

JUDICIAL CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM JC/OH
COVER SHEET PG 1

The JC/OH Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00087578	2 Total pages filed: 26								
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI Mr. John R.		OFFICE USE ONLY Date Received ELECTRONICALLY FILED 01/15/2026								
	NICKNAME LAST SUFFIX Messinger										
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE P.O. Box 305 Pflugerville, TX 78691		Date Hand-delivered or Date Postmarked								
			Receipt # Amount								
			Date Processed								
			Date Imaged								
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Mr. Ronald L.										
	NICKNAME LAST SUFFIX Agnew										
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 529 Tanner Trail Pflugerville, TX 78660										
7 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (512) 251-0569										
8 REPORT TYPE	<table style="width: 100%;"> <tr> <td><input checked="" type="checkbox"/> January 15</td> <td><input type="checkbox"/> 30th day before election</td> <td><input type="checkbox"/> Runoff</td> <td><input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)</td> </tr> <tr> <td><input type="checkbox"/> July 15</td> <td><input type="checkbox"/> 8th day before election</td> <td><input type="checkbox"/> Exceeded modified reporting limit</td> <td><input type="checkbox"/> Final Report (Attach C/OH-FR)</td> </tr> </table>			<input checked="" type="checkbox"/> January 15	<input type="checkbox"/> 30th day before election	<input type="checkbox"/> Runoff	<input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)	<input type="checkbox"/> July 15	<input type="checkbox"/> 8th day before election	<input type="checkbox"/> Exceeded modified reporting limit	<input type="checkbox"/> Final Report (Attach C/OH-FR)
<input checked="" type="checkbox"/> January 15	<input type="checkbox"/> 30th day before election	<input type="checkbox"/> Runoff	<input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)								
<input type="checkbox"/> July 15	<input type="checkbox"/> 8th day before election	<input type="checkbox"/> Exceeded modified reporting limit	<input type="checkbox"/> Final Report (Attach C/OH-FR)								
9 PERIOD COVERED	Month Day Year Month Day Year 07/01/2025 THROUGH 12/31/2025										
10 ELECTION	ELECTION DATE Month Day Year 03/03/2026		ELECTION TYPE <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special								
11 OFFICE	OFFICE HELD (if any)		12 OFFICE SOUGHT (if known) Court Of Criminal Appeals, Judge Place 9								

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JUDICIAL CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM JC/OH
COVER SHEET PG 2

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13 C / OH NAME Messinger, John R. (Mr.)	14 Filer ID (Ethics Commission Filers) 00087578
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15 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> Additional Pages	This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures.	
	COMMITTEE TYPE	COMMITTEE NAME
	<input type="checkbox"/> GENERAL	COMMITTEE ADDRESS
	<input type="checkbox"/> SPECIFIC	
	COMMITTEE CAMPAIGN TREASURER NAME	
	COMMITTEE CAMPAIGN TREASURER ADDRESS	

16 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 8,250.46
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 841.08
	4. TOTAL POLITICAL EXPENDITURES	\$ 17,531.81
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 4,728.35
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 1,500.00

17 AFFIDAVIT

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

Mr. John R. Messinger

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

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

_____ Signature of officer administering oath	_____ Printed name of officer administering oath	_____ Title of officer administering oath
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SUBTOTALS - JC/OH**FORM JC/OH
COVER SHEET PG 3**

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18 FILER NAME Messinger, John R. (Mr.)		19 Filer ID (Ethics Commission Filers) 00087578
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A(J)1: MONETARY POLITICAL CONTRIBUTIONS (JUDICIAL)	\$ 8,050.46
2.	<input checked="" type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$ 200.00
3.	<input checked="" type="checkbox"/> SCHEDULE B(J): PLEDGED CONTRIBUTIONS (JUDICIAL)	\$ 0.00
4.	<input checked="" type="checkbox"/> SCHEDULE E(J): LOANS (JUDICIAL)	\$ 1,000.00
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 11,057.21
6.	<input checked="" type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$ 0.00
7.	<input checked="" type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$ 0.00
8.	<input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 0.00
9.	<input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$ 6,474.60
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 1/10 Rpt: 4/26
2 FILER NAME Messinger, John R. (Mr.)		3 Filer ID (Ethics Commission Filers) 00087578
4 Date 09/17/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Altman, Daniel <hr/> 6 Contributor address; City; State; Zip Code Midlothian, TX 76065	7 Amount of Contribution (\$) \$104.10
8 Contributor's Principal Occupation Attorney		9 Contributor's Job Title Senior Counsel
10 Contributor's employer/law firm Oncor Electric Delivery		11 Law firm of contributor's spouse (if any) Carrington Coleman
12 If contributor is a child, law firm of parent(s) (if any)		
Date 11/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Choate, Jack <hr/> Contributor address; City; State; Zip Code Huntsville, TX 77340	Amount of Contribution (\$) \$208.20
Contributor's Principal Occupation Prosecutor		Contributor's Job Title Executive Director
Contributor's employer/law firm Special Prosecution Unit		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 11/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Curry, Alan <hr/> Contributor address; City; State; Zip Code Houston, TX 77006	Amount of Contribution (\$) \$208.20
Contributor's Principal Occupation Prosecutor		Contributor's Job Title Assistant District Attorney
Contributor's employer/law firm Harris County District Attorney's Office		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 2/10 Rpt: 5/26
2 FILER NAME Messinger, John R. (Mr.)		3 Filer ID (Ethics Commission Filers) 00087578
4 Date 08/27/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Foth, Mark <hr/> 6 Contributor address; City; State; Zip Code Pflugerville, TX 78660	7 Amount of Contribution (\$) <div style="text-align: right; font-weight: bold;">\$50.00</div>
8 Contributor's Principal Occupation Police officer		9 Contributor's Job Title Officer
10 Contributor's employer/law firm Austin Police Department		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 08/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Freitas, Rebecca <hr/> Contributor address; City; State; Zip Code Burnet, TX 78611	Amount of Contribution (\$) <div style="text-align: right; font-weight: bold;">\$52.05</div>
Contributor's Principal Occupation Retired		Contributor's Job Title Retired
Contributor's employer/law firm Retired		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 07/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goodman, Tom <hr/> Contributor address; City; State; Zip Code Austin, TX 78717	Amount of Contribution (\$) <div style="text-align: right; font-weight: bold;">\$52.05</div>
Contributor's Principal Occupation Pastor		Contributor's Job Title Pastor
Contributor's employer/law firm Hillcrest Church		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 3/10 Rpt: 6/26
2 FILER NAME Messinger, John R. (Mr.)		3 Filer ID (Ethics Commission Filers) 00087578
4 Date 12/22/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hodges, Brandon <hr/> 6 Contributor address; City; State; Zip Code Midland, TX 79705	7 Amount of Contribution (\$) \$520.51
8 Contributor's Principal Occupation Entrepreneur		9 Contributor's Job Title VP Corporate Affairs
10 Contributor's employer/law firm True Chemical Solutions		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 09/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Humphrey, Rob <hr/> Contributor address; City; State; Zip Code Elgin, TX 78621	Amount of Contribution (\$) \$52.05
Contributor's Principal Occupation Executive		Contributor's Job Title Director of Health Operations
Contributor's employer/law firm TRS		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 11/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LaFleur, Mark <hr/> Contributor address; City; State; Zip Code Alpine, TX 79830	Amount of Contribution (\$) \$100.00
Contributor's Principal Occupation Retired		Contributor's Job Title Retired
Contributor's employer/law firm Retired		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 4/10 Rpt: 7/26
2 FILER NAME Messinger, John R. (Mr.)		3 Filer ID (Ethics Commission Filers) 00087578
4 Date 08/19/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ledwell, Steve <hr/> 6 Contributor address; City; State; Zip Code Texarkana, TX 75501	7 Amount of Contribution (\$) \$5,000.00
8 Contributor's Principal Occupation Equipment Manufacturer		9 Contributor's Job Title Owner
10 Contributor's employer/law firm Ledwell & Son Enterprises		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 12/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) May, George <hr/> Contributor address; City; State; Zip Code Kingwood, TX 77339	Amount of Contribution (\$) \$52.05
Contributor's Principal Occupation Attorney		Contributor's Job Title Partner
Contributor's employer/law firm Twomey May PLLC		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 08/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Messinger, Rose <hr/> Contributor address; City; State; Zip Code Columbus, GA 31907	Amount of Contribution (\$) \$104.10
Contributor's Principal Occupation Retired		Contributor's Job Title Retired
Contributor's employer/law firm Retired		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 5/10 Rpt: 8/26
2 FILER NAME Messinger, John R. (Mr.)		3 Filer ID (Ethics Commission Filers) 00087578
4 Date 07/17/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Messinger, Rose <hr/> 6 Contributor address; City; State; Zip Code Columbus, GA 31907	7 Amount of Contribution (\$) \$104.10
8 Contributor's Principal Occupation Retired		9 Contributor's Job Title Retired
10 Contributor's employer/law firm Retired		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		

Date 09/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Messinger, Rose <hr/> Contributor address; City; State; Zip Code Columbus, GA 31907	Amount of Contribution (\$) \$104.10
Contributor's Principal Occupation Retired		Contributor's Job Title Retired
Contributor's employer/law firm Retired		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

Date 10/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Messinger, Rose <hr/> Contributor address; City; State; Zip Code Columbus, GA 31907	Amount of Contribution (\$) \$104.10
Contributor's Principal Occupation Retired		Contributor's Job Title Retired
Contributor's employer/law firm Retired		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 6/10 Rpt: 9/26
2 FILER NAME Messinger, John R. (Mr.)		3 Filer ID (Ethics Commission Filers) 00087578
4 Date 12/04/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Messinger, Rose <hr/> 6 Contributor address; City; State; Zip Code Columbus, GA 31907	7 Amount of Contribution (\$) \$104.10
8 Contributor's Principal Occupation Retired		9 Contributor's Job Title Retired
10 Contributor's employer/law firm Retired		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 08/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Russell, Susan <hr/> Contributor address; City; State; Zip Code Austin, TX 78759	Amount of Contribution (\$) \$50.00
Contributor's Principal Occupation Retired		Contributor's Job Title Retired
Contributor's employer/law firm Retired		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 09/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sanders, Mike <hr/> Contributor address; City; State; Zip Code Leander, TX 78641	Amount of Contribution (\$) \$104.10
Contributor's Principal Occupation Electrical engineer		Contributor's Job Title Retired
Contributor's employer/law firm Retired		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 7/10 Rpt: 10/26
2 FILER NAME Messinger, John R. (Mr.)		3 Filer ID (Ethics Commission Filers) 00087578
4 Date 09/01/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Toben, Beth <hr/> 6 Contributor address; City; State; Zip Code Waco, TX 76712	7 Amount of Contribution (\$) \$200.00
8 Contributor's Principal Occupation Prosecutor		9 Contributor's Job Title Assistant District Attorney
10 Contributor's employer/law firm Limestone County District Attorney's Office		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 12/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Torrey, Bill <hr/> Contributor address; City; State; Zip Code Cameron, TX 76520	Amount of Contribution (\$) \$100.00
Contributor's Principal Occupation Prosecutor		Contributor's Job Title Assistant District Attorney
Contributor's employer/law firm Bell County District Attorney		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 12/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Walker, James <hr/> Contributor address; City; State; Zip Code Coppell, TX 75019	Amount of Contribution (\$) \$260.25
Contributor's Principal Occupation Attorney		Contributor's Job Title Partner
Contributor's employer/law firm Pachulski Stang Ziehl Jones LLP		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 8/10 Rpt: 11/26
2 FILER NAME Messinger, John R. (Mr.)		3 Filer ID (Ethics Commission Filers) 00087578
4 Date 11/05/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wallace, Lee <hr/> 6 Contributor address; City; State; Zip Code Pflugerville, TX 78660	7 Amount of Contribution (\$) \$104.10
8 Contributor's Principal Occupation Retired		9 Contributor's Job Title Retired
10 Contributor's employer/law firm Retired		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		
Date 07/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yates, Jonathan <hr/> Contributor address; City; State; Zip Code Van Alstyne, TX 75495	Amount of Contribution (\$) \$52.05
Contributor's Principal Occupation Teacher		Contributor's Job Title Teacher
Contributor's employer/law firm Van Alstyne ISD		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		
Date 08/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yates, Jonathan <hr/> Contributor address; City; State; Zip Code Van Alstyne, TX 75495	Amount of Contribution (\$) \$52.05
Contributor's Principal Occupation Teacher		Contributor's Job Title Teacher
Contributor's employer/law firm Van Alstyne ISD		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 9/10 Rpt: 12/26
2 FILER NAME Messinger, John R. (Mr.)		3 Filer ID (Ethics Commission Filers) 00087578
4 Date 09/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yates, Jonathan <hr/> 6 Contributor address; City; State; Zip Code Van Alstyne, TX 75495	7 Amount of Contribution (\$) \$52.05
8 Contributor's Principal Occupation Teacher		9 Contributor's Job Title Teacher
10 Contributor's employer/law firm Van Alstyne ISD		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		

Date 10/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yates, Jonathan <hr/> Contributor address; City; State; Zip Code Van Alstyne, TX 75495	Amount of Contribution (\$) \$52.05
Contributor's Principal Occupation Teacher		Contributor's Job Title Teacher
Contributor's employer/law firm Van Alstyne ISD		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

Date 11/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yates, Jonathan <hr/> Contributor address; City; State; Zip Code Van Alstyne, TX 75495	Amount of Contribution (\$) \$52.05
Contributor's Principal Occupation Teacher		Contributor's Job Title Teacher
Contributor's employer/law firm Van Alstyne ISD		Law firm of contributor's spouse (if any)
If contributor is a child, law firm of parent(s) (if any)		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A(J)1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A(J)1: Sch: 10/10 Rpt: 13/26
2 FILER NAME Messinger, John R. (Mr.)		3 Filer ID (Ethics Commission Filers) 00087578
4 Date 12/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yates, Jonathan	7 Amount of Contribution (\$) \$52.05
	6 Contributor address; City; State; Zip Code Van Alstyne, TX 75495	
8 Contributor's Principal Occupation Teacher		9 Contributor's Job Title Teacher
10 Contributor's employer/law firm Van Alstyne		11 Law firm of contributor's spouse (if any)
12 If contributor is a child, law firm of parent(s) (if any)		

NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

SCHEDULE A2

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A2: Sch: 1/1 Rpt: 14/26	
2 FILER NAME Messinger, John R. (Mr.)		3 Filer ID (Ethics Commission Filers) 00087578	
4 TOTAL OF UNITEMIZED IN-KIND POLITICAL CONTRIBUTIONS		\$ 0.00	
5 Date 09/20/2025	6 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bezner, Justin	8 Amount of contribution (\$) \$200.00	9 In-kind contribution description Tickets to a county party event.
	7 Contributor address; City; State; Zip Code Smithville, TX 78957	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	
10 Principal occupation / Job title (FOR NON-JUDICIAL) (See instructions)		11 Employer (FOR NON-JUDICIAL) (See instructions)	
12 Contributor's principal occupation (FOR JUDICIAL) Risk Management		13 Contributor's job title (FOR JUDICIAL) (See instructions) Risk Manager	
14 Contributor's employer/law firm (FOR JUDICIAL) ARM		15 Law firm of contributor's spouse (if any) (FOR JUDICIAL)	
16 If contributor is a child, law firm of parent(s) (if any) (FOR JUDICIAL)			

PLEDGED CONTRIBUTIONS (JUDICIAL)

SCHEDULE B(J)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule B(J):
Sch: 1/1 Rpt: 15/26

2 FILER NAME
Messinger, John R. (Mr.)

3 Filer ID (Ethics Commission Filers)
00087578

4 TOTAL OF UNITEMIZED PLEDGES

\$ 0.00

5 Date

6 Full name of pledgor ☐ out-of-state PAC (ID#: _____)

8 Amount of
pledge (\$)

9 In-kind description
(If applicable)

7 Pledgor Address; City; State; Zip Code

☐ Check if travel outside of Texas. Complete Schedule T.

10 Pledgor's principal occupation

11 Pledgor's job title

12 Pledgor's employer/law firm

13 Law firm of pledgor's spouse (if any)

14 If pledgor is a child, law firm of parent(s) (if any)

LOANS (JUDICIAL)

SCHEDULE E(J)

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E(J): Sch: 1/1 Rpt: 16/26
2 FILER NAME Messinger, John R. (Mr.)		3 Filer ID (Ethics Commission Filers) 00087578
4 TOTAL OF UNITEMIZED LOANS		\$ 0.00
5 Date of loan 07/09/2025	7 Name of lender Messinger, John <input type="checkbox"/> out-of-state PAC (ID#: _____)	9 Loan Amount (\$) \$1,000.00
6 Is lender a financial institution? No	8 Lender address; City; State; Zip Code Pflugerville, TX 78660	10 Interest Rate
		11 Maturity Date
12 Lender's Principal Occupation Appellate prosecutor		13 Lender's Job Title Assistant State Prosecuting Attorney
14 Lender's Employer/Law Firm Office of the State Prosecuting Attorney		15 Law Firm of lender's spouse (if any)
16 If lender is child, law firm of parent(s) (if any)		
17 Description of Collateral <input checked="" type="checkbox"/> None		18 Check if personal funds were deposited into political account (See Instructions) <input type="checkbox"/>
19 GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	20 Name of guarantor	22 Amount Guaranteed (\$)
	21 Guarantor address; City; State; Zip Code	
23 Guarantor's Principal Occupation		24 Guarantor's Job Title
25 Guarantor's Employer/Law Firm		26 Law Firm of guarantor's spouse (if any)
27 If guarantor is child, law firm of parent(s) (if any)		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/8 Rpt: 17/26	2 FILER NAME Messinger, John R. (Mr.)	3 Filer ID (Ethics Commission Filers) 00087578
4 Date 11/05/2025	5 Payee name Austin Republican Women	
6 Amount (\$) \$105.00	7 Payee address; City; State; Zip Code P.O. Box 163655 Austin, TX 78716	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Platinum Anniversary Dinner
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/31/2025	Payee name Austin Republican Women	
Amount (\$) \$45.00	Payee address; City; State; Zip Code P.O. Box 163655 Austin, TX 78716	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Judicial candidate forum.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/29/2025	Payee name Colon & Company	
Amount (\$) \$250.00	Payee address; City; State; Zip Code 7941 Katy Fwy Houston, TX 77024	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting services.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 2/8 Rpt: 18/26	2 FILER NAME Messinger, John R. (Mr.)	3 Filer ID (Ethics Commission Filers) 00087578
4 Date 10/23/2025	5 Payee name Colon & Company	
6 Amount (\$) \$500.00	7 Payee address; City; State; Zip Code 7941 Katy Fwy Houston, TX 77024	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting services
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/08/2025	Payee name Colon & Company	
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code 7941 Katy Fwy Houston, TX 77024	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Consulting expenses
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/08/2025	Payee name Election Day Strategies	
Amount (\$) \$499.95	Payee address; City; State; Zip Code 11422 Slickrock Draw San Antonio, TX 78245	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Website maintenance
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 3/8 Rpt: 19/26	2 FILER NAME Messinger, John R. (Mr.)	3 Filer ID (Ethics Commission Filers) 00087578
4 Date 08/04/2025	5 Payee name Expedia	
6 Amount (\$) \$131.10	7 Payee address; City; State; Zip Code 1111 Expedia Group Way W Seattle, WA 98119	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Hotel
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/20/2025	Payee name Expedia	
Amount (\$) \$159.33	Payee address; City; State; Zip Code 1111 Expedia Group Way W Seattle, WA 98119	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Hotel
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/24/2025	Payee name Expedia	
Amount (\$) \$160.11	Payee address; City; State; Zip Code 1111 Expedia Group Way W Seattle, WA 98119	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Hotel
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 4/8 Rpt: 20/26	2 FILER NAME Messinger, John R. (Mr.)	3 Filer ID (Ethics Commission Filers) 00087578
4 Date 10/25/2025	5 Payee name Grand Hyatt San Antonio	
6 Amount (\$) \$637.58	7 Payee address; City; State; Zip Code 600 East Market Street San Antonio, TX 78205	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Hotel
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/03/2025	Payee name Minuteman Press	
Amount (\$) \$301.55	Payee address; City; State; Zip Code 19832 Panther Dr Ste 201 Pflugerville, TX 78660	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign materials
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/21/2025	Payee name Minuteman Press	
Amount (\$) \$173.20	Payee address; City; State; Zip Code 19832 Panther Dr Ste 201 Pflugerville, TX 78660	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign materials
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 5/8 Rpt: 21/26	2 FILER NAME Messinger, John R. (Mr.)	3 Filer ID (Ethics Commission Filers) 00087578
4 Date 10/24/2025	5 Payee name Minuteman Press	
6 Amount (\$) \$742.42	7 Payee address; City; State; Zip Code 19832 Panther Dr Ste 201 Pflugerville, TX 78660	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign materials.
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 10/27/2025	Candidate/Officeholder name Office sought Office held	
Payee name Minuteman Press		
Amount (\$) \$304.99	Payee address; City; State; Zip Code 19832 Panther Dr Ste 201 Pflugerville, TX 78660	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign materials.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 12/03/2025	Candidate/Officeholder name Office sought Office held	
Payee name Minuteman Press		
Amount (\$) \$90.00	Payee address; City; State; Zip Code 19832 Panther Dr Ste 201 Pflugerville, TX 78660	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign materials.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 6/8 Rpt: 22/26	2 FILER NAME Messinger, John R. (Mr.)	3 Filer ID (Ethics Commission Filers) 00087578
4 Date 11/07/2025	5 Payee name Priceline	
6 Amount (\$) \$123.97	7 Payee address; City; State; Zip Code 800 Connecticut Ave Norwalk, CT 06854	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Hotel
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 10/27/2025	Candidate/Officeholder name Office sought Office held	
Payee name Priceline		
Amount (\$) \$149.97	Payee address; City; State; Zip Code 800 Connecticut Ave Norwalk, CT 06854	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Hotel
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/05/2025	Candidate/Officeholder name Office sought Office held	
Payee name Priceline		
Amount (\$) \$519.04	Payee address; City; State; Zip Code 800 Connecticut Ave Norwalk, CT 06854	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Flight, hotel, vehicle
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 7/8 Rpt: 23/26	2 FILER NAME Messinger, John R. (Mr.)	3 Filer ID (Ethics Commission Filers) 00087578
4 Date 11/10/2025	5 Payee name Priceline	
6 Amount (\$) \$141.36	7 Payee address; City; State; Zip Code 800 Connecticut Ave Norwalk, CT 06854	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Hotel
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/04/2025	Payee name Republican Party of Texas	
Amount (\$) \$3,750.00	Payee address; City; State; Zip Code 807 Brazos St., Suite 701 Austin, TX 78701	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Primary filing fee.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/16/2025	Payee name Texas Federation of Republican Women	
Amount (\$) \$250.00	Payee address; City; State; Zip Code 13740 N Hwy 183 Suite J4 Austin, TX 78750	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Meet & Greet registration
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 8/8 Rpt: 24/26	2 FILER NAME Messinger, John R. (Mr.)	3 Filer ID (Ethics Commission Filers) 00087578
4 Date 07/08/2025	5 Payee name Texas Republican County Chairmen's Association	
6 Amount (\$) \$181.56	7 Payee address; City; State; Zip Code P.O. Box 955 Corpus Christi, TX 78403	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Annual meeting attendance
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: Sch: 1/1 Rpt: 25/26	2 FILER NAME Messinger, John R. (Mr.)	3 Filer ID (Ethics Commission Filers) 00087578
4 Date 12/31/2025	5 Payee name Messinger, John	
6 Amount (\$) \$6,474.60 <input type="checkbox"/> Reimbursement from political contributions intended	7 Payee address; City; State; Zip Code REDACTED PER 254.0401, ELEC. CODE Pflugerville, TX 78660	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense 10,791 miles at \$.60/mi.
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

OUTSTANDING LOANS

SCHEDULE L

The Instruction Guide explains how to complete this form.

1 Total pages Schedule L:
Sch: 1/1 Rpt: 26/26

2 FILER NAME

Messinger, John R. (Mr.)

3 Filer ID (Ethics Commission Filers)
00087578

LENDER
INFORMATION

4 Name of lender
Messinger, John

5 Lender address; City; State; Zip Code

Pflugerville, TX 78660

GUARANTOR
INFORMATION

6 Name of guarantor

☒ not applicable

7 Guarantor address; City; State; Zip Code