)
1	Total pages Schedule F1:	2	EII ED NIAME						1	3	Filer ID		(Ethics Commission Filers)
Ĺ	Sch: 43/58 Rpt:	1	Bucy III, Joh		he Hono	rable)					0006958	39	(Lanco Commission File15)
4	Date	5	Payee name										
	05/02/2024		NGPVan, Ir	IC									
6	Amount (\$)	ı	Payee addres	•	City;	State	e; Zip Co	de					
	\$341.12		655 15th St	. NW									
			Ste. 650										
L		L	Washington	, DC 20	0005			_				_	
8	PURPOSE OF		Category (Se				nedule)	(b)	Description				
	OF EXPENDITURE		Solicitation/	Fundra	ising Exp	ense		l	Check if travel of Check if Austin,				olete Schedule T.
								l	Database sof			ıy	p =
								l		•			
9	Complete ONLY if direct expenditure to benefit C/OH		Candidate/Offi	ceholde	r name	(Office sou	ght			Office	e he	eld
L		_										_	
	Date 06/07/2024		Payee name	10									
	06/07/2024	⊢	NGPVan, Ir		Dia		. 7' -	٠					
	Amount (\$)		Payee addres	•	City;	State	e; Zip Co	ae					
	\$341.12		655 15th St	. INVV									
			Ste. 650		2005								
		١	Washington										
	PURPOSE OF		Category (Se				nedule)	(b)	Description Check if travel (Urito:	de of Toyon	Com	nlete Schedule T
	EXPENDITURE		Solicitation/	⊢undra	ising Exp	ense		l	Check if travel of Check if Austin,				plete Schedule T. expense
								l	Database sof			3	
										_		_	
	Complete ONLY if direct expenditure to benefit C/ON		Candidate/Offi	ceholde	r name	(Office sou	ght		-	Office	e he	eld
	Date	Γ	Payee name							_		_	
	02/13/2024		Nacole4Lea	ınder C	ampaign	_	_			_	_	_	
	Amount (\$)	Γ	Payee addres	ss; (City;	State	; Zip Co	de					
	\$250.00		11880 Hero	Way V	V								
			#107										
			Leander, T	〈 78641	L								
	PURPOSE	(a)	Category (Se	e Categor	ies listed at th	ne top of this sch	nedule)	(b)	Description				
	OF EXPENDITURE		Contribution				,i++	l	\Box				plete Schedule T.
			Candidate/0	icehcוויכ	nuer/Poli	ucai Comn	шиее	l	Check if Austin, Campaign co			ııvıng	evhense
								l	- 3paigi1 00	. ru			
	Complete ONLY if direct		Candidate/Offi	ceholde	r name		Office sou	ght			Office	e he	eld
	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		Legal Services The Instruction Guide	Salaries/	Wages	s/Contract Labor		OTHER (enter a	category not listed above)
1	Total pages Schedule F1:	2 FILER NAM	E				3	Filer ID	(Ethics Commission Filers)
	Sch: 44/58 Rpt:	Bucy III, Jo	hn H. (The Honora	ble)				00069589	
4	Date	5 Payee name	9						
	01/16/2024	Nespresso							
6	Amount (\$)	7 Payee addre	ess; City;	State; Zip C	ode				
	\$115.60	111 W. 33r	d St						
		5th Floor							
		New York,	NY 10120						
8	PURPOSE OF		See Categories listed at the to	op of this schedule)	(b)	Description			
	EXPENDITURE	Food/Beve	rage Expense			_		de of Texas. Com officeholder living	
						Coffee	, 17,	officeriolder living	у схрепас
9	Complete ONLY if direct		ficeholder name	Office so	ught			Office he	eld
	expenditure to benefit C/OI	-							
	Date	Payee name	?						
	03/22/2024	Office Dep	ot						
	Amount (\$)	Payee addre	ess; City;	State; Zip C	ode				
	\$55.92	2620 W. A	nderson Ln						
		Austin, TX	78757						
	PURPOSE OF		See Categories listed at the to		(b)	Description			
	EXPENDITURE	Office Ove	rhead/Rental Exper	ise				de of Texas. Com officeholder living	
						Office supplie			,
						• •			
	Complete ONLY if direct		ficeholder name	Office so	ught			Office he	eld
	expenditure to benefit C/OI	H							
	Date	Payee name	9						
	03/25/2024	Office Dep	ot						
	Amount (\$)	Payee addre	ess; City;	State; Zip C	ode				
	\$12.67	2620 W. A	nderson Ln						
		Austin, TX	78757						
	PURPOSE	(a) Category (S	See Categories listed at the to	op of this schedule)	(b)	Description			
	OF EXPENDITURE	Office Ove	rhead/Rental Exper	ise				de of Texas. Com	•
						Office supplie		officeholder living	g expense
						Onice supplie			
H	Complete ONLY if direct		ficeholder name	Office so	<u>l</u> ught			Office he	eld
	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

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

	Contributions/ Donations Made By 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: 45/58 Rpt:	Bucy III, John H. (The Honorable) 00069589	
4	Date	5 Payee name	
	06/18/2024	Office Depot	
6	Amount (\$)	7 Payee address; City; State; Zip Code	_
	\$85.98	2620 W Anderson Ln	
		Austin, TX 78757	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	-
	OF	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.	
	EXPENDITURE	Check if Austin, TX, officeholder living expense	
		Supplies for event	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
	expenditure to benefit C/O	1	
	Date	Payee name	
	01/31/2024	Parker, Ashika	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$500.00	1307 Norwalk Ln	
		Apt 204	
		Austin, TX 78703	
	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.	
	LAFENDITORE	Check if Austin, TX, officeholder living expense	
		Legislative salary supplement	
	0 1: 01:17.7.1		_
	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held	
			_
	Date	Payee name	
	02/28/2024	Parker, Ashika	_
	Amount (\$)	Payee address; City; State; Zip Code	
	\$500.00	1307 Norwalk Ln	
		Apt 204	
		Austin, TX 78703	
	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 Legislative salary supplement	
		Legislative Salary Supplement	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/O		
			_

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	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: 46/58 Rpt:	Bucy III, John H. (The Honorable) 00069589
4	Date	5 Payee name
	03/26/2024	Parker, Ashika
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$500.00	1307 Norwalk Ln
		Apt 204
		Austin, TX 78703
8	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 Legislative salary supplement
		Legislative Salary Supplement
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	05/01/2024	Parker, Ashika
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	1307 Norwalk Ln
		Apt 204
		Austin, TX 78703
	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 Legislative salary supplement
		Legislative Salary Supplement
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	05/31/2024	Parker, Ashika
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	1307 Norwalk Ln
		Apt 204
		Austin, TX 78703
	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
		Legislative salary supplement
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

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 Filers)
	Sch: 47/58 Rpt:	Bucy III, John H. (The Honorable)
4	Date	5 Payee name
	06/30/2024	Parker, Ashika
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$500.00	1307 Norwalk Ln
		Apt 204
		Austin, TX 78703
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
	EXPENDITORE	Check if Austin, TX, officeholder living expense
		Legislative salary supplement
L		
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	06/18/2024	Party City
	Amount (\$)	Payee address; City; State; Zip Code
	\$43.30	5441 N. IH-35
		Austin, TX 78723
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Supplies for event
		Supplies for event
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
	Date	Payee name
	02/16/2024	Planned Parenthood Texas Votes
	Amount (\$)	Payee address; City; State; Zip Code
	\$2,500.00	P.O. Box 41646
		Austin, TX 78704
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T.
		Candidate/Officeholder/Political Committee
		Everit sponsorstip
_	Complete ONLY if direct	Condidate/Officeholder name Office sought
	Complete <u>ONLY</u> 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

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		Legal Services The Instruction Guide	Salaries/	Wages	s/Contract Labor		OTHER (enter a	category not listed above)
1	Total pages Schedule F1:	2 FILER NAM	E				3	Filer ID	(Ethics Commission Filers)
	Sch: 48/58 Rpt:	Bucy III, Jo	hn H. (The Honoral	ble)				00069589	
4	Date	5 Payee name							
	01/29/2024	Pressable							
6	Amount (\$)	7 Payee addre	ess; City;	State; Zip C	ode				
	\$25.00	110 E. Hou	ston St						
		7th Floor							
		San Antoni	o, TX 78205						
8	PURPOSE	(a) Category (S	see Categories listed at the to	op of this schedule)	(b)	Description			
	OF EXPENDITURE	Advertising	Expense			_			plete Schedule T.
						Web hosting	, IA,	officeholder living	g expense
						WCD HOSting			
9	Complete ONLY if direct		iceholder name	Office so	l ught			Office he	eld
	expenditure to benefit C/OI								
	Date	Payee name							
	02/28/2024	Pressable							
	Amount (\$)	Payee addre	ess; City;	State; Zip C	ode				
	\$25.00	110 E. Hou	ston St						
		7th Floor							
		San Antoni	o, TX 78205						
	PURPOSE	(a) Category (S	see Categories listed at the to	pp of this schedule)	(b)	Description			
	OF EXPENDITURE	Advertising	Expense						plete Schedule T.
						Web hosting	, IX,	officeholder living	g expense
						WCD HOSting			
	Complete ONLY if direct		iceholder name	Office so	<u> </u>			Office he	eld
	expenditure to benefit C/OI	H							
	Date	Payee name							
	03/28/2024	Pressable							
	Amount (\$)	Payee addre	ess; City;	State; Zip C	ode				
	\$25.00	110 E. Hou	ston St						
		7th Floor							
		San Antoni	o, TX 78205						
	PURPOSE	(a) Category (S	see Categories listed at the to	pp of this schedule)	(b)	Description			
	OF EXPENDITURE	Advertising	Expense						plete Schedule T.
	ZA ZHOHOKZ					ш	, TX,	officeholder living	g expense
						Web hosting			
_	Complete ONLY if direct	Candidate/Off	iceholder name	Office so	<u> </u> ught			Office he	eld
	expenditure to benefit C/OI				J				

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

	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: 49/58 Rpt:	Bucy III, John H. (The Honorable) 00069589
4	Date	5 Payee name
	04/29/2024	Pressable
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$25.00	110 E. Houston St
		7th Floor
		San Antonio, TX 78205
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense
	EXPENDITORE	Check if Austin, TX, officeholder living expense
		Web hosting
Ļ	0 1: 0 1: 0	
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	05/28/2024	Pressable
	Amount (\$)	Payee address; City; State; Zip Code
	\$25.00	110 E. Houston St
		7th Floor
		San Antonio, TX 78205
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		Web hosting
	Complete ONL V if direct	Candidate/Officeholder name Office sought Office held
	Complete ONLY if direct expenditure to benefit C/Oł	
_		
	Date	Payee name
	06/28/2024	Pressable
	Amount (\$)	Payee address; City; State; Zip Code
	\$25.00	110 E. Houston St
		7th Floor
		San Antonio, TX 78205
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Advertising Expense Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
	EXPENDITURE	Check if Austin, TX, officeholder living expense Web hosting
		Check if Austin, TX, officeholder living expense Web hosting Candidate/Officeholder name Office sought Office held
	EXPENDITURE Complete ONLY if direct	Check if Austin, TX, officeholder living expense Web hosting Candidate/Officeholder name Office sought Office held
	EXPENDITURE Complete ONLY if direct	Check if Austin, TX, officeholder living expense Web hosting Candidate/Officeholder name Office sought Office held

SCHEDULE F1

Advertising Expense Accounting/Banking

Event Expense Fees

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	Food/Beverage Expense Polling Expense /- Gift/Awards/Memorials Expense Printing Expense legal Services Salaries/Wages/Contract Labor				Travel in District Travel Out of District OTHER (enter a category not listed above)			
	Credit Card Payment		The Instruction Guide	e explains how to	compl	ete this form.			
1	Total pages Schedule F1: Sch: 50/58 Rpt:		E hn H. (The Honoral	ble)			3	Filer ID 00069589	(Ethics Commission Filers)
4	Date	5 Payee name	<u> </u>				_		
	01/03/2024	Public Stor							
6	Amount (\$)	7 Payee addre	ess; City;	State; Zip C	Code				
	\$106.00	13675 N. H	łwy 183						
_	2112200	Austin, TX			14.				
8	PURPOSE OF EXPENDITURE		See Categories listed at the to rhead/Rental Exper		(b)		, TX	, officeholder livin	nplete Schedule T. g expense
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Oh		ficeholder name	Office so	ought			Office h	eld
	Date	Payee name							
	02/03/2024	Public Stor	age						
	Amount (\$)	Payee addre	ess; City;	State; Zip (Code				
	\$137.00	13675 N. F	łwy 183						
		Austin, TX	78750						
	PURPOSE OF		See Categories listed at the to		(b)	Description			
	EXPENDITURE	Office Ove	rhead/Rental Exper	nse		\Box	, TX	, officeholder living	plete Schedule T. g expense
	Complete ONLY if direct expenditure to benefit C/Oh		ficeholder name	Office so	ought			Office h	eld
	Date	Payee name	<u>,</u>						
	03/04/2024	Public Stor	age						
	Amount (\$) \$137.00	Payee addre 13675 N. F		State; Zip (Code				
		Austin, TX	78750						
	PURPOSE OF EXPENDITURE		See Categories listed at the to rhead/Rental Expen		(b)		ı, TX	, officeholder livin	nplete Schedule T. g expense
	Complete ONLY if direct expenditure to benefit C/Oh		ficeholder name	Office so	ought			Office h	eld
	rms provided by Toyas F	thing Occurring	lan	, athics state ty					Version V// 1 0 d279aha0

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

	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)
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 51/58 Rpt:	Bucy III, John H. (The Honorable)	00069589
4	Date	5 Payee name	
	04/03/2024	Public Storage	
6	Amount (\$) \$137.00	7 Payee address; City; State; Zip Code 13675 N. Hwy 183 Austin, TX 78750	
8	PURPOSE OF EXPENDITURE	Onioc Overneda/rental Expense	utside of Texas. Complete Schedule T. TX, officeholder living expense
9	Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	05/03/2024	Public Storage	
	Amount (\$) \$137.00	Payee address; City; State; Zip Code 13675 N. Hwy 183	
		Austin, TX 78750	
	PURPOSE OF EXPENDITURE	Office Overficad/Nertial Experise	utside of Texas. Complete Schedule T. TX, officeholder living expense ent
	Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeholder name Office sought	Office held
	Date 06/03/2024	Payee name Public Storage	
	Amount (\$) \$137.00	Payee address; City; State; Zip Code 13675 N. Hwy 183 Austin, TX 78750	
	PURPOSE		
	OF EXPENDITURE	Office Overficad/Nertial Expense	utside of Texas. Complete Schedule T. TX, officeholder living expense ent
	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 Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Com

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: 52/58 Rpt:	Bucy III, John H. (The Honorable) 00069589
4	Date	5 Payee name
	04/03/2024	Round Rock Chamber of Commerce
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$228.42	212 E. Main St
		Round Rock, TX 78664
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.
		Check if Austin, TX, officeholder living expense Taste of Round Rock
		raste of Nouria Nock
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
-	Date	Payee name
	03/27/2024	Round Rock Parks & Recreation
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,450.00	301 W. Bagdad Ave
		Ste. 250
		Round Rock, TX 78664
	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 Venue rental and security deposit
		venue rental and security deposit
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Data	
	Date	Payee name
	06/30/2024	Sade Fashokun Campaign
	Amount (\$)	Payee address; City; State; Zip Code
	\$250.00	1841 S. Lakeline Blvd
		#101-114
		Cedar Park, TX 78613
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By
		Candidate/Officeholder/Political Committee
		Campaign contribution
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
g 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
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: 53/58 Rpt:	Bucy III, John H. (The Honorable) 00069589
4	Date	5 Payee name
	06/26/2024	Service to Go
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$766.00	1205 Turtle Creek Blvd
		Austin, TX 78745
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Bartenders for event
		Baltolia di a volit
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
L	experiorarie to benefit C/O	'
	Date	Payee name
	04/18/2024	Southwest Airlines
Г	Amount (\$)	Payee address; City; State; Zip Code
	\$391.96	2702 Love Field Dr
		Dallas, TX 75235
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Flight
⊢	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	•
⊨	Data	
	Date	Payee name
L	04/18/2024	Southwest Airlines
	Amount (\$)	Payee address; City; State; Zip Code
	\$30.00	2702 Love Field Dr
l		
		Dallas, TX 75235
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel Out of District Check if travel outside of Texas. Complete Schedule T.
	LAFENDITORE	Check if Austin, TX, officeholder living expense
		Fees
$ldsymbol{f eta}$	0 1	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
<u> </u>		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expe Legal Services The Instruction Guide	Offi Pol ense Prir Sal	fice Overhea Iling Expens nting Expens Iaries/Wages	se s/Contract Labor		Travel in District Travel Out of Dis	quipment & Related Expense
1	Total pages Schedule F1:	2 FII FR NAM			-	1	3	Filer ID	(Ethics Commission Filers)
	Sch: 54/58 Rpt:		bhn H. (The Honorab	ole)				00069589	(Lunes commission race)
4	Date	5 Payee name	,				_		
	06/14/2024	Spec's							
6	Amount (\$) \$313.00	7 Payee addre 4970 US-29 Austin, TX	90	State; Zi	p Code				
8	PURPOSE OF EXPENDITURE		See Categories listed at the toperage Expense	p of this schedule	(b)		ı, TX,	de of Texas. Comp officeholder living llies for even	g expense
9	Complete ONLY if direct expenditure to benefit C/Oh		ficeholder name	Office	e sought			Office he	ble
	Date	Payee name	,			_			
	06/10/2024	Stanton Ho	use						
	Amount (\$)	Payee addre	ess; City;	State; Zi	p Code				
	\$549.31	209 N. Star							
		El Paso, T							
	PURPOSE OF EXPENDITURE	(a) Category (s Travel Out	See Categories listed at the top of District	p of this schedule) (b)		ı, TX,	de of Texas. Comp officeholder living Onvention	
	Complete ONLY if direct expenditure to benefit C/Oh		ficeholder name	Office	e sought			Office he	bk
	Date	Payee name	,						
	01/06/2024	Target							
	Amount (\$) \$11.99	Payee addre 10107 Res		State; Zi	p Code				
		Austin, TX	78759						
	PURPOSE OF EXPENDITURE	,	See Categories listed at the toperage Expense	p of this schedule	(b)	ш	ı, TX,	de of Texas. Comp , officeholder living nd drinks	
	Complete ONLY if direct expenditure to benefit C/Oh		ficeholder name	Office	e sought			Office he	pld

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Food/Beverage Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

	Candidate/Officeholder/Politica		mmittee Legal Services Salaries/		se s/Contract Labor		OTHER (enter a	strict a category not listed above)	
	Credit Card Payment		The Instruction Guide explains how to co	omple	ete this form.				
1	Total pages Schedule F1:	2	FILER NAME			3	Filer ID	(Ethics Commission Filers)	
	Sch: 55/58 Rpt:		Bucy III, John H. (The Honorable)				00069589		
4	Date	5	Payee name						
	05/23/2024		Texas Capitol Gift Shop						
6	Amount (\$)	7	Payee address; City; State; Zip Co	ode					
	\$25.98		1400 Congress Ave						
			E1.006						
			Austin, TX 78701						
8	PURPOSE	(a)	Category (See Categories listed at the top of this schedule)	(b)	Description				_
	OF EXPENDITURE		Gift/Awards/Memorials Expense					nplete Schedule T.	
	LXI LINDITORL				—	TX,	officeholder living	g expense	
					Staff gift				
^	Complete ONL V if direct	<u> </u>	Candidate/Officeholder name Office sou	ıaht			Office h	ald	
9	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Officeholder name Office sou	ıgnı			Office h	eiu	
									_
	Date 03/06/2024		Payee name						
		L	Texas Democratic Party						
	Amount (\$)		Payee address; City; State; Zip Co	oae					
	\$500.00		314 E. Highland Mall Blvd						
			#508						
		L	Austin, TX 78752						
	PURPOSE OF	(a)	Category (See Categories listed at the top of this schedule)	(b)	Description				
	EXPENDITURE		Contributions/Donations Made By Candidate/Officeholder/Political Committee		=		officeholder living	nplete Schedule T. g expense	
			Canadate/Onicenolae// Chiaca Committee		Event sponso				
	Complete ONLY if direct		Candidate/Officeholder name Office sou	ught			Office h	eld	_
	expenditure to benefit C/OI	Н							
	Date		Payee name						
	05/07/2024		Texas Democratic Party						
	Amount (\$)		Payee address; City; State; Zip Co	ode					
	\$10,000.00		314 E. Highland Mall Blvd						
			#508						
			Austin, TX 78752						
	PURPOSE	(a)	Category (See Categories listed at the top of this schedule)	(b)	Description				
	OF EXPENDITURE		Contributions/Donations Made By					nplete Schedule T.	
			Candidate/Officeholder/Political Committee		TDP Convent		officeholder living		
					IDI CONVENI	101	i 3pori301311	·Ψ	
	Complete ONLY if direct	Ц,	Candidate/Officeholder name Office sou	<u>l</u> Jaht			Office h	eld	
	expenditure to benefit C/OI		5 moo 300	9.10			200 11		

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 (Contract Labor

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	<u> </u>
	Sch: 56/58 Rpt:	Bucy III, John H. (The Honorable) 00069589
4	Date	5 Payee name
	03/01/2024	Texas Silver-Haired Legislature Foundation
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$400.00	3006 Bee Caves Rd
		Ste. C-215
		Austin, TX 78746
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		Directory advertisement
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	Complete ONLY if direct expenditure to benefit C/Ol	
	Data	
	Date	Payee name
	04/03/2024	Texas Young Democrats PAC
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,000.00	13224 Marrero Dr
		Austin, TX 78729
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
		Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense Political contribution
		1 ollucal contribution
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Power name
	05/21/2024	Payee name Trudy's Hallmark Store
		·
	Amount (\$) \$4.32	Payee address; City; State; Zip Code 9828 Great Hills Trl
	φ4.32	
		Ste. 600
		Austin, TX 78759
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Gift/Awards/Memorials Expense Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
		Card
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	U
_		

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Con Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing 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: 57/58 Rpt:	Bucy III, John H. (The Honorable)
4	Date	5 Payee name
	01/31/2024	United States Postal Service
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$9.85	8225 Cross Park Dr
		Austin, TX 78710
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Advertising Expense
	EXPENDITORE	Check if Austin, TX, officeholder living expense
		Postage
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	05/20/2024	Williamson County Democratic Party PAC
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	P.O. Box 1296
		Georgetown, TX 78627
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T.
		Candidate/Officeholder/Political Committee
		Event Sponsorship
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
_	Data	
	Date 06/27/2024	Payee name Williamson County Domocratic Party PAC
	06/27/2024	Williamson County Democratic Party PAC
	Amount (\$)	Payee address; City; State; Zip Code
	\$5,000.00	P.O. Box 1296
L		Georgetown, TX 78627
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
	-	Candidate/Officeholder/Political Committee
		Coordinated Campaign
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	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
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

	Credit Gard Layment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 58/58 Rpt:	Bucy III, John H. (The Honorable)	00069589
4	Date	5 Payee name	
	05/16/2024	Worley Printing	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$1,560.21	3217 N. IH-35	
		Austin, TX 78722	
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE	Tilling Expense	outside of Texas. Complete Schedule T. n, TX, officeholder living expense
		l	ers, graduation certificates
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OI	<u></u>	
	Date	Payee name	
	05/17/2024	Yeti	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$616.86	7601 Southwest Pkwy	
		Austin, TX 78735	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	outside of Texas. Complete Schedule T.
	EXPENDITURE	Tilling Expense	n, TX, officeholder living expense
		Sponsor than	
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	experiulture to beliefit 6/01		

INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

SCHEDULE K

	The Instru	ages Schedule K:						
		L/2 Rpt: 154/155						
2	FILER NAME				3	Filer II	(Ethics Commission File	lers)
	Bucy III, Joh	n F	I. (The Honorable)			00069	9589	
4	Date	5	Name of person from whom amount is received				8 Amount (\$)	
	01/05/2024		Frost Bank					\$3.29
		6	Address of person from whom amount is received; City; State; Zip Code		1			
			San Antonio, TX 78296					
		7	Purpose for which amount is received	Check if po	litic	al con	ribution returned to filer	
			Interest					
	Date	Ī	Name of person from whom amount is received				Amount (\$)	
	02/06/2024		Frost Bank				, ,	\$3.66
		ļ	Address of person from whom amount is received; City; State; Zip Code				-	
			, was see of person nor more amount to received, "eng, state, 2-p code					
			San Antonio, TX 78296					
							ribution returned to filer	
	Interest							
	Data Name of sources from whom associated						Amount (¢)	
	Date 03/06/2024		Name of person from whom amount is received Frost Bank				Amount (\$)	\$2.92
	03/00/2024	ļ						ΨΖ.3Ζ
			Address of person from whom amount is received; City; State; Zip Code					
			San Antonio, TX 78296					
		⊢		Chock if no	litic	al con	ribution returned to filer	
			Interest	check ii po	IILIC	ai com	indution returned to life.	
_		L						
	Date		Name of person from whom amount is received				Amount (\$)	
	04/04/2024	<u> </u>	Frost Bank					\$2.66
			Address of person from whom amount is received; City; State; Zip Code					
			O A					
		L	San Antonio, TX 78296					
			-	Check if po	litic	al con	ribution returned to filer	
			Interest					
	Date		Name of person from whom amount is received				Amount (\$)	
	05/06/2024		Frost Bank					\$2.82
			1					
		L	San Antonio, TX 78296					
	Purpose for which amount is received						ribution returned to filer	
		_						

INTEREST, CREDITS, GAINS, REFUNDS, AND SCHEDULE K **CONTRIBUTIONS RETURNED TO FILER** 1 Total pages Schedule K: The Instruction Guide explains how to complete this form. Sch: 2/2 Rpt: 155/155 2 FILER NAME Filer ID (Ethics Commission Filers) Bucy III, John H. (The Honorable) 00069589 5 Name of person from whom amount is received 8 Amount (\$) 06/06/2024 Frost Bank \$2.18 6 Address of person from whom amount is received; City; State; Zip Code San Antonio, TX 78296 Purpose for which amount is received Check if political contribution returned to filer Interest Amount (\$) Name of person from whom amount is received Date 06/28/2024 Round Rock Parks & Recreation \$500.00 Address of person from whom amount is received; City; State; Zip Code Round Rock, TX 78664 Purpose for which amount is received Check if political contribution returned to filer Event security deposit refund