# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

### FORM C/OH COVER SHEET PG 1

The C/OH Instruction (	Guide explains how to cor	nplete this form.	1 Filer ID (Ethics Commi 00069589		2 Total pages filed: 50
3 CANDIDATE /	MS / MRS / MR	FIRST		MI	OFFICE USE ONLY
OFFICEHOLDER NAME	The Honorable	John H.			Date Received
					ELECTRONICALLY FILED
	NICKNAME	LAST		SUFFIX	· 01/15/2025
		Bucy		III	
4 CANDIDATE /	ADDRESS / PO BOX; A	 APT / SUITE #; CIT	<u></u> Y;	ZIP CODE	Date Hand-delivered or Date Postmarked
OFFICEHOLDER MAILING ADDRESS	P.O. Box 536		•		Receipt # Amount
Change of Address	Austin, TX 78767				
LI	Ausun, 177 10101				Date Processed
					Date Imaged
5 CAMPAIGN	MS / MRS / MR	FIRST		MI	
TREASURER NAME	Mrs.	Heather Sande	ers		
	NICKNAME	LAST		SUFFIX	
		Jefts			
6 CAMPAIGN	STREET ADDRESS (NO	PO BOX PLEASE);	AP	T / SUITE #; CITY;	STATE; ZIP CODE
TREASURER ADDRESS	1202 Willowbrook Dr.				
(Residence or Business)	Cedar Park , TX 78613				
7 CAMPAIGN	AREA CODE PH	ONE NUMBER E	EXTENSION		
TREASURER PHONE	(512) 529-4987				
8 REPORT TYPE	† <u> </u>		🗖		<b>.</b>
1175	X January 15	30th day before	election	Runoff	15th day after campaign treasurer appointment (officeholder only)
	July 15	8th day before	election	Exceeded modified reporting limit	Final Report (Attach C/OH-FR)
9 PERIOD	Month Day Yea	ar		Month Day	Year
COVERED	10/27/2024	TH	HROUGH	12/31/202	4
10 ELECTION	ELECTION DATE	l <u>—</u>		ELECTION TYPE	
	Month Day Yea	ar   LIP	Primary	Runoff	Other
	11/05/2024	XG	Seneral	Special	
11 OFFICE	OFFICE HELD (if any)	L		12 OFFICE SOUGHT	(if known)
	State Representative D	District 136		State Representa	
		00.7	FO DAGE 0		
		GO 1	TO PAGE 2		

## CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

### FORM C/OH COVER SHEET PG 2

2 of 50

13 C / OH NAME	Bucy III, John H. (The	Honorable)	14 Filer ID ( 00069589	(Ethics Commission Filers)				
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	olitical contributions accepted or political expendit These expenditures may have been made without officeholders are required to report this informatic	the candidate's or office	eholder's knowledge or				
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME						
ш	GENERAL							
		COMMITTEE ADDRESS						
	SPECIFIC							
		COMMITTEE CAMPAIGN TREASURER NAME						
		COMMITTEE CAMPAIGN TREASURER ADDRE	SS					
16 CONTRIBUTION TOTALS		ZED POLITICAL CONTRIBUTIONS (OTHER THA		\$ 0.00				
		<b>AL CONTRIBUTIONS</b> PLEDGES, LOANS, OR GUARANTEES OF LOAN	S)	\$ 101,350.00				
EXPENDITURE TOTALS								
	4. TOTAL POLITIC	AL EXPENDITURES		<b>\$</b> 16,703.33				
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE I RIOD	AST DAY OF THE	<b>\$</b> 127,533.20				
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS TING PERIOD	OF THE LAST DAY	\$ 36,375.00				
<b>17</b> AFFIDAVIT		I swear, or affirm, under penal true and correct and includes a under Title 15, Election Code.						
		The Hon	orable John H. Bucy I	III				
		Signature o	f Candidate or Officehol	der				
AFFIX NO	TARY STAMP / SEAL ABO	DVE						
Sworn to and subso	cribed before me, by the s	aid	, this the	day				
of	, 20, to ce	rtify which, witness my hand and seal of office.						
Signature of office	Signature of officer administering Printed name of officer administering Title of officer administering oath							

#### **SUBTOTALS - C/OH**

### FORM C/OH COVER SHEET PG 3

				3 of 50	
	ER NAM	ME ohn H. (The Honorable)	<b>19</b> Filer ID 00069589	(Eth	ics Commission Filers)
	-		1		
		E SUBTOTALS SCHEDULE			SUBTOTAL AMOUNT
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	93,850.00
2.	X	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	7,500.00
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.		SCHEDULE E: LOANS		\$	
5.	Х	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	6	\$	16,703.33
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	DNS	\$	
8.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
9.		SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	
10		SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$	
11		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	DNS	\$	
12	Х	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F TO FILER	RETURNED	\$	264.38
				•	

	MONET	ARY POLITICAL CONTRIBUTION	ONS	SCHEDULE A1
	The Instru	ction Guide explains how to complete this	form.	1 Total pages Schedule A1: Sch: 1/26 Rpt: 4/50
2	FILER NAME Bucy III, Joh	n H. (The Honorable)		3 Filer ID (Ethics Commission Filers) 00069589
4	Date 11/22/2024	<ul> <li>Full name of contributor  x out-of-state PAC (ID#: AbbVie PAC</li> <li>Contributor address; City; State; Zip Code</li> </ul>		7 Amount of Contribution (\$) \$500.00
		North Chicago, IL 60064		
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	ons)
	Date 12/11/2024	Full name of contributor out-of-state PAC (ID#: Agave Democratic Infrastructure Fund Contributor address; City; State; Zip Code  Austin, TX 78763	_	Amount of Contribution (\$) \$25,000.06
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	ons)
	Date 12/12/2024	Full name of contributor out-of-state PAC (ID#: Allen Boone Humphries Robinson LLP Contributor address; City; State; Zip Code		Amount of Contribution (\$) \$1,000.06
	Principal occu	Houston, TX 77027 pation / Job title (See Instructions)	Employer (See Instructions	ons)
	Date 12/09/2024	Full name of contributor X out-of-state PAC (ID#: Altria Group, Inc. PAC  Contributor address; City; State; Zip Code  Washington, DC 20001	C00089136 )	Amount of Contribution (\$) \$1,000.06
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	ons)
	Date 12/09/2024	Full name of contributor x out-of-state PAC (ID#: Amgen Inc. PAC  Contributor address; City; State; Zip Code  Thousand Oaks, CA 91320	C00251876 )	Amount of Contribution (\$)
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	ons)
			ı	

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUI	LE <b>A1</b>
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 2/26 Rpt: 5/50	
2	FILER NAME Bucy III, Joh	n H. (The Honorable)		3	Filer ID (Ethics Commission 00069589	on Filers)
4	Date 10/31/2024	Full name of contributor	)	7	Amount of Contribution (\$)	\$1,000.00
_	Dringing Local	Austin, TX 78768	Employer (Coo Instructions			
8	Рппсіраї осси	pation / Job title (See Instructions)	9 Employer (See Instructions	)		
	Date 11/03/2024	Full name of contributor out-of-state PAC (ID#:_ Barry, Catherine  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$5.00
	Principal occu	Round Rock, TX 78664  pation / Job title (See Instructions)	Employer (See Instructions	)		
	Health Science Specialist VHA					
	Date 12/03/2024	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$5.00
		Round Rock, TX 78664				
		pation / Job title (See Instructions) nce Specialist	Employer (See Instructions VHA	)		
	Date 10/31/2024	Full name of contributor out-of-state PAC (ID#:_Baw, Ali  Contributor address; City; State; Zip Code  Cedar Park, TX 78630			Amount of Contribution (\$)	\$36.00
	Principal occu Engineer	pation / Job title (See Instructions)	Employer (See Instructions Self-Employed	)		
	Date 12/09/2024	Full name of contributor out-of-state PAC (ID#:_ Bearbacker PAC Contributor address; City; State; Zip Code Houston, TX 77056	)		Amount of Contribution (\$)	\$2,500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		

	MONET	ARY POLITICAL CONT	RIBUTION	S		SCHEDULI	<b>■ A1</b>
	The Instru	ction Guide explains how to con	nplete this form	n.	1	Total pages Schedule A1: Sch: 3/26 Rpt: 6/50	
2	FILER NAME Bucy III, Joh	n H. (The Honorable)			3	Filer ID (Ethics Commission 00069589	ı Filers)
4	Date 11/14/2024	Berry, Robin	f-state PAC (ID#:		7	Amount of Contribution (\$)	\$25.00
8	Principal occu Editor/Publis	Austin, TX 78729 pation / Job title (See Instructions) her	9	Employer (See Instructions TCEQ	) ;)		
	Date 12/14/2024	Full name of contributor out-of Berry, Robin  Contributor address; City; State; Zip C	f-state PAC (ID#:	)		Amount of Contribution (\$)	\$25.00
	Principal occu Editor/Publis	pation / Job title (See Instructions) her		Employer (See Instructions TCEQ	5)		
	Date 10/30/2024	Full name of contributor out-of Bratton, Barbara Contributor address; City; State; Zip C	f-state PAC (ID#:	)		Amount of Contribution (\$)	\$25.00
	Principal occu	Leander, TX 78641 pation / Job title (See Instructions)		Employer (See Instructions Self-Employed	<u> </u> 5)		
	Date 11/30/2024	Bratton, Barbara  Contributor address; City; State; Zip C	f-state PAC (ID#:	)		Amount of Contribution (\$)	\$25.00
	Principal occu	Leander, TX 78641 pation / Job title (See Instructions)		Employer (See Instructions Self-Employed	<u> </u> ;)		
	Date 11/26/2024	Full name of contributor out-of Butcher, Michelle Contributor address; City; State; Zip C	f-state PAC (ID#:	)		Amount of Contribution (\$)	\$15.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions N/A	5)		
			•				

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDUI	LE <b>A1</b>
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 4/26 Rpt: 7/50	
2	FILER NAME Bucy III, Joh	n H. (The Honorable)		3	Filer ID (Ethics Commission 00069589	on Filers)
4	Date 12/12/2024	<ul> <li>Full name of contributor</li></ul>		7	Amount of Contribution (\$)	\$500.00
		Austin, TX 78766				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Date 11/07/2024	Full name of contributor X out-of-state PAC (ID#: CCWA - COPE PCC  Contributor address; City; State; Zip Code	00002089 )		Amount of Contribution (\$)	\$1,250.00
	Principal occu	Washington, DC 20001 pation / Job title (See Instructions)	Employer (See Instructions	-, 		
	Timolpai occa	pation / oob title (oce mondetions)	Employer (See mandenons	''		
	Date 12/12/2024	Full name of contributor X out-of-state PAC (ID#: CWA - COPE PCC  Contributor address; City; State; Zip Code	00002089)		Amount of Contribution (\$)	\$500.00
	Principal occu	Washington, DC 20001 pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> 5)		
	Date 12/13/2024	Full name of contributor x out-of-state PAC (ID#: C Centene Corporation PAC Contributor address; City; State; Zip Code  St. Louis, MO 63105	00397851		Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 11/01/2024	Full name of contributor x out-of-state PAC (ID#: C Chevron Employees PAC  Contributor address; City; State; Zip Code  San Ramon, CA 94583	00035006		Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDULE A1
	The Instruc	etion Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 5/26 Rpt: 8/50
2	FILER NAME Bucy III, John	n H. (The Honorable)		3	Filer ID (Ethics Commission Filers) 00069589
4	Date 11/17/2024	<ul> <li>Full name of contributor</li></ul>		7	Amount of Contribution (\$) \$25.00
8	Principal occu		Employer (See Instructions     N/A	j)	
	Date 11/19/2024	Full name of contributor			Amount of Contribution (\$) \$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>(</u>	
	Date 10/29/2024	Full name of contributor  out-of-state PAC (ID#:_ Congress Avenue Partners, LLC Contributor address; City; State; Zip Code			Amount of Contribution (\$) \$500.00
	Principal occu	Austin, TX 78701 pation / Job title (See Instructions)	Employer (See Instructions	5)	
	Date 12/11/2024	Full name of contributor out-of-state PAC (ID#:_ Delisi Communications PAC Contributor address; City; State; Zip Code Austin, TX 78701			Amount of Contribution (\$) \$500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>(</u>	
	Date 11/03/2024	Full name of contributor out-of-state PAC (ID#:_ DuTeil, Norma Diane  Contributor address; City; State; Zip Code  Round Rock, TX 78665			Amount of Contribution (\$) \$5.00
	Principal occu Not Employe	oation / Job title (See Instructions)	Employer (See Instructions N/A	5)	

	MONET	ARY POLITICAL (	CONTRIBUTIO	ONS		SCHEDUI	E A1
	The Instru	ction Guide explains how	to complete this fo	orm.	1	Total pages Schedule A1: Sch: 6/26 Rpt: 9/50	
2	FILER NAME Bucy III, Joh	n H. (The Honorable)			3	Filer ID (Ethics Commission 00069589	on Filers)
4	Date 12/12/2024	<ul><li>5 Full name of contributor Duron, Patricia</li><li>6 Contributor address; City; St</li></ul>	out-of-state PAC (ID#:_	)	7	Amount of Contribution (\$)	\$20.00
_		Cedar Park, TX 78613-73			_		
8	Principal occu Pet Sitter & (	pation / Job title (See Instructions Craft Sales	)	9 Employer (See Instructions Self-Employed	5)		
	Date 11/12/2024	Full name of contributor Eli Lilly and Company PA Contributor address; City; St Indianapolis, IN 46585		C00082792 )		Amount of Contribution (\$)	\$1,500.00
	Principal occu	pation / Job title (See Instructions	)	Employer (See Instructions	<u>l</u> s)		
	Date 10/30/2024	Full name of contributor Erskine, Patricia Contributor address; City; St	out-of-state PAC (ID#:_ ate; Zip Code		•	Amount of Contribution (\$)	\$5.00
	Principal occu	Round Rock, TX 78665 pation / Job title (See Instructions	3)	Employer (See Instructions	<u> </u>		
	Not Employe		,	N/A	,		
	Date 11/30/2024	Full name of contributor Erskine, Patricia Contributor address; City; St Round Rock, TX 78665		)		Amount of Contribution (\$)	\$5.00
	Principal occu Not Employe	pation / Job title (See Instructions ed	)	Employer (See Instructions N/A	5)		
	Date 12/04/2024	Full name of contributor Friends of UNT PAC Contributor address; City; St Dallas, TX 75380	out-of-state PAC (ID#:_	)	•	Amount of Contribution (\$)	\$750.00
	Principal occu	pation / Job title (See Instructions	·)	Employer (See Instructions	5)		
			'				

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDULE A	<b>\1</b>
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 7/26 Rpt: 10/50	
2	FILER NAME Bucy III, Joh	n H. (The Honorable)		3	Filer ID (Ethics Commission File 00069589	ers)
4	Date 12/11/2024	<ul> <li>Full name of contributor</li></ul>	)	7	Amount of Contribution (\$) \$1,0	00.00
_	<u> </u>	Austin, TX 78763				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	)		
	Date 11/08/2024	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	Round Rock, TX 78664	Employer (See Instructions			
	Teacher	pation / Job title (See Instructions)	Round Rock ISD	)		
	Date 11/20/2024	Full name of contributor out-of-state PAC (ID#:_ Gandaria-Escamilla, Sara Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	25.00
		Round Rock, TX 78664				
	Principal occu Teacher	pation / Job title (See Instructions)	Employer (See Instructions Round Rock ISD	)		
	Date 12/08/2024	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 Round Rock ISD	)		
	Date 12/14/2024	Full name of contributor out-of-state PAC (ID#:_ Gardner, Jill Contributor address; City; State; Zip Code  Cornwall, NY 12518	)		Amount of Contribution (\$)	50.00
	Principal occu Not Employe	pation / Job title (See Instructions)	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: 8/26 Rpt: 11/50	
2	FILER NAME Bucy III, Joh	n H. (The Honorable)		3	Filer ID (Ethics Commission 00069589	on Filers)
4	Date 12/13/2024	<ul> <li>Full name of contributor</li></ul>	(200076810)	7	Amount of Contribution (\$)	\$1,000.00
		Washington, DC 20001				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	s)		
	Date 11/17/2024	Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$10.00
	Principal occu	Austin, TX 78717 pation / Job title (See Instructions)	Employer (See Instructions	;) 		
	Ph.D Studen		The LBJ School of Publi		Affairs	
	Date 11/25/2024	Full name of contributor out-of-state PAC (ID#:_ Gulf States Toyota Inc. State PAC Contributor address; City; State; Zip Code	)	•	Amount of Contribution (\$)	\$500.00
		Houston, TX 77077				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)		
	Date 11/21/2024	Full name of contributor out-of-state PAC (ID#:_ HCA Texas Good Government Fund Contributor address; City; State; Zip Code  Dallas, TX 75240			Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>I</u> S)		
	Date 12/13/2024	Full name of contributor out-of-state PAC (ID#:_HMWK LLC  Contributor address; City; State; Zip Code  Austin, TX 78701	)	•	Amount of Contribution (\$)	\$100.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUI	E A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 9/26 Rpt: 12/50	
2	FILER NAME Bucy III, Joh	n H. (The Honorable)		3	Filer ID (Ethics Commission 00069589	on Filers)
4	Date 12/10/2024	5 Full name of contributor		7	Amount of Contribution (\$)	\$500.00
_	Duinning Langu	Austin, TX 78701	O Franks var (Can Instruction			
8	Рппсіраї осси	pation / Job title (See Instructions)	9 Employer (See Instructions	)		
	Date 11/21/2024	Full name of contributor out-of-state PAC (ID#:_ HOSPAC - State Contributor address; City; State; Zip Code  Austin, TX 78701			Amount of Contribution (\$)	\$2,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 12/12/2024	Full name of contributor out-of-state PAC (ID#:_ HS Law PAC Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$500.00
	Pointing I accord	Austin, TX 78701	Farely and (Construction)			
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 11/14/2024	Full name of contributor out-of-state PAC (ID#:_HillCo PAC  Contributor address; City; State; Zip Code  Austin, TX 78701	)		Amount of Contribution (\$)	\$5,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 11/26/2024	Full name of contributor out-of-state PAC (ID#:_ Hislop, Martha Contributor address; City; State; Zip Code  Round Rock, TX 78681			Amount of Contribution (\$)	\$10.00
	Principal occu Designer	pation / Job title (See Instructions)	Employer (See Instructions Edible Arrangements	)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E <b>A1</b>
	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 10/26 Rpt: 13/50	
2	FILER NAME Bucy III, Joh	ın H. (The Honorable)		3	Filer ID (Ethics Commission 00069589	n Filers)
4	Date 11/21/2024	<ul> <li>Full name of contributor</li></ul>	)	7	Amount of Contribution (\$)	\$500.00
•	Dringing aggr	Dallas, TX 75201	Employer (See Instructions			
8	Principal occu	ipation / Job title (See Instructions)	9 Employer (See Instructions)	)		
	Date 11/01/2024	Full name of contributor			Amount of Contribution (\$)	\$50.00
	Principal occu	Georgetown, TX 78633  upation / Job title (See Instructions)	Employer (See Instructions	)		
	Not Employe		N/A			
	Date 12/01/2024	Full name of contributor out-of-state PAC (ID#: Hooper, Hanna  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$50.00
		Georgetown, TX 78633				
	Principal occu Not Employe	pation / Job title (See Instructions) ed	Employer (See Instructions N/A	)		
	Date 11/09/2024	Full name of contributor out-of-state PAC (ID#: Jones, Robert  Contributor address; City; State; Zip Code  Dallas, TX 75218			Amount of Contribution (\$)	\$10.00
	Principal occu investor	pation / Job title (See Instructions)	Employer (See Instructions Self-Employed	)		
	Date 11/07/2024	Full name of contributor out-of-state PAC (ID#: Josh, Kelly  Contributor address; City; State; Zip Code  Austin, TX 78750-1422			Amount of Contribution (\$)	\$25.00
	Principal occu Director of F	ipation / Job title (See Instructions) Finance	Employer (See Instructions	)		

	MONET	ARY POLITICAL C	ONTRIBUTION	NS		SCHEDULI	E <b>A1</b>
	The Instru	ction Guide explains how	to complete this for	m.	1	Total pages Schedule A1: Sch: 11/26 Rpt: 14/50	
2	FILER NAME Bucy III, Joh	n H. (The Honorable)			3	Filer ID (Ethics Commission 00069589	ı Filers)
4	Date 12/07/2024	5 Full name of contributor  Josh, Kelly	out-of-state PAC (ID#:		7	Amount of Contribution (\$)	\$25.00
8	Principal occu	Austin, TX 78750-1422 pation / Job title (See Instructions)	9	Employer (See Instruction SEIU	s)		
	Date 11/09/2024	Full name of contributor King, Henry Contributor address; City; Sta		)		Amount of Contribution (\$)	\$10.00
	Principal occu Technician	pation / Job title (See Instructions)		Employer (See Instruction Hulk Automotive	s)		
	Date 12/09/2024	Full name of contributor King, Henry Contributor address; City; Sta				Amount of Contribution (\$)	\$10.00
	Principal occu	Round Rock, TX 78664 pation / Job title (See Instructions)		Employer (See Instruction	e)		
	Technician	pation 7 dob title (dee matractions)		Hulk Automotive	<i></i>		
	Date 11/03/2024	Full name of contributor Lawrence, Eileen Contributor address; City; Sta	out-of-state PAC (ID#: te; Zip Code			Amount of Contribution (\$)	\$25.00
	Principal occu Attorney	pation / Job title (See Instructions)		Employer (See Instruction Self-Employed	<u> </u> s)		
	Date 12/03/2024	Full name of contributor  Lawrence, Eileen  Contributor address; City; Sta	out-of-state PAC (ID#: te; Zip Code			Amount of Contribution (\$)	\$25.00
	Principal occu Attorney	pation / Job title (See Instructions)		Employer (See Instruction Self-Employed	s)		

	MONET	ARY POLITICAL C	ONTRIBUTIO	NS	S		SCHEDUL	E A1
	The Instruc	ction Guide explains how	to complete this for	rm	1.	1	Total pages Schedule A1: Sch: 12/26 Rpt: 15/50	
2	FILER NAME Bucy III, John	n H. (The Honorable)				3	Filer ID (Ethics Commission 00069589	on Filers)
4	Date 12/14/2024	6 Contributor address; City; Sta	out-of-state PAC (ID#: atte; Zip Code			7	Amount of Contribution (\$)	\$50.00
8	Principal occu Not Employe	Temple, TX 76504 pation / Job title (See Instructions)	9		Employer (See Instructions N/A	<u> </u> 5)		
	Date 11/18/2024	Full name of contributor  Legacy 44 PAC  Contributor address; City; Sta					Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)		E	Employer (See Instructions	<u> </u> 5)		
	Date 10/28/2024	Full name of contributor  Lester, Brigid  Contributor address; City; Sta	out-of-state PAC (ID#:				Amount of Contribution (\$)	\$10.00
	Principal occu Not Employe	Cedar Park, TX 78613 pation / Job title (See Instructions)			Employer (See Instructions N/A	<u> </u> 5)		
	Date 11/28/2024	Full name of contributor  Lester, Brigid  Contributor address; City; Sta	out-of-state PAC (ID#:atte; Zip Code				Amount of Contribution (\$)	\$10.00
	Principal occu Not Employe	Cedar Park, TX 78613 pation / Job title (See Instructions)			Employer (See Instructions N/A	<u> </u> 5)		
	Date 12/11/2024	Full name of contributor Linebarger Goggan Blair & Contributor address; City; Sta					Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)		E	Employer (See Instructions	5)		
			-					

	MONET	ARY POLITICAL (		SCHEDUL	E A1			
	The Instruc	ction Guide explains how	to complete this fo	rn	n.	1	Total pages Schedule A1: Sch: 13/26 Rpt: 16/50	
2	FILER NAME Bucy III, John	n H. (The Honorable)				3	Filer ID (Ethics Commission 00069589	on Filers)
4	Date 12/11/2024	<ul><li>5 Full name of contributor Loewy, Adam</li><li>6 Contributor address; City; St</li></ul>	out-of-state PAC (ID#:			7	Amount of Contribution (\$)	\$5,000.00
_	Deinginglagg	Austin, TX 78701	<u>,                                    </u>		Francisco (Con Instructions			
8	Attorney	pation / Job title (See Instructions	(1)		Employer (See Instructions Loewy Law Firm	)		
	Date 12/09/2024	Full name of contributor  Longbow Consulting Parti  Contributor address; City; St			)		Amount of Contribution (\$)	\$350.00
	Principal occu	Austin, TX 78701 pation / Job title (See Instructions	s)		Employer (See Instructions	5)		
	Date 11/01/2024	Full name of contributor Lutes, Lavern Contributor address; City; St	out-of-state PAC (ID#:		)		Amount of Contribution (\$)	\$25.00
	Principal occu Electrical En	pation / Job title (See Instructions	)		Employer (See Instructions Psemi Corporation	<u> </u>		
	Date 11/01/2024	Full name of contributor  Manning, Sam (Dr.)  Contributor address; City; St					Amount of Contribution (\$)	\$10.00
	Principal occu Not Employe	pation / Job title (See Instructions	)		Employer (See Instructions N/A	5)		
	Date 10/30/2024	Full name of contributor Martin, Elizabeth Contributor address; City; St	out-of-state PAC (ID#:		)		Amount of Contribution (\$)	\$50.00
	Principal occu Not Employe	pation / Job title (See Instructions	)		Employer (See Instructions N/A	i)		

	MONET	TARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E <b>A1</b>
	The Instru	ction Guide explains how to complete this f	form.	1	Total pages Schedule A1: Sch: 14/26 Rpt: 17/50	
2	FILER NAME Bucy III, Joh	nn H. (The Honorable)		3	Filer ID (Ethics Commission 00069589	n Filers)
4	Date 12/13/2024	<ul> <li>Full name of contributor X out-of-state PAC (ID#:_McGuireWoods Federal PAC</li> <li>Contributor address; City; State; Zip Code</li> </ul>	C00225342 )	7	Amount of Contribution (\$)	\$500.00
_	Detection	Richmond, VA 23219	To 5			
8	Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 11/01/2024	Full name of contributor out-of-state PAC (ID#:_ Mercer, Frances  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$500.00
	Principal occi	Dallas, TX 75202  upation / Job title (See Instructions)	Employer (See Instructions	:) 		
	Administration		Pegasus School	·)		
	Date 11/05/2024	Full name of contributor out-of-state PAC (ID#:_ Mercer, Frances Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$500.00
		Dallas, TX 75202				
	Principal occu Administratio	upation / Job title (See Instructions) on	Employer (See Instructions Pegasus School	5)		
	Date 11/18/2024	Full name of contributor out-of-state PAC (ID#:_ Mitchell, John Contributor address; City; State; Zip Code  Austin, TX 78756			Amount of Contribution (\$)	\$15.00
	Principal occu Not Employe	upation / Job title (See Instructions) ed	Employer (See Instructions N/A	5)		
	Date 12/10/2024	Full name of contributor out-of-state PAC (ID#:_ Moak Casey PAC Contributor address; City; State; Zip Code Austin, TX 78701			Amount of Contribution (\$)	\$500.00
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<b>s</b> )		
			,			

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E <b>A1</b>
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 15/26 Rpt: 18/50	
2	FILER NAME Bucy III, Joh	ın H. (The Honorable)		3	Filer ID (Ethics Commission 00069589	n Filers)
4	Date 10/30/2024	5 Full name of contributor out-of-state PAC (ID#:_ Morgan, Paul  6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$25.00
8	Principal occu	Houston, TX 77064-4273	9 Employer (See Instructions			
•	Not Employe		N/A	)		
	Date 11/30/2024	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 pation / Job title (See Instructions)	Employer (See Instructions	)		
	Not Employe	ed	N/A			
	Date 10/29/2024	Full name of contributor out-of-state PAC (ID#:_ Morin, Julie and Thomas Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$500.00
		Houston, TX 77005				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 11/23/2024	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 11/12/2024	Full name of contributor out-of-state PAC (ID#:_NABIP Texas PAC  Contributor address; City; State; Zip Code  Cranford, NJ 07016			Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		

	MONET	ARY POLITICAL (	ONS	SCHEDULE A1			
	The Instru	ction Guide explains how	v to complete this fo	orm.	1	Total pages Schedule A1: Sch: 16/26 Rpt: 19/50	
2	FILER NAME Bucy III, Joh	n H. (The Honorable)			3	Filer ID (Ethics Commission 00069589	on Filers)
4	Date 12/09/2024	<ul><li>5 Full name of contributor NRG Energy Inc PAC</li><li>6 Contributor address; City; S</li></ul>	x out-of-state PAC (ID#: C		7	Amount of Contribution (\$)	\$3,000.00
		Princeton, NJ 08540					
8	Principal occu	pation / Job title (See Instruction	5)	9 Employer (See Instructions	5)		
	Date 12/11/2024	Full name of contributor Oncor Texas State PAC Contributor address; City; S	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$1,500.00
	Principal occu	Dallas, TX 75202 pation / Job title (See Instruction	s)	Employer (See Instructions	<u>;)</u>		
	Timelpar occu	pation / Job title (See instruction	3)	Employer (See instructions	"		
	Date 12/09/2024	Full name of contributor Pfizer PAC Contributor address; City; S	x out-of-state PAC (ID#: C	)		Amount of Contribution (\$)	\$1,500.00
	Principal occu	New York, NY 10001 pation / Job title (See Instruction	s)	Employer (See Instructions	?) 		
	pa. 000a	paner roos and (eee mendener	-)	p.o) o. (e e ee a e e e	-,		
	Date 11/08/2024	Full name of contributor PharmPAC Contributor address; City; S Austin, TX 78757			•	Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instruction	s)	Employer (See Instructions	s)		
	Date 10/30/2024	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 Planning Ass	pation / Job title (See Instruction	5)	Employer (See Instructions NJ Pinelands Commissi			
		-					

	MONEI	ARY POLITICAL (	CONTRIBUTIO	NS		SCHEDUL	E <b>A1</b>
	The Instru	ction Guide explains how	to complete this fo	orm.	1	. Total pages Schedule A1: Sch: 17/26 Rpt: 20/50	
2	FILER NAME	- II (The II e e e e e e e e e			3	Filer ID (Ethics Commission	n Filers)
		n H. (The Honorable)	_			00069589	
4	Date 11/30/2024	<ul><li>5 Full name of contributor Piner, Elizabeth</li><li>6 Contributor address; City; Si</li></ul>	out-of-state PAC (ID#:_		)  7	' Amount of Contribution (\$)	\$50.00
		Austin, TX 78729					
8	Principal occu	pation / Job title (See Instructions	3)	9 Employer (See	Instructions)		
	Planning Ass	sistant		NJ Pinelands	Commission	n	
	Date 10/29/2024	Full name of contributor Piner, Elizabeth  Contributor address; City; Si	out-of-state PAC (ID#:_			Amount of Contribution (\$)	\$25.00
		Austin, TX 78729					
		pation / Job title (See Instructions	3)	Employer (See	Instructions)		
	Not Employe	ed		N/A			
	Date 11/02/2024	Full name of contributor Piner, Elizabeth Contributor address; City; Si	out-of-state PAC (ID#:		)	Amount of Contribution (\$)	\$25.00
		Austin, TX 78729					
	Principal occu	I	s)	Employer (See	Instructions)		
	Not Employe	,	,	N/A	,		
	Date 11/14/2024	Full name of contributor Piner, Elizabeth Contributor address; City; St	out-of-state PAC (ID#:_			Amount of Contribution (\$)	\$50.00
	Principal occu Not Employe	pation / Job title (See Instructions	5)	Employer (See N/A	Instructions)		
	Date 11/29/2024	Full name of contributor Piner, Elizabeth  Contributor address; City; Si  Austin, TX 78729	out-of-state PAC (ID#:_			Amount of Contribution (\$)	\$25.00
	Principal occu Not Employe	pation / Job title (See Instructions ed	s)	Employer (See N/A	Instructions)		

	MONET	ARY POLITICAL (	CONTRIBUTIO	N	IS		SCHEDUL	E <b>A1</b>
	The Instruc	ction Guide explains how	to complete this fo	orı	n.	1	Total pages Schedule A1: Sch: 18/26 Rpt: 21/50	
2	FILER NAME Bucy III, John	n H. (The Honorable)				3	Filer ID (Ethics Commission 00069589	n Filers)
4	Date 12/02/2024	<ul><li>5 Full name of contributor</li><li>Piner, Elizabeth</li><li>6 Contributor address; City; S</li></ul>	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	s)		
_	Not Employe		,		N/A	,		
	Date 12/14/2024	Full name of contributor Piner, Elizabeth Contributor address; City; S			)		Amount of Contribution (\$)	\$50.00
	Principal occu	Austin, TX 78729 pation / Job title (See Instructions	5)		Employer (See Instructions	<u> </u>		
	Not Employe		,		N/A	,		
	Date 10/31/2024	Full name of contributor Poursamadi, Amir Contributor address; City; S	out-of-state PAC (ID#:_	••••	)	•	Amount of Contribution (\$)	\$25.00
		Austin, TX 78717						
	Principal occu Not Employe	pation / Job title (See Instructions d	s)		Employer (See Instructions N/A	5)		
	Date 12/11/2024	Full name of contributor RECA-Good Government Contributor address; City; S Austin, TX 78701			)	•	Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions	s)		Employer (See Instructions	5)		
	Date 12/09/2024	Full name of contributor  Red Rock Texas PAC  Contributor address; City; S  Austin, TX 78701	out-of-state PAC (ID#:_ ate; Zip Code				Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions	s)		Employer (See Instructions	5)		

	MONET	ARY POLITICAL CONT	RIBUTION	IS		SCHEDUL	E <b>A1</b>
	The Instru	ction Guide explains how to con	nplete this for	n.	1	Total pages Schedule A1: Sch: 19/26 Rpt: 22/50	
2	FILER NAME Bucy III, Joh	n H. (The Honorable)			3	Filer ID (Ethics Commissio 00069589	n Filers)
4	Date 11/13/2024	<ul> <li>Full name of contributor  out-of</li></ul>	-state PAC (ID#:	)	7	Amount of Contribution (\$)	\$5.00
_	Deignigal	Round Rock, TX 78681-4055	lo.	Franks on (Cook batusations			
8		pation / Job title (See Instructions) Founder Consultancy	9	Employer (See Instructions Self-Employed	·)		
	Date 12/13/2024	Richardson, Carrie  Contributor address; City; State; Zip C	-state PAC (ID#:			Amount of Contribution (\$)	\$5.00
	Principal occu	Round Rock, TX 78681-4055 pation / Job title (See Instructions)		Employer (See Instructions	<u> </u>		
	•	Founder Consultancy		Self-Employed	,		
	Date 12/12/2024	Full name of contributor x out-of Rock Holdings Inc. State PAC Contributor address; City; State; Zip C	-state PAC (ID#: <u>C00</u>	)		Amount of Contribution (\$)	\$750.00
		Lansing, MI 48933					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 11/08/2024	Rushin, Camron				Amount of Contribution (\$)	\$25.00
	Principal occu Software En	pation / Job title (See Instructions) gineer		Employer (See Instructions	5)		
	Date 12/08/2024	Rushin, Camron	-state PAC (ID#:			Amount of Contribution (\$)	\$25.00
	Principal occu Software En	pation / Job title (See Instructions) gineer		Employer (See Instructions Ixia	i)		
			<b>'</b>				

	MONET	ARY POLITICAL CONTRIBUTION	Ν	IS		SCHEDUL	E <b>A1</b>
	The Instruc	ction Guide explains how to complete this f	or	m.	1	Total pages Schedule A1: Sch: 20/26 Rpt: 23/50	
2	FILER NAME Bucy III, Joh	n H. (The Honorable)			3	Filer ID (Ethics Commission 00069589	n Filers)
4	Date 11/26/2024	<ul> <li>Full name of contributor  out-of-state PAC (ID#:_Shelton, Kristin</li> <li>Contributor address; City; State; Zip Code</li> </ul>			7	Amount of Contribution (\$)	\$4.00
_		Austin, TX 78717	1.		L		
8	Teacher	pation / Job title (See Instructions)	9	Employer (See Instructions Round Rock ISD	5)		
	Date 10/31/2024	Contributor address; City; State; Zip Code		)	•	Amount of Contribution (\$)	\$10.00
	Principal occu	Austin, TX 78717 pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> s)		
	Not Employe	d		N/A			
	Date 12/12/2024	Full name of contributor out-of-state PAC (ID#:_ Southern Glazer's PAC of Texas  Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$500.00
		Austin, TX 78701					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 11/18/2024	Full name of contributor out-of-state PAC (ID#:_Stempko, Jessica (The Honorable)  Contributor address; City; State; Zip Code  Round Rock, TX 78681		)		Amount of Contribution (\$)	\$25.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions N/A	5)		
	Date 11/14/2024	Full name of contributor out-of-state PAC (ID#:_Stoddard, Mark  Contributor address; City; State; Zip Code  Austin, TX 78723				Amount of Contribution (\$)	\$5.00
	Principal occu Not Employe	pation / Job title (See Instructions)		Employer (See Instructions N/A	5)		
			•				

	MONET	ARY POLITICAL CONTRIBUTION	)N	IS		SCHEDUI	LE <b>A1</b>
	The Instruc	ction Guide explains how to complete this f	or	m.	1	Total pages Schedule A1: Sch: 21/26 Rpt: 24/50	
2	FILER NAME Bucy III, John	n H. (The Honorable)			3	Filer ID (Ethics Commission 00069589	on Filers)
4		<ul> <li>Full name of contributor</li></ul>		)	7	Amount of Contribution (\$)	\$5.00
8	Principal occu Not Employe	Austin, TX 78723 pation / Job title (See Instructions) d	9	Employer (See Instructions N/A	<u> </u> s)		
	Date 11/25/2024	Full name of contributor out-of-state PAC (ID#:_ TREPAC - Texas Association of Realtors PAC Contributor address; City; State; Zip Code  Austin, TX 78768			•	Amount of Contribution (\$)	\$2,500.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u>l</u> s)		
	Date 10/28/2024	Full name of contributor out-of-state PAC (ID#:_ TXCPA PAC Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$500.00
	Principal occu	Addison, TX 75001 pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> 5)		
	Date 12/12/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Aggregates & Concrete Association PAC Contributor address; City; State; Zip Code  Round Rock, TX 78681		)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> 5)		
	Date 12/13/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Alliance for Conservation PAC Contributor address; City; State; Zip Code  Austin, TX 78721		)	•	Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUI	LE <b>A1</b>
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 22/26 Rpt: 25/50	
2	FILER NAME Bucy III, Joh	n H. (The Honorable)		3	Filer ID (Ethics Commission 00069589	on Filers)
4	Date 12/12/2024	Full name of contributor		7	Amount of Contribution (\$)	\$1,000.00
_		Austin, TX 78701				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	)		
	Date 11/21/2024	Full name of contributor out-of-state PAC (ID#: Texas Dairymen PAC  Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$500.00
	Principal occu	Austin, TX 78711 pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 11/21/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Dental Associaton Political Action Commi Contributor address; City; State; Zip Code	ittee		Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 10/30/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Farm Bureau AGFUND Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 12/13/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Land Title Association PAC Contributor address; City; State; Zip Code  Austin, TX 78703			Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUI	LE <b>A1</b>
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 23/26 Rpt: 26/50	
2	FILER NAME Bucy III, Joh	n H. (The Honorable)		3	Filer ID (Ethics Commission 00069589	on Filers)
4	Date 12/12/2024	5 Full name of contributor out-of-state PAC (ID#:_ Texas McDonald's Operators Association PAC,  6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$1,000.00
_	Daine in all account	Athens, TX 78751	2 Faralassa (Caralassa tarata			
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	)		
	Date Full name of contributor out-of-state PAC (ID#:)  12/09/2024 Texas Sands PAC  Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$4,000.00
	Principal occu	Austin, TX 78701 pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 12/12/2024	Full name of contributor out-of-state PAC (ID#:_ Texas State Association of Firefighters Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$750.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 12/11/2024	Full name of contributor out-of-state PAC (ID#:_ Texas State University System PAC Contributor address; City; State; Zip Code  Austin, TX 78767	)		Amount of Contribution (\$)	\$1,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		
	Date 12/09/2024	Full name of contributor out-of-state PAC (ID#:_ Texas Trial Lawyers Associatin PAC Contributor address; City; State; Zip Code Austin, TX 78701			Amount of Contribution (\$)	\$1,500.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	)		

	MONET	ARY POLITICAL C	CONTRIBUTIO	ONS		SCHEDUI	_E <b>A1</b>
	The Instru	ction Guide explains how	to complete this fo	orm.	1	Total pages Schedule A1: Sch: 24/26 Rpt: 27/50	
2	FILER NAME Bucy III, Joh	n H. (The Honorable)			3	Filer ID (Ethics Commission 00069589	on Filers)
4	Date 12/13/2024	<ul><li>5 Full name of contributor</li><li>The Cigna Group Employ</li><li>6 Contributor address; City; St</li></ul>			7	Amount of Contribution (\$)	\$500.00
		Philadelphia, PA 19192					
8	Principal occu	pation / Job title (See Instructions	)	9 Employer (See Instructions	s)		
	Date Full name of contributor out-of-state PAC (ID#:)  11/12/2024 The US Oncology Network PAC  Contributor address; City; State; Zip Code		•	Amount of Contribution (\$)	\$1,000.00		
	Principal occu	The Woodlands, TX 7738 pation / Job title (See Instructions		Employer (See Instructions	<u> </u> 5)		
	Date 11/01/2024	Full name of contributor Thompson, Dianne Contributor address; City; St	out-of-state PAC (ID#:_			Amount of Contribution (\$)	\$10.00
		Round Rock, TX 78664 pation / Job title (See Instructions	)	Employer (See Instructions	<u> </u> s)		
	Not Employed  Date  Full name of contributor out-of-state PAC (ID#:)  Thompson, Dianne  Contributor address; City; State; Zip Code  Round Rock, TX 78664		•	Amount of Contribution (\$)	\$15.00		
	Principal occu Not Employe	pation / Job title (See Instructionsed	)	Employer (See Instructions N/A	<u>s)</u>		
	Date 12/01/2024	Full name of contributor Thompson, Dianne Contributor address; City; St Round Rock, TX 78664	out-of-state PAC (ID#:_ ate; Zip Code			Amount of Contribution (\$)	\$10.00
	Principal occu Not Employe	pation / Job title (See Instructions ed	)	Employer (See Instructions N/A	5)		

	MONET	ARY POLITICAL (	CONTRIBUTIO	N	S		SCHEDUI	_E <b>A1</b>
	The Instru	ction Guide explains how	to complete this fo	rn	n.	1	Total pages Schedule A1: Sch: 25/26 Rpt: 28/50	
2	Bucy III, John H. (The Honorable)						Filer ID (Ethics Commission 00069589	on Filers)
4	Date 10/30/2024	<ul><li>5 Full name of contributor Thompson, George</li><li>6 Contributor address; City; S</li></ul>	out-of-state PAC (ID#:			7	Amount of Contribution (\$)	\$10.00
		Austin, TX 78729						
8		pation / Job title (See Instructions tion Programmer	s) <u> </u>	•	Employer (See Instructions RVH Solutions Inc	5)		
	Date Full name of contributor out-of-state PAC (ID#:)  11/12/2024 Trevino, Victoria  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$50.00			
	Principal occu	Austin, TX 78756 pation / Job title (See Instructions	s)		Employer (See Instructions	<u> </u> s)		
	Date 11/01/2024	Full name of contributor Trone, Robert  Contributor address; City; S	out-of-state PAC (ID#:		)		Amount of Contribution (\$)	\$2,000.00
	Principal occu	Bethesda, MD 20817 pation / Job title (See Instructions	s)		Employer (See Instructions	<u> </u> s)		
	Date Full name of contributor			Amount of Contribution (\$)	\$1,000.00			
	Principal occu	pation / Job title (See Instructions	5)		Employer (See Instructions	<u>(</u> 5)		
	Date 11/10/2024	Full name of contributor Wilby, Eliza Contributor address; City; S Austin, TX 78717	out-of-state PAC (ID#:				Amount of Contribution (\$)	\$10.00
	Principal occu Veterinarian	pation / Job title (See Instructions	(3)		Employer (See Instructions Thrive Pet Healthcare	5)		
			<b>'</b>					

	MONETARY POLITICAL CONTRIBUTIONS		SCHEDU	LE <b>A1</b>
	The Instruction Guide explains how to complete this form.	1	Total pages Schedule A1: Sch: 26/26 Rpt: 29/50	
2	FILER NAME Bucy III, John H. (The Honorable)	3	Filer ID (Ethics Commissi 00069589	on Filers)
4			Amount of Contribution (\$)	\$10.00
	Austin, TX 78717			
8	Principal occupation / Job title (See Instructions)  9 Employer (See Instruction Thrive Pet Healthcare	ns)		
	Date Full name of contributor out-of-state PAC (ID#:)  11/01/2024 Woodard, Owen  Contributor address; City; State; Zip Code		Amount of Contribution (\$)	\$10.00
	Georgetown, TX 78628			
	Principal occupation / Job title (See Instructions)  Employer (See Instruction N/A	ns)		
	Date Full name of contributor X out-of-state PAC (ID#: C00279455  Zeneca Inc. PAC (AZPAC)  Contributor address; City; State; Zip Code  Wilmington, DE 19850		Amount of Contribution (\$)	\$1,000.00
	Principal occupation / Job title (See Instructions)  Employer (See Instructions)	ns)		

### NON-MONETARY (IN-KIND) POLITICAL SCHEDULE A2 **CONTRIBUTIONS** 1 Total pages Schedule A2: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 30/50 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Bucy III, John H. (The Honorable) 00069589 \$ TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS **6** Full name of contributor 9 In-kind contribution Date out-of-state PAC (ID#: Amount of contribution (\$) description 11/22/2024 Agave Democratic Infrastructure Fund \$7,500.00 Communications 7 Contributor address; City; State; Zip Code Consulting Austin, TX 78763 Check if travel outside of Texas. Complete Schedule T. (See instructions) 10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions) 11 Employer (FOR NON-JUDICIAL) 12 Contributor's principal occupation (FOR JUDICIAL) 13 Contributor's job title (FOR JUDICIAL) 14 Contributor's employer/law firm (FOR JUDICIAL) 15 Law firm of contributor's spouse (if any) (FOR JUDICIAL) 16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)

### POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

#### 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
Gift/Awards/Memorials Expense Printing Expense
Leaal Services Salaries/Wages/Contract Labor

	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: 1/19 Rpt: 31/50	Bucy III, John H. (The Honorable) 00069589
4	Date	5 Payee name
	10/27/2024	ActBlue
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$11.25	372 Summer St
		Somerville, MA 02144
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Credit card processing fees
		Ground dard processing 1995
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OF	
	Date	Payee name
	11/03/2024	ActBlue
	Amount (\$)	Payee address; City; State; Zip Code
	\$37.05	372 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.  Check if Austin, TX, officeholder living expense
		Credit card processing fees
		<b>3</b>
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OH	1
	Date	Payee name
	11/05/2024	ActBlue
	Amount (\$)	Payee address; City; State; Zip Code
	\$19.75	372 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.
	_	Check if Austin, TX, officeholder living expense  Credit card processing fees
		Credit data processing rees
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/Oh	<b>y</b>

#### POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

#### SCHEDULE F1

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee I	Legal Services  The Instruction Guide explain		/ages	/Contract Labor		OTHER (enter a	category not listed abo	ve)
1	Total pages Schedule F1:	2 FILER NAME					3	Filer ID	(Ethics Commission	n Filers)
	Sch: 2/19 Rpt: 32/50		n H. (The Honorable)					00069589		
4	Date	5 Payee name								
	11/10/2024	ActBlue								
6	Amount (\$)	7 Payee addres	s; City; Sta	te; Zip Co	de					
l	\$4.17	372 Summe	r St							
l										
		Somerville, N	MA 02144							
8	PURPOSE	(a) Category (See	e Categories listed at the top of this	schedule)	(b)	Description				
l	OF EXPENDITURE	Accounting/E	Banking					ide of Texas. Com		
l						Credit card p		, officeholder living	expense	
l						Credit card pr	100	cooning icco		
Ļ	Complete ONLY if direct	Candidate/Offic	achaldar nama	Office cou	abt			Office he	ald.	
9	Complete ONLY if direct expenditure to benefit C/OI		enoluer name	Office sou	gni			Office fie	eiu	
F	Date	Payee name								
	11/17/2024	ActBlue								
H	Amount (\$)	Payee addres	s; City; Sta	te; Zip Co	de					
l	\$4.76	372 Summe	r St							
l										
		Somerville, N	MA 02144							
l	PURPOSE	(a) Category (See	e Categories listed at the top of this	schedule)	(b)	Description				
l	OF EXPENDITURE	Accounting/E	Banking			<b>=</b>		ide of Texas. Com		
l						Credit card p		, officeholder living	expense	
						Credit card pr	IUC	essing lees		
┝	Complete ONLY if direct	Candidate/Offic	eholder name	Office sou	aht			Office he	-iq	
l	expenditure to benefit C/OI		onolder name	011100 000	giit			011100 110	, id	
⊢	Date	Dayso name								
l	11/24/2024	Payee name ActBlue								
┡			0.5		-1 -					
l	Amount (\$)	Payee addres 372 Summe		te; Zip Co	ue					
l	\$4.17	372 Sulfillie	1 31							
		Somerville, N	MA 02144							
L	DUDD005				<i>a</i> >					
	PURPOSE OF		e Categories listed at the top of this	schedule)	(a)	Description  Check if travel	oute	ide of Texas. Com	nlete Schedule T	
l	EXPENDITURE	Accounting/E	Banking					, officeholder living		
l						Credit card p				
							-	3		
$\vdash$	Complete ONLY if direct	Candidate/Offic	eholder name	Office sou	ght			Office he	eld	
	expenditure to benefit C/OI		<del>-</del>		J					
$\vdash$										
ı										

#### POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

#### 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

	Candidate/Officeholder/Politica Credit Card Payment		Legal Services  The Instruction Guide	Salaries/	Wages	/Contract Labor		OTHER (enter a	category not listed ab	ove)
1	Total pages Schedule F1:	2 FILER NAM	E				3	Filer ID	(Ethics Commiss	ion Filers)
	Sch: 3/19 Rpt: 33/50	Bucy III, Jo	hn H. (The Honorab	ole)				00069589		
4	Date	5 Payee name	<b>!</b>							
	12/01/2024	ActBlue								
6	Amount (\$)	7 Payee addre	ess; City;	State; Zip C	ode					
	\$9.09	372 Summ	er St							
		Somerville,	MA 02144							
8	PURPOSE OF		See Categories listed at the top	o of this schedule)	(b)	Description				
	EXPENDITURE	Accounting	/Banking			ш		de of Texas. Com officeholder living		
						Credit card pr			схрензе	
								g		
9	Complete ONLY if direct expenditure to benefit C/Oh		ïceholder name	Office so	l ught			Office he	eld	
	Date	Payee name	<u> </u>							
	12/08/2024	ActBlue								
	Amount (\$)	Payee addre	ess; City;	State; Zip C	ode					
	\$5.15	372 Summ	-	этээ, цр						
	70.20	0.2 00	o. o.							
		Somerville	MA 02144							
	PURPOSE	(a) Category (S	See Categories listed at the top	o of this schedule)	(b)	Description				
	OF EXPENDITURE	Accounting	/Banking			<u></u>		de of Texas. Com		
						Credit card pr		officeholder living	expense	
						Credit card pr	UC	cooning icco		
	Complete ONLY if direct expenditure to benefit C/Oh		iceholder name	Office so	l ught			Office he	eld	
	Dete									
	Date	Payee name	•							
	12/15/2024	ActBlue								
	Amount (\$)	Payee addre		State; Zip C	ode					
	\$216.69	372 Summ	er St							
		Somerville,	MA 02144							
	PURPOSE	(a) Category /	See Categories listed at the top	o of this echodula)	(b)	Description				
	OF	Accounting		of this scriedule)	`´		outsi	de of Texas. Com	plete Schedule T.	
	EXPENDITURE		<b>3</b>			Check if Austin,	TX,	officeholder living	expense	
						Credit card pr	ОС	essing fees		
	Complete ONLY if direct		iceholder name	Office so	ught			Office he	eld	
	expenditure to benefit C/O	Н								

### POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

#### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Printing Expense Salaries/Wages/Contract Labor Gift/Awards/Memorials Expense Travel Out of District Legal Services Candidate/Officeholder/Political Committee 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: 4/19 Rpt: 34/50 Bucy III, John H. (The Honorable) 00069589 4 Date Payee name Action Network 11/26/2024 6 Amount (\$) Payee address; City; State; Zip Code \$11.00 1900 L St NW #900 Washington, DC 20036 8 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Advertising Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense **Email service** Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 12/26/2024 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 Check if travel outside of Texas. Complete Schedule T. Advertising Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense **Email service** Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 11/18/2024 Amazon Payee address; Amount (\$) City: State; Zip Code \$25.92 410 Terry Ave N Seattle, WA 98109 **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Office Overhead/Rental Expense **EXPENDITURE** Check if Austin, TX, officeholder living expense Pens Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH

#### POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

#### 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

	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: 5/19 Rpt: 35/50	Bucy III, John H. (The Honorable) 00069589
4	Date	5 Payee name
	11/19/2024	Amazon
6	Amount (\$) \$17.30	7 Payee address; City; State; Zip Code 410 Terry Ave N  Seattle, WA 98109
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 Pens
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	12/03/2024	Blue Victory Communications, LLC
	Amount (\$) \$1,353.13	Payee address; City; State; Zip Code P.O. Box 300626  Austin, TX 78705
	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  Communications
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	12/18/2024	Blue Victory Communications, LLC
	Amount (\$) \$1,353.13	Payee address; City; State; Zip Code P.O. Box 300626
		Austin, TX 78705
	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  Communications
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

### POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

#### 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

nt Solicitation/Fundraising Expense
e 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 com	plete this form.
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 6/19 Rpt: 36/50	Bucy III, John H. (The Honorable)	00069589
4	Date	5 Payee name	-
	11/06/2024	Boost Mobile	
6	Amount (\$)	7 Payee address; City; State; Zip Code	e
	\$35.00	9060 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 travel outside of Texas. Complete Schedule T.
	LAFLINDITORL		Check if Austin, TX, officeholder living expense
			Campaign phone
9	Complete ONLY if direct	Candidate/Officeholder name Office sougl	ht Office held
9	expenditure to benefit C/OI		nt Onice neid
_	Date		
	Date	Payee name	
	12/06/2024	Boost Mobile	
	Amount (\$)	Payee address; City; State; Zip Code	е
	\$35.00	9060 Irvine Center Dr	
		Irvine, CA 92618	
	PURPOSE OF	,	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	Candidate/Officeholder name Office sough	ht Office held
	expenditure to benefit C/OI	1	
	Date	Payee name	
	10/31/2024	Burke, Kyle	
	Amount (\$)	Payee address; City; State; Zip Code	e
	\$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 travel outside of Texas. Complete Schedule T.
	EXPENDITURE		Check if Austin, TX, officeholder living expense
			Legislative salary supplement
L	Operation ONE VIII II	Out distant Office health and a second of the second of th	Offic. 1. 1.
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	ht Office held
l			

#### 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 Credit Card Payment		ittee I	-ood/Beverage Expense Gift/Awards/Memorials E Legal Services The Instruction Gui	Expense		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:	l							3	Filer ID	(Ethics Commission Filers)	
L	Sch: 7/19 Rpt: 37/50	Ві	ucy III, Joh	n H. (The Hono	rable)				L	00069589		
4	Date	<b>5</b> Pa	ayee name									
L	11/30/2024	В	urke, Kyle									
6	Amount (\$)	<b>7</b> Pa	ayee addres	s; City;	State;	Zip Co	ode					
	\$500.00	22	203 Marcus	Abrams Blvd								
		Aı	ustin, TX 7	8748								
8	PURPOSE	(a) Ca	ategory (See	e Categories listed at the	e top of this sche	edule)	(b)	Description				
	OF EXPENDITURE	S	alaries/Wa	ges/Contract La	bor			_		de of Texas. Comp officeholder living		
								Legislative sa				
										) I- I		
9	Complete ONLY if direct	<u>I</u> Car	ndidate/Offic	eholder name	C	Office sou	ıght			Office he	eld	
	expenditure to benefit C/OI	Н										
	Date	Pá	ayee name									_
	12/31/2024	В	urke, Kyle									
	Amount (\$)	Pá	ayee addres	s; City;	State;	Zip Co	ode					_
	\$500.00	22	203 Marcus	s Abrams Blvd								
		Aı	ustin, TX 7	8748								
	PURPOSE	(a) Ca	ategory (See	e Categories listed at the	e top of this sche	edule)	(b)	Description				
	OF EXPENDITURE			ges/Contract La		-		<b>—</b>		de of Texas. Comp		
	ZA ZABITORZ							_		officeholder living		
								Legislative sa	udí	y supplemen	IL	
_	Complete ONLY if direct	[ Car	ndidate/Offic	eholder name	0	Office sou	laht			Office he	hld	_
	expenditure to benefit C/O		.s.idato/Oillo	SSidoi Huillo	O		-9·11			Since ne	··· <del>··</del>	
H	Date	D,	avee name									_
	12/03/2024	l	•	Chamber of Cor	nmerce							
	Amount (\$)		avee addres			Zip Co	nde					
	\$250.00		,	testone Blvd	Siaie,	2.p 00	Juc					
	<del>4200.00</del>		te. 180									
			edar Park,	TX 78613								
	PURPOSE						(b)	Docorinties				
	OF	ı		e Categories listed at the ead/Rental Exp		edule)	(0)	Description  Check if travel of	outsi	de of Texas. Comp	olete Schedule T.	
	EXPENDITURE		oc Overi	oddir toritai Exp	0.100			Check if Austin,	, TX,	officeholder living	expense	
								Event sponso	orsh	nip		
	Complete ONLY if direct expenditure to benefit C/O		ndidate/Offic	eholder name	С	office sou	ıght			Office he	eld	
		-										

### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 8/19 Rpt: 38/50	Bucy III, John H. (The Honorable) 00069589
4	Date	5 Payee name
	12/18/2024	Cedar Park Chamber of Commerce
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$100.00	1460 E. Whitestone Blvd
		Ste. 180
		Cedar Park, TX 78613
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Fees Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Chamber dues
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	11/21/2024	City of Round Rock
	Amount (\$)	Payee address; City; State; Zip Code
	\$62.50	221 E. Main St
		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  Beaujolais Nights ticket
		Beddjoldis Nights ticket
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	<b>y</b>
	Date	Payee name
	12/13/2024	Fresh Plus
	Amount (\$)	Payee address; City; State; Zip Code
	\$37.44	1221 W. Lynn St
	Ψ57.744	1221 W. Lyfiii 3t
		Austin TV 70702
		Austin, TX 78703
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  Food/Reverage Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Office snacks and drinks
	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 Event Expense

Loan Repayment/Reimbursement

Solicitation/Fundraising Expense

	Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica		
L	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: 9/19 Rpt: 39/50	Bucy III, John H. (The Honorable) 00069589	
4	Date	5 Payee name	_
	11/05/2024	Gannett	
6	Amount (\$)	7 Payee address; City; State; Zip Code	_
	\$21.31	7950 Jones Branch Dr	
	Ψ21.01		
		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 travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense  Newspaper subscription	
		Twowspaper Subscription	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
9	expenditure to benefit C/O		
	Date	Payee name	
	12/04/2024	Gannett	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$21.31	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.	
	EXPENDITURE	Check if Austin, TX, officeholder living expense	
		Newspaper subscription	
	Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held	
L		<u> </u>	
	Date	Payee name	
	11/01/2024	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	
		Soogie Workspace	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	-
	expenditure to benefit C/O		
			_
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### 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

ense I ravel in pense Travel O ages/Contract Labor OTHER

	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: 10/19 Rpt: 40/50	Bucy III, John H. (The Honorable) 00069589
4	Date	5 Payee name
	12/02/2024	Google LLC
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$23.03	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
		Coogio Workopado
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
,	expenditure to benefit C/O	
_	Data	
	Date	Payee name
	11/21/2024	HEB
	Amount (\$)	Payee address; City; State; Zip Code
	\$3.28	1000 E 41st St
		Austin, TX 78751
	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 Office snacks and drinks
		טוווטפ אומטגא מוע עווווגא
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
	Date	Payee name
	10/31/2024	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
	EXPENDITORE	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
	experialitate to beliefit 6/01	<u> </u>

### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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 (Contract Labor, Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (order a category pet listed above)

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 11/19 Rpt: 41/50	Bucy III, John H. (The Honorable) 00069589
4	Date	5 Payee name
	11/15/2024	Heinrich, Allison
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,000.00	2301 Ohlen Rd
		#107
		Austin, TX 78757
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.
	LAI LINDITORE	Check if Austin, TX, officeholder living expense
		Campaign management/consulting
_	Opening the ONII Wife discort	Our did at 10% as hald a grant of the standard
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	11/30/2024	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.
		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	
	Date	Dove name
	12/15/2024	Payee name  Heinrich, Allison
	Amount (\$) \$1,000.00	Payee address; City; State; Zip Code 2301 Ohlen Rd
	φ1,000.00	#107
		Austin, TX 78757
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description  Consulting Expanse.  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.  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/O	

#### SCHEDULE F1

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1	Total pages Schedule F1: Sch: 12/19 Rpt: 42/50	2 FILER NAME Bucy III, John H. (The Honorable) 3 Filer ID (Ethics Commission Filers) 00069589
4	Date 12/31/2024	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	(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
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date 11/01/2024	Payee name Michaels
	Amount (\$) \$135.78	Payee address; City; State; Zip Code 3939 W. John W. Carpenter Fwy  Irving, TX 75063
	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 Picture frames
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date 11/04/2024	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/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 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	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: 13/19 Rpt: 43/50	Bucy III, John H. (The Honorable) 00069589
4	Date	5 Payee name
	12/12/2024	Nespresso
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$117.50	111 W. 33rd St
		5th Floor
		New York, NY 10120
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Coffee
		Conce
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	11/20/2024	Office Depot
Г	Amount (\$)	Payee address; City; State; Zip Code
	\$57.73	2620 W Anderson Ln
		Austin, TX 78757
	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  Packing supplies
		T doming supplies
┝	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
Г	Date	Payee name
	12/03/2024	Office Depot
	Amount (\$)	Payee address; City; State; Zip Code
	\$20.94	2620 W Anderson Ln
		Austin, TX 78757
	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
		Packing supplies
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
$\vdash$		

### 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: 14/19 Rpt: 44/50	Bucy III, John H. (The Honorable) 00069589
4	Date	5 Payee name
	12/09/2024	Office Depot
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$32.89	2620 W Anderson Ln
		Austin, TX 78757
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  Extension cords for office
		Extension cords for office
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/OI	- · · · · · · · · · · · · · · · · · · ·
⊨	Date	Payee name
	10/31/2024	Parker, Ashika
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	1307 Norwalk Ln
		Apt 204
		Austin, TX 78703
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Legislative salary supplement
		Logiolative salary supplement
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
_	Date	Payee name
	11/30/2024	Parker, Ashika
	Amount (\$)	Payee address; City; State; Zip Code
	\$500.00	1307 Norwalk Ln
	4000.00	Apt 204
		Austin, TX 78703
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  Salaries/Mages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.  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 Contributions/ Donations Made By -Candidate/Officeholder/Political Comn

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: 15/19 Rpt: 45/50	Bucy III, John H. (The Honorable) 00069589
4	Date	5 Payee name
	12/31/2024	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
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
H	Date	Payee name
	10/28/2024	Pressable
	Amount (\$)	Payee address; City; State; Zip Code
	\$25.00	110 E. Houston St
	·	7th Floor
		San Antonio, TX 78205
	DUDDOOF	1
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  Advertising Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Advertising Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Web hosting
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	11/29/2024	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
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Web hosting
	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 Comn

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		Gift/Awards/Memorials Expense Legal Services  The Instruction Guide explains h		ages	/Contract Labor C	ravel Out of Dist OTHER (enter a d	rict category not listed above)
1	Total pages Cobadula F1	1					ilor ID	(Ethics Commission Filers)
1	Total pages Schedule F1: Sch: 16/19 Rpt: 46/50		Bucy III, John H. (The Honorable)				Filer ID 10069589	(Ethics Commission Filers)
4	Date	5	Payee name					
	12/30/2024		Pressable					
6	Amount (\$)	7		Zip Co	de			
	\$25.00		110 E. Houston St					
			7th Floor					
			San Antonio, TX 78205					
8	PURPOSE	(a)	Category (See Categories listed at the top of this sche	edule)	(b)	Description		
	OF EXPENDITURE		Advertising Expense			Check if travel outside		
						Check if Austin, TX, of	ficeholder living	expense
						Web hosting		
9	Complete ONLY if direct	<u> </u>	Candidate/Officeholder name O	office soug	tdr		Office he	Id
9	expenditure to benefit C/Ol		Candidate/Officeriolider Haffle U	mice sou(	JIIL		Office He	iu
_	Data	Г						
	Date 11/04/2024		Payee name					
		_	Public Storage	7: 0	al c			
	Amount (\$)			Zip Coo	ae			
	\$137.00		13675 N. Hwy 183					
			Austin, TX 78750					
	PURPOSE OF	(a)	Category (See Categories listed at the top of this sche	edule)	(b)	Description	·- 0	
	EXPENDITURE		Office Overhead/Rental Expense			Check if travel outside Check if Austin, TX, of		
						Storage unit rent		o.ponee
						· ·		
	Complete ONLY if direct		Candidate/Officeholder name O	office souç	ght		Office he	ld
	expenditure to benefit C/OI	Н						
F	Date		Payee name					
	12/03/2024		Public Storage					
	Amount (\$)		Payee address; City; State;	Zip Coo	de			
	\$137.00		13675 N. Hwy 183	-				
			Austin, TX 78750					
	PURPOSE OF	(a)	Category (See Categories listed at the top of this sche	edule)	(b)	Description		
	EXPENDITURE		Office Overhead/Rental Expense			Check if travel outside Check if Austin, TX, of		
						Storage unit rent	meenoluer livifly	слропос
						9		
	Complete ONLY if direct		Candidate/Officeholder name O	office soug	ght		Office he	ld
	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 Credit Card Payment

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

	Credit Card Payment	The Instruction Guide explains how to complete this for	m.
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 17/19 Rpt: 47/50	Bucy III, John H. (The Honorable)	00069589
4	Date	5 Payee name	•
	12/18/2024	Round Rock Chamber of Commerce	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$300.00	212 E. Main St	
		Round Rock, TX 78664	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Descripti	on
	OF EXPENDITURE	Fees	f travel outside of Texas. Complete Schedule T.
		Chambe	f Austin, TX, officeholder living expense
		Shame	duos
9	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O		
	Date	Payee name	
	10/30/2024	Scale to Win	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$1,891.24	13742 Harper St	
		·	
		Santa Ana, CA 92703	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Descripti	on
	OF EXPENDITURE	, , ,	f travel outside of Texas. Complete Schedule T.
	LAPENDITORE		f Austin, TX, officeholder living expense
		Text me	ssages
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/Ol		Office Held
	Date	Power name	
	11/07/2024	Payee name Scale to Win	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$521.33	13742 Harper St	
	4021.00	101 12 1141 por 61	
		Santa Ana, CA 92703	
	PURPOSE		
	OF	(a) Category (See Categories listed at the top of this schedule)  Advertising Expense	OTI f travel outside of Texas. Complete Schedule T.
	EXPENDITURE		f Austin, TX, officeholder living expense
		Text me	ssages
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held
	experiulture to beliefit C/OI	1	

### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	_
	Sch: 18/19 Rpt: 48/50	Bucy III, John H. (The Honorable) 00069589	
4	Date	5 Payee name	_
	11/19/2024	Texas House Democratic Caucus	
6	Amount (\$)	7 Payee address; City; State; Zip Code	_
	\$1,500.00	P.O. Box 12453	
		Austin, TX 78711	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.	
		Caucus dues	
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/OI		
	Date	Payee name	=
	12/18/2024	Walgreen's	
	Amount (\$)	Payee address; City; State; Zip Code	_
	\$16.19	2525 W. Anderson Ln	
		Austin, TX 78757	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Printing Expense Check if travel outside of Texas. Complete Schedule T.	
		Check if Austin, TX, officeholder living expense  Photos for office	
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
	expenditure to benefit C/OI	<del>1</del>	
	Date	Payee name	_
	12/18/2024	Walgreen's	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$21.64	2525 W. Anderson Ln	
		Austin, TX 78757	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Printing Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense	
		Photos for office	
-	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 Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

	Consuling 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: 19/19 Rpt: 49/50	Bucy III, John H. (The Honorable) 00069589
4		5 Payee name
	12/05/2024	Walmart
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$203.51	5017 W. Hwy 290
		Austin, TX 78735
Ļ	DUDDOGE	
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
		Minifridge for office
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
F	Date	Payee name
	11/25/2024	Williamson County Democratic Party PAC
⊢	Amount (\$)	Payee address; City; State; Zip Code
	\$1,000.00	P.O. Box 1296
	Ψ1,000.00	1.0. Box 1230
		O TV 70007
L		Georgetown, TX 78627
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Contributions/Donations Made By  Candidate/Officeholder/Political Committee  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Candidate/Officeholder/Political Committee
		Event Sponsorship
⊢	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	Complete ONLY if direct expenditure to benefit C/O	•
L	· 	
ı		

## 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: 1/1 Rpt: 50/50 2 FILER NAME Filer ID (Ethics Commission Filers) Bucy III, John H. (The Honorable) 00069589 Date 8 Amount (\$) 5 Name of person from whom amount is received 12/13/2024 Ann Johnson Campaign \$260.00 6 Address of person from whom amount is received; City; State; Zip Code Houston, TX 77256 Purpose for which amount is received Check if political contribution returned to filer Office fridge Name of person from whom amount is received Amount (\$) Date 11/06/2024 Frost Bank \$2.34 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 Date Name of person from whom amount is received Amount (\$) 12/05/2024 Frost Bank \$2.04 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