JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH COVER SHEET PG 1

The JC/OH Instructior	n Guide explains how to co	mplete this form.	1 Filer ID (Ethics Commission 00026739	n Filers)	2 Total pages f	iled: 27
3 CANDIDATE /	MS / MRS / MR	FIRST		MI		
OFFICEHOLDER	The Honorable	John P.				USE ONLY
NAME		JUIII P.			Date Received	
					ELECTRONIC	ALLY FILED
					. 10/07/2024	
	NICKNAME	LAST		SUFFIX	10/01/2024	
		Devine				
4 CANDIDATE /	ADDRESS / PO BOX; A		τy.	ZIP CODE	Date Hand-delivered	or Date Postmarked
OFFICEHOLDER		,	,	2 0002		
MAILING					Receipt #	Amount
ADDRESS	REDACTED PER 2	54.0313, GOV'T	CODE		Receipt #	Amount
Change of Address						
Ľ					Date Processed	
					Date Imaged	
5 CAMPAIGN	MS / MRS / MR	FIRST			MI	
TREASURER					IVII	
NAME	The Honorable	John P.				
	NICKNAME	LAST			SUFFIX	
	NICKIAWE				301117	
		Devine				
6 CAMPAIGN	STREET ADDRESS (NO	PO BOX PLEASE);	APT /	SUITE #; CITY;	ST	ATE; ZIP CODE
TREASURER	, ,	,,				
ADDRESS						
(Residence or Business)	REDACTED PER 2	54.0313, GOV'T	CODE			
()						
7 CAMPAIGN	AREA CODE PH	ONE NUMBER	EXTENSION			
TREASURER		ONE NOMBER	EXTENSION			
PHONE	(713) 498-9649					
8 REPORT						
TYPE	January 15	X 30th day befor	e election Ru	Inoff		ampaign treasurer
		_			appointment (off	iceholder only)
	July 15	8th day before		ceeded modified	Final Report (Att	ach C/OH-FR)
			re	porting limit	_	
9 PERIOD	Month Day Yea	ar		Month Day	Year	
COVERED	07/01/2024		HROUGH	09/26/202		
	07/01/2024	1		09/20/202	4	
10 ELECTION	ELECTION DATE			ELECTION TYPE		
	Month Day Yea	ar 🗖 I	Primary	Runoff	Other	
	11/05/2024					
		X	General	Special		
		1		2 OFFICE SOUGHT	(if known)	
11 OFFICE	OFFICE HELD (if any)		-			
	Supreme Court Justice	Place 4		Supreme Court J	JUSTICE Place 4	
		GO	TO PAGE 2			
Forms provided by Te	exas Ethics Commission	www.e	thics.state.tx.us		Vers	sion V4.1.0.48da51f

JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH COVER SHEET PG 2 2 of 27

L

13 C / OH NAME	Devine, John P. (The	e Honorable)	14 Filer ID 00026739	(Ethics Commission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder	political contributions accepted or political ex These expenditures may have been made v d officeholders are required to report this info	vithout the candidate's or offic	eholder's knowledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		
	X GENERAL			
		COMMITTEE ADDRESS		
	SPECIFIC	1115 San Jacinto Blvd.		
		Suite 200		
		Austin, TX 78701		
		COMMITTEE CAMPAIGN TREASURER N	IAME	
		Cantu, Leslie		
		COMMITTEE CAMPAIGN TREASURER A	DDRESS	
		PO Box 2246		
		Austin, TX 78768		
16 CONTRIBUTION TOTALS		IIZED POLITICAL CONTRIBUTIONS(OTHEI ES OF LOANS, OR CONTRIBUTIONS MAE		\$ 0.00
		ICAL CONTRIBUTIONS		\$ 52,250.00
EXPENDITURE	· · · · · · · · · · · · · · · · · · ·	PLEDGES, LOANS, OR GUARANTEES OF IIZED POLITICAL EXPENDITURES	LOANS)	
TOTALS				\$ 1,234.91
	4. TOTAL POLIT	ICAL EXPENDITURES		\$ 44,884.49
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD			\$ 20,825.63
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCI OF THE REPOR	PAL AMOUNT OF ALL OUTSTANDING LOA	NS AS OF THE LAST DAY	\$ 0.00
17 AFFIDAVIT				
			penalty of perjury, that the ac ludes all information required Code.	
		Th	e Honorable John P. Devir	ne
		Signa	ature of Candidate or Officeho	lder
AFFIX NO	TARY STAMP / SEAL AE	OVE		
Sworn to and subs	cribed before me by the	said	, this the	day
		ertify which, witness my hand and seal of offi		uuy
Signature of office	cer administering oath	Printed name of officer administering of	oath Title of office	er administering oath
Forms provided by Te	xas Ethics Commissio	n www.ethics.state.tx.us		Version V4.1.0.48da51f7

SUBTOTALS - JC/OH

FORM JC/OH COVER SHEET PG 3

3 of 27

	ER NAM vine, Jo	ME Dhn P. (The Honorable)	19 Filer ID 00026739	(Ethic	cs Commission Filers)
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE					SUBTOTAL AMOUNT
1.	Х	SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)		\$	52,250.00
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
3.		SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)		\$	
4.		SCHEDULE E(J): LOANS (JUDICIAL)		\$	
5.	Х	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	6	\$	44,884.49
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 CONTRIBUTIO	DNS	\$	
12.	Х	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS I TO FILER	RETURNED	\$	5.60
1					

The Instrue	ction Guide explains how to complete this f	form.	1 Total pages Schedule A(J)1: Sch: 1/10 Rpt: 4/27	
2 FILER NAME			3 Filer ID (Ethics Commission Filers)	
Devine, Johr	n P. (The Honorable)		00026739	
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)	
07/03/2024	Baker & Hostetler LLP		\$250.00	
	6 Contributor address; City; State; Zip Code		1	
	Houston, TX 77002			
8 Contributor's F	Principal Occupation	9 Contributor's Job Title		
10 Octobrille to the				
10 Contributor's e	employer/law firm	11 Law firm of contributor's sp	bouse (if any)	
12 If contributor is	s a child, law firm of parent(s) (if any)			
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
08/14/2024	Bryan Christ Campaign)	\$200.00	
	Contributor address; City; State; Zip Code			
	Conroe, TX 77305			
Contributor's F	Principal Occupation	Contributor's Job Title	1	
Contributor's e	employer/law firm	Law firm of contributor's sp	oouse (if any)	
If contributor is	s a child, law firm of parent(s) (if any)			
Date	Full name of contributor)	Amount of Contribution (\$)	
08/12/2024	Canyon Lake Republican Women		\$750.00	
	Contributor address; City; State; Zip Code			
	Canyon Lake, TX 78133			
Contributor's F	Principal Occupation	Contributor's Job Title	l	
Contributor 5 1				
Contributor's e	employer/law firm	Law firm of contributor's sp	pouse (if any)	
		'		
If contributor is a child, law firm of parent(s) (if any)				
L	by Toyoc Ethios Commission		Varcian V/4.1.0.49daE1f7	

The Instruc	tion Guide explains how to complete this f	orm.	1 Total pages Schedule A(J)1: Sch: 2/10 Rpt: 5/27
2 FILER NAME Devine, John	P. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00026739
08/30/2024	 Full name of contributor out-of-state PAC (ID#:_ Conti, Lawrence Contributor address; City; State; Zip Code 		7 Amount of Contribution (\$) \$1,000.00
	New Braunfels, TX 78132		
8 Contributor's P Sales	rincipal Occupation	9 Contributor's Job Title Owner	
10 Contributor's en Self	nployer/law firm	11 Law firm of contributor's sp	oouse (if any)
12 If contributor is	a child, law firm of parent(s) (if any)		
Date 07/16/2024	Full name of contributor out-of-state PAC (ID#:) Dunlop, Fred H. Contributor address; City; State; Zip Code		Amount of Contribution (\$) \$100.00
Contributor's P	Houston, TX 77056	Contributor's Job Title	
Retired		Retired	
Contributor's er Retired	nployer/law firm	Law firm of contributor's sp	oouse (if any)
If contributor is	a child, law firm of parent(s) (if any)		
Date 08/01/2024	Full name of contributor out-of-state PAC (ID#: Enoch, Craig Contributor address; City; State; Zip Code)	Amount of Contribution (\$) \$500.00
Contributor's D	Austin, TX 78703	Contributor's Job Title	
Contributor's Principal OccupationContributor's Job TitleAttorneyPartner			
Contributor's employer/law firm Law firm of contributor's sp		oouse (if any)	
Enoch Kever, PLLC			
If contributor is	a child, law firm of parent(s) (if any)		
Forms provided b	y Texas Ethics Commission www.ethic:	s.state.tx.us	Version V4.1.0.48da51f7

The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A(J)1: Sch: 3/10 Rpt: 6/27
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
	n P. (The Honorable)		00026739
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)
09/08/2024	Fayette County Republican Women		\$500.00
	6 Contributor address; City; State; Zip Code		
	La Grange, TX 78945		
8 Contributor's F	I Principal Occupation	9 Contributor's Job Title	I
	- F F		
10 Contributor's e	emplover/law firm	11 Law firm of contributor's sp	pouse (if any)
12 If contributor is	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
07/16/2024	Godwin Bowman, PC)	\$1,000.00
07/10/2024			\$1,000.00
	Contributor address; City; State; Zip Code		
	Dallas, TX 75201		
Contributor's F	Principal Occupation	Contributor's Job Title	
Contributor's e	employer/law firm	Law firm of contributor's sp	oouse (if any)
If contributor is	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
09/01/2024	Great State Republicans		\$250.00
	Contributor address; City; State; Zip Code		
	Hallettsville, TX 77964		
Contributor's F	Principal Occupation	Contributor's Job Title	
Contributor's e	employer/law firm	Law firm of contributor's sp	pouse (if any)
If contributor is	s a child, law firm of parent(s) (if any)		
	s a child, law little of parcial(s) (if any)		
L	by Taylog Ethico Commission		Version V/4.1.0.40deE1f7

The Instruc	ction Guide explains how to complete this f	form.	1 Total pages Schedule A(J)1: Sch: 4/10 Rpt: 7/27
2 FILER NAME Devine, John	P. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00026739
07/16/2024	 5 Full name of contributor out-of-state PAC (ID#:_ Harris, Finley & Bogle 6 Contributor address; City; State; Zip Code 		7 Amount of Contribution (\$) \$1,000.00
	Fort Worth, TX 76102		
8 Contributor's P	Principal Occupation	9 Contributor's Job Title	
10 Contributor's e	mployer/law firm	11 Law firm of contributor's sp	pouse (if any)
12 If contributor is	a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
09/03/2024	Hensley, Clayton		\$100.00
	Contributor address; City; State; Zip Code Waco, TX 76702		
Contributor's F Retired	Principal Occupation	Contributor's Job Title Retired	
Contributor's e Retired	mployer/law firm	Law firm of contributor's sp	oouse (if any)
If contributor is	s a child, law firm of parent(s) (if any)		
Date 07/16/2024	Full name of contributor in out-of-state PAC (ID#:_ Jackson, Alma Contributor address; City; State; Zip Code		Amount of Contribution (\$) \$100.00
	San Antonio, TX 78255		
Contributor's P Retired	Principal Occupation	Contributor's Job Title Retired	
	mployer/law firm	Law firm of contributor's sp	oouse (if any)
Retired			
lf contributor is	a child, law firm of parent(s) (if any)		
	by Texas Ethics Commission www.ethic	s state ty us	Version V4.1.0.48da51f7

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 5/10 Rpt: 8/27
2 FILER NAME Devine, John P. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00026739
4 Date 5 Full name of contributor out-of-state PAC (ID# 07/11/2024 Johnson, Philip 6 Contributor address; City; State; Zip Code		7 Amount of Contribution (\$) \$300.00
Lubbock, TX 79412		
8 Contributor's Principal Occupation	9 Contributor's Job Title	
Attorney	Attorney	
10 Contributor's employer/law firm Self-employed	11 Law firm of contributor's sp	oouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date Full name of contributor Out-of-state PAC (ID#	:)	Amount of Contribution (\$)
07/16/2024 Longwell, Harry)	\$500.00
Contributor address; City; State; Zip Code		·
Dallas, TX 75220		
Contributor's Principal Occupation	Contributor's Job Title	
Retired	Retired	
Contributor's employer/law firm	Law firm of contributor's sp	bouse (if any)
Retired		
If contributor is a child, law firm of parent(s) (if any)		
Date Full name of contributor Out-of-state PAC (ID#	:)	Amount of Contribution (\$)
08/02/2024 Mission Business PAC		\$10,000.00
Contributor address; City; State; Zip Code		
Universal City, TX 78148		
Contributor's Principal Occupation	Contributor's Job Title	
Contributor's employer/law firm Law firm of contributor's sp		couse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Forme provided by Toyae Ethice Commission		Varcian V/4 1 0 40daE1f7

The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A(J)1: Sch: 6/10 Rpt: 9/27	
2 FILER NAME Devine, Johr	n P. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00026739	
4 Date	5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)	
07/07/2024	North Shore Republican Women		\$500.00	
	6 Contributor address; City; State; Zip Code			
	Montgomery, TX 77356			
8 Contributor's R	Principal Occupation	9 Contributor's Job Title		
10 Contributor's e	employer/law firm	11 Law firm of contributor's sp	bouse (if any)	
12 If contributor is	s a child, law firm of parent(s) (if any)			
Date)	Amount of Contribution (\$)	
07/09/2024	Pack, Sam		\$1,000.00	
	Contributor address; City; State; Zip Code			
	Dallas, TX 75248			
Contributor's I	Principal Occupation	Contributor's Job Title		
Auto Dealer		Owner		
	employer/law firm	Law firm of contributor's sp	bouse (if any)	
Sam Pack A	· · · · · · · · · · · · · · · · · · ·			
If contributor is	s a child, law firm of parent(s) (if any)			
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)	
08/06/2024	Pink Elephant Committee		\$1,500.00	
	Contributor address; City; State; Zip Code			
	Midland, TX 79707			
Contributor's I	Principal Occupation	Contributor's Job Title		
Contributor's employer/law firm Law firm of contributor's sp		oouse (if any)		
If contributor is	s a child, law firm of parent(s) (if any)			

The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A(J)1: Sch: 7/10 Rpt: 10/27
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Devine, Johr	n P. (The Honorable)		00026739
4 Date	5 Full name of contributor out-of-state PAC (ID#:_)	7 Amount of Contribution (\$)
08/22/2024	Republican Women of Kerr County		\$750.00
	6 Contributor address; City; State; Zip Code		1
	Kerrville, TX 78029		
8 Contributor's F	Principal Occupation	9 Contributor's Job Title	
10 Contributor's e	employer/law firm	11 Law firm of contributor's sp	bouse (if any)
12 If contributor is	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
09/23/2024	San Angelo Republican Women		\$100.00
	Contributor address; City; State; Zip Code		
	San Angelo, TX 76906		
Contributor's F	Principal Occupation	Contributor's Job Title	
Contributor's o	employer/law firm	Law firm of contributor's sp	
Contributors e	shipioyennaw intri	Law IIIII of contributors sp	
If contributor is	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID#:	\ \	Amount of Contribution (\$)
07/12/2024	Sparks, Don L)	\$1,000.00
01112/2024	Contributor address; City; State; Zip Code		
	Midland, TX 79705		
Contributor's F	Principal Occupation	Contributor's Job Title	
Petroleum E		Founder/Chairman	
Contributor's e	employer/law firm	Law firm of contributor's sp	oouse (if any)
Discovery O	perating Inc.		
If contributor is a child, law firm of parent(s) (if any)			
	hy Tayas Ethics Commission www.ethic	e etato ty ue	Version V// 1.0./8da51f7

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A(J)1: Sch: 8/10 Rpt: 11/27		
2 FILER NAME Devine, John	P. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00026739		
08/14/2024	5 Full name of contributor out-of-state PAC (ID#: Stewart, Scott		7 Amount of Contribution (\$) \$100.00		
	6 Contributor address; City; State; Zip Code Fort Worth, TX 76107				
8 Contributor's P	rincipal Occupation	9 Contributor's Job Title	•		
Attorney		Attorney			
10 Contributor's e	mployer/law firm	11 Law firm of contributor's sp	oouse (if any)		
Stewart, PLL	С				
12 If contributor is	a child, law firm of parent(s) (if any)				
Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)		
07/21/2024	Stewart, Scott		\$100.00		
	Contributor address; City; State; Zip Code				
	Fort Worth, TX 76107				
	rincipal Occupation	Contributor's Job Title			
Attorney		Attorney			
	mployer/law firm	Law firm of contributor's sp	oouse (if any)		
Stewart, PLL	c a child, law firm of parent(s) (if any)				
Date	Full name of contributor Out-of-state PAC (ID#:)	Amount of Contribution (\$)		
07/02/2024	TREPAC-Texas Realtors PAC)	\$5,000.00		
	Contributor address; City; State; Zip Code				
	Austin, TX 78701				
Contributor's P	Principal Occupation	Contributor's Job Title	I		
Contributor's employer/law firm Law firm of contributor's		oouse (if any)			
If contributor is	s a child, law firm of parent(s) (if any)	I			

The Instruc	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A(J)1: Sch: 9/10 Rpt: 12/27
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
Devine, Johr	P. (The Honorable)		00026739
	5 Full name of contributor out-of-state PAC (ID#:_)	7 Amount of Contribution (\$)
07/16/2024	Texans for Lawsuit Reform PAC		\$25,000.00
	6 Contributor address; City; State; Zip Code		
	Austin, TX 78701		
8 Contributor's P	Principal Occupation	9 Contributor's Job Title	
10 Contributor's e	mplover/law firm	11 Law firm of contributor's sp	nouse (if any)
	nipioyennaw nim	II Law IIIII of contributors sp	
12 If contributor is	a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID#:_)	Amount of Contribution (\$)
09/10/2024	Texas Strong Republican Women		\$500.00
	Contributor address; City; State; Zip Code		
	Argyle, TX 76226		
Contributor's F	Principal Occupation	Contributor's Job Title	
Contributor's e	mployer/law firm	Law firm of contributor's sp	oouse (if any)
If contributor is	s a child, law firm of parent(s) (if any)		
Date	Full name of contributor out-of-state PAC (ID#:))	Amount of Contribution (\$)
07/11/2024	Vaughan, Shelton		\$50.00
	Contributor address; City; State; Zip Code		
	Houston, TX 77057		
Contributor's F	Principal Occupation	Contributor's Job Title	
Attorney		Partner	
Contributor's e	mployer/law firm	Law firm of contributor's sp	oouse (if any)
Duane Morris	s LLP		
If contributor is	a child, law firm of parent(s) (if any)	•	
Forms provided	by Texas Ethics Commission www.ethic	s state tx us	Version V4 1 0 48da51f7

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A(J)1 **1** Total pages Schedule A(J)1: The Instruction Guide explains how to complete this form. Sch: 10/10 Rpt: 13/27 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Devine, John P. (The Honorable) 00026739 4 5 Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: 7 08/21/2024 \$100.00 Wozniak, Joseph 6 Contributor address; City; State; Zip Code Richmond, TX 77406 Contributor's Principal Occupation 9 Contributor's Job Title 8 Retired Retired 10 Contributor's employer/law firm 11 Law firm of contributor's spouse (if any) Retired 12 If contributor is a child, law firm of parent(s) (if any)

	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:		B Filer ID (Ethics Commission Filers)					
-	Sch: 1/13 Rpt: 14/27	Devine, John P. (The Honorable)	00026739					
4	Date 07/18/2024	 Payee name Arch Ray Resort 						
6	Amount (\$) \$100.00	7 Payee address; City; State; Zip Code 312 Schmidtzinksy Fredericksburg, TX 78624						
8	PURPOSE OF EXPENDITURE		tside of Texas. Complete Schedule T. "X, officeholder living expense eting					
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held					
	Date	Payee name						
	07/30/2024	Arch Ray Resort						
	Amount (\$)	Payee address; City; State; Zip Code						
	\$156.81	312 Schmidtzinksy Fredericksburg, TX 78624						
	PURPOSE OF EXPENDITURE		itside of Texas. Complete Schedule T. "X, officeholder living expense eting					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held					
	Date	Payee name						
	07/31/2024	Arch Ray Resort						
	Amount (\$) \$174.95	Payee address; City; State; Zip Code 312 Schmidtzinksy						
		Fredericksburg, TX 78624						
	PURPOSE OF EXPENDITURE		itside of Texas. Complete Schedule T. 'X, officeholder living expense eting					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held					

		EXPENDITURE CATEGORIES FOR BOX 8(a)	
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Legal Services 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)
1	Total pages Schedule F1:	FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 2/13 Rpt: 15/27	Devine, John P. (The Honorable)	00026739
4	Date 09/09/2024	Payee name Arch Ray Resort	
6	Amount (\$) \$61.40	 Payee address; City; State; Zip Code 312 Schmidtzinksy Fredericksburg, TX 78624 	
8	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. TX, officeholder living expense eeting
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	09/06/2024	Austin Marriott Downtown	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$53.07	304 E Cesar Chavez St Austin, TX 78701	
	PURPOSE OF EXPENDITURE	Check if Austin,	outside of Texas. Complete Schedule T. TX, officeholder living expense S Supreme Court annual event
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	09/06/2024	Austin Marriott Downtown	
	Amount (\$) \$396.22	Payee address; City; State; Zip Code 304 E Cesar Chavez St	
		Austin, TX 78701	
	PURPOSE OF EXPENDITURE		outside of Texas. Complete Schedule T. TX, officeholder living expense ring Texas Supreme Court annual event
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held

			EXPENDITURE CATEGOR	RIES FOR	вох	(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 Expense Legal Services The Instruction Guide explains I	Office Ove Polling Exp Printing Ex Salaries/W	head/R ense pense ages/Co	Reimbursement Rental Expense ontract Labor e this form.		Travel in District Travel Out of Distr	uipment & Related Expense	
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID	(Ethics Commission Filers)	
	Sch: 3/13 Rpt: 16/27		Devine, John P. (The Honorable)					00026739	·	
4	Date 09/06/2024	5	Payee name Austin Marriott Downtown							
6	Amount (\$) \$189.61	7	Payee address; City; State; Zip Code 304 E Cesar Chavez St Austin, TX 78701							
8	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sche Event Expense	edule)		Check if Austin,	TX,	de of Texas. Compl officeholder living e gues at Texa		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name C	Office sou	jht			Office hel	d	
	Date		Payee name							
	08/26/2024		Blu Prime Steakhouse							
	Amount (\$) \$277.32		Payee address; City; State; 1818 N Loop 1604 W San Antonio, TX 78248	Zip Co	le					
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sche Food/Beverage Expense	edule)			TX,	de of Texas. Compl officeholder living e		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name C	Office sou	jht			Office hel	d	
	Date		Payee name							
	09/10/2024		Chateau Bellevue							
	Amount (\$) \$994.50		Payee address; City; State; 708 San Antonio St	Zip Co	le					
			Austin, TX 78701							
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sche Event Expense	edule)		Check if Austin,	тx,	de of Texas. Compl officeholder living e Court event a		
	Complete ONLY if direct expenditure to benefit C/OF		Candidate/Officeholder name C)ffice sou	jht			Office hel	d	

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		EXPENDITURI Event Expense Fees Food/Beverage Expens Gift/Awards/Memorials Legal Services The Instruction Gu	e Expense	Loan Repa Office Over Polling Exp Printing Exp Salaries/Wa	ment/Reimbursement head/Rental Expense ense gense ages/Contract Labor		Transportation E Travel in District Travel Out of Dis	
1	Total pages Schedule F1:	2					2	Filer ID	(Ethics Commission Filers)
1		 ²		abla)			 		
	Sch: 4/13 Rpt: 17/27		Devine, John P. (The Honor	able)				00026739	
4	Date	5	Payee name						
	07/08/2024		Devine, John (The Honorab	le)					
6	Amount (\$)	7	Payee address; City;	State	; Zip Coo	le			
	\$2,071.11		201 W. 14th St.						
	+_,		Suite 104						
			Austin, TX 78711						
8	PURPOSE	(a)	Category (See Categories listed at th	e top of this sch	nedule)	b) Description			
	OF EXPENDITURE		Travel In District			Check if travel	outs	ide of Texas. Com	plete Schedule T.
								, officeholder living	
						Mileage reim	bui	rsement for o	campaign travel
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name	(Office soug	ht		Office he	eld
	Date		Payee name						
	08/14/2024		Devine, John (The Honorab	le)					
-	Amount (\$)	-	Payee address; City;	-	; Zip Coo				
	()			State	, zip cot				
	\$1,193.94		201 W. 14th St.						
			Suite 104						
			Austin, TX 78711						
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at th Travel In District	e top of this sch	nedule)	Check if Austir	n, TX	ide of Texas. Com , officeholder living rsement for (
	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł		Candidate/Officeholder name	(Office soug	ht		Office he	eld
	Date	Γ	Payee name						
	08/01/2024		Devine, John (The Honorab	le)					
		-	-	-	; Zip Coo				
	Amount (\$)		Payee address; City;	Sidle	, Ζιρ Ουι	le			
	\$4,800.00		201 W. 14th St.						
			Suite 104						
			Austin, TX 78711						
	PURPOSE	(a)	Category (See Categories listed at th	e ton of this sch	(eluber	b) Description			
	OF	 `´	Office Overhead/Rental Exp				outs	ide of Texas. Com	plete Schedule T.
	EXPENDITURE					Check if Austir Campaign of		, officeholder living e lease	J expense
	Complete ONLY if direct expenditure to benefit C/OF		Candidate/Officeholder name	(Office soug	ht		Office he	eld

			EXPENDITURE CATEGO	RIES FOF	BC	DX 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 Expense	Loan Repa Office Ove Polling Ex Printing Ex Salaries/W	tymer rhead pense pens ages	ht/Reimbursement d/Rental Expense e e /Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Travel in District Travel Out of District OTHER (enter a category not listed a	
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (Ethics Commiss	sion Filers)
	Sch: 5/13 Rpt: 18/27		Devine, John P. (The Honorable)					00026739	
4	Date	5	Payee name						
	09/03/2024		Devine, John (The Honorable)						
6	Amount (\$)	7	Payee address; City; State	; Zip Co	de				
	\$5,000.00		201 W. 14th St.						
			Suite 104						
			Austin, TX 78711						
_	BUBBOOF				<u> </u>				
8	PURPOSE OF	(a)	Category (See Categories listed at the top of this sc	hedule)	(D)	Description	outoi	le of Texas. Complete Schedule T.	
	EXPENDITURE		Office Overhead/Rental Expense					officeholder living expense	
						Campaign off			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	ght			Office held	
	Date		Payee name						
	09/18/2024		Extra Space Storage						
	Amount (\$)			; Zip Co	do				
	\$2,621.00		706 Industrial Blvd	, zip co	uc				
	ΦΖ,0ΖΙ.00								
			Marble Falls, TX 78654						
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sci Office Overhead/Rental Expense	hedule)	(b)			le of Texas. Complete Schedule T. officeholder living expense	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	ght			Office held	
	Date		Payee name						
	07/29/2024		Holiday Inn Fredericksburg						
	Amount (\$)		Payee address; City; State	; Zip Co	de				
	\$267.30		500 S Washington	, <u>Lip</u> 00	40				
	φ207.00								
			Fredericksburg, TX 78624						
	PURPOSE OF	(a)	Category (See Categories listed at the top of this sc	hedule)	(b)	Description			
	EXPENDITURE		Travel In District				, тх,	le of Texas. Complete Schedule T. officeholder living expense	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	ght			Office held	

			EXPENDITURE CA	TEGO	RIES FOF	R BC	DX 8(a)				
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		-		Office Ove Polling Ex Printing Ex Salaries/W	erhead pense xpens Vages	e /Contract Labor		Travel in District Travel Out of Dist	uipment & Related Expense	
			The Instruction Guide e	explains	how to co	mple	ete this form.				
1	Total pages Schedule F1:	2	FILER NAME						Filer ID	(Ethics Commission Filer	's)
	Sch: 6/13 Rpt: 19/27		Devine, John P. (The Honorable	e)					00026739		
4	Date	5	Payee name								
	07/03/2024		Hurlburt, Rob								
6	Amount (\$)	7	Payee address; City;	State;	; Zip Co	de					
	\$2,000.00		4306 Quinlan Park Rd #4311								
			Austin, TX 78732								
8	PURPOSE	<u> </u>				(h)	Description				
0	OF	(a)	Category (See Categories listed at the top Salaries/Wages/Contract Labor	of this sch	iedule)	(0)	Description	outsid	le of Texas. Comp	lete Schedule T.	
	EXPENDITURE		Salaries/Wages/Contract Labor						officeholder living		
							Campaign me	edia	a and websit	е	
9	Complete ONLY if direct expenditure to benefit C/OF		candidate/Officeholder name	C	Office sou	ight			Office he	ld	
	Date		Payee name								
	07/19/2024		Hurlburt, Rob								
	Amount (\$)	<u> </u>	Payee address; City;	State	; Zip Co	nde					
	\$2,000.00		4306 Quinlan Park Rd #4311	State,	, zip co	ue					
	φ2,000.00		4500 Quinian Park Ru #4511								
			Austin, TX 78732								
	PURPOSE	(a)	Category (See Categories listed at the top	of this sch	nedule)	(b)	Description				
	OF EXPENDITURE		Salaries/Wages/Contract Labor						de of Texas. Comp		
							Campaign me		officeholder living		
							Campaign m	euic	a anu websit	e	
	Complete ONIL V if direct		andidata/Officabaldar nama			abt			Office he		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Office sou	iynt			Office he	iu	
											_
	Date		Payee name								
	08/09/2024		Hurlburt, Rob								
	Amount (\$)		Payee address; City;	State;	; Zip Co	de					
	\$2,000.00		4306 Quinlan Park Rd #4311								
			Austin, TX 78732								
	PURPOSE	(a)	Category (See Categories listed at the top	of this sch	edule)	(b)	Description				
	OF		Salaries/Wages/Contract Labor	01 110 001	iouulo)			outsio	de of Texas. Comp	lete Schedule T.	
	EXPENDITURE		5						officeholder living		
							Campaign me	edia	a and websit	е	
	Complete ONLY if direct		andidate/Officeholder name	C	Office sou	ight			Office he	ld	
	expenditure to benefit C/Oł	Η									

		EXPENDITURE CATEGORIES FOR BOX 8(a)	
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Poling Expense Gift/Awards/Memorials Expense Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.	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:		3 Filer ID (Ethics Commission Filers)
1	Sch: 7/13 Rpt: 20/27	Devine, John P. (The Honorable)	00026739
4	Date	Payee name	
	09/03/2024	Hurlburt, Rob	
6	Amount (\$)	Payee address; City; State; Zip Code	
	\$2,000.00	4306 Quinlan Park Rd #4311	
		Austin, TX 78732	
8	PURPOSE OF	a) Category (See Categories listed at the top of this schedule) (b) Description	
	EXPENDITURE		el outside of Texas. Complete Schedule T. tin, TX, officeholder living expense
			nedia and website
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	09/03/2024	Hurlburt, Rob	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$2,000.00	4306 Quinlan Park Rd #4311	
		Austin, TX 78732	
	PURPOSE OF EXPENDITURE		el outside of Texas. Complete Schedule T. tin, TX, officeholder living expense nedia and website
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	09/05/2024	Hurlburt, Rob	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$2,000.00	4306 Quinlan Park Rd #4311	
		Austin, TX 78732	
	PURPOSE OF EXPENDITURE		el outside of Texas. Complete Schedule T. tin, TX, officeholder living expense nedia and website
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held

			EXPENDITURE CATEGORIE	S FOR	BOX 8(a)		
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Fees Of Food/Beverage Expense Pc Gift/Awards/Memorials Expense Pr	office Overl olling Expe rinting Exp alaries/Wa	ense ges/Contract Labor		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		1	3	Filer ID (Ethics Commission Filers)
	Sch: 8/13 Rpt: 21/27		Devine, John P. (The Honorable)				00026739
4	Date 08/19/2024	5	Payee name Kendall County Republican Party				
6	Amount (\$)	7	Payee address; City; State; Z	Zip Cod	e		
	\$1,000.00		PO Box 1044				
			Boerne, TX 78006				
8	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this schedul Event Expense	le) (Check if Austin,	TX,	de of Texas. Complete Schedule T. officeholder living expense Lincoln Reagan Dinner)
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name Offic	ce soug	ht		Office held
	Date		Payee name				
	09/03/2024		Montgomery County Republican Party				
	Amount (\$)		Payee address; City; State; Z	Zip Cod	e		
	\$3,123.69		18001 Hwy 105 W				
			Suite 101				
			Montgomery, TX 77356				
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedul Event Expense	le) (Check if Austin,	TX,	de of Texas. Complete Schedule T. officeholder living expense Lincoln Reagan Dinner)
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name Offic	ce soug	ht		Office held
	Date		Payee name				
	07/30/2024		Patriot Academy				
	Amount (\$)		Payee address; City; State; Z	Zip Cod	e		
	\$314.88		PO Box 586				
			Dripping Springs, TX 78620				
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedul Event Expense	ile) (de of Texas. Complete Schedule T. officeholder living expense
	Complete ONLY if direct expenditure to benefit C/OF		andidate/Officeholder name Offic	ce soug	ht		Office held

	EXPENDITURE CATEGORIES FOR BOX 8(a)							
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	-	se Polling Expense Printing Exp	ense ges/Contract Labor	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:	ILER NAME			3 Filer ID (Ethics Commission Filers)			
	Sch: 9/13 Rpt: 22/27	evine, John P. (The Hono	rable)		00026739			
4	Date 08/02/2024	ayee name erry's Steakhouse						
6	Amount (\$) \$300.73	ayee address; City; 440 Parkwood Blvd. risco, TX 75034	State; Zip Cod	e				
8	PURPOSE OF EXPENDITURE	ategory (See Categories listed at t ood/Beverage Expense	he top of this schedule)		outside of Texas. Complete Schedule T. , TX, officeholder living expense eeting			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	ndidate/Officeholder name	Office soug	ht	Office held			
	Date	ayee name						
	08/26/2024	laza San Antonio Hotel						
	Amount (\$) \$384.53	ayee address; City; 55 S Alamo St	State; Zip Cod	е				
		an Antonio, TX 78205						
	PURPOSE OF EXPENDITURE	ategory (See Categories listed at 1 ravel In District	the top of this schedule)		outside of Texas. Complete Schedule T. , TX, officeholder living expense e			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	ndidate/Officeholder name	Office soug	ht	Office held			
	Date	ayee name						
	08/26/2024	laza San Antonio Hotel						
	Amount (\$) \$1,093.95	ayee address; City; 55 S Alamo St	State; Zip Cod	e				
		an Antonio, TX 78205						
	PURPOSE OF EXPENDITURE	ategory (See Categories listed at t ravel In District	he top of this schedule)		outside of Texas. Complete Schedule T. , TX, officeholder living expense e			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	ndidate/Officeholder name	Office soug	ht	Office held			

			EXPENDITURE	CATEGOR	RIES 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 Exp littee Legal Services The Instruction Guid		Office Over Polling Exp Printing Ex Salaries/W	oense ages/Contract Labor		Travel in District Travel Out of Dist	quipment & Related Expense	
1	Total pages Schedule F1:	2 F	ILER NAME				3	Filer ID	(Ethics Commission Filers)	
	Sch: 10/13 Rpt: 23/27		evine, John P. (The Honoral	ble)				00026739		
4	Date 09/16/2024		ayee name lenaissance Hotel							
6	Amount (\$) \$480.57	6	7 Payee address; City; State; Zip Code 6007 Legacy Dr Plano, TX 75024							
8	PURPOSE OF EXPENDITURE		ategory (See Categories listed at the t ravel In District	op of this sch	edule)		I, TX	ide of Texas. Comp , officeholder living		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		ndidate/Officeholder name	C	Office sou	ht		Office he	ld	
	Date	F	ayee name							
	07/15/2024	S	alt Traders Coastal Cooking							
	Amount (\$) \$82.62	2	ayee address; City; 850 N Interstate 35 cound Rock, TX 78681	State;	; Zip Coo	le				
	PURPOSE OF EXPENDITURE	(a) (ategory (See Categories listed at the t ood/Beverage Expense	op of this sch	edule)		n, TX,	ide of Texas. Comp , officeholder living]		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		ndidate/Officeholder name	C	Dffice sou	ht		Office he	ld	
	Date	F	ayee name							
	07/29/2024	S	alt Traders Coastal Cooking							
	Amount (\$) \$201.23		ayee address; City; 101 S Mopac Expy	State;	; Zip Coo	le				
		A	ustin, TX 78746							
	PURPOSE OF EXPENDITURE		ategory (See Categories listed at the t ood/Beverage Expense	op of this sch	edule)		n, TX	ide of Texas. Comp , officeholder living]		
	Complete ONLY if direct expenditure to benefit C/OF		ndidate/Officeholder name	C	Dffice sou	ht		Office he	ld	

	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 Expense hmittee Legal Services The Instruction Guide explai	Office O Polling E Printing Salaries	verhea Expens Expens /Wage	se s/Contract Labor		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: 11/13 Rpt: 24/27		Devine, John P. (The Honorable)					00026739			
4	Date	5	Payee name								
	08/06/2024		Salt Traders Coastal Cooking								
6	Amount (\$)	7	Payee address; City; State; Zip Code								
	\$105.61		1101 S Mopac Expy								
			Austin, TX 78746								
8	PURPOSE	(a)	Category (See Categories listed at the top of this	cobodulo)	(b)	Description					
-	OF		Food/Beverage Expense	scheuule)			outsi	ide of Texas. Complete Schedule T.			
	EXPENDITURE		· · · · · · · · · · · · · · · · · · ·			Check if Austin	, TX,	, officeholder living expense			
						Court staff lu	nch	1			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name	Office so	ught			Office held			
	Date		Payee name								
	09/09/2024		Salt Traders Coastal Cooking								
	Amount (\$)			ate; Zip C	ode.						
	\$122.27		1101 S Mopac Expy	αιο, <i>Σ</i> ιρ ο	Jouc						
	ΦΙΖΖ.ΖΙ		1101 S Mopac Expy								
			Austin, TX 78746								
	PURPOSE	(a)	Category (See Categories listed at the top of this	schedule)	(b)	Description					
	OF EXPENDITURE		Food/Beverage Expense					ide of Texas. Complete Schedule T.			
						Court staff lui		, officeholder living expense			
						Court Starr Iu	ncn	I			
	Complete ONLY if direct		Candidate/Officeholder name	Office so	ught			Office held			
	expenditure to benefit C/OI			Onice so	uynt			Onice field			
_	Date		Davias name								
	09/06/2024		Payee name Satellite Phone Store								
				ata. Zia C) a al a						
	Amount (\$)			ate; Zip C	oae						
	\$257.54		2830 Shelter Island Dr.								
			San Diego, CA 92106								
	PURPOSE	(a)	Category (See Categories listed at the top of this	schedule)	(b)	Description					
	OF EXPENDITURE		Office Overhead/Rental Expense					ide of Texas. Complete Schedule T.			
								, officeholder living expense			
						Campaign ph	1011				
	Complete ONU V if direct	Ľ	Candidata/Officabalder name	Office co	l labt			Office hold			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office so	ugnt			Office held			

	EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Rei Fees Office Overhead/Ren Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Cont The Instruction Guide explains how to complete th	tal Expense Transportation Equipment & Related Expense Travel in District Travel Out of District tract Labor OTHER (enter a category not listed above)						
1	Total pages Schedule F1:	· · · ·	3 Filer ID (Ethics Commission Filers)						
-	Sch: 12/13 Rpt: 25/27	Devine, John P. (The Honorable)	00026739						
4	Date 08/19/2024	Payee name Satellite Phone Store							
6	Amount (\$) \$2,832.94								
		San Diego, CA 92106							
8	PURPOSE OF EXPENDITURE		scription Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense mpaign phones						
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	andidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	09/13/2024	Texas Right to Life Committee							
	Amount (\$)	Payee address; City; State; Zip Code							
	\$2,500.00	4500 Bissonnet St							
		Suite 305 Bellaire, TX 77401							
	PURPOSE OF EXPENDITURE	Event Expense	scription Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense ent sponsor						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	andidate/Officeholder name Office sought	Office held						
	Date	Payee name							
	09/13/2024	Texas Right to Life Committee							
	Amount (\$) \$169.00	Payee address; City; State; Zip Code 4500 Bissonnet St Suite 305 Bellaire, TX 77401							
	PURPOSE OF EXPENDITURE	Event Expense	scription Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense ent tickets						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	andidate/Officeholder name Office sought	Office held						

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment			EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Legal Services 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)		
1	Total pages Sebadula E1:					2		(Ethics Commission Filers)	
1	Total pages Schedule F1: Sch: 13/13 Rpt: 26/27		⊨ hn P. (The Honorable)				Filer ID 00026739	(Ethics Commission Filers)	
4	Date 09/16/2024	5 Payee name The Wood	ands Waterway Marriott						
6	Amount (\$) \$322.79		Robbins Dr	ate; Zip Code					
		The Wood	ands, TX 77380						
8	PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Travel In District (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Hotel expense 							
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Of H	ficeholder name	Office sought			Office he	ld	

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

SCHEDULE K

	The Instru	ages Schedule K: /1 Rpt: 27/27					
2	FILER NAME	_		ID (Ethics Commission Filers)			
	Devine, John P. (The Honorable)				00026		
4	Date 07/18/2024					8 Amount (\$)	¢0.75
	07/18/2024						\$0.75
		6 Address of person from whom amount is received; City; State; Zip Code					
		Austin, TX 78767					
				litical contr	ribution returned to filer		
		Interest					
F	Date	Date Name of person from whom amount is received				Amount (\$)	
	08/19/2024						\$2.68
			Address of person from whom amount is received; City; State; Zip Code				
		Austin, TX 78767					
			—	Check if po	litical contr	ribution returned to filer	
			Interest				
	Date		Name of person from whom amount is received			Amount (\$)	#0.47
	09/19/2024 Frost Bank Address of person from whom amount is received; City; State; Zip Code						\$2.17
			Austin, TX 78767				
			Purpose for which amount is received	Check if po	litical contr	ribution returned to filer	