#### FORM JC/OH JUDICIAL CANDIDATE / OFFICEHOLDER **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Total pages filed: Filer ID The JC/OH Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00026739 63 CANDIDATE / MS / MRS / MR **FIRST** MI **OFFICE USE ONLY OFFICEHOLDER** The Honorable John P. NAME Date Received **ELECTRONICALLY FILED** 07/15/2025 NICKNAME LAST **SUFFIX** Devine CANDIDATE / Date Hand-delivered or Date Postmarked ADDRESS / PO BOX; APT / SUITE #; ZIP CODE **OFFICEHOLDER** MAILING Amount Receipt # **ADDRESS** REDACTED PER 254.0313, GOV'T CODE Change of Address Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** The Honorable John P. NAME NICKNAME LAST **SUFFIX** Devine **CAMPAIGN** STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE APT / SUITE #; CITY; STATE; **TREASURER ADDRESS** REDACTED PER 254.0313, GOV'T CODE (Residence or Business) **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (713) 498-9649 **PHONE** REPORT TYPE 30th day before election 15th day after campaign treasurer January 15 Runoff appointment (officeholder only) July 15 8th day before election Exceeded modified Final Report (Attach C/OH-FR) Х reporting limit PERIOD Month Month Day Year Day Year **COVERED THROUGH** 01/01/2025 06/30/2025 10 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year Primary Runoff Other General Special OFFICE HELD (if any) 12 OFFICE SOUGHT (if known) 11 OFFICE Supreme Court Justice Place 4

# JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

## FORM JC/OH COVER SHEET PG 2

2 of 63

13 C / OH NAME	Devine, John P. (The	Honorable)	<b>14</b> Filer ID 00026739	(Ethics Commission Filers)
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political e These expenditures may have been made I officeholders are required to report this inf	without the candidate's or office	eholder's knowledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		
	GENERAL			
		COMMITTEE ADDRESS		
	SPECIFIC			
		COMMITTEE CAMPAIGN TREASURER A	ADDRESS	
<b>16</b> CONTRIBUTION TOTALS		IZED POLITICAL CONTRIBUTIONS(OTHE ES OF LOANS, OR CONTRIBUTIONS MA		\$ 0.00
		ICAL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES O	F LOANS)	<b>\$</b> 87,611.00
EXPENDITURE 3. TOTAL UNITEMIZED POLITICAL EXPENDITURES TOTALS				<b>\$</b> 636.36
	4. TOTAL POLIT	ICAL EXPENDITURES		\$ 89,072.33
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OI RIOD	F THE LAST DAY OF THE	\$ 6,322.30
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIF OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LO TING PERIOD	ANS AS OF THE LAST DAY	\$ 0.00
17 AFFIDAVIT				
			er penalty of perjury, that the acc cludes all information required t I Code.	
		Tr	ne Honorable John P. Devin	e
		Sigr	nature of Candidate or Officehol	der
AFFIX NOT	ΓARY STAMP / SEAL AB	OVE		
Sworn to and subso	cribed before me, by the s	aid	, this the	day
		ertify which, witness my hand and seal of of		
Signature of office	er administering oath	Printed name of officer administering	oath Title of office	r administering oath

#### **SUBTOTALS - JC/OH**

### FORM JC/OH COVER SHEET PG 3

			С	OVI	ER SHEET PG 3 3 of 63
	ER NAN vine, Jo	ohn P. (The Honorable)	<b>19</b> Filer ID 00026739	(Eth	nics Commission Filers)
		E SUBTOTALS SCHEDULE			SUBTOTAL AMOUNT
1.	X	SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)		\$	87,611.00
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
3.		SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)		\$	
4.		SCHEDULE E(J): LOANS (JUDICIAL)		\$	
5.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	3	\$	89,072.33
6.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
7.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
8.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
9.		SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$	
10.		SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$	
11.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	DNS	\$	
12.	Х	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS FOR TO FILER	RETURNED	\$	3.94
l					

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 1/34 Rpt: 4/63
2	FILER NAME Devine, John	n P. (The Honorable)			3	Filer ID (Ethics Commission Filers) 00026739
4	Date 02/25/2025	<ul><li>5 Full name of contributor Adler, Jim S.</li><li>6 Contributor address; City;</li></ul>	out-of-state PAC (ID#:		7	Amount of Contribution (\$) \$2,500.00
		Houston, TX 77027				
8		Principal Occupation		9 Contributor's Job Title		
	Attorney			Attorney		
10		employer/law firm & Associates		11 Law firm of contributor's sp	oous	se (if any)
12	! If contributor is	s a child, law firm of parent(s) (if	any)	<u>I</u>		
F	Date	Full name of contributor	out-of-state PAC (ID#:	)	Τ	Amount of Contribution (\$)
	02/11/2025 Andrews, Bolivar  Contributor address; City; State; Zip Code			\$100.00		
		Houston, TX 77057				
	Contributor's F	Principal Occupation		Contributor's Job Title		
	Retired			Retired		
	Contributor's e	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	If contributor is	s a child, law firm of parent(s) (if	any)	1		
H	Date	Full name of contributor	out-of-state PAC (ID#:	)	Τ	Amount of Contribution (\$)
	02/13/2025	Attaway, Robin Gregory	_			\$50.00
		Contributor address; City; Richardson, TX 75080	State; Zip Code			
	Contributor's F	rincipal Occupation		Contributor's Job Title	<u> </u>	
	Retired			Retired		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	Retired					
	If contributor is	s a child, law firm of parent(s) (if	any)			

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 2/34 Rpt: 5/63
2	FILER NAME Devine, John	n P. (The Honorable)			1	Filer ID (Ethics Commission Filers) 00026739
4	Date 02/10/2025	<ul><li>5 Full name of contributor Baggs, Donna</li><li>6 Contributor address; City;</li></ul>	out-of-state PAC (ID#:		7	Amount of Contribution (\$) \$1,000.00
		San Antonio, TX 78216				
8		Principal Occupation		9 Contributor's Job Title		
	Administrato			Administrator		
10	Contributor's e	employer/law firm ung, LLP		11 Law firm of contributor's sp	oous	e (if any)
12	! If contributor is	s a child, law firm of parent(s) (i	f any)			
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)
	03/04/2025	Baxter, Sally  Contributor address; City;  Lometa, TX 76853	State; Zip Code			\$100.00
_	Contributor's F	Principal Occupation		Contributor's Job Title		
	Business Ov			Owner		
		employer/law firm		Law firm of contributor's sp	oous	e (if any)
_	Arch Ray Re		f any)			
	ii contributor is	s a child, law firm of parent(s) (i	i any)			
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)
	02/07/2025	Beck Redden LLP				\$1,500.00
		Contributor address; City;  Houston, TX 77010	State; Zip Code			
	Contributor's F	Principal Occupation		Contributor's Job Title	<u> </u>	
	Contributor's 6	employer/law firm		Law firm of contributor's sp	oous	e (if any)
	If contributor is	s a child, law firm of parent(s) (i	f any)			

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	ages Schedule A(J)1: /34 Rpt: 6/63
2	FILER NAME Devine, John	n P. (The Honorable)			3 Filer ID 00026	(Ethics Commission Filers) 739
4	4 Date 5 Full name of contributor out-of-state PAC (ID#:)  Bevis, Blair  6 Contributor address; City; State; Zip Code  Katy, TX 77494		7 Amoun	t of Contribution (\$) \$100.00		
Ļ	O - materille : standard			O Contributanta Jak Titla		
8	Retired	Principal Occupation		9 Contributor's Job Title Retired		
10		employer/law firm		11 Law firm of contributor's sp	nouse (if any	Λ
10	Retired	employer/law lilli		11 Law IIIII of Contributor 3 Sp	ouse (ii ariy	)
12	If contributor is	s a child, law firm of parent(s) (i	f any)			
	Date	Full name of contributor	out-of-state PAC (ID#:	)	Amoun	t of Contribution (\$)
	02/26/2025 BracewellPAC  Contributor address; City; State; Zip Code			\$10,000.00		
		Houston, TX 77002-277	0			
	Contributor's F	Principal Occupation		Contributor's Job Title		
	Contributor's	employer/law firm		Law firm of contributor's sp	oouse (if any	)
	If contributor is	s a child, law firm of parent(s) (i	f any)	L		
	Date	Full name of contributor	out-of-state PAC (ID#:	)	Amoun	t of Contribution (\$)
	02/13/2025	Broussard, Paul				\$100.00
		Contributor address; City;  Houston, TX 77079	State; Zip Code			
	Contributor's I	Principal Occupation		Contributor's Job Title		
	Consultant			Consultant		
		employer/law firm		Law firm of contributor's sp	oouse (if any	r)
		ogistics, LLC				
	If contributor is	s a child, law firm of parent(s) (if	f any)			

	MONET	ARY POLITICAL	SCHEDULE A(J)1		
	The Instru	ction Guide explains ho	w to complete this f	form.	1 Total pages Schedule A(J)1: Sch: 4/34 Rpt: 7/63
2	FILER NAME				3 Filer ID (Ethics Commission Filers)
	Devine, Joh	n P. (The Honorable)			00026739
4	Date	5 Full name of contributor	out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)
	02/07/2025	7/2025 Buchanan, James			\$100.00
		6 Contributor address; City;	State; Zip Code		
		Corpus Christi, TX 7840	4		
8	Contributor's	Principal Occupation		9 Contributor's Job Title	
	Retired			Retired	
10	Contributor's	employer/law firm		11 Law firm of contributor's s	pouse (if any)
	Retired				
12	If contributor i	s a child, law firm of parent(s) (i	f any)		
	Date	Full name of contributor	out-of-state PAC (ID#:		Amount of Contribution (\$)
	02/08/2025	Cameron, Arthur			\$50.00
		Contributor address; City;	State; Zip Code		"
		Tyler, TX 75707			
	Contributor's	Principal Occupation		Contributor's Job Title	1
	Retired			Retired	
	Contributor's	employer/law firm		Law firm of contributor's s	pouse (if any)
	Retired				
	If contributor i	s a child, law firm of parent(s) (i	f any)		
	Date	Full name of contributor	out-of-state PAC (ID#:		Amount of Contribution (\$)
	02/08/2025	Canright Jr., Robert	_		\$25.00
		Contributor address; City;	State; Zip Code		·
		Plano, TX 75025			
	Contributor's	Principal Occupation		Contributor's Job Title	•
	Retired			Retired	
	Contributor's	employer/law firm		Law firm of contributor's s	pouse (if any)
	Retired				
	If contributor i	s a child, law firm of parent(s) (i	f any)		
$\vdash$					

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 5/34 Rpt: 8/63
2	FILER NAME Devine, John	n P. (The Honorable)			3	Filer ID (Ethics Commission Filers) 00026739
4	Date 02/17/2025	<ul><li>5 Full name of contributor Carlson, Craig</li><li>6 Contributor address; City;</li></ul>	out-of-state PAC (ID#:	)	7	Amount of Contribution (\$) \$1,000.00
		Killeen, TX 76541				
8		Principal Occupation		9 Contributor's Job Title		
	Attorney			Managing Partner		
10	Contributor's e Calrson Law	employer/law firm r Firm		11 Law firm of contributor's sp	oous	se (if any)
12	! If contributor is	s a child, law firm of parent(s) (if	any)	1		
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)
	02/09/2025	Carter, E. Leon  Contributor address; City;	State; Zip Code			\$2,500.00
	O a material and a second as 1	Dallas, TX 75287		O contributanta dal Titta		
	Attorney	Principal Occupation		Contributor's Job Title Principal Attorney		
		employer/law firm		Law firm of contributor's sp	2011	co (if any)
	Carter Arnet			Law IIIII of Contributor 3 3	Jou.	se (ii aiiy)
		s a child, law firm of parent(s) (if	any)			
		T			_	
	Date 02/17/2025	Full name of contributor  Clark Hill PLC	out-of-state PAC (ID#:	)		Amount of Contribution (\$) \$500.00
	02/11/2023	Contributor address; City;  Dallas, TX 75202	State; Zip Code			φ300.00
	Contributor's F	I Principal Occupation		Contributor's Job Title	<u> </u>	
	Contributor's e	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	If contributor is	s a child, law firm of parent(s) (if	any)	I.		

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this t	form.	1	Total pages Schedule A(J)1: Sch: 6/34 Rpt: 9/63
2	FILER NAME Devine, John	n P. (The Honorable)			1	Filer ID (Ethics Commission Filers) 00026739
4	Date 02/11/2025	<ul><li>5 Full name of contributor Clinton, Dan</li><li>6 Contributor address; City;</li></ul>	out-of-state PAC (ID#:_	)	7	Amount of Contribution (\$) \$100.00
		Houston, TX 77057				
8		Principal Occupation		9 Contributor's Job Title		
40	Retired			Retired		- Ct )
10	Retired	employer/law firm		11 Law firm of contributor's sp	ouse	e (ii any)
12	! If contributor is	s a child, law firm of parent(s) (i	f any)			
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)
	02/28/2025	Day, Jim  Contributor address; City;	State; Zip Code			\$100.00
_	Contributor's	Leander, TX 78641 Principal Occupation		Contributor's Job Title		
	Business Ov			Owner		
-	Contributor's	employer/law firm		Law firm of contributor's sp	oouse	e (if any)
	Eagle Peak	Shooting Range				
	If contributor is	s a child, law firm of parent(s) (i	f any)			
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)
	02/18/2025	Doornbos, Billy  Contributor address; City;  Nederland, TX 77627	State; Zip Code		<u>.</u>	\$100.00
	Contributor's F	Principal Occupation		Contributor's Job Title		
	Investments	·		President		
Н	Contributor's	employer/law firm		Law firm of contributor's sp	oouse	e (if any)
	C. Doornbos	s, Inc				
	If contributor is	s a child, law firm of parent(s) (i	f any)			

	MONET	ARY POLITICAL	CONTRIBUTIO	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 7/34 Rpt: 10/63
2	FILER NAME Devine, John	n P. (The Honorable)			3	Filer ID (Ethics Commission Filers) 00026739
4	Date 02/21/2025	Full name of contributor     Dunnam, Jim     Contributor address; City;	out-of-state PAC (ID#:		7	Amount of Contribution (\$) \$2,500.00
		Waco, TX 76710				
8		Principal Occupation		9 Contributor's Job Title		
_	Attorney			Partner		
10	Contributor's 6  Dunnam & D	employer/law firm Dunnam LLP		11 Law firm of contributor's sp	oous	e (if any)
12	! If contributor is	s a child, law firm of parent(s) (if	any)	<u> </u>		
H	Date	Full name of contributor	out-of-state PAC (ID#:	)	Ι	Amount of Contribution (\$)
	02/08/2025	Durst, Timothy  Contributor address; City;	<u> </u>			\$500.00
		Dallas, TX 75209				
		Principal Occupation		Contributor's Job Title		
	Attorney			Partner		
		employer/law firm		Law firm of contributor's sp	oous	se (if any)
	O'Melveny &		: \			
	ii contributor i	s a child, law firm of parent(s) (if	any)			
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)
	02/15/2025	Edwards, Charles A				\$100.00
		Contributor address; City;  Lakeway, TX 78734	State; Zip Code			
	Contributor's F	I Principal Occupation		Contributor's Job Title		
	Retired			Retired		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	e (if any)
	Retired					
	If contributor is	s a child, law firm of parent(s) (if	any)			

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 8/34 Rpt: 11/63
2	FILER NAME Devine, John	n P. (The Honorable)			3	Filer ID (Ethics Commission Filers) 00026739
4	Date 02/23/2025	<ul><li>5 Full name of contributor Farris, Thomas D</li><li>6 Contributor address; City;</li></ul>	out-of-state PAC (ID#:		7	Amount of Contribution (\$) \$100.00
		Amarillo, TX 79105				
8		Principal Occupation		9 Contributor's Job Title		
	Attorney			Attorney		
10	Contributor's e Farris Parke	employer/law firm r & Hubbard		11 Law firm of contributor's sp	oous	se (if any)
12	! If contributor is	s a child, law firm of parent(s) (if	any)	I.		
F	Date	Full name of contributor	out-of-state PAC (ID#:	)	Ī	Amount of Contribution (\$)
	02/11/2025 Felton, Scott (The Honorable)  Contributor address; City; State; Zip Code				\$500.00	
		Waco, TX 76701				
		Principal Occupation		Contributor's Job Title		
	Judge			County Judge		
		employer/law firm		Law firm of contributor's sp	oous	se (if any)
		County, Texas				
	If contributor is	s a child, law firm of parent(s) (if	any)			
F	Date	Full name of contributor	out-of-state PAC (ID#:	)	Ī	Amount of Contribution (\$)
	03/05/2025	Fleming, JoAnn	_			\$500.00
		Contributor address; City; Flint, TX 75762	State; Zip Code		•	
	Contributor's I	Principal Occupation		Contributor's Job Title		
	Retired	- micipal Occupation		Retired		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	Retired					
	If contributor is	s a child, law firm of parent(s) (if	any)			

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 9/34 Rpt: 12/63
2	FILER NAME Devine, John	n P. (The Honorable)			3	Filer ID (Ethics Commission Filers) 00026739
4	Date 03/04/2025	<ul><li>5 Full name of contributor Forrest, Jeannie</li><li>6 Contributor address; City;</li></ul>	out-of-state PAC (ID#:		7	Amount of Contribution (\$) \$200.00
		Dallas, TX 75214				
8		Principal Occupation		9 Contributor's Job Title		
	Bookkeeper			Bookkeeper		
10	Contributor's of Jerry Forres	employer/law firm t, GG LLC		11 Law firm of contributor's sp	oous	se (if any)
12	If contributor is	s a child, law firm of parent(s) (if	f any)			
	Date	Full name of contributor	D out of state BAC (ID#s	\	Т	Amount of Contribution (\$)
	Date Full name of contributor out-of-state PAC (ID#:)  02/25/2025 Foster, Leonard  Contributor address; City; State; Zip Code		•	\$50.00		
		Richardson, TX 75081				
		Principal Occupation		Contributor's Job Title		
	Retired			Retired		
	Contributor's e	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	If contributor is	s a child, law firm of parent(s) (if	f any)	<u> </u>		
H	Date	Full name of contributor	out-of-state PAC (ID#:	)	Т	Amount of Contribution (\$)
	02/12/2025	Four S Oil Company, Inc	_			\$250.00
		Contributor address; City; Kilgore, TX 75663	State; Zip Code		•	
	Contributor's I	Principal Occupation		Contributor's Job Title	<u> </u>	
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	If contributor is	s a child, law firm of parent(s) (if	f any)	I		

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 10/34 Rpt: 13/63
2	FILER NAME Devine, John	n P. (The Honorable)			3	Filer ID (Ethics Commission Filers) 00026739
4	Date 03/05/2025	<ul><li>5 Full name of contributor Frost, Edwin</li><li>6 Contributor address; City;</li></ul>	out-of-state PAC (ID#:		7	Amount of Contribution (\$) \$5,000.00
		Newnan, GA 30264				
8	Contributor's I	Principal Occupation		9 Contributor's Job Title		
	Financial Se			Self-Employed		
10	Contributor's 6 Self-Employ	employer/law firm ed		11 Law firm of contributor's sp	oous	se (if any)
12	! If contributor is	s a child, law firm of parent(s) (i	f any)			
	Date	Full name of contributor	out-of-state PAC (ID#:	)	T	Amount of Contribution (\$)
	02/08/2025 Garriott, David  Contributor address; City; State; Zip Code			\$50.00		
		Spring, TX 77379				
		Principal Occupation		Contributor's Job Title		
	Retired			Retired		
	Contributor's e	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	If contributor is	s a child, law firm of parent(s) (i	f any)			
H	Date	Full name of contributor	out-of-state PAC (ID#:	)	T	Amount of Contribution (\$)
	02/09/2025	Gassett, M G				\$50.00
		Contributor address; City;  Grand Prairie, TX 75050				
	Contributor's I	Principal Occupation		Contributor's Job Title	<u> </u>	
	info requeste	ed		info requested		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	info requeste	ed				
	If contributor is	s a child, law firm of parent(s) (i	f any)			

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 11/34 Rpt: 14/63
2	FILER NAME Devine, John	n P. (The Honorable)			3	Filer ID (Ethics Commission Filers) 00026739
4	Date 02/12/2025	5 Full name of contributor Gibbs, Robin 6 Contributor address; City;	out-of-state PAC (ID#:		7	Amount of Contribution (\$) \$500.00
		Houston, TX 77002				
8		Principal Occupation		9 Contributor's Job Title		
	Attorney Founder/Partner					
10	10 Contributor's employer/law firm Gibbs & Brun LLP  11 Law firm of contributor's sp				oous	se (if any)
12	! If contributor is	s a child, law firm of parent(s) (i	f any)	J		
	Date	Full name of contributor	out-of-state PAC (ID#:	)	Π	Amount of Contribution (\$)
	02/07/2025 Giglio, Charles  Contributor address; City; State; Zip Code				\$1,000.00	
		Beaumont, TX 77701		I 0		
	Wholesale D	Principal Occupation		Contributor's Job Title President/CEO		
		employer/law firm		Law firm of contributor's sp	2011	co (if amy)
	Giglio Distrib			Law IIIII of Contributor 3 3	Jou.	se (ii aiiy)
		s a child, law firm of parent(s) (i	f anv)			
	ii ooniinaatoi ii	o a orma, iaw iiiii or paroni(o) (i				
=	Date	Full name of contributor	out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)
	02/23/2025	Glatstein, David	_			\$100.00
	Contributor address; City; State; Zip Code		•			
	Contributor's I	Frisco, TX 75034 Principal Occupation		Contributor's Job Title	<u> </u>	
	Retired	этпстрат Оссирацоп		Retired		
		employer/law firm		Law firm of contributor's sp	าดน	se (if any)
	Retired	,		,		( 1 )
	If contributor is	s a child, law firm of parent(s) (i	f any)	1		

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 12/34 Rpt: 15/63
2	FILER NAME Devine, John	n P. (The Honorable)			3	Filer ID (Ethics Commission Filers) 00026739
4	Date 03/02/2025	_ `		7	Amount of Contribution (\$) \$500.00	
		Dripping Springs, TX 78	620			
8	Contributor's I	Principal Occupation		9 Contributor's Job Title		
	Attorney			Founder/President		
10		employer/law firm		11 Law firm of contributor's sp	oou	se (if any)
		edom Foundation				
12	! If contributor is	s a child, law firm of parent(s) (if	any)			
	Date	Full name of contributor	out-of-state PAC (ID#:	)	T	Amount of Contribution (\$)
	02/09/2025 Habib, Abdul  Contributor address; City; State; Zip Code  Austin, TX 78723				\$10.00	
_	Contributor's F	Principal Occupation		Contributor's Job Title		
	info requeste			info requested		
	-	employer/law firm		Law firm of contributor's sp	oou	se (if any)
	info requeste	ed				
	If contributor is	s a child, law firm of parent(s) (if	any)	1		
F	Date	Full name of contributor	out-of-state PAC (ID#:	)	T	Amount of Contribution (\$)
	02/10/2025	Hackman, Dodd Leon				\$250.00
		Contributor address; City;  Houston, TX 77024	State; Zip Code			
	Contributor's I	Principal Occupation		Contributor's Job Title		
	Investor			Investor		
	Contributor's	employer/law firm		Law firm of contributor's sp	oou	se (if any)
	DH Investme	ents				
	If contributor is	s a child, law firm of parent(s) (if	any)			

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 13/34 Rpt: 16/63
2	FILER NAME Devine, John	n P. (The Honorable)			3	Filer ID (Ethics Commission Filers) 00026739
4	Date 02/11/2025			7	Amount of Contribution (\$) \$500.00	
		Harlingen, TX 78552				
8		Principal Occupation		9 Contributor's Job Title		
_	Contractor			President		-
10	RIO Elevato	employer/law firm r Co, Inc		11 Law firm of contributor's sp	oous	e (if any)
12	! If contributor is	s a child, law firm of parent(s) (i	f any)			
F	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)
	02/12/2025 Hallett & Perrin PC  Contributor address; City; State; Zip Code			\$500.00		
		Dallas, TX 75202				
	Contributor's F	Principal Occupation		Contributor's Job Title		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	e (if any)
	If contributor is	s a child, law firm of parent(s) (i	f any)			
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)
	02/12/2025	Hallett & Perrin PC				\$500.00
		Contributor address; City;  Dallas, TX 75202	State; Zip Code			
	Contributor's F	I Principal Occupation		Contributor's Job Title	<u>1                                    </u>	
	Contributor's 6	employer/law firm		Law firm of contributor's sp	oous	e (if any)
	If contributor is	s a child, law firm of parent(s) (i	f any)	I.		

	MONET	ARY POLITICAL	CONTRIBUTIO	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 14/34 Rpt: 17/63
2	FILER NAME Devine, Johr	n P. (The Honorable)			3	Filer ID (Ethics Commission Filers) 00026739
4	Date 02/23/2025	Full name of contributor     Han, Nam T     Contributor address; City; s	out-of-state PAC (ID#:		7	Amount of Contribution (\$) \$100.00
		Houston, TX 77084				
8		Principal Occupation		9 Contributor's Job Title		
	Insurance Agent Insurance Agent					
10	<ul><li>10 Contributor's employer/law firm</li><li>Self-Employed</li><li>11 Law firm of contributor's specification</li></ul>				oous	se (if any)
12	If contributor is	s a child, law firm of parent(s) (if	any)	1		
	Date	Full name of contributor	out-of-state PAC (ID#:	)	Π	Amount of Contribution (\$)
	02/07/2025 Hancher, Tom B  Contributor address; City; State; Zip Code			\$50.00		
		Columbus, TX 78934		1		
		Principal Occupation		Contributor's Job Title		
	Retired			Retired		on the sun of
	Retired	employer/law firm		Law firm of contributor's sp	ous	se (II any)
	If contributor is	s a child, law firm of parent(s) (if	any)	1		
H	Date	Full name of contributor	out-of-state PAC (ID#:	)	Τ	Amount of Contribution (\$)
	02/17/2025	Harris, Finley & Bogle				\$1,000.00
		Contributor address; City; S	State; Zip Code		•	
	Contributor's F	Principal Occupation		Contributor's Job Title	<u> </u>	
	Contributor's e	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	If contributor is	s a child, law firm of parent(s) (if	any)			

	MONET	ARY POLITICAL CONTRIBUTION	SCHEDULE A(J)1		
	The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A(J)1: Sch: 15/34 Rpt: 18/63	
2	FILER NAME			3 Filer ID (Ethics Commission Filers)	
	Devine, Joh	n P. (The Honorable)		00026739	
4	Date 02/07/2025	<ul> <li>Full name of contributor  out-of-state PAC (ID#:_ Hingst, Harry L</li> <li>Contributor address; City; State; Zip Code</li> </ul>		7 Amount of Contribution (\$) \$200.00	
		Canyon Lake, TX 78133			
8	Contributor's	Principal Occupation	9 Contributor's Job Title		
	Retired		Retired		
10		employer/law firm	11 Law firm of contributor's s	pouse (if any)	
	Retired				
12	2 If contributor i	s a child, law firm of parent(s) (if any)			
H	Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)	
	03/05/2025	Holmes, James		\$250.00	
		Contributor address; City; State; Zip Code		·· <del>·</del>	
		, , , , , , , , , , , , , , , , , , , ,			
		Dallas, TX 75201			
-	Contributor's	I Principal Occupation	Contributor's Job Title	. <b>L</b>	
	Attorney		Attorney		
		employer/law firm	Law firm of contributor's s	pouse (if any)	
	Holmes PLL				
	If contributor i	s a child, law firm of parent(s) (if any)			
F	Date	Full name of contributor	)	Amount of Contribution (\$)	
	02/12/2025	Holton, Leyla		\$45.00	
		Contributor address; City; State; Zip Code		·· <del>·</del>	
		Conroe, TX 77303			
	Contributor's	Principal Occupation	Contributor's Job Title	•	
	Retired		Retired		
	Contributor's	employer/law firm	Law firm of contributor's s	pouse (if any)	
	Retired				
	If contributor i	s a child, law firm of parent(s) (if any)			

	MONET	ARY POLITICAL	CONTRIBUTIO	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this t	form.	1	Total pages Schedule A(J)1: Sch: 16/34 Rpt: 19/63
2	FILER NAME Devine, John	n P. (The Honorable)			3	Filer ID (Ethics Commission Filers) 00026739
4	Date 02/21/2025			7	Amount of Contribution (\$) \$2,500.00	
		Houston, TX 77210		1		
8	Contributor's I	Principal Occupation		9 Contributor's Job Title		
10	10 Contributor's employer/law firm   11 Law firm of contributor's spo			oous	se (if any)	
12	! If contributor is	s a child, law firm of parent(s) (i	f any)			
	Date	Full name of contributor	out-of-state PAC (ID#:	)	Т	Amount of Contribution (\$)
	02/08/2025 Inman, Bobby R  Contributor address; City; State; Zip Code			\$250.00		
		Austin, TX 78746				
	Contributor's I	Principal Occupation		Contributor's Job Title		
	Professor			Emeritus Professor		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	University of	Texas				
	If contributor is	s a child, law firm of parent(s) (i	f any)			
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)
	02/14/2025	John T Cox III, PC				\$1,000.00
Contributor address; City; State; Zip Code  Dallas, TX 75225						
	Contributor's I	I Principal Occupation		Contributor's Job Title	<u> </u>	
	Contributor's 6	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	If contributor is	s a child, law firm of parent(s) (i	f any)	1		

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 17/34 Rpt: 20/63
2	FILER NAME Devine, John	n P. (The Honorable)			3	Filer ID (Ethics Commission Filers) 00026739
4	Date 01/24/2025	Jolly Jr., Norman  6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$) \$1,500.00	
		Houston, TX 77007		1		
8		Principal Occupation		9 Contributor's Job Title		
_	Attorney			Attorney		
10		employer/law firm		11 Law firm of contributor's sp	oous	e (If any)
_	Norman Joll					
12	if contributor is	s a child, law firm of parent(s) (i	r any)			
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)
	03/04/2025 Kabir, Omar  Contributor address; City; State; Zip Code			\$50.00		
		Waller, TX 77484				
	Contributor's I	Principal Occupation		Contributor's Job Title		
	Retired			Retired		
	Contributor's e	employer/law firm		Law firm of contributor's sp	oous	e (if any)
	If contributor is	s a child, law firm of parent(s) (i	f any)			
L		T = "			_	
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$) \$25.00
	02/13/2025 Kannel, Patricia  Contributor address; City; State; Zip Code			\$25.00		
	Caratrilar tanıla I	Sweetwater, TX 79556		Constributorio Job Titlo		
	Retired	Principal Occupation		Contributor's Job Title Retired		
_		employer/law firm			20110	o (if any)
	Retired	етіріоуетлам ітті		Law firm of contributor's sp	Jous	e (II aliy)
	If contributor is	s a child, law firm of parent(s) (i	f any)			

	MONET	ARY POLITICAL (	CONTRIBUTIO	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains hov	v to complete this f	form.	1	Total pages Schedule A(J)1: Sch: 18/34 Rpt: 21/63
2	FILER NAME Devine, John	n P. (The Honorable)			3	Filer ID (Ethics Commission Filers) 00026739
4	Date 03/04/2025	_ `		7	Amount of Contribution (\$) \$50.00	
		Springfield, MO 65803				
8		Principal Occupation		9 Contributor's Job Title		
	Retired			Retired		
10	<ul><li>10 Contributor's employer/law firm</li><li>Retired</li><li>11 Law firm of contributor's sp</li></ul>			ous	se (if any)	
12	If contributor is	s a child, law firm of parent(s) (if a	any)			
	Date	Full name of contributor	out-of-state PAC (ID#:_	)		Amount of Contribution (\$)
	02/12/2025 Lamb, Mellany  Contributor address; City; State; Zip Code		•	\$100.00		
		Flower Mound, TX 75022		I		
	Homemaker	Principal Occupation		Contributor's Job Title Homemaker		
H		employer/law firm		Law firm of contributor's sp	oous	se (if any)
	Self					
	If contributor is	s a child, law firm of parent(s) (if a	any)	•		
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)
	01/29/2025	Law Offices of E Todd Tr	acy PC			\$25,000.00
		Contributor address; City; S  Dallas, TX 75235	tate; Zip Code			
	Contributor's I	I Principal Occupation		Contributor's Job Title	<u>                                       </u>	
	Contributor's 6	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	If contributor is	s a child, law firm of parent(s) (if a	any)			

	MONET	ARY POLITICAL	CONTRIBUTIO	ONS	SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this f	form.	1 Total pages Schedule A(J)1: Sch: 19/34 Rpt: 22/63
2	FILER NAME				3 Filer ID (Ethics Commission Filers)
	Devine, Joh	n P. (The Honorable)			00026739
4	Date	tate 5 Full name of contributor out-of-state PAC (ID#:)			7 Amount of Contribution (\$)
	02/18/2025	18/2025 Lewis, Margaret Brown			\$500.00
		6 Contributor address; City;	State; Zip Code		
		Dallas, TX 75229			
8		Principal Occupation		9 Contributor's Job Title	
	Retired			Retired	
10		employer/law firm		11 Law firm of contributor's s	spouse (if any)
	Retired				
12	2 If contributor i	s a child, law firm of parent(s) (i	f any)		
	Date	Full name of contributor	out-of-state PAC (ID#:	)	Amount of Contribution (\$)
	02/13/2025	Longwell, Harry			\$500.00
		Contributor address; City;	State: Zip Code		···
		],,,,,,,	, p		
		Dallas, TX 75220			
_	Contributor's	Principal Occupation		Contributor's Job Title	
	Retired	Thiopai Occupation		Retired	
L		employer/law firm		Law firm of contributor's s	enouse (if any)
	Retired	employer/law lilli		Law IIIII of Contributor 5 5	spouse (ii arry)
		a a shild law firm of parant(a) (i	fond		
	ii contributori	s a child, law firm of parent(s) (i	rany)		
	Date	Full name of contributor	out-of-state PAC (ID#:_		Amount of Contribution (\$)
	02/17/2025	Malone, Carol H			\$100.00
		Contributor address; City;	State; Zip Code		
		Fort Worth, TX 76123			
	Contributor's	Principal Occupation		Contributor's Job Title	
	Piano Teach	ner		Piano Instructor	
	Contributor's	employer/law firm		Law firm of contributor's s	spouse (if any)
	Self-Employ				
_		s a child, law firm of parent(s) (i	f anv)		
			,,		
-					

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 20/34 Rpt: 23/63
2	FILER NAME Devine, John	n P. (The Honorable)			1	Filer ID (Ethics Commission Filers) 00026739
4	Date 03/05/2025	Marsh, Jon  Contributor address; City; State; Zip Code		7	Amount of Contribution (\$) \$1,000.00	
Ļ	Contributorio	Katy, TX 77494		Contributorio Joh Titlo		
8	Retired	Principal Occupation		9 Contributor's Job Title Retired		
10		employer/law firm		11 Law firm of contributor's sp	20116	a (if any)
10	Retired	этрюуетлам шт		11 Law IIIII of Contributor 3 S	Jous	s (II ally)
12	If contributor is	s a child, law firm of parent(s) (i	f any)	L		
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)
	02/13/2025 Martens Law  Contributor address; City; State; Zip Code				\$250.00	
_	Contributorio	Austin, TX 78701		Contributor's Job Title		
	Continuator S i	Principal Occupation		Continuator's Job Title		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	e (if any)
	If contributor is	s a child, law firm of parent(s) (i	f any)			
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)
	02/15/2025	Martin, Paul E				\$500.00
		Contributor address; City;  Montgomery, TX 77318	State; Zip Code			
	Contributor's I	Principal Occupation		Contributor's Job Title		
	Retired			Retired		
		employer/law firm		Law firm of contributor's sp	oous	e (if any)
	Retired					
	If contributor is	s a child, law firm of parent(s) (i	f any)			

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 21/34 Rpt: 24/63
2	FILER NAME Devine, John	n P. (The Honorable)			3	Filer ID (Ethics Commission Filers) 00026739
4	Date 02/10/2025			7	Amount of Contribution (\$) \$100.00	
		Grapevine, TX 76051				
8		Principal Occupation		9 Contributor's Job Title		
_	Real Estate Owner					
10	<ul><li>10 Contributor's employer/law firm</li><li>Self-Employed</li><li>11 Law firm of contributor's sp</li></ul>				ous	se (If any)
12		s a child, law firm of parent(s) (i	f any)	1		
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)
	03/02/2025 McClellan, Brad  Contributor address; City; State; Zip Code  Austin, TX 78741			\$100.00		
	Contributor's I	Principal Occupation		Contributor's Job Title		
	Attorney	molpai Goodpaion		Attorney		
	Contributor's	employer/law firm		Law firm of contributor's sp	ous	se (if any)
	Attorney at L	aw				
	If contributor is	s a child, law firm of parent(s) (i	f any)			
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)
	02/07/2025	McCown, Steven				\$500.00
		Contributor address; City;  Austin, TX 78703				
	Contributor's F	Principal Occupation		Contributor's Job Title	<u> </u>	
	Attorney			Attorney		
		employer/law firm		Law firm of contributor's sp	ous	se (if any)
	Littler Mende					
	If contributor is	s a child, law firm of parent(s) (i	f any)			

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this	form.	1	Total pages Schedule A(J)1: Sch: 22/34 Rpt: 25/63
2	FILER NAME Devine, John	n P. (The Honorable)			3	Filer ID (Ethics Commission Filers) 00026739
4	Date 02/15/2025	15/2025 McDonald, DJ (Mrs.)  6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$) \$250.00	
		Dallas, TX 75249				
8		Principal Occupation		9 Contributor's Job Title		
_	Retired Retired					Ct - m )
10	<ul><li>10 Contributor's employer/law firm</li><li>Retired</li><li>11 Law firm of contributor's sp</li></ul>				oous	е (іт апу)
12	2 If contributor is	s a child, law firm of parent(s) (i	f any)	1		
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)
	02/17/2025 McGinnis Lochridge  Contributor address; City; State; Zip Code				\$2,500.00	
		Austin, TX 78703				
	Contributor's I	Principal Occupation		Contributor's Job Title		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	e (if any)
	If contributor is	s a child, law firm of parent(s) (i	f any)			
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)
	02/14/2025	McKelroy, Barbara				\$25.00
Contributor address; City; State; Zip Code  Fort Worth, TX 76114						
	Contributor's F	rincipal Occupation		Contributor's Job Title	<u> </u>	
	Retired			Retired		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	e (if any)
	Retired					
	If contributor is	s a child, law firm of parent(s) (i	f any)			

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instruction Guide explains how to complete this form.					Total pages Schedule A(J)1: Sch: 23/34 Rpt: 26/63
2	FILER NAME Devine, John	ER NAME vine, John P. (The Honorable)			3	Filer ID (Ethics Commission Filers) 00026739
4	4 Date 03/05/2025  5 Full name of contributor out-of-state PAC (ID#:)  Miller, Amos  6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$) \$50.00		
		Lamar, MO 64759				
8		Principal Occupation		9 Contributor's Job Title		
	Truck Driver			Owner		
10		employer/law firm Construction LLC		11 Law firm of contributor's sp	pous	e (if any)
12	! If contributor is	s a child, law firm of parent(s) (if	any)			
F	Date	Full name of contributor	out-of-state PAC (ID#:	)	Ī	Amount of Contribution (\$)
	02/18/2025	Mithoff, Richard  Contributor address; City;	<u> </u>			\$5,000.00
		Houston, TX 77002				
	Contributor's I	Principal Occupation		Contributor's Job Title		
	Attorney			Attorney		
	Contributor's e	employer/law firm		Law firm of contributor's sp	pous	e (if any)
	If contributor is	s a child, law firm of parent(s) (if	any)	1		
L	5 /	I = 1				
	Date 02/06/2025	Full name of contributor  Montesa, Sandra	out-of-state PAC (ID#:	)		Amount of Contribution (\$) \$20.00
	02/00/2020	Contributor address; City;  Harker Heights, TX 785				420.00
	Contributor's I	rincipal Occupation		Contributor's Job Title	<u> </u>	
	Retired			Retired		
	Contributor's	employer/law firm		Law firm of contributor's sp	pous	e (if any)
	Retired					
	If contributor is	s a child, law firm of parent(s) (if	any)			

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instruction Guide explains how to complete this form.					Total pages Schedule A(J)1: Sch: 24/34 Rpt: 27/63
2	FILER NAME Devine, John	NAME e, John P. (The Honorable)			3	Filer ID (Ethics Commission Filers) 00026739
4	4 Date 02/13/2025  5 Full name of contributor out-of-state PAC (ID#:			Amount of Contribution (\$) \$10.00		
		Plano, TX 76023				
8		Principal Occupation		9 Contributor's Job Title		
	Retired			Retired		
10	Contributor's e	employer/law firm		11 Law firm of contributor's sp	oous	se (if any)
12	! If contributor i	s a child, law firm of parent(s) (i	f any)			
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)
	02/08/2025	Morris, Edward  Contributor address; City;	State; Zip Code			\$100.00
		Amarillo, TX 79121				
	Contributor's F	Principal Occupation		Contributor's Job Title		
	Retired			Retired		
	Contributor's e	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	If contributor is	s a child, law firm of parent(s) (i	f any)			
H	Date	Full name of contributor	out-of-state PAC (ID#:	)	T	Amount of Contribution (\$)
	03/02/2025	Mortenson, Sam				\$500.00
		Contributor address; City;  Aurora, IN 47001	State; Zip Code			
	Contributor's F	Principal Occupation		Contributor's Job Title	<u> </u>	
	Business Ov			Business Owner		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	MMM Tree S					, ,
	If contributor is	s a child, law firm of parent(s) (i	f any)	1		

	MONET	ARY POLITICAL	CONTRIBUTIO	DNS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this f	orm.	1	Total pages Schedule A(J)1: Sch: 25/34 Rpt: 28/63
2	FILER NAME Devine, John	n P. (The Honorable)				Filer ID (Ethics Commission Filers)
4	Date 02/15/2025	<ul><li>5 Full name of contributor Murphy, James</li><li>6 Contributor address; City;</li></ul>	out-of-state PAC (ID#:_			Amount of Contribution (\$) \$100.00
		Sugar Land, TX 77478				
8	Contributor's Retired	Principal Occupation		9 Contributor's Job Title Retired		
10	Contributor's e	employer/law firm		11 Law firm of contributor's s	pouse	e (if any)
12		s a child, law firm of parent(s) (i	f any)			
	Date	Full name of contributor	out-of-state PAC (ID#:_	)	Τ	Amount of Contribution (\$)
	01/08/2025	Novy, Larry	_			\$20.00
		Contributor address; City;  Dallas, TX 75218	State; Zip Code			
	Contributor's F	Principal Occupation		Contributor's Job Title		
	Retired			Retired		
	Contributor's e	employer/law firm		Law firm of contributor's s	pouse	(if any)
	If contributor is	s a child, law firm of parent(s) (i	f any)	<u> </u>		
=	Date	Full name of contributor	out-of-state PAC (ID#:_	)	Τ.	Amount of Contribution (\$)
	02/15/2025	O'Neill, Jack	<b>_</b> \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \			\$1,000.00
		Contributor address; City;	State; Zip Code			
	Contributor's I	Austin, TX 78735  Principal Occupation		Contributor's Job Title		
	Attorney	- micipal Occupation		Attorney		
		employer/law firm		Law firm of contributor's s	pouse	(if any)
	Pierce & O'N	leill, LLP				
	If contributor is	s a child, law firm of parent(s) (i	f any)	•		

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instruction Guide explains how to complete this form.					Total pages Schedule A(J)1: Sch: 26/34 Rpt: 29/63
2	FILER NAME Devine, John	LER NAME evine, John P. (The Honorable)			3	Filer ID (Ethics Commission Filers) 00026739
4	Date 02/15/2025  5 Full name of contributor out-of-state PAC (ID#:) Palmer, Cynthia P 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$) \$250.00		
		Houston, TX 77058				
8		Principal Occupation		9 Contributor's Job Title		
	Retired			Retired		
10	Contributor's e Retired	employer/law firm		11 Law firm of contributor's sp	oous	se (if any)
12	If contributor is	s a child, law firm of parent(s) (i	f any)			
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)
	02/07/2025	Pat Curry Campaign  Contributor address; City;	State; Zip Code			\$1,000.00
		Waco, TX 76712		T		
	Contributor's I	Principal Occupation		Contributor's Job Title		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	If contributor is	s a child, law firm of parent(s) (i	f any)			
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)
	02/25/2025	Pierce, Charles	_			\$100.00
		Contributor address; City;  Cleburne, TX 76033	State; Zip Code			
	Contributor's F	Principal Occupation		Contributor's Job Title	_	
	Truck Driver			Owner		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	Self-Employ	ed				
	If contributor is	s a child, law firm of parent(s) (i	f any)			

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	1	Total pages Schedule A(J)1: Sch: 27/34 Rpt: 30/63		
2	FILER NAME Devine, John	LER NAME evine, John P. (The Honorable)			3	Filer ID (Ethics Commission Filers) 00026739
4	Date 03/02/2025	<ul><li>Full name of contributor Preston, Joy</li><li>Contributor address; City;</li></ul>	out-of-state PAC (ID#:		7	Amount of Contribution (\$) \$50.00
		Frisco, TX 75033				
8		Principal Occupation		9 Contributor's Job Title		
_	Retired			Retired		
10	Retired	employer/law firm		11 Law firm of contributor's sp	oous	e (If any)
12	! If contributor is	s a child, law firm of parent(s) (i	f any)	L		
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)
	03/02/2025	Pruitt, Jimmy  Contributor address; City;	State; Zip Code			\$25.00
		Comfort, TX 78013		I		
	Contributor's Pastor	Principal Occupation		Contributor's Job Title Pastor		
L		employer/law firm		Law firm of contributor's sp	าดแร	se (if any)
	Bridge Chur	, ,				- (· · · · · · · )
	If contributor is	s a child, law firm of parent(s) (i	f any)	I		
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)
	02/06/2025	Putnam, Terrill  Contributor address; City;  Georgetown, TX 78633	State; Zip Code			\$250.00
	Contributor's F	Principal Occupation		Contributor's Job Title	<u> </u>	
	Retired			Retired		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	e (if any)
	Retired					
	If contributor is	s a child, law firm of parent(s) (i	f any)			

	MONET	ARY POLITICAL	CONTRIBUTION	ONS	SCHEDULE A(	J)1
	The Instru	ction Guide explains ho	ow to complete this	form.	1 Total pages Schedule A(J)1: Sch: 28/34 Rpt: 31/63	
2	FILER NAME			3 Filer ID (Ethics Commission F	ilers)	
	Devine, Joh	n P. (The Honorable)			00026739	
4	Date 03/05/2025			7 Amount of Contribution (\$)	\$500.00	
		<b>6</b> Contributor address; City;	State; Zip Code			
		Midland, TX 79702				
8	Contributor's I Consultant	Principal Occupation		9 Contributor's Job Title Consultant		
10	Contributor's G	employer/law firm ed		11 Law firm of contributor's s	spouse (if any)	
12		s a child, law firm of parent(s) (i	f any)			
F	Date	Full name of contributor	out-of-state PAC (ID#	:)	Amount of Contribution (\$)	
	01/15/2025	Robur LLC	_		4	\$300.00
		Contributor address; City;	State; Zip Code			
		Dallas, TX 75201		<b>.</b>		
	Contributor's I	Principal Occupation		Contributor's Job Title		
	Contributor's	employer/law firm		Law firm of contributor's s	spouse (if any)	
	If contributor i	s a child, law firm of parent(s) (i	f any)			
_	Date	Full name of contributor	out-of-state PAC (ID#	:)	Amount of Contribution (\$)	
	03/05/2025	Schlafly, Andrew			4	300.00
		Contributor address; City;	State; Zip Code			
		Far Hills, NJ 07931				
	Contributor's I	Principal Occupation		Contributor's Job Title		
	Attorney			Attorney		
	Contributor's of Self-Employ	employer/law firm		Law firm of contributor's s	spouse (if any)	
		s a child, law firm of parent(s) (i	f any)			

	MONET	ARY POLITICAL CONTRIBUTION	ONS	SCHEDULE A(J)1
	The Instru	ction Guide explains how to complete this	form.	1 Total pages Schedule A(J)1: Sch: 29/34 Rpt: 32/63
2	FILER NAME			3 Filer ID (Ethics Commission Filers)
	Devine, Jon	n P. (The Honorable)		00026739
4	Date 03/05/2025	<ul> <li>Full name of contributor</li></ul>	)	7 Amount of Contribution (\$) \$75.00
		Cedar Park, TX 78613		
8	Contributor's	Principal Occupation	9 Contributor's Job Title	•
	Software En	gineer	Senior Software Engine	eer
10	Contributor's	employer/law firm	11 Law firm of contributor's s	pouse (if any)
12		is a child, law firm of parent(s) (if any)	1	
	Date	Full name of contributor  uut-of-state PAC (ID#:	)	Amount of Contribution (\$)
	02/10/2025	Stallings, Kyle		\$2,500.00
		Contributor address; City; State; Zip Code		
		Midland, TX 79702	ı	
		Principal Occupation	Contributor's Job Title	
	Investor-Oil		Founder/CEO	
		employer/law firm	Law firm of contributor's s	pouse (if any)
	Desert Roya			
	If contributor i	is a child, law firm of parent(s) (if any)		
	Date	Full name of contributor out-of-state PAC (ID#:		Amount of Contribution (\$)
	02/06/2025	Stanley, John M		\$200.00
		Contributor address; City; State; Zip Code		
		Burleson, TX 76028		
	Contributor's	Principal Occupation	Contributor's Job Title	•
	Retired		Retired	
		employer/law firm	Law firm of contributor's s	pouse (if any)
	Retired			
	If contributor i	is a child, law firm of parent(s) (if any)		

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	1	Total pages Schedule A(J)1: Sch: 30/34 Rpt: 33/63		
2	FILER NAME Devine, John	ILER NAME evine, John P. (The Honorable)			3	Filer ID (Ethics Commission Filers) 00026739
4	Date 03/02/2025	Full name of contributor     Stap, Drew     Contributor address; City;	out-of-state PAC (ID#:		7	Amount of Contribution (\$) \$5.00
		Amarillo, TX 79109				
8		Principal Occupation		9 Contributor's Job Title		
	info requeste			info requested		
10	Contributor's e info requeste	employer/law firm ed		11 Law firm of contributor's sp	oous	se (if any)
12	2 If contributor is	s a child, law firm of parent(s) (i	f any)			
	Date	Full name of contributor	out-of-state PAC (ID#:	)	Π	Amount of Contribution (\$)
	03/02/2025	Staples, Craig  Contributor address; City;	<u> </u>			\$50.00
	Contributorio	Tomball, TX 77377		Contributor's Job Title		
	info requeste	Principal Occupation		info requested		
_	•	employer/law firm		Law firm of contributor's sp	2011	se (if any)
	info requeste			Law iiiii oi continuatoi 3 3	Jou.	se (ii diiy)
		s a child, law firm of parent(s) (i	f any)			
H	Date	Full name of contributor	out-of-state PAC (ID#:	)	Τ	Amount of Contribution (\$)
	02/07/2025	Telle, J Thomas  Contributor address; City;	<u> </u>			\$100.00
		Fredericksburg, TX 786	24			
	Contributor's I	Principal Occupation		Contributor's Job Title	_	
	Retired			Retired		
		employer/law firm		Law firm of contributor's sp	oous	se (if any)
	Retired					
	If contributor is	s a child, law firm of parent(s) (i	f any)			

	MONET	ARY POLITICAL	CONTRIBUTIO	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	w to complete this t	form.	1	Total pages Schedule A(J)1: Sch: 31/34 Rpt: 34/63
2	FILER NAME Devine, John	AME John P. (The Honorable)			3	Filer ID (Ethics Commission Filers) 00026739
4	4 Date 02/18/2025  5 Full name of contributor out-of-state PAC (ID#:) The Law Offices of Domingo Garcia PC  6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$) \$1,000.00		
8	Contributor's I	Dallas, TX 75247 Principal Occupation		9 Contributor's Job Title		
	Continuator 5	Timolpai Goodpailon		C Communication of Cost Trade		
10	Contributor's 6	employer/law firm		11 Law firm of contributor's sp	oous	se (if any)
12	! If contributor is	s a child, law firm of parent(s) (i	f any)			
	Date	Full name of contributor	out-of-state PAC (ID#:	)	Τ	Amount of Contribution (\$)
	02/11/2025	Traxel, Roger Contributor address; City;	<u> </u>			\$100.00
		Dallas, TX 75252				
		Principal Occupation		Contributor's Job Title		
	Retired			Retired		
	Contributor's e	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	If contributor is	s a child, law firm of parent(s) (i	f any)			
H	Date	Full name of contributor	out-of-state PAC (ID#:	)	Τ	Amount of Contribution (\$)
	03/04/2025	Tromba, John				\$77.00
		Contributor address; City; Euless, TX 76040	State; Zip Code			
	Contributor's I	Principal Occupation		Contributor's Job Title	<u> </u>	
	Retired	тпера Оссараноп		Retired		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	Retired					
	If contributor is	s a child, law firm of parent(s) (i	f any)			

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	1	Total pages Schedule A(J)1: Sch: 32/34 Rpt: 35/63		
2	FILER NAME Devine, John	LER NAME evine, John P. (The Honorable)			3	Filer ID (Ethics Commission Filers) 00026739
4	Date 02/09/2025  5 Full name of contributor out-of-state PAC (ID#:) Ware, Richard 6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$) \$200.00		
		Amarillo, TX 79105				
8		Principal Occupation		9 Contributor's Job Title		
	Banker			Chairman		
10	Contributor's e	employer/law firm ional Bank		11 Law firm of contributor's sp	oous	se (if any)
12	If contributor is	s a child, law firm of parent(s) (i	f any)	1		
	Date	Full name of contributor	out-of-state PAC (ID#:	)	Π	Amount of Contribution (\$)
	02/27/2025	Wareing, Peter  Contributor address; City;	State; Zip Code			\$1,000.00
	O a materilla contra da la f	Houston, TX 77019		Contribute de la Ede		
	Investments	Principal Occupation		Contributor's Job Title Investor		
		employer/law firm		Law firm of contributor's sp	วดน	se (if any)
		non & Company				,
	If contributor is	s a child, law firm of parent(s) (i	f any)	•		
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)
	02/12/2025	Webster, Patti				\$50.00
		Contributor address; City; Boerne, TX 78015	State; Zip Code			
	Contributor's I	I Principal Occupation		Contributor's Job Title	<u> </u>	
	Retired			Retired		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	Retired					
	If contributor is	s a child, law firm of parent(s) (i	f any)			

	MONET	ARY POLITICAL	CONTRIBUTION	ONS		SCHEDULE A(J)1
	The Instru	ction Guide explains ho	1	Total pages Schedule A(J)1: Sch: 33/34 Rpt: 36/63		
2	FILER NAME Devine, John	ER NAME evine, John P. (The Honorable)			3	Filer ID (Ethics Commission Filers) 00026739
4	Date 02/14/2025	<ul><li>5 Full name of contributor Whitacre Jr., Edward E</li><li>6 Contributor address; City;</li></ul>	out-of-state PAC (ID#:		7	Amount of Contribution (\$) \$250.00
		San Antonio, TX 78212				
8	Contributor's Retired	Principal Occupation		9 Contributor's Job Title Retired		
10		employer/law firm		11 Law firm of contributor's sp	oous	se (if any)
12	! If contributor is	s a child, law firm of parent(s) (i	f any)	I.		
	Date 02/09/2025	Full name of contributor Williams II, James Contributor address; City;	out-of-state PAC (ID#:			Amount of Contribution (\$) \$199.00
		Amarillo, TX 79106				
		Principal Occupation		Contributor's Job Title		
	Architect			Principal		or (it am)
	Jim Williams	employer/law firm		Law firm of contributor's sp	oous	se (If any)
		s a child, law firm of parent(s) (i	f any)	<u> </u>		
	Date	Full name of contributor	out-of-state PAC (ID#:	,	T	Amount of Contribution (\$)
	02/07/2025	Wilson, William C.  Contributor address; City;				\$100.00
		Cypress, TX 77433-624	1			
	Contributor's Retired	Principal Occupation		Contributor's Job Title Retired		
	Contributor's	employer/law firm		Law firm of contributor's sp	oous	se (if any)
	Retired					
	If contributor is	s a child, law firm of parent(s) (i	f any)			

	MONET	sc	SCHEDULE A(J)1				
	The Instru	ction Guide explains how to complete this f	1	Total pages S Sch: 34/34 F	Schedule A(J)1: Rpt: 37/63		
2	FILER NAME		1		nics Commission	Filers)	
_		n P. (The Honorable)			00026739	. '' . '	
4	1 Date 5 Full name of contributor out-of-state PAC (ID#:)  Wood, Will  6 Contributor address; City; State; Zip Code				Amount of Co	intribution (\$)	\$100.00
							Ψ100.00
		Continuator address, City, State, 21p code					
		Plano, TX 75075					
8	Contributor's F	I Principal Occupation	9 Contributor's Job Title	<u> </u>			
	Retired		Retired				
10	Contributor's	employer/law firm	11 Law firm of contributor's sp	pouse	e (if any)		
	Retired						
12	If contributor is	s a child, law firm of parent(s) (if any)					

#### SCHEDULE F1

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

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

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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	d 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: Sch: 1/24 Rpt: 38/63	2 FILER NAME Devine, John P. (The Honorable)  3 Filer ID (Ethics Commission Filers) 00026739
4 Date	5 Payee name
02/12/2025	Anedot
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$22.60	1340 Poydras St
	Suite 1770
	New Orleans, LA 70112
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description
EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	Credit card processing fees
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Data	
Date 02/12/2025	Payee name  Anedot
Amount (\$) \$44.60	Payee address; City; State; Zip Code
Φ44.00	1340 Poydras St
	Suite 1770
	New Orleans, LA 70112
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  Accounting/Banking  Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	Credit card processing fees
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
02/14/2025	Anedot
Amount (\$)	Payee address; City; State; Zip Code
\$24.60	1340 Poydras St
	Suite 1770
	New Orleans, LA 70112
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	Credit card processing fees
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	

#### SCHEDULE F1

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

Advertising Expense Accounting/Banking Consulting Expense Contributions/Opnations 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  The Instruction Guide explains how to complete this form.					OTHER (enter a category not listed above)				
1	Total pages Schedule F1:	2 FILER NAMI	FILER NAME 3						(Ethics Commission Filers	s)		
	Sch: 2/24 Rpt: 39/63		nn P. (The Honorabl	e)				00026739				
4	Date	5 Payee name										
	02/19/2025	Anedot										
6	Amount (\$)	<b>7</b> Payee addre	ss; City;	State; Zip Co	ode							
	\$2.30	1340 Poyd	as St									
		Suite 1770										
		New Orlear	ns, LA 70112									
8	PURPOSE	(a) Category (S	ee Categories listed at the top	of this schedule)	(b)	Description						
	OF EXPENDITURE	Accounting	/Banking					de of Texas. Com				
						Credit card p		officeholder living	expense			
						Credit card pr	IUC	essing lees				
9	Complete ONLY if direct		iceholder name	Office sou	l ıght			Office he	ld			
	expenditure to benefit C/OI	<del>-</del>										
	Date	Payee name										
	02/20/2025	Anedot										
	Amount (\$)	Payee addre	ss; City;	State; Zip Co	ode							
	\$4.30	1340 Poyd	as St									
		Suite 1770										
		New Orlea	ns, LA 70112									
	PURPOSE	(a) Category (S	ee Categories listed at the top	of this schedule)	(b)	Description						
	OF EXPENDITURE	Accounting	/Banking			<b>=</b>		de of Texas. Com				
						Credit card p		officeholder living	expense			
						Credit card pr	100	essing lees				
	Complete ONLY if direct expenditure to benefit C/OI		iceholder name	Office sou	ight			Office he	ld			
	Date	Payee name										
	02/20/2025	Anedot										
			0''	0:: 7: 0								
	Amount (\$)	Payee addre	•	State; Zip Co	ode							
	\$44.60	1340 Poyd	as St									
		Suite 1770										
		New Orlea	ns, LA 70112									
	PURPOSE	(a) Category (S	ee Categories listed at the top	of this schedule)	(b)	Description						
	OF EXPENDITURE	Accounting	/Banking			ш		de of Texas. Com				
						ш		officeholder living	expense			
						Credit card p	ıuc	essing lees				
$\vdash$	Complete ONLY if direct	Candidate/Off	iceholder name	Office sou	laht			Office he	ıld			
	expenditure to benefit C/OI		iccholuci Hallie	Onice Suc	igril			Onice ne	ıu			

### SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

	Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Gift mmittee Leg <b>Th</b>	Miseverage Expense JAWards/Memorials Expense Jal Services  Jal Instruction Guide explain		pense ages/Contract Labor	Travel III District Travel Out of District OTHER (enter a cate	gory not listed above)
1	Total pages Schedule F1:	FILER NAME				3 Filer ID (E	thics Commission Filers)
	Sch: 3/24 Rpt: 40/63		P. (The Honorable)			00026739	
	Date 02/25/2025	Payee name Anedot					
6	Amount (\$) \$100.30	Payee address; 1340 Poydras Suite 1770 New Orleans,	St	te; Zip Co	de		
8	PURPOSE OF EXPENDITURE	Category (See C Accounting/Ba	categories listed at the top of this s unking	schedule)	Check if Austin	outside of Texas. Complete , TX, officeholder living expo rocessing fees	
	Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeh	nolder name	Office sou	ght	Office held	
	Date	Payee name					
	03/04/2025	Anedot					
	Amount (\$) \$40.30	Payee address; 1340 Poydras Suite 1770 New Orleans,	St	te; Zip Co	de		
	PURPOSE OF EXPENDITURE	Category (See C Accounting/Ba	ategories listed at the top of this s	schedule)	Check if Austin	outside of Texas. Complete , TX, officeholder living expo rocessing fees	
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeh	nolder name	Office sou	ght	Office held	
	Date 03/05/2025	Payee name Anedot					
	Amount (\$) \$51.30	Payee address; 1340 Poydras Suite 1770 New Orleans,	St	te; Zip Co	de		
	PURPOSE OF EXPENDITURE	Category (See C Accounting/Ba	Categories listed at the top of this s	schedule)	Check if Austin	outside of Texas. Complete , TX, officeholder living expo rocessing fees	
	Complete ONLY if direct expenditure to benefit C/Oh	Candidate/Officeh	nolder name	Office sou	ght	Office held	
<b>-</b>	rms provided by Tayas F	ng Commissis-	MAAAN athics	otots to		1/-	reion V// 1 0 5dd2aca2

#### SCHEDULE F1

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

Fees Office Overhead/R
Food/Beverage Expense Polling Expense
Gift/Awards/Memorials Expense Printing Expense
Legal Services Salaries/Wages/Ci

	Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor  The Instruction Guide explains how to complete this form.	OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
	Sch: 4/24 Rpt: 41/63	Devine, John P. (The Honorable)	00026739
4	Date	5 Payee name	
	03/06/2025	Anedot	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$12.28	1340 Poydras St	
		Suite 1770	
		New Orleans, LA 70112	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	7 tocounting/Editions	vel outside of Texas. Complete Schedule T.
		I	stin, TX, officeholder living expense  I processing fees
		Ground Sand	. processing rece
9	Complete ONLY if direct expenditure to benefit C/O	L L Candidate/Officeholder name Office sought H	Office held
	Date	Payee name	
	03/10/2025	Anedot	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$299.10	1340 Poydras St	
		Suite 1770	
		New Orleans, LA 70112	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Accounting/Banking	vel outside of Texas. Complete Schedule T.
		l	stin, TX, officeholder living expense  I processing fees
		Cleuit card	i processing rees
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/Ol	<b>1</b>	
	Date	Payee name	
	03/10/2025	Anedot	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$10.30	1340 Poydras St	
		Suite 1770	
		New Orleans, LA 70112	
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE	Accounting/Banking	vel outside of Texas. Complete Schedule T.
	EXI ENDITORE		stin, TX, officeholder living expense
		Credit card	I processing fees
_	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/O	•	Office field
_			
l			

#### 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: 5/24 Rpt: 42/63	Devine, John P. (The Honorable) 00026739
4	Date	5 Payee name
	02/25/2025	Appelt, Christina
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,195.00	1536 Columbia St
		Houston, TX 77008
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.
	EXI ENDITORE	Compaign reports
		Campaign reports
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
_	Date	Davis same
	02/18/2025	Payee name Arch Ray Resort
	Amount (\$) \$437.92	Payee address; City; State; Zip Code 312 Schmidtzinksy
	φ431.92	312 3GIIIIIUIZIIKSY
		Fraderickoburg TV 70624
		Fredericksburg, TX 78624
	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
		Meeting
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	03/04/2025	Arch Ray Resort
	Amount (\$)	Payee address; City; State; Zip Code
	\$432.14	312 Schmidtzinksy
		Fredericksburg, TX 78624
	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  Meeting
		mooung
H	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	

Event Expense

#### SCHEDULE F1

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

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

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

	Candidate/Officeholder/Politica Credit Card Payment	l 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: 6/24 Rpt: 43/63	Devine, John P. (The Honorable) 00026739
4	Date	5 Payee name
	04/09/2025	Arch Ray Resort
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$585.00	312 Schmidtzinksy
		Fredericksburg, TX 78624
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Campaign event expense (venue and catering)
		campaign event expenses (venue and eatening)
9	Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
F	Date	Payee name
	03/24/2025	Bitelo Brazilian Steakhouse
┢	Amount (\$)	Payee address; City; State; Zip Code
	\$245.33	1850 S Lakeline Blvd
	, , , , , ,	Ste 300
L		Cedar Park, TX 78613
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Meal with supporters
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
L		
	Date	Payee name
	04/10/2025	Blakemore & Associates
	Amount (\$)	Payee address; City; State; Zip Code
	\$3,286.48	1 Greenway Plaza
		Suite 225
		Houston, TX 77046
H	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Consulting Expense Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Consulting service
L		
Γ	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	<del>1</del>
Г		

#### SCHEDULE F1

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

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

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

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

	Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 7/24 Rpt: 44/63	Devine, John P. (The Honorable) 00026739
4	Date	5 Payee name
	06/04/2025	Booking.com
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$17.99	800 Connecticut Dr
		Norwalk, CT 06854
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		Hotel expense
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
$\vdash$	Date	Payee name
	06/05/2025	Booking.com
	Amount (\$)	Payee address; City; State; Zip Code
	\$372.71	800 Connecticut Dr
		Norwalk, CT 06854
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Hotel expense
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
H	Date	Payee name
	04/21/2025	Devine, Angelique
	Amount (\$)	Payee address; City; State; Zip Code
	\$400.00	PO Box 1090
		Marble Falls, TX 78654
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		Campaign work
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/Ol	

#### 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/Political Committee Credit Card Payment			Legal Services  The Instruction Guide ex		OTHER (enter a category not listed above)					
1	Total pages Schedule F1:	2 FILER NAM	E				3	Filer ID	(Ethics Commission	on Filers)
	Sch: 8/24 Rpt: 45/63	Devine, Jo	hn P. (The Honorable	)				00026739		
4	Date	5 Payee name	9							
	02/18/2025	Devine, Ar	igelique							
6	Amount (\$) \$100.00	7 Payee addro PO Box 10 Marble Fal		State; Zip Co	ode					
8	PURPOSE	(a) Category (s	See Categories listed at the top of	f this schodulo)	(b)	Description				
	OF EXPENDITURE		ages/Contract Labor		officeholder living	plete Schedule T. g expense				
9	Complete ONLY if direct expenditure to benefit C/O		ficeholder name	Office sou	ught			Office he	eld	
	Date	Payee name	<del></del>							
	03/03/2025	Devine, Ar	igelique							
	Amount (\$)	Payee addro	ess; City;	State; Zip Co	ode					
	\$100.00	PO Box 10	90							
		Marble Fal	ls, TX 78654							
	PURPOSE OF EXPENDITURE		See Categories listed at the top of ages/Contract Labor	f this schedule)	(b)	<b>=</b>	, TX	de of Texas. Com officeholder livinç		
	Complete ONLY if direct expenditure to benefit C/O		ficeholder name	Office sou	<u>I</u> ught			Office he	eld	
	Date	Payee name	9							
	06/09/2025	Ebay Inc.								
	Amount (\$)	Payee addre	ess; City;	State; Zip Co	ode					
	\$893.06	2025 Ham		, ·						
		San Jose,	CA 95125							
	PURPOSE OF EXPENDITURE		See Categories listed at the top or rhead/Rental Expense		(b)		, TX	officeholder living	plete Schedule T. g expense	
	Complete ONLY if direct expenditure to benefit C/O		ficeholder name	Office sou	ught			Office he	eld	

#### SCHEDULE F1

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

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

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

	Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 9/24 Rpt: 46/63	Devine, John P. (The Honorable) 00026739
4	Date	5 Payee name
	06/09/2025	Ebay Inc.
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,980.98	2025 Hamilton Ave
		San Jose, CA 95125
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
		Court office furnishings
		Godit omgo
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
ľ	expenditure to benefit C/OI	
H	Date	Payee name
	06/12/2025	Ebay Inc.
		·
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,028.38	2025 Hamilton Ave
		San Jose, CA 95125
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Office Overhead/Rental Expense
		Court office furnishings
		Court office furnishings
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
_	Data	
	Date	Payee name
	06/13/2025	Ebay Inc.
	Amount (\$)	Payee address; City; State; Zip Code
	\$741.92	2025 Hamilton Ave
		San Jose, CA 95125
	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.
		Court office furnishings
		Court office furnishings
_	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

	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: 10/24 Rpt: 47/63	Devine, John P. (The Honorable) 00026739
4	Date	5 Payee name
	02/13/2025	Elevated Motoring
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,300.00	607 Leander Dr
		Leander, TX 78641
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Transportation Equipment And Related Check if travel outside of Texas. Complete Schedule T.
		Expense Check if Austin, TX, officeholder living expense  Rental for campaign events
		remainor eampaign events
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9	expenditure to benefit C/O	
$\vdash$	Date	Daysa nama
	03/25/2025	Payee name
		Extra Space Storage
	Amount (\$)	Payee address; City; State; Zip Code
	\$512.00	706 Industrial Blvd
		Marble Falls, TX 78654
	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
		Storage rent
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
_	Data	
	Date 02/24/2025	Payee name
		Gillespie County Republican Party
	Amount (\$)	Payee address; City; State; Zip Code
	\$390.00	PO Box 2975
		Fredericksburg, TX 78624
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Event Expense Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Event tickets
		LVEIT LICKELS
_	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	

#### SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Food/Beverage Expense

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

	Candidate/Officeholder/Politica Credit Card Payment			Legal Se	ras/Memoriais Exp ervices	pense	Salaries/W		se s/Contract Labor		OTHER (enter a	strict category not lister	d above)
		_			struction Guid	e explains l	now to co	mple	ete this form.				
1	Total pages Schedule F1: Sch: 11/24 Rpt: 48/63	2	FILER NAME Devine, Joh		The Honoral	ble)				3	Filer ID 00026739	(Ethics Comm	nission Filers)
4	Date 02/06/2025	5	Payee name Headliner's	Club					•				
6	Amount (\$) \$388.12	7	Payee address 221 W. 6th S Suite 2100 Austin, TX 7	St	City;	State;	Zip Co	de					
8	PURPOSE OF EXPENDITURE	(a)	Category <sub>(Se</sub> Event Exper		ories listed at the t	top of this sche	edule)	(b)	=	, TX,	officeholder living		nt
9	Complete ONLY if direct expenditure to benefit C/O		Candidate/Offic	ceholde	er name	C	Office sou	ght			Office h	eld	
	Date		Payee name										
	03/03/2025		Hilton Dallas	s Frisc	o Hotel & C	onvention	n Center						
	Amount (\$)		Payee addres	ss;	City;	State;	Zip Co	de					
	\$322.95		7600 John (	) Ham	nmons Dr.								
			Frisco, TX 7	5034									
	PURPOSE OF EXPENDITURE	(a)	Category <sub>(Se</sub> Travel In Dis		ories listed at the t	op of this sche	edule)	(b)	<b>=</b>	, TX,	de of Texas. Com officeholder living	nplete Schedule T. g expense	
	Complete ONLY if direct expenditure to benefit C/O		Candidate/Offic	ceholde	er name	С	Office sou	ght			Office h	eld	
	Date		Payee name										
	02/11/2025		Hilton Hotel										
	Amount (\$) \$257.66		Payee addres 27204 US H		City; 90	State;	Zip Co	de					
			Cypress, TX				- i						
	PURPOSE OF EXPENDITURE	(a)	Category <sub>(Se</sub> Travel In Dis		ories listed at the t	top of this sche	edule)	(b)		, TX,	de of Texas. Com officeholder living	nplete Schedule T. g expense	
	Complete ONLY if direct expenditure to benefit C/O		Candidate/Offic	ceholde	er name	С	Office sou	ght			Office h	eld	

#### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

	Candidate/Officeholder/Politica Credit Card Payment		ee Legal	vards/Memoriais Expe Services	Salaries/\	Wage:	s/Contract Labor		OTHER (enter a	category not listed above)	
	- Croak Gara Faymon		The I	nstruction Guide	explains how to co	ompl	ete this form.				
1	Total pages Schedule F1:	2 FIL	ER NAME					3	Filer ID	(Ethics Commission File	ers)
	Sch: 12/24 Rpt: 49/63	De	vine, John P.	(The Honorab	le)				00026739		
4	Date	<b>5</b> Pay	yee name								
	06/26/2025	Но	uston Marriot	Westchase							
6	Amount (\$)	<b>7</b> Pay	yee address;	City;	State; Zip Co	ode					
	\$217.30	290	00 Briarpark 🏻	Dr.							
		Но	uston, TX 770	)42							
8	PURPOSE	<b>(a)</b> Cat	tegory (See Cate	gories listed at the to	n of this schedule)	(b)	Description				
	OF		avel In District		p or ano concuarcy			outsi	de of Texas. Com	plete Schedule T.	
	EXPENDITURE						_		officeholder living	j expense	
							Hotel expens	е			
9	Complete ONLY if direct expenditure to benefit C/OI		didate/Officehol	der name	Office sou	ught			Office he	eld	
	experialitate to beliefit eroi	1									
	Date	Pay	yee name								
	03/28/2025	Hu	ckaba, Josh								
	Amount (\$)	Pay	yee address;	City;	State; Zip Co	ode					
	\$8,000.00	24	493 Kildare Si	i <b>.</b>							
		Не	mpstead, TX	77445							
	PURPOSE	(a) Cat	tegory (See Cate	gories listed at the to	p of this schedule)	(b)	Description				
	OF EXPENDITURE	l .		Contract Labo			<b>=</b>			plete Schedule T.	
							ш		officeholder living	j expense	
							Security serv	ice:	5		
_	Complete ONLY if direct	Cano	didate/Officehol	der name	Office sou	ıaht			Office he		
	expenditure to benefit C/OI		uluate/Officerior	uei iiaiiie	Office 300	agrit			Office file	aiu	
_	Data										
	Date 02/07/2025	1 1	yee name								
			rlburt, Rob								
	Amount (\$)	1	yee address;	City;	State; Zip Co	ode					
	\$4,000.00	430	06 Quinlan Pa	ırk Rd #4311							
		Au	stin, TX 7873	2							
	PURPOSE OF			gories listed at the to		(b)	Description				
	EXPENDITURE	Sa	laries/Wages/	Contract Labo	r		ш		de of Texas. Com officeholder living	plete Schedule T.	
							Campaign we				
							20paigii W			· <del></del>	
	Complete ONLY if direct	L Can	didate/Officehol	der name	Office sou	l uaht			Office he	eld	
	expenditure to benefit C/OI				555 500	5			200 110		
1											

#### 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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salarice Magnet/Contract Labor

	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: 13/24 Rpt: 50/63	Devine, John P. (The Honorable) 00026739
4	Date	5 Payee name
	02/10/2025	Hurlburt, Rob
6	Amount (\$) \$500.00	7 Payee address; City; State; Zip Code 4306 Quinlan Park Rd #4311  Austin, TX 78732
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Campaign website and media
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	02/14/2025	Hurlburt, Rob
	Amount (\$) \$1,500.00	Payee address; City; State; Zip Code 4306 Quinlan Park Rd #4311
		Austin, TX 78732
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Campaign website and media
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	02/28/2025	Hurlburt, Rob
	Amount (\$) \$2,000.00	Payee address; City; State; Zip Code 4306 Quinlan Park Rd #4311
		Austin, TX 78732
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule)  Salaries/Wages/Contract Labor  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Campaign website and media
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

#### SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee
Credit Card Revenue1

Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Frinting Expense Legal Services Salaries/Wages/Contract Labor

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	<u> </u>
	Sch: 14/24 Rpt: 51/63	Devine, John P. (The Honorable) 00026739
4	Date	5 Payee name
	03/10/2025	Hurlburt, Rob
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$2,000.00	4306 Quinlan Park Rd #4311
		Austin, TX 78732
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
	EXI ENDITORE	Check if Austin, TX, officeholder living expense
		Campaign website and media
_		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	04/14/2025	Hurlburt, Rob
	Amount (\$)	Payee address; City; State; Zip Code
	\$2,000.00	4306 Quinlan Park Rd #4311
		Austin, TX 78732
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
	EXPENDITORE	Check if Austin, TX, officeholder living expense
		Campaign website and media
	Operation ONLY if allowed	Our distance (Office health are reserved.
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	05/05/2025	Hurlburt, Rob
	Amount (\$)	Payee address; City; State; Zip Code
	\$2,000.00	4306 Quinlan Park Rd #4311
		Austin, TX 78732
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
	EXPENDITORE	Check if Austin, TX, officeholder living expense
		Campaign website and media
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Original Color Color Color	

#### SCHEDULE F1

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

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

	Contributing 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: 15/24 Rpt: 52/63	Devine, John P. (The Honorable) 00026739
4	Date	5 Payee name
	03/05/2025	Hurlburt, Rob
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$3,000.00	4306 Quinlan Park Rd #4311
		Austin, TX 78732
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
	LXI LINDITORL	Check if Austin, TX, officeholder living expense
		Campaign website and media
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	03/13/2025	Hurlburt, Rob
	Amount (\$)	Payee address; City; State; Zip Code
	\$3,000.00	4306 Quinlan Park Rd #4311
	Ψ3,000.00	4300 Quillian Faik Nu #4311
		Austin, TX 78732
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor
		Check if Austin, TX, officeholder living expense
		Campaign website and media
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	experialitate to beliefit 6/01	'
	Date	Payee name
	03/31/2025	Hurlburt, Rob
	Amount (\$)	Payee address; City; State; Zip Code
	\$3,000.00	4306 Quinlan Park Rd #4311
	+-,	(
		Austin, TX 78732
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Campaign website and media
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OF	1

#### SCHEDULE F1

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

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

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

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

	Candidate/Officeholder/Politica Credit Card Payment	d Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 16/24 Rpt: 53/63	Devine, John P. (The Honorable) 00026739
4	Date	5 Payee name
	05/28/2025	Hurlburt, Rob
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$2,000.00	4306 Quinlan Park Rd #4311
		Austin, TX 78732
8	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Campaign website and media
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
L		
	Date	Payee name
L	03/17/2025	Hurlburt, Rob
	Amount (\$)	Payee address; City; State; Zip Code
	\$2,000.00	4306 Quinlan Park Rd #4311
		Austin, TX 78732
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Campaign website and media
		Campaign website and media
⊢	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	
⊨	Data	
	Date 03/17/2025	Payee name  Hurlburt, Rob
L		
	Amount (\$)	Payee address; City; State; Zip Code
	\$5,000.00	4306 Quinlan Park Rd #4311
		Austin, TX 78732
$\vdash$	PURPOSE	
	OF	(a) Category (See Categories listed at the top of this schedule)  Salaries/Wages/Contract Labor  (b) Description  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Check if Austin, TX, officeholder living expense
		Campaign website and media
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	H
Г		

#### 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: Sch: 17/24 Rpt: 54/63	2 FILER NAME Devine, John P. (The Honorable)  3 Filer ID (Ethics Commission Filers) 00026739
4	Date 02/03/2025	5 Payee name John Doner & Associates, Inc
	Amount (\$) \$12,667.18	7 Payee address; City; State; Zip Code 1005 Congress Ave Suite 580 Austin, TX 78701
8	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  Printing, mailing, postage and fundraising services
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held H
	Date 03/28/2025	Payee name John Doner & Associates, Inc
	Amount (\$) \$13,312.43	Payee address; City; State; Zip Code  1005 Congress Ave Suite 580 Austin, TX 78701
	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  Printing, mailing, postage and fundraising services
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
	Date 01/02/2025	Payee name Korea World Newspaper
	Amount (\$) \$450.00	Payee address; City; State; Zip Code 9610 Long Point Rd
		Houston, TX 77055
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Campaign ad
	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held H

#### SCHEDULE F1

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

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

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

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

	Candidate/Officeholder/Politica Credit Card Payment	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: 18/24 Rpt: 55/63	Devine, John P. (The Honorable) 00026739
4	Date	5 Payee name
	06/09/2025	Lundy, Jennifer
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$1,000.00	3204 Dwyer Ln
		Flower Mound, TX 75022
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Salaries/Wages/Contract Labor  Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense  Campaign work
		Campaign work
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
F	Date	Payee name
	06/16/2025	Marriott Woodlands
	Amount (\$)	Payee address; City; State; Zip Code
	\$279.74	1601 Lake Robbins Dr
		The Woodlands, TX 77380
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Travel In District Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Hotel expense
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	<del>1</del>
	Date	Payee name
	02/20/2025	Matt's El Rancho
	Amount (\$)	Payee address; City; State; Zip Code
	\$118.66	2613 South Lamar
		Austin, TX 78704
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.
	_,, _,,,,,,	Check if Austin, TX, officeholder living expense  Court staff lunch
		Court Stail Iulicii
$\vdash$	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/O	
$\vdash$		
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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 Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor

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

	Credit Card Payment	The Instruction Guide explains how to co	ompl	ete this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 19/24 Rpt: 56/63	Devine, John P. (The Honorable)		00026739
4	Date	5 Payee name		•
	03/20/2025	Matt's El Rancho		
6	Amount (\$)	7 Payee address; City; State; Zip C	ode	
	\$101.56	2613 South Lamar		
		Austin, TX 78704		
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.
	LAPENDITORE			Check if Austin, TX, officeholder living expense
				Court staff lunch
_	0 1 0 0 1 1 1 1	0. 151. (0.15.1.1)	<u> </u>	0" 11
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office so	ught	Office held
	Date	Payee name		
	01/14/2025	Salt Traders Coastal Cooking		
	Amount (\$)	Payee address; City; State; Zip C	ode	
	\$122.27	1101 S Mopac Expy		
		Austin, TX 78746		
	PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	OF EXPENDITURE	Food/Beverage Expense		Check if travel outside of Texas. Complete Schedule T.
				Check if Austin, TX, officeholder living expense  Court staff lunch
				Court Stair lands
	Complete ONLY if direct	Candidate/Officeholder name Office so	<u>l</u> uaht	Office held
	expenditure to benefit C/OI		agiit	Cinice Hold
	Date	Payee name		
	02/12/2025	Salt Traders Coastal Cooking		
		•	odo	
	Amount (\$) \$84.95	Payee address; City; State; Zip C 1101 S Mopac Expy	oue	
	Ф04.93	1101 3 Mopac Expy		
		A		
		Austin, TX 78746		
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b)	Description  Check if travel outside of Taylor Complete Schodule T
	EXPENDITURE	Food/Beverage Expense		Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
				Court staff lunch
	Complete ONLY if direct	Candidate/Officeholder name Office so	ught	Office held
	expenditure to benefit C/OI			
_				

### SCHEDULE F1

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

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

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1: Sch: 20/24 Rpt: 57/63	2 FILER NAME Devine, John P. (The Honorable)  3 Filer ID (Ethics Commission Filers) 00026739
4	Date 02/19/2025	5 Payee name Salt Traders Coastal Cooking
6	Amount (\$) \$199.88	7 Payee address; City; State; Zip Code 1101 S Mopac Expy  Austin, TX 78746
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense  (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Court Staff lunch
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date 03/19/2025	Payee name Salt Traders Coastal Cooking
	Amount (\$) \$146.59	Payee address; City; State; Zip Code  1101 S Mopac Expy  Austin, TX 78746
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense  (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Court staff lunch
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date 06/11/2025	Payee name Salt Traders Coastal Cooking
	Amount (\$) \$191.90	Payee address; City; State; Zip Code 1101 S Mopac Expy
		Austin, TX 78746
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense  (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Court Staff lunch
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

#### SCHEDULE F1

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

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

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

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

	Credit Card Payment	The Instruction Guide explains how to complete this form.							
1	Total pages Schedule F1:	<u> </u>							
	Sch: 21/24 Rpt: 58/63	Devine, John P. (The Honorable) 00026739							
4	Date	Payee name							
	01/21/2025	Saltgrass Steak House							
6	Amount (\$)	7 Payee address; City; State; Zip Code							
	\$162.38	21855 Katy Fwy							
		Katy, TX 77450							
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description							
	OF EXPENDITURE	Food/Beverage Expense							
	EXPENDITORE	Check if Austin, TX, officeholder living expense							
		Meal with supporters							
_									
9	Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held							
	Date	Payee name							
	01/03/2025	Satellite Phone Store							
	Amount (\$)	Payee address; City; State; Zip Code							
	\$257.54	2830 Shelter Island Dr.							
		San Diego, CA 92106							
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description							
	OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.							
	_/	Check if Austin, TX, officeholder living expense  Phone service							
		Filone Service							
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held							
	expenditure to benefit C/OI								
	Data								
	Date 02/04/2025	Payee name Satellite Phone Store							
	Amount (\$)	Payee address; City; State; Zip Code							
	\$257.54	2830 Shelter Island Dr.							
		San Diego, CA 92106							
	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							
		Phone service							
	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

	Candidate/Officeholder/Politica Credit Card Payment		Legal Services Salaries/Wages/Contract Labor  The Instruction Guide explains how to complete this form.					OTHER (enter a category not listed above)			
┝	Total pages Schedule F1:	2 FILED NAME					3	Filer ID	(Ethics Commission	a Eilore)	
	Sch: 22/24 Rpt: 59/63		nn P. (The Honorable)					00026739	(Ethics Commission	i Fileis)	
┝	Date						<u> </u>				
"	03/03/2025	5 Payee name Satellite Ph	ono Storo								
Ļ											
6	Amount (\$)	7 Payee addre	•	ate; Zip Co	de						
l	\$257.54	2830 Shelte	er Island Dr.								
l											
		San Diego,	CA 92106								
8	PURPOSE	(a) Category (S	ee Categories listed at the top of this	s schedule)	(b)	Description					
	OF EXPENDITURE	Office Over	head/Rental Expense			=		ide of Texas. Com			
						Phone service		, officeholder living	expense		
l						THORIC SCIVIC	C				
9	Complete ONLY if direct	Candidate/Offi	ceholder name	Office sou	aht			Office he	ald.		
	expenditure to benefit C/O		centituer flame	Office Sou	gni			Office fie	au		
⊨		Т									
	Date	Payee name	0.								
	04/02/2025	Satellite Ph	one Store								
	Amount (\$)	Payee addre	•	ate; Zip Co	de						
	\$257.54	2830 Shelte	er Island Dr.								
		San Diego,	CA 92106								
	PURPOSE	(a) Category (S	ee Categories listed at the top of this	s schedule)	(b)	Description					
	OF EXPENDITURE		head/Rental Expense			_		ide of Texas. Com			
						Phone service		, officeholder living	expense		
						FIIOHE SEIVIC	E				
⊢	Complete ONLY if direct	Candidate/Offi	ceholder name	Office sou	aht			Office he	ald.		
l	expenditure to benefit C/O		centituer flame	Office Sou	gni			Office fie	au		
⊨		T									
	Date	Payee name	01.								
	05/02/2025	Satellite Ph									
	Amount (\$)	Payee addre		ate; Zip Co	de						
	\$257.54	2830 Shelte	er Island Dr.								
		San Diego,	CA 92106								
	PURPOSE	(a) Category (S	ee Categories listed at the top of this	s schedule)	(b)	Description					
	OF EXPENDITURE	Office Over	head/Rental Expense			브		ide of Texas. Com	•		
l						<u> </u>		, officeholder living	expense		
						Phone servic	C				
$\vdash$	Complete ONLY if direct	Candidata/Off	achalder name	Office	abt			Office h	ald.		
	Complete ONLY if direct expenditure to benefit C/Ol		ceholder name	Office sou	ynt			Office he	au		
$\vdash$	•										

#### 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	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 23/24 Rpt: 60/63	Devine, John P. (The Honorable) 00026739
4	Date	5 Payee name
	06/03/2025	Satellite Phone Store
6	Amount (\$)	7 Payee address; City; State; Zip Code
	\$257.54	2830 Shelter Island Dr.
		San Diego, CA 92106
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
		Phone service
9	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	01/08/2025	Shore Raw Bar & Grill
	Amount (\$)	Payee address; City; State; Zip Code
	\$295.17	8665 W, TX-71
		Suite 100
		Austin, TX 78735
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
	EXPENDITURE	Food/Beverage Expense Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Court staff lunch
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	1
	Date	Payee name
	06/09/2025	Smith, Pam
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,000.00	3865 Lake Bayshore Dr
		Unit F113
		Bradenton, FL 34205
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)  (b) Description  Check if the relevant of Taylor Camplete Schedule T
	EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Campaign work
	Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
	expenditure to benefit C/OI	T

#### SCHEDULE F1

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

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

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

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

Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to con		OTHER (enter a category not listed above)					
1 Total pages Schedule F1:	2 FILER NAME		Filer ID (Ethics Commission Filers)					
Sch: 24/24 Rpt: 61/63	Devine, John P. (The Honorable)		00026739					
4 Date	5 Payee name	•						
01/24/2025	State of Grace							
6 Amount (\$)	7 Payee address; City; State; Zip Co	?						
\$261.05								
	Houston, TX 77098							
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	) Description						
OF EXPENDITURE	Food/Beverage Expense	Check if travel outside of Texas. Complete Schedule T.						
		<b>—</b>	Check if Austin, TX, officeholder living expense  Dinner with colleague and campaign worker					
		Diffici with collect	ague and campaign worker					
9 Complete ONLY if direct	Candidate/Officeholder name Office sour	t	Office held					
expenditure to benefit C/OH								
Date	Payee name							
01/02/2025	The Oasis on Lake Travis							
Amount (\$)	Payee address; City; State; Zip Co	1						
\$220.67								
¥==0.0.	0000 Comunicite Itali							
	Austin, TX 78732							
PURPOSE		Description						
OF	(a) Category (See Categories listed at the top of this schedule)  Food/Beverage Expense	`	le of Texas. Complete Schedule T.					
EXPENDITURE	Toda/Bovorage Expense	ш	officeholder living expense					
		Supreme Court of	of Texas luncheon					
Complete <u>ONLY</u> if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH								
,								
Date	Payee name							
02/19/2025	Trattoria Lisina							
Amount (\$)	Payee address; City; State; Zip Co	2						
\$414.78	13308 Farm to Market Rd 150							
	5 % 1 7 4 70040							
	Driftwood, TX 78619							
PURPOSE OF	, ,	Description	le of Texas. Complete Schedule T.					
EXPENDITURE	Food/Beverage Expense		officeholder living expense					
		Campaign meal						
Complete ONLY if direct	Candidate/Officeholder name Office sou	t	Office held					
expenditure to benefit C/OH								

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

#### SCHEDULE K

I The Instruction Guide explains how to complete this form			ages Schedule K: ./2 Rpt: 62/63				
2	2 FILER NAME 3			Filer ID	(Ethics Commission F	ilers)	
	Devine, John P. (The Honorable)			00026	5739		
4	Date	5 Name of person from whom amount is received			8 Amount (\$)		
-	01/21/2025	Frost Bank			(+)	\$0.30	
	01/21/2020					Ψ0.00	
		6 Address of person from whom amount is received; City; State; Zip Code					
		Austin, TX 78767					
			1000		<u> </u>		
			Olitic	ai cont	ribution returned to filer		
		Interest					
	Date	Name of person from whom amount is received			Amount (\$)		
	02/20/2025	Frost Bank				\$0.52	
		Address of person from whom amount is received; City; State; Zip Code			1		
		Austin, TX 78767					
		Purpose for which amount is received Check if po	olitic	al cont	ribution returned to filer		
		Interest					
H	Data						
	Date	Name of person from whom amount is received  Frost Bank			Amount (\$)	Φ1 <b>Λ</b> 0	
	03/19/2025					\$1.08	
		Address of person from whom amount is received; City; State; Zip Code					
		Austin TV 70767					
		Austin, TX 78767			<u> </u>		
		_ `	al cont	ribution returned to filer			
		Interest					
	Date	nate Name of person from whom amount is received			Amount (\$)		
	04/17/2025	4/17/2025 Frost Bank				\$0.99	
		Address of person from whom amount is received; City; State; Zip Code		1			
		Austin, TX 78767					
		Purpose for which amount is received Check if po	litic	al cont	ribution returned to filer		
		Interest					
_	Date	Name of person from whom amount is received			Amount (\$)		
	05/19/2025	Name of person from whom amount is received  Frost Bank			Amount (\$)	\$0.63	
						Φ0.03	
		Address of person from whom amount is received; City; State; Zip Code					
		A TV 70707					
		Austin, TX 78767					
		<u> </u>	litic	al cont	ribution returned to filer		
		Interest					

# INTEREST, CREDITS, GAINS, REFUNDS, AND SCHEDULE K **CONTRIBUTIONS RETURNED TO FILER** 1 Total pages Schedule K: The Instruction Guide explains how to complete this form. Sch: 2/2 Rpt: 63/63 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Devine, John P. (The Honorable) 00026739 5 Name of person from whom amount is received 8 Amount (\$) 06/18/2025 \$0.42 Frost Bank 6 Address of person from whom amount is received; City; State; Zip Code Austin, TX 78767 Purpose for which amount is received Check if political contribution returned to filer Interest