CORRECTION/AMENDMENT AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

FORM COR-C/OH

	Remember To At Nee	tach Any Part Of ded To Report A			oort Form	
Signature of offic	cer administering oath	Printed name of of	ficer administering o	oath	Title of officer admin	istering oath
	, 20, to cert					
Sworn to and subso	cribed before me, by the sai	d		, this 1	the	day
AFFIX NOTARY S	TAMP / SEAL ABOVE		J			
			Signa		e or Officeholder	
				Don E. McLa	ughlin Jr.	
				nat any error or o	naccurate or incompl mission in the report	
		X	report not later that	in the 14th busine	n, that I am filing this d ess day after the date	e I learned
		_	misrepresent the i			
		X	was made in good	faith and without	r affirm that the origir t an intent to mislead	nal report or to
		Che	ck the box next to a	ny and all applica	able statements:	
			correct.	penalty of perju		
7 AFFIDAVIT		1	oor or officer und-	nonalty of anti-	ry, that this corrected	roport in truc
I did not file the expe	ense report with the original.	It was an honest ove	rsight.			
6 EXPLANATION OF						
5 ORIGINAL PERIOD COVERED	Month Day Yea 07/01/2023	r THROUGH	Month Day 12/31/2023	Year 3	Date Imaged	
	8th day before election	Final Report (Attack	,	V		
	30th day before election	15th day after camp appointment (office			Date Processed	
REPORT TYPE	July 15	Exceeded modified			Receipt #	Amount
4 ORIGINAL	X January 15	McLaughlin	Other	Jr.	Date Hand-delivered or	Date Postmarked
	NICKNAME	LAST Mol aughlin		SUFFIX		
OFFICEHOLDER		Don E.			01/17/2024	
3 CANDIDATE /	MS / MRS / MR	FIRST		MI	Date Received	
1 Filer ID (Eth 00087820	nics Commission Filers)	2 Total pages filed:45			OFFICE U	SE ONLY
					_	

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

					2 Total pages	filod
The C/OH Instruction	Guide explains how to com	plete this form.	1 Filer ID (Ethics Commis	ssion Filers)	2 Total pages	45
			00087820			40
3 CANDIDATE /	MS / MRS / MR	FIRST		MI	OFFICE	USE ONLY
OFFICEHOLDER NAME		Don E.			Date Received	
	NICKNAME	LAST		SUFFIX	01/17/2024	
		McLaughlin		Jr.		
4 CANDIDATE /	ADDRESS / PO BOX; AF	PT / SUITE #: CIT	-Y:	ZIP CODE	Date Hand-delivered	or Date Postmarked
OFFICEHOLDER	PO Box 1707					
MAILING ADDRESS					Receipt #	Amount
I						
Change of Address	Uvalde, TX 78802				Date Processed	
					Date Imaged	
5 CAMPAIGN	MS / MRS / MR	FIRST		MI		
TREASURER NAME		Steve				
	NICKNAME	LAST		SUFFIX		
		McNew				
6 CAMPAIGN			4.0-			
6 CAMPAIGN TREASURER	STREET ADDRESS (NO F	O BOX PLEASE),	AP	r / SUITE #; CITY;	51	TATE; ZIP CODE
ADDRESS	PO Box 1707					
(Residence or Business)						
	Uvalde, TX 78802					
7. 0414541011						
7 CAMPAIGN TREASURER		ONE NUMBER	EXTENSION			
PHONE	(830) 278-7157					
0 DEDODT						
8 REPORT TYPE	X January 15	30th day before		Runoff	1 15th day after a	ampaign treasurer
	X January 15			Runon		fficeholder only)
	July 15	8th day before	election	Exceeded modified	Final Report (At	ttach C/OH-FR)
				reporting limit	-	
9 PERIOD	Month Day Year	r		Month Day	Year	
COVERED	07/01/2023	Tł	HROUGH	12/31/2023	3	
10 ELECTION	ELECTION DATE			ELECTION TYPE		
	Month Day Year	r XF	Primary	Runoff	Other	
	03/05/2024		Conoral	Special		
			General	Special		
				1		
11 OFFICE	OFFICE HELD (if any)			12 OFFICE SOUGHT		
				State Representa	ative District 80	
	:			-		
		GO	FO PAGE 2			
<u> </u>						
Forms provided by Te	xas Ethics Commission	www.et	hics.state.tx.u	S	Vei	rsion V3.5.1.0bfcfb67

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH **COVER SHEET PG 2** 3 of 45

13 C / OH NAME	4 Filer ID (E 00087820	thics Commission Filers)		
15 NOTICE FROM POLITICAL COMMITTEE(S)	candidate / officeholder.	political contributions accepted or political expenditure These expenditures may have been made without th I officeholders are required to report this information of	e candidate's or officeh	older's knowledge or
Additional Pages	COMMITTEE TYPE	COMMITTEE NAME		
	GENERAL			
		COMMITTEE ADDRESS		
	SPECIFIC			
		COMMITTEE CAMPAIGN TREASURER NAME		
		COMMITTEE CAMPAIGN TREASURER ADDRESS	5	
16 CONTRIBUTION TOTALS		ZED POLITICAL CONTRIBUTIONS (OTHER THAN ES OF LOANS, OR CONTRIBUTIONS MADE ELEC		\$ 0.00
		\$ 235,856.64		
EXPENDITURE TOTALS		\$ 0.00		
		\$ 63,251.81		
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	AL CONTRIBUTIONS MAINTAINED AS OF THE LAS RIOD	ST DAY OF THE	\$ 235,866.89
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIP OF THE REPOR	AL AMOUNT OF ALL OUTSTANDING LOANS AS C TING PERIOD	OF THE LAST DAY	\$ 0.00
17 AFFIDAVIT		I swear, or affirm, under penalty of true and correct and includes all under Title 15, Election Code.		
			. McLaughlin Jr.	
		Signature of C	Candidate or Officehold	er
AFFIX NO	TARY STAMP / SEAL ABO	DVE		
		aid ertify which, witness my hand and seal of office.	, this the	day
-	-	Printed name of officer administering		administering oath
Forms provided by Te	vas Ethics Commission	www.ethics.state.tx.us		Version V3.5.1.0bfcfb67

SUBTOTALS - C/OH	FORM C/OH	
	C	OVER SHEET PG 3 4 of 45
18 FILER NAME McLaughlin Jr., Don E.	19 Filer ID 00087820	(Ethics Commission Filers)
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1. X SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 235,856.64
2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTION	S	\$
3. SCHEDULE B: PLEDGED CONTRIBUTIONS		\$
4. X SCHEDULE E: LOANS		\$ 0.00
5. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIB	BUTIONS	\$ 63,251.81
6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$
7. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONT	RIBUTIONS	\$
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 BUS	SINESS OF C/OH	\$
11. SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTI	RIBUTIONS	\$
12. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUT TO FILER	TIONS RETURNED	\$

	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 1/27 Rpt: 5/45	
2	FILER NAME			3	Filer ID (Ethics Commission	on Filers)
	McLaughlin .	Jr., Don E.			00087820	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	12/23/2023	Almand, Jonette				\$300.00
		6 Contributor address; City; State; Zip Code				
		Uvalde, TX 78801				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Self		Self			
F	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	11/28/2023	Apex Steel Pipe			:	\$10,000.00
		Houston, TX 77019				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	.		
⊨	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	09/22/2023	Archer, Allyn	······································			\$1,000.00
						·+ ,
		Uvalde, TX 78801				
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	L;)		
	Retired		Retired			
⊨	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	09/25/2023	Arnim, Thomas				\$500.00
	•••	Contributor address; City; State; Zip Code				***
		San Antonio, TX 78209				
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	L;)		
	Partner		Petty Family Limited			
⊨	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	09/12/2023	Bakke, Phillip			,	\$500.00
	-	Contributor address; City; State; Zip Code				-
		Uvalde, TX 78210				
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	L;)		
	President	•	Bakke Development			
⊢						

					_		
	The Instru	ction Guide explains how to com	plete this fo	orm.	1	Total pages Schedule A1: Sch: 2/27 Rpt: 6/45	
2	FILER NAME				3	Filer ID (Ethics Commissi	ion Filers)
	McLaughlin 、	Jr., Don E.				00087820	,
4	Date	5 Full name of contributor out-of-s	state PAC (ID#:)	7	Amount of Contribution (\$)	
	09/15/2023	Barrow, James					\$500.00
	I	6 Contributor address; City; State; Zip Co	ode				
	I	San Antonio, TX 78209					
8	Principal occu	pation / Job title (See Instructions)	!	9 Employer (See Instructions)		
	Attorney			Barrow Law Office			
	Date	Full name of contributor out-of-s	state PAC (ID#:)		Amount of Contribution (\$)	
	12/18/2023	Beasley, KC					\$1,000.00
	1	Contributor address; City; State; Zip Co	ode				
		Driftwood, TX 78619					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Real Estate			KPG Commercial			
	Date	Full name of contributor out-of-s	state PAC (ID#:)		Amount of Contribution (\$)	
	07/31/2023	Beasley, Kennon					\$1,000.00
	I	Contributor address; City; State; Zip Co	ode				
		Driftwood, TX 78619					
		pation / Job title (See Instructions)		Employer (See Instructions)		
	Consulting			Self			
	Date		state PAC (ID#:)		Amount of Contribution (\$)	
	08/24/2023	Beasley, Russell					\$100.00
	I	Contributor address; City; State; Zip Co	ode				
		Fort Marth TV 76114					
┝	Dringing oog	Fort Worth, TX 76114	r	Employer (Coo Instructions	<u> </u>		
	Principal occu Pilot	pation / Job title (See Instructions)		Employer (See Instructions Dunham Jones Attorney			
					5		
	Date		state PAC (ID#:)		Amount of Contribution (\$)	÷10.000.00
	10/11/2023	Benson, Tom					\$10,000.00
		Contributor address; City; State; Zip Co	ode				
		Crystal City, TX 78839					
┝	Dringingl occu		r	Employer (Soo Instructions	<u> </u>		
	Ownder	pation / Job title (See Instructions)		Employer (See Instructions Self)		
	Ownuer			JEII			
1							-

	The Instru	ction Guide explains how to complete	e this fo	orm.	1	Total pages Schedule A1: Sch: 3/27 Rpt: 7/45	
2	FILER NAME				3	Filer ID (Ethics Commissio	on Filers)
	McLaughlin .	Jr., Don E.				00087820	
4	Date	5 Full name of contributor out-of-state PA	AC (ID#:_)	7	Amount of Contribution (\$)	
	12/18/2023	Billy , Jacob					\$1,000.00
		6 Contributor address; City; State; Zip Code					
		Uvalde, TX 78802					
8		pation / Job title (See Instructions)		9 Employer (See Instructions	5)		
	retired			retired	_		
	Date	Full name of contributor out-of-state PA	AC (ID#:)		Amount of Contribution (\$)	
	12/02/2023	Brewer, Carol					\$300.00
		Contributor address; City; State; Zip Code					
		Uvalde, TX 78801					
┝	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> •)		
	Teacher			Uvalde CISD	5)		
╞			: 0 ('D#:		<u> </u>	Amount of Contribution (¢)	
	Date 11/23/2023	Full name of contributor out-of-state PA Brewer, Robert	AC (ID#:)		Amount of Contribution (\$)	\$150.00
	11/20/2020						Φ100.00
		Contributor address; City; State; Zip Code					
		Shelby Township, MI 48315					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Banker			MSGCU			
	Date	Full name of contributor 🔲 out-of-state PA	AC (ID#:_)		Amount of Contribution (\$)	
	09/27/2023	Briscoe, Ben					\$300.00
		Contributor address; City; State; Zip Code					
		Pearsall, TX 78061			Ĺ		
	Principal occu Vice Preside	pation / Job title (See Instructions)		Employer (See Instructions Lone Star Bank	5)		
				LUNE SIAI DANK			
	Date	Full name of contributor out-of-state PA	AC (ID#:)		Amount of Contribution (\$)	÷1 000 00
	12/20/2023	Buchanan, John					\$1,000.00
		Contributor address; City; State; Zip Code					
		Uvalde, TX 78801					
┝	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	 ;)		
	СРА			Self	,		
⊢			I				

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 4/27 Rpt: 8/45 2 FILER NAME Filer ID (Ethics Commission Filers) 3 McLaughlin Jr., Don E. 00087820 Date 4 5 Full name of contributor out-of-state PAC (ID#: 7 Amount of Contribution (\$) 10/08/2023 Calvert, Joe \$500.00 6 Contributor address; City; State; Zip Code San Antonio, TX 78209 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Retired Self Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 09/15/2023 Cammack & Strong, P.C. \$350.00 Contributor address; City; State; Zip Code Austin, TX 78701 Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: 09/14/2023 Capt, Carper \$2,500.00 Contributor address; City; State; Zip Code Uvalde, TX 78801 Principal occupation / Job title (See Instructions) Employer (See Instructions) Owner Self Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 11/27/2023 \$300.00 Cargil, Steve Contributor address; City; State; Zip Code Uvalde, TX 78801 Principal occupation / Job title (See Instructions) Employer (See Instructions) Owner Cargil Produce Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 12/14/2023 \$300.00 Carnes, James Contributor address; City; State; Zip Code Uvalde, TX 78801 Principal occupation / Job title (See Instructions) Employer (See Instructions) Farmer Self

	The Instruc	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 5/27 Rpt: 9/45	
2	FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
	McLaughlin 、	Jr., Don E.			00087820	-
4	Date	5 Full name of contributor out-of-state PAC (ID#	t)	7	Amount of Contribution (\$)	
	12/03/2023	Casal, Henry				\$300.00
		6 Contributor address; City; State; Zip Code		1		
		San Antonio, TX 78209	_			
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Surveyor		Self			
	Date	Full name of contributor out-of-state PAC (ID#	:)		Amount of Contribution (\$)	
	12/29/2023 Charles, Olga					\$300.00
		Contributor address; City; State; Zip Code		1		
		Uvalde, TX 78801				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Community A	Ambassador	Uvalde Area Chamber			
	Date	Full name of contributor out-of-state PAC (ID#)		Amount of Contribution (\$)	
	09/29/2023	Chester, Dalton				\$2,500.00
		Contributor address; City; State; Zip Code		1		
		San Antonio, TX 78260	<u>.</u>			
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Retired		Retired			
	Date	Full name of contributor Out-of-state PAC (ID#	t:)	Γ	Amount of Contribution (\$)	
	12/29/2023	Clark, Derbigny				\$300.00
		Contributor address; City; State; Zip Code		1		
		Uvalde, TX 78801				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Rancher		Self			
	Date	Full name of contributor out-of-state PAC (ID#	:)	Γ	Amount of Contribution (\$)	
	08/23/2023	Conrad, Peter				\$50.00
		Contributor address; City; State; Zip Code		1		
		Uvalde, TX 78801	-			
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Retired		Retired			

F					—		
	The Instru	ction Guide explains how	I to complete this fo	orm.	1	Total pages Schedule A1: Sch: 6/27 Rpt: 10/45	
2	FILER NAME				3	Filer ID (Ethics Commissio	on Filers)
	McLaughlin					00087820	,
4	Date	5 Full name of contributor	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	09/22/2023	Davis, Virginia					\$500.00
		6 Contributor address; City; St	tate; Zip Code		1		
0	Dringing occ	Uvalde, TX 78801		C Employer (See Instruction)	$\overline{\Gamma}$		
δ	Retired	upation / Job title (See Instructions	,)	9 Employer (See Instructions Self	5)		
	Date	Full name of contributor	out-of-state PAC (ID#:)	Ī	Amount of Contribution (\$)	
	08/20/2023	Defend Texas Liberty					\$2,500.00
		Contributor address; City; St			1		
		San Antonio, TX 76087					
	Principal occu	upation / Job title (See Instructions	٤)	Employer (See Instructions	5)		
	Date	Full name of contributor	out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	08/18/2023	Dickie, Frankie	—				\$1,000.00
		Contributor address; City; St	tate; Zip Code		1		
		Uvalde, TX 78802					
	Principal occu	upation / Job title (See Instructions	s)	Employer (See Instructions	<u>-</u> 5)		
	Retired			Self			
F	Date	Full name of contributor	out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	08/28/2023	Dishman, C.M.	<u> </u>				\$400.00
		Contributor address; City; St	tate; Zip Code		1		
		Uvalde, TX 78801					
	Principal occu	upation / Job title (See Instructions	3)	Employer (See Instructions	5)		
	Dentist			Self			
F	Date	Full name of contributor	out-of-state PAC (ID#:)	Г	Amount of Contribution (\$)	
	08/30/2023	Double M Helicopter					\$250.00
		Contributor address; City; St	tate; Zip Code		1		
		Uvalde, TX 78802					
	Principal occu	upation / Job title (See Instructions	3)	Employer (See Instructions	5)		
\vdash			L				
1							

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	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 7/27 Rpt: 11/45	
2	FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
	McLaughlin .	Jr., Don E.			00087820	
4	Date	5 Full name of contributor out-of-state PAC (ID:	#:)	7	Amount of Contribution (\$)	
	12/21/2023	DuBose, Win				\$150.00
		6 Contributor address; City; State; Zip Code				
		Uvlde, TX 78801				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Mortgage		Chicago Title			
	Date	Full name of contributor out-of-state PAC (ID;	+:)		Amount of Contribution (\$)	
	09/07/2023	DuBose, Win				\$500.00
		Contributor address; City; State; Zip Code				
		Uvlde, TX 78801				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Mortgage		Chicago Title			
⊨	Date	Full name of contributor out-of-state PAC (ID;	#:)		Amount of Contribution (\$)	
	08/27/2023	Eason, Dan				\$1,000.00
		Contributor address; City; State; Zip Code				
		San Antonio, TX 78213				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	CEO		Uvalco Supply			
	Date	Full name of contributor out-of-state PAC (ID:	#:)		Amount of Contribution (\$)	
	12/18/2023	Eason, Dan				\$1,000.00
		Contributor address; City; State; Zip Code		1		
		San Antonio, TX 78213				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	CEO		Uvalco Supply			
	Date	Full name of contributor out-of-state PAC (ID	#:)		Amount of Contribution (\$)	
	12/30/2023	Elliott, Jan				\$300.00
		Contributor address; City; State; Zip Code				
		Uvalde, TX 78801				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Rancher		El Bigote Cattle Co.			

	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 8/27 Rpt: 12/45	
2	FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
	McLaughlin .	Jr., Don E.			00087820	ŕ
4	Date	5 Full name of contributor out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	
	08/28/2023	Elliott, Jannifer			()	\$2,500.00
		6 Contributor address; City; State; Zip Code				
		· · · · · · · · · · · · · · · · · · ·				
		Uvalde, TX 78801				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Self El Bigote Cattle Co.					
F	Date	Full name of contributor out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	10/04/2023	Ellis, Merrill				\$500.00
		Contributor address; City; State; Zip Code				
		;;;;				
		San Antonio, TX 78230				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Retired		Self			
F	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	10/10/2023	Eustace, Joseph (Mr.)			()	\$1,000.00
		Contributor address; City; State; Zip Code				
		Pleasanton, TX 78064				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Retired		Self			
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	12/15/2023	Faglie, Kelly				\$300.00
		Contributor address; City; State; Zip Code				
		Uvalde, TX 78801				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Owner		Faglie Construction			
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	12/29/2023	Garcia, Jamie				\$300.00
		Contributor address; City; State; Zip Code		1		
		Uvalde, TX 78801				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Retired		Retired			
Γ						

	The Instru	ction Guide explains how to con	plete this for	m.	1	Total pages Schedule A1: Sch: 9/27 Rpt: 13/45	
2	FILER NAME				3	Filer ID (Ethics Commissio	on Filers)
	McLaughlin .	Jr., Don E.				00087820	,
4	Date	5 Full name of contributor out-of	-state PAC (ID#:)	7	Amount of Contribution (\$)	
	12/21/2023	Gates, Gary					\$1,500.00
		6 Contributor address; City; State; Zip C					
		Richmond, TX 77406					
8		pation / Job title (See Instructions)	9	Employer (See Instructions	5)		
	Real Estate			Gatesco, Inc.			
	Date	Full name of contributor	-state PAC (ID#:)		Amount of Contribution (\$)	
	09/13/2023	Gates, Jim					\$500.00
		Contributor address; City; State; Zip C					
		Pearsall, TX 78061			Ļ		
		pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Vice Preside			Jourdanton State Bank			
	Date		-state PAC (ID#:)		Amount of Contribution (\$)	
	08/27/2023	Gilleland, Bruce					\$500.00
		Contributor address; City; State; Zip C	code				
		Uvalde, TX 78802					
⊢	Princinal occu	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u>		
	Farmer			Self	,		
╞	Date	Full name of contributor Out-of	-state PAC (ID#:)		Amount of Contribution (\$)	
	09/25/2023	Graham, Braden	-state PAC (ID#)			\$1,000.00
	03/23/2023		òdo				φ <u>1</u> ,000.00
		Contributor address; City; State; Zip C	oue				
		San Antonio, TX 78229					
⊢	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	I;)		
	Sales			Longhorn Recycling			
⊨	Date	Full name of contributor	-state PAC (ID#:)		Amount of Contribution (\$)	
	12/12/2023	Graves, Browder					\$300.00
		Contributor address; City; State; Zip C	code				
		Uvalde, TX 78801					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	;)		
	Owner			Graves Taxidermy			
			•				
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	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 10/27 Rpt: 14/45	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	McLaughlin .	Jr., Don E.			00087820	,
4	Date	5 Full name of contributor out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	
	08/23/2023	Graves, Browder				\$500.00
		6 Contributor address; City; State; Zip Code				
		Uvalde, TX 78801				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Owner		Graves Taxidermy			
╞	Date	Full name of contributor out-of-state PAC (ID#:)	Г	Amount of Contribution (\$)	
	08/28/2023	Grigg, Shirley				\$100.00
		Contributor address; City; State; Zip Code				
		Uvalde, TX 78801				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Retired	, , , , , , , , , , , , , , , , , , ,	Self	,		
⊨	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	11/30/2023	Haughey, Sam)			\$300.00
	11/00/2020	Contributor address; City; State; Zip Code				<i>4000.00</i>
		Contributor address, City, State, Zip Code				
		Uvalde, TX 78801				
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>і</u> 5)		
	Owner		Rancher			
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	10/03/2023	Hausser, Will)			\$500.00
	20,00,2020	Contributor address; City; State; Zip Code				+000.00
		San Antonio, TX 78209				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Retired		Retired			
⊨	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	09/13/2023	Hebdon, Jack)			\$500.00
	00/10/2020	Contributor address; City; State; Zip Code				<i>4000.00</i>
		Contributor address, City, State, Zip Code				
		San Antonio, TX 78209				
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	1 5)		
	President		Hebdon Family Investm		ts	
⊢	-		,			
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Th	ie Instru	ction Guide explains how to complete this f	orm.		Total pages Schedule A1: Sch: 11/27 Rpt: 15/45	
2 FIL	ER NAME			3	Filer ID (Ethics Commissio	on Filers)
Мс	Laughlin	Jr., Don E.			00087820	
4 Dat	te	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
12/	2/15/2023	Henderson, Johnn				\$150.00
		6 Contributor address; City; State; Zip Code		"		
		New Braunfels, TX 78130				
		upation / Job title (See Instructions)	9 Employer (See Instructions	s)		
Co	ontractor		Tim's South Texas			
Dat	te	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
12/	2/28/2023	Hessee, Harper				\$300.00
		Contributor address; City; State; Zip Code		"		
1						
		Uvalde, TX 78801				
Prir	ncipal occu	upation / Job title (See Instructions)	Employer (See Instructions			
Ow	wner		Chaparral Feeders, Inc.			
Dat	te	Full name of contributor out-of-state PAC (ID#:)	T	Amount of Contribution (\$)	
12/	2/29/2023	Huffines, Don				\$1,000.00
		Contributor address; City; State; Zip Code		"		
		Uvalde, TX 78801	•			
		ipation / Job title (See Instructions)	Employer (See Instructions	s)		
Re	eal Estate		Self			
Dat	te	Full name of contributor out-of-state PAC (ID#:)	Τ	Amount of Contribution (\$)	
12/	2/31/2023	Huffstutler, Kerry				\$300.00
		Contributor address; City; State; Zip Code		"		
		San Antonio, TX 78248	i			
		pation / Job title (See Instructions)	Employer (See Instructions	s)		
Re	ealtor		Compass			
Dat		Full name of contributor out-of-state PAC (ID#:)	Τ	Amount of Contribution (\$)	
08/	8/30/2023	Huffstutler, Mark				\$500.00
		Contributor address; City; State; Zip Code		1		
		Uvalde, TX 78801	•			
		ipation / Job title (See Instructions)	Employer (See Instructions	s)		
Ow	wner		Huff Air			

MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 12/27 Rpt: 16/45 2 FILER NAME Filer ID (Ethics Commission Filers) 3 McLaughlin Jr., Don E. 00087820 Date 4 5 Full name of contributor out-of-state PAC (ID#: 7 Amount of Contribution (\$) 10/05/2023 Hurt, Melinda \$500.00 6 Contributor address; City; State; Zip Code Dilley, TX 78017 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) self Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 08/24/2023 JDMI, LLC \$5,000.00 Contributor address; City; State; Zip Code Corpus Christi, TX 78427 Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: 09/14/2023 Jackson, Jennifer \$250.00 Contributor address; City; State; Zip Code Spring Branch, TX 78070 Principal occupation / Job title (See Instructions) Employer (See Instructions) Manager Longhorn Recycling Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 09/10/2023 \$100.00 Jackson, William Contributor address; City; State; Zip Code Uvalde, TX 78801 Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired Retired Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 08/23/2023 \$250.00 Jenkins, Bradley Contributor address; City; State; Zip Code Cypress, TX 77429 Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired Retired

	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 13/27 Rpt: 17/45	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
-	McLaughlin				00087820	
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	10/17/2023	Kahlig, Tina				\$100.00
		6 Contributor address; City; State; Zip Code		1		
		Hill Country Village, TX 78232				
8	Principal occu	ipation / Job title (See Instructions)	9 Employer (See Instructions)	5)		
	Retired	1				
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	12/06/2023	Kimble, Travis				\$300.00
		Contributor address; City; State; Zip Code		1		
		Uvalde, TX 78801				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)	5)		
	Landman	· · · · · · · · · · · · · · · · · · ·	TKN			
╞	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	09/07/2023	Kinsel, Karl	/		Amount of Contribution (+)	\$100.00
	00/01/2020			ł		Ψ100.00
		Contributor address; City; State; Zip Code				
		San Antonio, TX 78209				
	Princinal occu	upation / Job title (See Instructions)	Employer (See Instructions)	<u>ا</u>		
	Owner		Texas Wildlife Services	,		
			<u> </u>	$\overline{}$	Amount of Contribution (¢)	
	Date 11/23/2023	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	¢200.00
	11/23/2023	Koninek, Sherry				\$300.00
		Contributor address; City; State; Zip Code				
		Uvalde, TX 78801				
	Drincipal occi	upation / Job title (See Instructions)	Employer (See Instructions)	$\overline{\Gamma}$		
	Retired	pation / Job title (See instructions)	Uvalde CISD	5)		
				—		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	10/09/2023	Koontz, Bart				\$104.10
		Contributor address; City; State; Zip Code				
		San Antonio, TX 78212	,]			
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)	5)		
			Self			
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	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 14/27 Rpt: 18/45	
2	FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
	McLaughlin	Jr., Don E.			00087820	-
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	11/23/2023	Kothmann, Roy				\$300.00
		6 Contributor address; City; State; Zip Code		1		
		Uvalde, TX 78801				
		ipation / Job title (See Instructions)	9 Employer (See Instructions			
	Loan Officer		First State Bank of Uval	lde		
	Date	Full name of contributor out-of-state PAC (ID#:	·)	Γ	Amount of Contribution (\$)	
	09/14/2023	LEC Legacy, LTD				\$2,500.00
		Contributor address; City; State; Zip Code		1		
	Duin singl oppi	Uvalde, TX 78801		Ĺ		
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	5)		
╞	<u> </u>		<u> </u>	T		
	Date	Full name of contributor out-of-state PAC (ID#:	·)		Amount of Contribution (\$)	ቀጋ ድቦጋ ፍለ
	11/22/2023					\$2,602.54
		Contributor address; City; State; Zip Code				
		Uvalde, TX 78801				
┢	Principal occu	I Ipation / Job title (See Instructions)	Employer (See Instructions	5)		
	Co-owner		Laffere Farms			
F	Date	Full name of contributor out-of-state PAC (ID#:	·)	Γ	Amount of Contribution (\$)	
	09/20/2023	Langford, HT				\$100.00
		Contributor address; City; State; Zip Code		1		
L		Uvalde, TX 78801	- · · · · · · · · · · · · · · · · · · ·			
		upation / Job title (See Instructions)	Employer (See Instructions	5)		
	Owner		Langford Investments	1		
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	* 200.00
	12/28/2023	Light, George				\$300.00
		Contributor address; City; State; Zip Code				
		Uvalde, TX 78801				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Rancher		Self	-,		
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	The Instru	ction Guide explains how to	complete this fo	rm.	1	Total pages Schedule A1: Sch: 15/27 Rpt: 19/45	
2	FILER NAME				3	Filer ID (Ethics Commissio	on Filers)
	McLaughlin .	Jr., Don E.				00087820	,
4	Date	5 Full name of contributor	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	12/19/2023	Lockhart, Calvin					\$1,000.00
		6 Contributor address; City; State;	Zip Code		1		
		Dripping Springs, TX 78620					
8		pation / Job title (See Instructions)	2	9 Employer (See Instructions	5)		
	Self			Self			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	11/22/2023	Lozano, Hugo					\$300.00
		Contributor address; City; State;	Zip Code		1		
		Houston, TX 77056					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Owner			Q2 Technologies.com			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	09/26/2023	Martin, Jill					\$250.00
		Contributor address; City; State;	Zip Code		1		
		San Antonio, TX 78209					
		pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Retired			Self			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	09/14/2023	Maxey, Merlin					\$500.00
		Contributor address; City; State;	Zip Code		1		
		Uvalde, TX 78801					
		pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Owner			Maxey Energy			
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	12/04/2023	McCampbell, Thomas					\$150.00
		Contributor address; City; State;	Zip Code				
		Corpus Christi, TX 78401					
		pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Owner			McCampbell CPA			
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SCHEDULE	A1
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	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 16/27 Rpt: 20/45	
2	FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
	McLaughlin .	Jr., Don E.			00087820	,
4	Date	5 Full name of contributor out-of-state PAC (ID#	:)	7	Amount of Contribution (\$)	
	09/22/2023	McCord, Joseph				\$100.00
		6 Contributor address; City; State; Zip Code		"		
		Houston, TX 77007	i			
8		pation / Job title (See Instructions)	9 Employer (See Instruction	is)		
	Retired		Retired			
	Date	Full name of contributor Out-of-state PAC (ID#	:)		Amount of Contribution (\$)	
	10/26/2023	McElroy, Vann				\$500.00
		Contributor address; City; State; Zip Code				
		Livelde TV 70001				
\vdash	Dringing oog	Uvalde, TX 78801				
	Independent	pation / Job title (See Instructions)	Employer (See Instruction Self	IS)		
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	Date	Full name of contributor out-of-state PAC (ID#)		Amount of Contribution (\$)	<u>ቀ</u> ር 000 00
	09/08/2023	McFadin, Archie				\$5,000.00
		Contributor address; City; State; Zip Code				
		Uvalde, TX 78802				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instruction	is)		
	Farmer		McFadin Farms			
	Date	Full name of contributor out-of-state PAC (ID#	:)		Amount of Contribution (\$)	
	09/08/2023	McFadin, Archie				\$2,500.00
		Contributor address; City; State; Zip Code		1		
	<u> </u>	Uvalde, TX 78802		Ĺ		
	Principal occu Farmer	pation / Job title (See Instructions)	Employer (See Instruction Self	IS)		
╘				_		
	Date	Full name of contributor out-of-state PAC (ID#	:)		Amount of Contribution (\$)	#1 000 00
	12/20/2023	McFadin, Archie				\$1,000.00
		Contributor address; City; State; Zip Code				
		Uvalde, TX 78802				
⊢	Principal occu	I pation / Job title (See Instructions)	Employer (See Instruction	I)		
	Farmer		Self			
⊢						

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	The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 17/27 Rpt: 21/45
2	FILER NAME			3 Filer ID (Ethics Commission Filers)
	McLaughlin	Jr., Don E.		00087820
4	Date	5 Full name of contributor Out-of-state PAC (ID#:_)	7 Amount of Contribution (\$)
	08/02/2023	McLaughlin, Donald		\$50,000.00
		6 Contributor address; City; State; Zip Code		
		Uvalde, TX 78802		
8		pation / Job title (See Instructions)	9 Employer (See Instructions	s)
	President		DKM Enterprises	
	Date)	Amount of Contribution (\$)
	07/28/2023	McLaughlin, Donald		\$25.00
		Contributor address; City; State; Zip Code		
		Uvalde, TX 78802		
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	(s)
	President		DKM Enterprises	5)
╞	Date	Full name of contributor Out-of-state PAC (ID#:		Amount of Contribution (\$)
	08/02/2023	McNew, Steven)	\$50,000.00
	00,02,2020	Contributor address; City; State; Zip Code		
		Uvalde, TX 78802		
		pation / Job title (See Instructions)	Employer (See Instructions	s)
	Vice Preside	ent	DKM Enterprises	
	Date	Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)
	12/28/2023	Meyer, John M.		\$300.00
		Contributor address; City; State; Zip Code		
		Uvalde, TX 78801		
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)
	Law Enforce		Frio Co. Sheriff's Dept.	.,
╞	Date	Full name of contributor out-of-state PAC (ID#:	 	Amount of Contribution (\$)
	10/09/2023	Milstead, Larry)	\$1,000.00
		Contributor address; City; State; Zip Code		
		Uvalde, TX 78801		
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)
	Retired		Self	

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	The Instru	ction Guide explains how to comp	lete this fo	orm.	1	Total pages Schedule A1: Sch: 18/27 Rpt: 22/45	
2	FILER NAME				3	Filer ID (Ethics Commissi	on Filers)
	McLaughlin .	Jr., Don E.				00087820	
4	Date	5 Full name of contributor out-of-sta	ate PAC (ID#:)	7	Amount of Contribution (\$)	
	08/30/2023	Naggli, William					\$50.00
		6 Contributor address; City; State; Zip Cod					
		Uvalde, TX 78801					
8	Principal occu	pation / Job title (See Instructions)		9 Employer (See Instructions	;)		
	Retired			Self			
⊨	Date	Full name of contributor out-of-sta	ate PAC (ID#:)		Amount of Contribution (\$)	
	11/23/2023	Nanney, Les					\$300.00
		Contributor address; City; State; Zip Cod					
		Uvalde, TX 78801					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	;)		
	Owner			Self			
	Date	Full name of contributor out-of-sta	ate PAC (ID#:)		Amount of Contribution (\$)	
	08/29/2023	Nelson, Mary Ellen					\$2,500.00
		Corpus Christi, TX 78413					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	;)		
	Mom			Stay at home			
	Date	Full name of contributor 🗌 out-of-sta	ate PAC (ID#:)		Amount of Contribution (\$)	
	11/07/2023	Neutze, Jimmy					\$15,000.00
		Contributor address; City; State; Zip Cod	le				
		Uvalde, TX 78801					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Owner			Minitz			
	Date	Full name of contributor 🗌 out-of-sta	ate PAC (ID#:)		Amount of Contribution (\$)	
	12/22/2023	Nolasco, Rene					\$300.00
		Contributor address; City; State; Zip Cod	le				
		Uvalde, TX 78801					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Owner			Reno's Rental			

	The Instru	ction Guide explains how	v to complete this f	orm.	1	I Total pages Sch Sch: 19/27 Rp		
2	FILER NAME					B Filer ID (Ethics	s Commissi	on Filers)
	McLaughlin					00087820		.
4	Date	5 Full name of contributor	out-of-state PAC (ID#:		7	7 Amount of Contr	ribution (\$)	
	09/07/2023	Nordwick, Thomas						\$100.00
		6 Contributor address; City; St	State; Zip Code					
		Uvalde, TX 78801						
8		upation / Job title (See Instructions	3)	9 Employer (See Ins	structions)			
	Retired			Retired				
	Date	Full name of contributor	out-of-state PAC (ID#:_)	Amount of Contr	ribution (\$)	
	12/19/2023	Nunley, Richard						\$2,500.00
		Contributor address; City; St						
		Sabinal, TX 78881	-		<u> </u>			
		upation / Job title (See Instructions	s)	Employer (See Ins	structions)			
	Rancher			Self				
	Date	Full name of contributor	out-of-state PAC (ID#:_)	Amount of Contr	ribution (\$)	
	10/06/2023	Parman, Bryan						\$500.00
		Contributor address; City; St						
	<u></u>	San Antonio, TX 78248						
	Principal occu	upation / Job title (See Instructions	s)	Employer (See Ins				
L		 		Fulcrum Propert	ties			
	Date	Full name of contributor	out-of-state PAC (ID#:_			Amount of Contr	ribution (\$)	
	09/06/2023							\$250.00
		Contributor address; City; St						
		Uvalde, TX 78802						
	Principal occu	upation / Job title (See Instructions	<i>c)</i>	Employer (See Ins	structions)			
	Farmer		<i>)</i>	Self	50 000000			
╞		Full name of contributor				Amount of Cont	-ibution (¢)	
	Date 10/05/2023	Pinnacle Contracting Serv	out-of-state PAC (ID#:)	Amount of Contr	Πbution (Φ)	\$2,500.00
	10/03/2023							φ2,300.00
		Contributor address; City; St	tate; Zip Code					
		Kingsbury, TX 78638						
	Principal occu	upation / Job title (See Instructions	<u></u>	Employer (See Ins	structions)			
			<i>'</i>					
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	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 20/27 Rpt: 24/45	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	McLaughlin .				00087820	,
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	12/22/2023	Price, Robert				\$250.00
		6 Contributor address; City; State; Zip Code		1		
	Dringing occ	Uvalde, TX 78801				
ö	Retired	upation / Job title (See Instructions)	9 Employer (See Instructions Retired	3)		
⊨				—	to the forest instantion (f)	
	Date	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	ቀንደብ ባብ
	12/02/2023					\$250.00
		Contributor address; City; State; Zip Code				
		Uvalde, TX 78801				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	⊥ s)		
	Retired		Retired			
╞	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	12/01/2023	Rock, Tony				\$300.00
				1		
		Con Can, TX 78838				
		upation / Job title (See Instructions)	Employer (See Instructions	5)		
	Retired		US Navy			
	Date)	Γ	Amount of Contribution (\$)	
	12/21/2023	Rodriguez, Elsa				\$150.00
		Contributor address; City; State; Zip Code]		
		San Antonio, TX 78216				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u>د)</u>		
	Retured		Teacher	<i>)</i>		
╞	Date	Full name of contributor out-of-state PAC (ID#:		—	Amount of Contribution (\$)	
	11/25/2023	Rogers, Liz	/		Allount of Contribution (*)	\$100.00
	12,20,212	Contributor address; City; State; Zip Code		-		+=•
		Alpine, TX 79830				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	s)		
	Retired		Rancher			
			-			

The Instruction Guide explains how to complete this form. 1 Total pages Schedule A1: Sch: 21/27 Rpt: 25/45 2 FILER NAME McLaughlin Jr., Don E. 3 Filer ID (Ehics Commission Filers 00087820 4 Date 11/25/2023 5 Full name of contributor
McLaughlin Jr., Don E. 00087820 4 Date 5 Full name of contributor □ out-ef-state PAC (IDE:) 7 Amount of Contribution (\$) 11/25/2023 Rogers, Liz 5 Contributor address; City, State; Zip Code 7 Amount of Contribution (\$) 4 Date Alpine, TX 79830 9 Employer (See Instructions) Self 7 Amount of Contribution (\$) 8 Principal occupation / Job title (See Instructions) Retired 9 Employer (See Instructions) Self Amount of Contribution (\$) 11/16/2023 Full name of contributor out-state PAC (IDE:
McLaughlin Jr., Don E. 00087820 4 Date 5 Full name of contributor
11/25/2023 Rogers, Liz \$100 6 Contributor address; City; State; Zip Code \$101 Alpine, TX 79830 9 Employer (See Instructions) Self 7 Pate Full name of contributor
6 Contributor address; City; State; Zip Code Alpine, TX 79830 9 8 Principal occupation / Job title (See Instructions) Retired 9 Date Full name of contributor out-of-state PAC (ID#;) Rotan, Matthew Amount of Contribution (\$) Self 11/16/2023 Full name of contributor out-of-state PAC (ID#;) Rotan, TX 77024 Amount of Contribution (\$) Self Principal occupation / Job title (See Instructions) Partner Employer (See Instructions) Marble Capital LP Amount of Contribution (\$) S300 Date Full name of contributor out-of-state PAC (ID#;) Rubio, DJ Amount of Contribution (\$) S301 Principal occupation / Job title (See Instructions) Ratcher Employer (See Instructions) Rubio, DJ Amount of Contribution (\$) S301 Principal occupation / Job title (See Instructions) Ratcher Employer (See Instructions) Self Amount of Contribution (\$) S15,001 Principal occupation / Job title (See Instructions) Ratcher Employer (See Instructions) Self Amount of Contribution (\$) S15,001 Oate Full name of contributor
6 Contributor address; City; State; Zip Code Alpine, TX 79830 9 8 Principal occupation / Job title (See Instructions) Retired Date Full name of contributor
8 Principal occupation / Job title (See Instructions) Retired 9 Employer (See Instructions) Self Date Full name of contributor out-of-state PAC (ID#:) Rotan, Matthew Amount of Contribution (\$) 11/16/2023 Foul name of contributor out-of-state PAC (ID#:) Houston, TX 77024 Amount of Contribution (\$) Principal occupation / Job title (See Instructions) Partner Employer (See Instructions) Marble Capital LP Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#:) (Contributor address; City; State; Zip Code Amount of Contribution (\$) 12/09/2023 Rubio, DJ Contributor out-of-state PAC (ID#:) Contributor address; City; State; Zip Code Amount of Contribution (\$) Principal occupation / Job title (See Instructions) Rancher Employer (See Instructions) Self Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 08/27/2023 Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 08/27/2023 Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) Rubio, Susan Contributor address; City; State; Zip Code) Amount of Cont
8 Principal occupation / Job title (See Instructions) Retired 9 Employer (See Instructions) Self Date Full name of contributor out-of-state PAC (ID#:) Rotan, Matthew Amount of Contribution (\$) 11/16/2023 Foul name of contributor out-of-state PAC (ID#:) Houston, TX 77024 Amount of Contribution (\$) Principal occupation / Job title (See Instructions) Partner Employer (See Instructions) Marble Capital LP Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#:) (Contributor address; City; State; Zip Code Amount of Contribution (\$) 12/09/2023 Rubio, DJ Contributor address; City; State; Zip Code Amount of Contribution (\$) Principal occupation / Job title (See Instructions) Rancher Employer (See Instructions) Self Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 08/27/2023 Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 08/27/2023 Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 0ate Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 0ate C
8 Principal occupation / Job title (See Instructions) Retired 9 Employer (See Instructions) Self Date Full name of contributor out-of-state PAC (ID#:) Rotan, Matthew Amount of Contribution (\$) 11/16/2023 Foul name of contributor out-of-state PAC (ID#:) Houston, TX 77024 Amount of Contribution (\$) Principal occupation / Job title (See Instructions) Partner Employer (See Instructions) Marble Capital LP Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#:) (Contributor address; City; State; Zip Code Amount of Contribution (\$) 12/09/2023 Rubio, DJ Contributor address; City; State; Zip Code Amount of Contribution (\$) Principal occupation / Job title (See Instructions) Rancher Employer (See Instructions) Self Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 08/27/2023 Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 08/27/2023 Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 0ate Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 0ate C
Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 11/16/2023 Rotan, Matthew \$150 Contributor address; City; State; Zip Code Houston, TX 77024 Principal occupation / Job title (See Instructions) Employer (See Instructions) Partner Marble Capital LP Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) Rubio, DJ Sale 12/09/2023 Rubio, DJ Contributor address; City; State; Zip Code Amount of Contribution (\$) Bulverde, TX 78163 Employer (See Instructions) Amount of Contribution (\$) Rancher Self Amount of Contribution (\$) 08/27/2023 Full name of contributor out-of-state PAC (ID#:) 0ate Full name of contributor out-of-state PAC (ID#:) Principal occupation / Job title (See Instructions) Employer (See Instructions) Rancher
11/16/2023 Rotan, Matthew
11/16/2023 Rotan, Matthew
Contributor address; City; State; Zip Code Houston, TX 77024 Principal occupation / Job title (See Instructions) Partner Date Full name of contributor 12/09/2023 Rubio, DJ Contributor address; City; State; Zip Code Bulverde, TX 78163 Principal occupation / Job title (See Instructions) Bulverde, TX 78163 Principal occupation / Job title (See Instructions) Rancher Date OB/27/2023 Full name of contributor Out-of-state PAC (ID#:) Amount of Contribution (\$) Rancher Date OB/27/2023 Full name of contributor Out-of-state PAC (ID#:) Amount of Contribution (\$) Rubio, Susan Contributor address; City; State; Zip Code Cotulla, TX 78014 Principal occupation / Job title (See Instructions) Rancher Date Full name of contributor Out-of-state PAC (ID#:) Amount of Contribution (\$) Self Date
Houston, TX 77024 Employer (See Instructions) Principal occupation / Job title (See Instructions) Employer (See Instructions) Partner Marble Capital LP Date Full name of contributor out-of-state PAC (ID#:) 12/09/2023 Rubio, DJ Amount of Contribution (\$) Contributor address; City; State; Zip Code Salo Bulverde, TX 78163 Employer (See Instructions) Principal occupation / Job title (See Instructions) Employer (See Instructions) Rancher Self Date Full name of contributor out-of-state PAC (ID#:) 08/27/2023 Rubio, Susan Self Contributor address; City; State; Zip Code Amount of Contribution (\$) 08/27/2023 Rubio, Susan \$15,000 Contributor address; City; State; Zip Code \$15,000 Contributor address; City; State; Zip Code \$15,000 Cotulla, TX 78014 Employer (See Instructions) Principal occupation / Job title (See Instructions) Employer (See Instructions) Rancher Self Amount of Contribution (\$) Date Full name of contributor out-of-state PAC (ID#:
Principal occupation / Job title (See Instructions) Partner Employer (See Instructions) Marble Capital LP Date Full name of contributor out-of-state PAC (ID#:) 12/09/2023 Rubio, DJ Amount of Contribution (\$) 12/09/2023 Rubio, DJ \$300 Contributor address; City; State; Zip Code Amount of Contribution (\$) Bulverde, TX 78163 Employer (See Instructions) Rancher Employer (See Instructions) Self Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 08/27/2023 Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 08/27/2023 Fulbio, Susan Contributor address; City; State; Zip Code Amount of Contribution (\$) Principal occupation / Job title (See Instructions) Rancher Employer (See Instructions) Self Amount of Contribution (\$) Principal occupation / Job title (See Instructions) Rancher Employer (See Instructions) Self Amount of Contribution (\$) Date Full name of contributor Out-of-state PAC (ID#:) Amount of Contribution (\$)
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Contributor address; City; State; Zip Code Bulverde, TX 78163 Principal occupation / Job title (See Instructions) Employer (See Instructions) Rancher Full name of contributor
Principal occupation / Job title (See Instructions) Employer (See Instructions) Rancher Self Date Full name of contributor out-of-state PAC (ID#:) 08/27/2023 Rubio, Susan \$15,000 Contributor address; City; State; Zip Code Cotulla, TX 78014 \$15,000 Principal occupation / Job title (See Instructions) Employer (See Instructions) \$15,000 Rancher Cotulla, TX 78014 Employer (See Instructions) \$15,000 Principal occupation / Job title (See Instructions) Employer (See Instructions) \$15,000 Rancher Self Self Self Self Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$)
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Rancher Self Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$) 08/27/2023 Rubio, Susan \$15,000 Contributor address; City; State; Zip Code Contributor address; City; State; Zip Code \$15,000 Cotulla, TX 78014 Employer (See Instructions) Employer (See Instructions) Rancher Self Self Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$)
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08/27/2023 Rubio, Susan \$15,000 Contributor address; City; State; Zip Code Cotulla, TX 78014 Principal occupation / Job title (See Instructions) Employer (See Instructions) Rancher Self Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$)
Contributor address; City; State; Zip Code Cotulla, TX 78014 Principal occupation / Job title (See Instructions) Rancher Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$)
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Principal occupation / Job title (See Instructions) Employer (See Instructions) Rancher Self Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$)
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Rancher Self Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution (\$)
Date Full name of contributor Out-of-state PAC (ID#:) Amount of Contribution (\$)
12/01/2023 Ruehlman, David \$500
Contributor address; City; State; Zip Code
Austin TV 70746
Austin, TX 78746
Principal occupation / Job title (See Instructions) Employer (See Instructions) Operations Management
Principal occupation / Job title (See Instructions) Employer (See Instructions) Operations Manager Austin Eagle Management

	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 22/27 Rpt: 26/45	
2	FILER NAME			3	Filer ID (Ethics Commission 00087820	on Filers)
4	Date 10/05/2023	 5 Full name of contributor out-of-state PAC (ID#: Sasser, M. Stuart (Mr.) 6 Contributor address; City; State; Zip Code 		7	Amount of Contribution (\$)	\$1,000.00
		Corpus Christi, TX 78404				
8	Principal occu Retired	ipation / Job title (See Instructions)	9 Employer (See Instructions) Self	3)		
	Date 10/12/2023	Full name of contributor out-of-state PAC (ID#:_ Sasser, Trebes (Mr.) Contributor address; City; State; Zip Code San Antonio, TX 78209)		Amount of Contribution (\$)	\$500.00
	Principal occu President	upation / Job title (See Instructions)	Employer (See Instructions) Ridgemont Properties	<u> </u> 3)		
	Date 12/29/2023	Full name of contributor out-of-state PAC (ID#: Schultz, Dolly Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$300.00
	Principal occu Contract Ma	Uvalde, TX 78801 Ipation / Job title (See Instructions) nager	Employer (See Instructions) Schultz & Swift Services			
	Date 10/10/2023	Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$500.00
	Principal occu Realator	ipation / Job title (See Instructions)	Employer (See Instructions) Self	<u> </u> ३)		
	Date 09/22/2023	Full name of contributor out-of-state PAC (ID#:_ South Texas Cattle Marketing Contributor address; City; State; Zip Code Pearsall, TX 78061			Amount of Contribution (\$)	\$500.00
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions)	<u> </u> 3)		

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	The Instru	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 23/27 Rpt: 27/45	
2	FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
	McLaughlin .				00087820	
4	Date	5 Full name of contributor out-of-state PAC (ID#)	7	Amount of Contribution (\$)	
	11/22/2023	Speer, Melody				\$300.00
		6 Contributor address; City; State; Zip Code	·····	1		
_	Dringing Loop	Uvalde, TX 78801		<u> </u>		
8	Principal occu Owner	upation / Job title (See Instructions)	9 Employer (See Instructions Southwest Livestock Au		n	
	Date	Full name of contributor out-of-state PAC (ID#:	ť:)		Amount of Contribution (\$)	±1 000 00
	10/04/2023					\$1,000.00
		Contributor address; City; State; Zip Code				
		Natchitoches, LA 71457				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u>م</u>		
	Owner		Strawberry Creek Outfit		\$	
╞━	Date	Full name of contributor out-of-state PAC (ID#:	-		Amount of Contribution (\$)	
	11/09/2023	Full name of contributor out-of-state PAC (ID#: Stevens, David	:)			\$250.00
	11/00/2020	Contributor address; City; State; Zip Code				Ψ200.00
		Continuator address, Gity, State, Zip Code				
		Georgetown, TX 78633				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	s)		
	Retired		University of Texas			
F	Date	Full name of contributor out-of-state PAC (ID#)	Τ	Amount of Contribution (\$)	
	09/06/2023	Stroff, Michael				\$100.00
		Contributor address; City; State; Zip Code		·		
		Uvalde, TX 78801	- i			
		upation / Job title (See Instructions)	Employer (See Instructions	s)		
L	Retired		Retired			
	Date	Full name of contributor out-of-state PAC (ID#	:)	Ţ	Amount of Contribution (\$)	
	09/27/2023	Stroff, Michael				\$500.00
		Contributor address; City; State; Zip Code				
		Uvalde, TX 78801				
\vdash	Drincinal occi		Employor (See Instructions			
	Retired	<pre>upation / Job title (See Instructions)</pre>	Employer (See Instructions Retired	5)		
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The Instruction Guide explains how to complete this form.	1 Total pages Schedule A1: Sch: 24/27 Rpt: 28/45				
2 FILER NAME	3 Filer ID (Ethics Commission Filers)				
McLaughlin Jr., Don E.	00087820				
4 Date 5 Full name of contributor out-of-state PAC (ID#:)	7 Amount of Contribution (\$)				
11/18/2023 TNK Energy, LLC	\$750.00				
6 Contributor address; City; State; Zip Code	•				
Uvalde, TX 78801					
8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions)	3)				
Date Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)				
09/29/2023 Tarski, Michael	\$1,000.00				
Contributor address; City; State; Zip Code					
Fredericksburg, TX 78624					
Principal occupation / Job title (See Instructions) Employer (See Instructions)	5)				
Attorney Self					
Date Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)				
12/16/2023 Tarski, Paul	\$150.00				
Contributor address; City; State; Zip Code					
Uvalde, TX 78801					
Principal occupation / Job title (See Instructions) Employer (See Instructions)	5)				
Attorney Tarski Law Firm	,				
Date Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)				
10/05/2023 Thompson, Bill	\$500.00				
Contributor address; City; State; Zip Code					
San Antonio, TX 78261					
Principal occupation / Job title (See Instructions) Employer (See Instructions)	5)				
Retired					
Date Full name of contributor out-of-state PAC (ID#:)	Amount of Contribution (\$)				
08/23/2023 Toombs, Liza	\$50.00				
Contributor address; City; State; Zip Code					
Baton Rouge, LA 70817					
Principal occupation / Job title (See Instructions) Employer (See Instructions)					
Retired Retired	>/				

	The Instru	ction Guide explains how	to complete this f	orm.	1	Total pages Schedule A1: Sch: 25/27 Rpt: 29/45	
2	FILER NAME				3	Filer ID (Ethics Commissio	on Filers)
	McLaughlin .	Jr., Don E.				00087820	,
4	Date	5 Full name of contributor	out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	
	09/14/2023	Triesch, Johnny					\$2,000.00
		6 Contributor address; City; Sta	ate; Zip Code		1		
		San Antonio, TX 78220					
8		pation / Job title (See Instructions))	9 Employer (See Instructions	5)		
	Owner			Longhorn Recycling			
	Date	Full name of contributor	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	09/25/2023	Triesch, Taylor				\$1,000.00	
		Contributor address; City; Sta	ate; Zip Code		1		
		San Antonio, TX 78220					
	-	pation / Job title (See Instructions)	Employer (See Instructions	5)			
	Owner		Longhorn Recycling				
	Date	Full name of contributor)		Amount of Contribution (\$)		
	09/06/2023	Vaden, Sue					\$300.00
		Contributor address; City; Sta	ate; Zip Code		1		
		Uvalde, TX 78801					
	-	pation / Job title (See Instructions))	Employer (See Instructions	5)		
	Retired			Retired			
	Date	Full name of contributor	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	09/06/2023	Valtex Nursery					\$250.00
		Contributor address; City; Sta	ate; Zip Code		1		
		Moore, TX 78057		· · · · · · · · · · · · · · · · · · ·			
	Principal occu	pation / Job title (See Instructions))	Employer (See Instructions	5)		
	Date	Full name of contributor)		Amount of Contribution (\$)		
	07/28/2023	Wagnon, Robert					\$1,000.00
		Contributor address; City; Sta	1				
		Houston, TX 77030					
		pation / Job title (See Instructions)	5)				
L	CEO		е				

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	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 26/27 Rpt: 30/45	
2	FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
	McLaughlin				00087820	-
4	Date	5 Full name of contributor out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	
	08/03/2023	Wagnon, Robert				\$25.00
		6 Contributor address; City; State; Zip Code		1		
		Houston, TX 77030				
		upation / Job title (See Instructions)	9 Employer (See Instructions			
	CEO		Republic State Mortgage	e		
	Date	Full name of contributor out-of-state PAC (ID#:)	Γ	Amount of Contribution (\$)	
	08/23/2023	Wagnon, Robert				\$150.00
		Contributor address; City; State; Zip Code		1		
		Houston 77030 Namibia				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	s)		
	CEO		Republic State Mortgage	e		
	Date	Full name of contributor out-of-state PAC (ID#:_)	Γ	Amount of Contribution (\$)	
	07/31/2023	Williams, Richard				\$1,000.00
		Contributor address; City; State; Zip Code		1		
		Uvalde, TX 78802				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	5)		
	Owner		RKW Pipe			
	Date	Full name of contributor out-of-state PAC (ID#:_)	Γ	Amount of Contribution (\$)	
	12/04/2023	Willis, David				\$300.00
		Contributor address; City; State; Zip Code		ł		
		Uvalde, TX 78801				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	s)		
	Owner		Watermelons, Inc.			
	Date	Full name of contributor out-of-state PAC (ID#:_)	Γ	Amount of Contribution (\$)	
	12/31/2023	Willoughby, Robert				\$500.00
		Contributor address; City; State; Zip Code	1			
		San Antonio, TX 78209				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	retired		retired			
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	MONET	ARY POLITICAL CONTRIBUTIO		SCHEDULE A1			
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 27/27 Rpt: 31/45		
2	FILER NAME	Jr., Don E.		3	Filer ID (Ethics Commission Filers) 00087820		
4	Date 09/26/2023	 5 Full name of contributor out-of-state PAC (ID#: Wilson, Jon 6 Contributor address; City; State; Zip Code 	7	Amount of Contribution (\$) \$100.00			
8	Principal occu	New Braunfels, TX 78130 pation / Job title (See Instructions)	<u>ا</u>				
Ľ	Entreprenue		 9 Employer (See Instructions Self 	,,			
	Date 08/28/2023	Full name of contributor out-of-state PAC (ID#: Zimmerman, Darrell Contributor address; City; State; Zip Code)		Amount of Contribution (\$) \$100.00		
_	Principal occu	Uvalde, TX 78801 pation / Job title (See Instructions)	Employer (See Instructions	 5)			
	Retired		Self	,			

LOANS		SCHEDUL	ЕE								
The Instruction Guide explains how to complete this form.		ges Schedule E: 1 Rpt: 32/45									
2 FILER NAME McLaughlin Jr., Don E.											
⁴ TOTAL OF UNITEMIZED LOANS	\$	0.00									
5 Date of loan 7 Name of lender Out-of-state PAC (ID#:)	9 Loan Amount (\$)									
6 Is lender a financial institution? 8 Lender address; City; State; Zip Code		10 Interest Rate11 Maturity Date									
		II Maturity Date									
12 Principal occupation / Job title (See Instructions) 13 Employer (See Instructions))										
14 Description of Collateral 15 Check if personal funds were None	re deposited	l into political account (See Instructions)									
Image: marked system Image: marked system 16 GUARANTOR INFORMATION 17 Name of guarantor		19 Amount Guarantee	ed (\$)								
not applicable 18 Guarantor address; City; State; Zip Code											
20 Principal occupation 21 Employer (See Instructions))										

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		mmittee	Gift/Awards/Memorials Legal Services	Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Sift/Awards/Memorials Expense Printing Expense			Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
1	Total pages Schedule F1:	2	FILER NAM	E	-		-	3	Filer ID	(Ethics Commission Filers)
	Sch: 1/13 Rpt: 33/45			n Jr., Don E.					00087820	(
4	Date	5	Payee name							
	11/22/2023		Angel Light	& Signs						
6	Amount (\$)	7	Payee addre	ess; City;	State;	; Zip Co	de			
	\$243.56		293 FM 48	1						
			Uvalde, TX	78801						
8	PURPOSE	(a)					(b) Description			
ľ	OF	(4)	Advertising	ee Categories listed at	the top of this sch	iedule)		outsi	ide of Texas. Com	plete Schedule T.
	EXPENDITURE		/ avertising	Expense			Check if Austin	, TX,	, officeholder living	j expense
							Truck Decal			
9 Complete <u>ONLY</u> if direct Candidate/Officeholder name Office sourcespenditure to benefit C/OH					Office sou	ght		Office he	eld	
	Date		Payee name							
	12/06/2023		Angel Light	& Signs						
	Amount (\$)		Payee addre	ess; City;	State	; Zip Co	de			
	\$135.31		293 FM 48			, 1				
	\$100.01		200111110	-						
			Uvalde, TX	78801						
	PURPOSE OF	(a)	Category (S	see Categories listed at	the top of this sch	nedule)	(b) Description			
	EXPENDITURE		Advertising	Expense					ide of Texas. Com , officeholder living	
							Truck Decals		, onicendider hving	l exhense
	Complete ONLY if direct		Candidate/Off	iceholder name	(Office soug	tht		Office he	h
	expenditure to benefit C/Oł		Sundiductor On			511100 0004	jit			
_	Data									
	Date 08/08/2023		Payee name Axiom							
	Amount (\$)		Payee addre		State	; Zip Coo	de			
	\$300.00		800 W. 47t	h St.						
			Suite 200							
			Kansas Cit	y, MO 64112						
	PURPOSE	(a)	Category (S	ee Categories listed at	the top of this sch	nedule)	(b) Description			
	OF EXPENDITURE		Consulting						ide of Texas. Com	
								, TX,	, officeholder living	j expense
							Logo Study			
							-			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Off	iceholder name	C	Office sou	ght		Office he	eld
	superioration to benefit 0/01	•								

POLITICAL EXPENDITURES FROM POLITICAL	
CONTRIBUTIONS	

				EXPENDITU	RE CATEGOP	RIES FOR	вох	8(a)				
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment			Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contract Labor			ental Expense ontract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expe Travel in District Travel Out of District OTHER (enter a category not listed above			elated Expense	
	-			he Instruction C	Guide explains	how to co	nplete					
1	Total pages Schedule F1:	2	FILER NAME							Filer ID	(Ethics Cor	nmission Filers)
	Sch: 2/13 Rpt: 34/45		McLaughlin J	r., Don E.						00087820		
4	Date	5	Payee name									
	10/02/2023		Axiom									
6	Amount (\$)	7	Payee address	; City;	State;	Zip Co	de					
	\$1,582.00		800 W. 47th S	St.								
			Suite 200									
			Kansas City,	MO 64112								
8	PURPOSE	(a)					(h) D	escription				
0	OF	(a)	Category (See Advertising E		the top of this sch	edule)			outsic	de of Texas. Com	plete Schedule	т.
	EXPENDITURE		Auventising L	vhense			F	=		officeholder living		
							P	almcards				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Office	holder name	С	Dffice sou	ght			Office he	eld	
	Date		Payee name									
	10/05/2023		Axiom									
	Amount (\$)		Payee address	; City;	State:	Zip Co	de					
	\$160.49		800 W. 47th \$,							
	+=001.0		Suite 200									
				MO 64110								
			Kansas City,									
	PURPOSE OF	(a)	Category (See		the top of this sch	edule)	(b) D	escription		le of Texas. Com	plata Sabadula	т
	EXPENDITURE		Consulting Ex	pense			F	-		officeholder living		1.
							C	ם onsulting Tr			·	
								-				
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Office	holder name	С	Dffice sou	ght			Office he	eld	
⊢	Date		Payee name									
	10/16/2023		Axiom									
-	Amount (\$)		Payee address	; City;	State:	Zip Co	de					
	\$9,000.00		800 W. 47th S		State,	210 00	uc					
	\$3,000.00			JI.								
			Suite 200									
			Kansas City,	MO 64112								
	PURPOSE OF	(a)	Category (See		the top of this sch	edule)	(b) D	escription				
	EXPENDITURE		Consulting Ex	pense			Ļ	4		de of Texas. Com		Т.
								ug. Sept. & (officeholder living	expense	
							А		50			
-	Complete ONLY if direct	L	Candidate/Office	holder name		Office sou	thr			Office he	۱۹	
	expenditure to benefit C/OI			noider name	L L	2000 SUU						

POLITICAL EXPENDITURES FROM POLITICAL	
CONTRIBUTIONS	

			EX	PENDITURE CATEGO	ORIES FO	R BC	DX 8(a)				
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment			Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Gift/Awards/Memorials Expense Printing Expense Legal Services Salaries/Wages/Contract Labor			d/Rental Expense e /Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expens Travel in District Travel Out of District OTHER (enter a category not listed above)		
	-			struction Guide explain	s how to co	omple	ete this form.				
1	Total pages Schedule F1:	2	FILER NAME					3	Filer ID	(Ethics Commissio	on Filers)
	Sch: 3/13 Rpt: 35/45		McLaughlin Jr., D	on E.					00087820		
4	Date	5	Payee name								
	11/01/2023		Axiom								
6	Amount (\$)	7	Payee address;	City; Stat	e; Zip Co	ode					
	\$3,000.00		800 W. 47th St.								
			Suite 200								
			Kansas City, MO	64112							
8	PURPOSE	(a)		ories listed at the top of this s	chodulo)	(b)	Description				
	OF	ľ	Consulting Expen		chedule)	Ľ		outsi	de of Texas. Comp	olete Schedule T.	
	EXPENDITURE		5 1					, TX,	officeholder living	expense	
							Nov. Dues				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officehold	er name	Office sou	ught			Office he	ld	
	Date		Payee name								
	12/01/2023		Axiom								
	Amount (\$)		Payee address;	City; Stat	e; Zip Co	ode					
	\$3,000.00		800 W. 47th St.								
			Suite 200								
			Kansas City, MO	64112							
	PURPOSE	(a)	-	ories listed at the top of this s	abadula)	(b)	Description				
	OF		Consulting Exper		chedule)	()	·	outsi	de of Texas. Comp	plete Schedule T.	
	EXPENDITURE						Check if Austin	, TX,	officeholder living	expense	
							Dec. Dues				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officehold	er name	Office sou	ught			Office he	ld	
	Date		Payee name								
	12/04/2023		Axiom								
-	Amount (\$)		Payee address;	City; Stat	e; Zip Co	ode					
	\$2,864.00		800 W. 47th St.	-	·						
			Suite 200								
			Kansas City, MO	64112							
-	PURPOSE	(m)				(h)	Description				
	OF	(a)		ories listed at the top of this s	chedule)	(0)		outsi	de of Texas. Com	plete Schedule T.	
	EXPENDITURE		Printing Expense						officeholder living		
						1	Mailers				
	Complete ONLY if direct		Candidate/Officehold	er name	Office sou	ught			Office he	ld	
	expenditure to benefit C/OI	H									

	EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Gift/Awards nmittee Legal Servio	age Expense 'Memorials Expense	Office Ove Polling Exp Printing Ex Salaries/W	pense ages/Contract Labor		Travel in District Travel Out of Dist	quipment & Related Expense		
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID	(Ethics Commission Filers)		
	Sch: 4/13 Rpt: 36/45		McLaughlin Jr., Don	E.				00087820			
4	Date	5	Payee name				I				
	10/03/2023		Broken Arrow Wear								
6	Amount (\$)	7	Payee address; C	ty; State;	Zip Co	le					
-	\$927.25	Ľ	4404 Merle Hay Rd.		p 00						
	+011120										
			Des Moines, IA 503	10							
8	DUDDOCE					(h) =					
°	PURPOSE OF	(a)	Category (See Categorie Advertising Expense		edule)	(b) Description	outsi	de of Texas. Comp	lete Schedule T.		
	EXPENDITURE							officeholder living			
						T-Shirts					
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder	name C	Office sou	ght		Office he	ld		
	Date		Payee name								
	11/09/2023		Broken Arrow Wear								
_	Amount (\$)	┢	Payee address; C	ty; State;	Zip Co	de					
	\$657.55		4404 Merle Hay Rd.	-,	1						
			Des Moines, IA 503	10							
	PURPOSE OF	(a)	Category (See Categorie		edule)	(b) Description	outoi	de of Toylog, Comp	slata Cabadula T		
	EXPENDITURE		Advertising Expense	<u>)</u>				de of Texas. Comp officeholder living			
						T-Shirts					
	Complete ONLY if direct	(Candidate/Officeholder	name C	Office sou	ght		Office he	ld		
	expenditure to benefit C/OI	Н									
	Date		Payee name								
	08/08/2023		Delgado, Carlos								
_	Amount (\$)		Payee address; C	ty; State;	Zip Co	de					
	\$245.00		1941 E FM 2369	.,,							
			Uvalde, TX 78801		i						
	PURPOSE OF	(a)	Category (See Categorie		edule)	(b) Description	ot- '	de of Toylor Or	slata Cabadula T		
	EXPENDITURE		Advertising Expense	9				de of Texas. Comp officeholder living			
						Truck Decals		oniceriolder innig	capende		
-	Complete ONLY if direct	<u>ر</u>	Candidate/Officeholder	name C	Office sou	aht		Office he	ld		
	expenditure to benefit C/Oł					g		Childe He			
-											

	EXPENDITURE CATEGORIES FOR BOX 8(a)											
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		nmittee	Legal Services	e Expense emorials Expense	Office Ove Polling Ex Printing Ex Salaries/W	erhead pense kpens /ages	e /Contract Labor		Transportation E Travel in District Travel Out of Dis		
1	Total pages Schedule F1:	2	FILER NAME	Ξ					3	Filer ID	(Ethics Commission Filer	rs)
	Sch: 5/13 Rpt: 37/45		McLaughlir							00087820		
4	Date	5	Payee name									
	08/09/2023		Delgado, C	arlos								
6	Amount (\$)	7	Payee addre	ss; City	; State	; Zip Co	de					
	\$245.00		1941 E FM	2369								
			Uvalde, TX	78801								
	DUDDOCE	(0)					(h)	D :				
8	PURPOSE OF	(a)			sted at the top of this sch	nedule)	(a)	Description	outsi	de of Teyas, Com	plete Schedule T.	
	EXPENDITURE		Advertising	Expense						officeholder living		
								Truck Decals				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Off	iceholder na	me (Office sou	ght			Office he	eld	
	Date		Payee name									
	08/31/2023		Delgado, C	arlos								
	Amount (\$)		Payee addre	ss; City	State	; Zip Co	de					
	\$496.00		1941 E FM			,						
	φ+50.00		1941 C 1 101	2000								
			Uvalde, TX	78801								
	PURPOSE	(a)	Category (S	ee Categories li	ategories listed at the top of this schedule)			Description				
	OF EXPENDITURE		Event Expense					Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense				
									officeholder living	j expense		
								Candy for ev	ent			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Off	iceholder na	me (Office sou	ght			Office he	eld	
		_										
	Date		Payee name									
	08/31/2023		Delgado, C	arlos								
	Amount (\$)		Payee addre	ss; City	; State	; Zip Co	de					
	\$167.00		1941 E FM	2369								
			Uvalde, TX	78801								
	PURPOSE	(a)	Category (S	ee Categories li	sted at the top of this sch	nedule)	(b)	Description				
	OF EXPENDITURE		Advertising	Expense							plete Schedule T.	
	LAFENDITORE								, TX,	officeholder living) expense	
								T-Shirts				
	Complete ONLY if direct		Candidate/Off	iceholder na	me (Office sou	ght		_	Office he	eld	1
	expenditure to benefit C/OI	1										

	EXPENDITURE CATEGORIES FOR BOX 8(a)												
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Fees Food/ Gift/A nmittee Legal	Expense Beverage Expense wards/Memorials Exper Services Instruction Guide e		Office Ove Polling Exp Printing Ex Salaries/W	rhead/ pense pense (ages/	Contract Labor		Travel in District Travel Out of Dis	quipment & Related Expense		
1	Total pages Schedule F1:	2	FILER NAME						3	Filer ID	(Ethics Commission Filers	;)	
	Sch: 6/13 Rpt: 38/45		McLaughlin Jr.,	Don E.						00087820			
4	Date	5	Payee name										
	09/14/2023		Delgado, Carlos										
6	Amount (\$)	7	Payee address;	City;	State;	Zip Co	de						
	\$185.00		1941 E FM 2369)									
			Uvalde, TX 788)1									
8	PURPOSE	(a)	Category (See Cate	agazian listed at the tan	of this colu	e dule)	(b)	Description					
-	OF		Event Expense	egones insted at the top	of this sche	edule)	,		outsio	de of Texas. Com	plete Schedule T.		
	EXPENDITURE						İ	Check if Austin	expense				
								Candy for giv	eav	vay			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeho	der name	C	Office sou	ght			Office he	eld		
-	Date		Payee name									_	
	09/18/2023		Payee name Delgado, Carlos										
					Ctata	710 00	al a						
	Amount (\$)		Payee address;	City;	State;	Zip Co	ue						
	\$170.00		1941 E FM 2369)									
			Uvalde, TX 788)1									
	PURPOSE	(a)	Category (See Cat	egories listed at the top	of this sche	edule)	(b)	Description					
	OF EXPENDITURE		Advertising Exp	ense					plete Schedule T.				
						ļ			TX, officeholder living expense				
			Truck Magne			iets							
			Candidate/Officeholder name Office sought										
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeho	der name	Ĺ	JTTICE SOU	gnt			Office he	eia		
_	Data	-											
	Date 09/25/2023		Payee name										
			Delgado, Carlos										
	Amount (\$)		Payee address;	City;	State;	Zip Co	de						
	\$601.70		1941 E FM 2369)									
			Uvalde, TX 788)1									
	PURPOSE	(a)	Category (See Cat	egories listed at the top	of this sche	edule)	(b)	Description					
	OF EXPENDITURE	Event Expense									plete Schedule T.		
										officeholder living	expense		
								Snow Cone S	500	al			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeho	der name	C	Office sou	ght			Office he	eld		
		•											

	EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expens Fees Food/Bevera Gift/Awards/N ittee Legal Service	se Loa Off ge Expense Pol femorials Expense Prii	an Repayment/Reimbi ice Overhead/Rental B lling Expense nting Expense laries/Wages/Contract	ursement Expense t Labor	Travel in District Travel Out of Dis	quipment & Related Expense				
1	Total pages Schedule F1:	ILER NAME			3	Filer ID	(Ethics Commission Filers)				
	Sch: 7/13 Rpt: 39/45	IcLaughlin Jr., Don	E.			00087820	· · ·				
4	Date 10/04/2023	ayee name Delgado, Carlos									
6	Amount (\$) \$250.00	ayee address; Cit 941 E FM 2369 Ivalde, TX 78801	y; State; Zi	p Code							
8	PURPOSE OF EXPENDITURE	ategory (See Categories Event Expense	listed at the top of this schedule	Che	eck if travel out	tside of Texas. Com X, officeholder living Icial					
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	ndidate/Officeholder n	ame Offic	e sought		Office he	ld				
	Date	ayee name									
	10/10/2023	Delgado, Carlos									
	Amount (\$) \$700.00	ayee address; Cit 941 E FM 2369 Ivalde, TX 78801	y; State; Zi	p Code							
	PURPOSE OF EXPENDITURE		listed at the top of this schedule	Che	eck if travel out	tside of Texas. Comp X, officeholder living					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	ndidate/Officeholder n	ame Offic	e sought		Office he	ld				
	Date	ayee name									
	07/17/2023	irst State Bank of U	valde								
	Amount (\$) \$265.02	ayee address; Cit 00 E. Nopal	y; State; Zi	p Code							
		Ivalde, TX 78801									
	PURPOSE OF EXPENDITURE	ategory (See Categories accounting/Banking	listed at the top of this schedule		eck if travel out	tside of Texas. Com X, officeholder living					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	ndidate/Officeholder n	ame Offic	e sought		Office he	eld				

POLITICAL EXPENDITURES FROM POLITICAL
CONTRIBUTIONS

	EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		mittee Legal Services	e Expense emorials Expense	Office Over Polling Exp Printing Ex Salaries/W	ense ages/Contrad	l Expense ct Labor		Travel in District Travel Out of Dist	quipment & Related Exp	
Ļ		-		tion Guide explains h	how to con	ipiete trus		_			、
1	Total pages Schedule F1: Sch: 8/13 Rpt: 40/45		FILER NAME McLaughlin Jr., Don E						Filer ID 00087820	(Ethics Commission	n Filers)
4	Date	5	Payee name								
	08/21/2023		Jet Press								
6	Amount (\$) \$102.84		Payee address; City 245 N. Getty St. Uvalde, TX 78801	; State;	Zip Coo	le					
8	PURPOSE OF EXPENDITURE		Category _{(See Categories li} Advertising Expense	sted at the top of this sche	edule)		neck if travel o	ТΧ,	le of Texas. Comp officeholder living		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł		andidate/Officeholder na	.me O)ffice souç	ht			Office he	ld	
	Date		Payee name								
	10/24/2023		Jet Press								
	Amount (\$) \$81.19		Payee address; City 245 N. Getty	; State;	Zip Coo	le					
			Uvalde, TX 78801								
	PURPOSE OF EXPENDITURE		Category _{(See Categories li} Printing Expense	sted at the top of this sche	edule)	Ch	neck if travel o	, TX,	le of Texas. Comp officeholder living		
	Complete ONLY if direct expenditure to benefit C/OF		andidate/Officeholder na	me O	Office soug	ht			Office he	ld	
	Date		Payee name								
	10/24/2023		Jimenez, Jamie								
	Amount (\$) \$1,500.00		Payee address; City 1941 E FM 2369	; State;	Zip Coo	le					
			Uvalde, TX 78801								
	PURPOSE OF EXPENDITURE		Category _{(See Categories li} Advertising Expense	sted at the top of this sche	edule)	Ch	neck if travel o neck if Austin,	TX,	le of Texas. Comp officeholder living et Radio Ad	expense	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder na	me O	Office soug	ht			Office he	ld	

POLITICAL EXPENDITURES FROM POLITICAL
CONTRIBUTIONS

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	, _ I Cor	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains	Office Ove Polling Ex Printing E Salaries/V	erhea kpense xpens Vages	se s/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)		
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (Ethics Commission Filers)		
	Sch: 9/13 Rpt: 41/45		McLaughlin Jr., Don E.					00087820		
4	Date	5	Payee name							
	12/13/2023		Laredo Morning Times							
6	Amount (\$)	7	Payee address; City; State	; Zip Co	ode					
	\$500.00		5711 McPherson							
			Suite 230A							
			Laredo, TX 78041							
8	PURPOSE	(a)	Category (See Categories listed at the top of this sch		(b)	Description				
	OF		Advertising Expense	ieuuie)	l`´		outsi	de of Texas. Complete Schedule T.		
	EXPENDITURE					Check if Austin	, TX,	officeholder living expense		
						Ad in paper				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officeholder name	Office sou	ught			Office held		
	Date		Payee name							
	12/18/2023		Lena , Garcia							
	Amount (\$)		Payee address; City; State	; Zip Co	ode					
	\$500.00		25 County Rd. 429							
			-							
			Uvalde, TX 78801							
	PURPOSE OF	(a)	Category (See Categories listed at the top of this sch	nedule)	(b)	Description				
	EXPENDITURE		Advertising Expense					de of Texas. Complete Schedule T. , officeholder living expense		
						Ad in Uvalde				
_	Complete ONLY if direct		Candidate/Officeholder name		Office held					
	expenditure to benefit C/OF	4		Office sou	3					
-	Date		Payee name							
	10/06/2023		McLaughlin, Don							
	Amount (\$)			; Zip Co	nde					
	\$2,185.00		1941 E. FM 2369	, בוף פנ	Juc					
	\$2,200.00		10112111112000							
			Uvalde, TX 78801							
	PURPOSE	(a)	Category (See Categories listed at the top of this sch	nedule)	(b)	Description				
	OF EXPENDITURE		Event Expense					de of Texas. Complete Schedule T.		
	-							officeholder living expense		
						Casheu chec	יה נו	give to band for fullulaiser		
_	Complete ONIL V if direct	Ļ	Candidate/Officabalder asma	Office com				Office held		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name	Office sou	igiit			Onice neid		
_										

	Advertising Expense Accounting/Banking Consulting 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: 10/13 Rpt: 42/45	McLaughlin Jr., Don E. 00087820
Δ	Date	5 Payee name
	10/16/2023	One Water in Tx. Hill Country
6	Amount (\$) \$15.00	7 Payee address; City; State; Zip Code 505 E. Huntland Dr. Suite 530 Austin 78752 Namibia
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 Ticket to Conference
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	12/13/2023	Remington Research Group
	Amount (\$)	Payee address; City; State; Zip Code
	\$7,500.00	800 W. 47th St. Kansas City, MO 64112
	PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Polling Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Primary Survey
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	09/27/2023	US Post Office
	Amount (\$) \$66.00	Payee address; City; State; Zip Code 103 S. Getty
		Uvalde, TX 78801
	PURPOSE OF EXPENDITURE	 (a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Stamps
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held

	EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Fees Food/E Gift/Av nmittee Legal S	Expense leverage Expense vards/Memorials Expense Services nstruction Guide expla	Office Ove Polling Ex Printing E Salaries/V	xpense Wages/Contract Labor		Solicitation/Fundraising Exp Transportation Equipment & Travel in District Travel Out of District OTHER (enter a category no	Related Expense		
1	Total pages Schedule F1:	2				-	3	Filer ID (Ethics C	Commission Filers)		
	Sch: 11/13 Rpt: 43/45		McLaughlin Jr., I	Don E.				00087820			
4	Date	5	Payee name								
	10/03/2023		Uvalde Eagle Ne	ewspaper							
6	Amount (\$)	7	Payee address;	City; St	ate; Zip Co	ode					
	\$200.00		25 County Rd. 4	29							
			Uvalde, TX 7880	1							
8	PURPOSE	(a)	Category (See Cate	gories listed at the top of this	s schedule)	(b) Description					
	OF EXPENDITURE		Advertising Expe		,			de of Texas. Complete Sched	lule T.		
							ι, TΧ,	officeholder living expense			
						Ad in paper					
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officehol	der name	Office sou	ught		Office held			
	Date		Payee name								
	08/23/2023		Vantage ROI, LLC								
	Amount (\$)		Payee address;	City; St	ate; Zip Co	ode					
	\$3,750.00		PO Box 340836								
			Austin, TX 78734	1							
	PURPOSE	(a)	Category (See Cate	gories listed at the top of this	s schedule)	(b) Description					
	OF EXPENDITURE		Consulting Expe	nse				tside of Texas. Complete Schedule T.			
							, TX, officeholder living expense				
			Oppone				Opponent Reseaarch				
	Complete ONLY if direct		Candidate/Officehol	der name	Office held						
	expenditure to benefit C/Oł		andidate/Onicerior		Office sou	agin		Office field			
_	Date		Payee name								
	10/23/2023		Vantage ROI, LL	C							
	Amount (\$)		Payee address;		ate; Zip Co	ode					
	\$6,426.35		PO Box 340836	City, St	ale, Zip Co	Jue					
	φ0,420.33		FO BUX 340630								
			Austin, TX 78734	1							
	PURPOSE	(a)	Category (See Cate	gories listed at the top of this	s schedule)	(b) Description					
	OF		Consulting Expe		,		outsi	de of Texas. Complete Sched	lule T.		
	EXPENDITURE		0 1					officeholder living expense			
						Opponent Re	esea	arch			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officehol	der name	Office sou	ught		Office held			

			EXPENDITU	RE CATEGOR	RIES FOR	BOX 8(a)						
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expe Gift/Awards/Memorial nmittee Legal Services The Instruction C	s Expense	Office Ove Polling Exp Printing Ex Salaries/W	oense ages/Contract Labor		Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)				
1	Total pages Schedule F1:	2	FILER NAME				3	Filer ID (Ethics Commission Filers)				
	Sch: 12/13 Rpt: 44/45		McLaughlin Jr., Don E.					00087820				
4	Date	5	Payee name				<u> </u>					
	11/22/2023		Vantage ROI, LLC									
6	Amount (\$)	7	Payee address; City;	State:	; Zip Co	le						
	\$3,490.74		PO Box 340836									
			Austin, TX 78734									
8	PURPOSE	(2)				(b) Decemination						
°	OF	(a)	Category (See Categories listed at Consulting Expense	the top of this sch	edule)	(b) Description	outsi	ide of Texas. Complete Schedule T.				
	EXPENDITURE					Check if Austin	, TX,	, officeholder living expense				
						Opposition R	ese	earch				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name	C	Office sou	ht		Office held				
	Date		Payee name									
	08/09/2023		Vista Print									
	Amount (\$)		Payee address; City; State; Zip Code									
	\$1,187.70		95 Hayden Ave.									
			Lexington, MD 02421									
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at Advertising Expense	the top of this sch	edule)		, TX,	ide of Texas. Complete Schedule T. , officeholder living expense S				
_	Complete ONLY if direct		Candidate/Officeholder name		Iht	Office held						
	expenditure to benefit C/OI	Н										
⊨	Date		Payee name									
	09/14/2023		Vista Print									
	Amount (\$)		Payee address; City;	State	; Zip Co	le						
	\$100.65		95 Hayden Ave.	Olule,	, zip 00							
	\$100.00		so hayden / we.									
			Lexington , MD 02421									
	PURPOSE OF	(a)	Category (See Categories listed at		iedule)	(b) Description						
	EXPENDITURE		Office Overhead/Rental E>	kpense			I, TX	ide of Texas. Complete Schedule T. , officeholder living expense S				
-	Complete ONLY if direct	L(Candidate/Officeholder name	Office sou	Iht		Office held					
	expenditure to benefit C/OI											
-												

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	/ - al Con	Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expe Imittee Legal Services The Instruction Guide		Office Ove Polling Exp Printing Ex Salaries/W	pense ages/Contract Lab	ense bor		Travel in District Travel Out of Dis	quipment & Related Expense
1	Total pages Schedule F1:	2	FILER NAME					3	Filer ID	(Ethics Commission Filers)
	Sch: 13/13 Rpt: 45/45		McLaughlin Jr., Don E.						00087820	
4	Date	5	Payee name							
	08/29/2023		Vistago Print							
6	Amount (\$)		Payee address; City;	State;	; Zip Co	de				
	\$5,842.52		6706 Lohman Ford Rd.							
			Lago Vista, TX 78645							
8	PURPOSE	(a)	Category (See Categories listed at the top	p of this sch	edule)	(b) Description				
	OF EXPENDITURE		Advertising Expense							plete Schedule T.
						Yard Sig		IX,	officeholder living	expense
						raid Olg	giis			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		andidate/Officeholder name	C	Office sou	ght			Office he	eld
	Date		Payee name							
	08/30/2023		Vistago Print							
	Amount (\$)		Payee address; City;	State;	; Zip Co	de				
	\$214.29		6706 Lohman Ford Rd.		•					
			Lago Vista, TX 78645							
	PURPOSE OF		Category (See Categories listed at the top	p of this sch	edule)	(b) Description				
	EXPENDITURE		Advertising Expense						le of Texas. Com officeholder living	plete Schedule T.
						Car Mag		17,		expense
							9.1010			
	Complete ONLY if direct		andidate/Officeholder name		Dffice sou	nht			Office he	ald
	expenditure to benefit C/OI					<u></u>			01100110	
_	Date		Payee name							
	09/18/2023		Vistago Print							
				Stata	; Zip Co	do				
	Amount (\$) \$4,394.65		Payee address; City; 6706 Lohman Ford Rd.	State,	, zip co	ue				
	\$4,394.05		0700 Loninan Folu Ru.							
			Lago Vista, TX 78645							
	PURPOSE OF		Category (See Categories listed at the top	p of this sch	edule)	(b) Description				
	EXPENDITURE		Advertising Expense						le of Texas. Com officeholder living	plete Schedule T.
						Yard Sig		17,		expense
-	Complete ONLY if direct		andidate/Officeholder name	ſ	Office sour	aht			Office he	ald
	expenditure to benefit C/Oł				2.1100 0000	g···			Chief In	
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