#### FORM MPAC MONTHLY FILING GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT **COVER SHEET PG 1** 2 Total pages filed: The MPAC Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00058303 3 COMMITTEE NAME **OFFICE USE ONLY** Exotic Wildlife Association Political Action Committee Date Received **ELECTRONICALLY FILED** 02/05/2024 COMMITTEE ADDRESS / PO BOX: APT / SUITE #: CITY: STATE: ZIP **ADDRESS** 231 Thompson Drive Change of Address Kerrville, TX 78028 Date Hand-delivered or Date Postmarked MS / MRS / MR **CAMPAIGN FIRST** MI **TREASURER** Receipt # Amount Charly NAME Date Processed **NICKNAME SUFFIX** LAST Date Imaged Seale CAMPAIGN APT / SUITE #; STREET ADDRESS (NO PO BOX PLEASE); CITY; STATE; ZIP CODE **TREASURER** 231 Thompson Drive STREET **ADDRESS** (Residence or Business) Kerrville, TX 78028 **CAMPAIGN** STREET ADDRESS OR PO BOX: APT / SUITE #; CITY: STATE: ZIP CODE **TREASURER** 231 Thompson Drive MAILING **ADDRESS** Change of Address Kerrville, TX 78028 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER PHONE** (830) 315-7761 REPORT TYPE 10th day after campaign X Monthly Dissolution (Attach PAC-DR) treasurer termination 10 MONTHLY January 5 April 5 July 5 October 5 REPORT FILING **DEADLINE** February 5 May 5 August 5 November 5 March 5 September 5 December 5 June 5 11 PERIOD Month Day Year Month Day Year **THROUGH COVERED** 12/26/2023 01/25/2024

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### MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

### FORM MPAC COVER SHEET PG 2

| 12 COMMITTEE NAME                                                   |                                                                                         |                          |                                                                                                               | 13 Filer   | ID        | (Ethics Commission Filers) |
|---------------------------------------------------------------------|-----------------------------------------------------------------------------------------|--------------------------|---------------------------------------------------------------------------------------------------------------|------------|-----------|----------------------------|
| Exotic Wildlife Association Political Action Committee              |                                                                                         |                          | 0005                                                                                                          | 58303      |           |                            |
| 14 COMMITTEE<br>ACTIVITY                                            | Candidates  (Identify by name or, if applicable, classify by party.)                    | A. Supported             | Don McLaughlin State Repres                                                                                   | sentativ   | е         |                            |
| (Attach lists on plain paper to complete this report if necessary.) |                                                                                         | B. Opposed               |                                                                                                               |            |           |                            |
|                                                                     | Measures (Describe by date and location of election and nature of issue.)               | A. Supported             | 1                                                                                                             |            |           |                            |
|                                                                     |                                                                                         | B. Opposed               |                                                                                                               |            |           |                            |
|                                                                     | Officeholders     Assisted     (Identify by name or, if applicable, classify by party.) |                          |                                                                                                               |            |           |                            |
| L5 CONTRIBUTION<br>TOTALS                                           | PLEDGES, LOANS, CONTRIBUTIONS N                                                         | OR GUARAN<br>NADE ELECTI | CONTRIBUTIONS (OTHER THAN ITEES OF LOANS, OR RONICALLY) higher itemization threshold                          |            | \$        | 0.00                       |
|                                                                     | 2. TOTAL POLITICAL (OTHER THAN PLE                                                      |                          | BUTIONS<br>S, OR GUARANTEES OF LOANS)                                                                         |            | \$        | 340.88                     |
| EXPENDITURE<br>TOTALS                                               | 3. TOTAL UNITEMIZE                                                                      | D POLITICAL              | EXPENDITURES                                                                                                  |            | \$        | 0.00                       |
|                                                                     | 4. TOTAL POLITICA                                                                       | AL EXPENDI               | TURES                                                                                                         |            | \$        | 1,000.00                   |
| CONTRIBUTION<br>BALANCE                                             | 5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD  |                          | DAY                                                                                                           | \$         | 65,108.92 |                            |
| OUTSTANDING<br>LOAN TOTALS                                          | 6. TOTAL PRINCIPAL<br>LAST DAY OF THE                                                   |                          | ALL OUTSTANDING LOANS AS OF PERIOD                                                                            | THE        | \$        | 0.00                       |
| L6 AFFIDAVIT                                                        |                                                                                         |                          |                                                                                                               |            |           |                            |
|                                                                     |                                                                                         |                          | I swear, or affirm, under penalty of pertrue and correct and includes all inforunder Title 15, Election Code. |            |           |                            |
|                                                                     |                                                                                         |                          | Mr. Cha                                                                                                       | arly Sea   | ıle       |                            |
|                                                                     |                                                                                         |                          | Signature of Ca                                                                                               | ampaign    | Treasur   | er                         |
| AFFIX NOTARY                                                        | STAMP / SEAL ABOVE                                                                      |                          |                                                                                                               |            |           |                            |
| Sworn to and subscribed                                             | before me, by the said _                                                                |                          | , t                                                                                                           | this the _ |           | day                        |
| of                                                                  | _, 20, to certify                                                                       | which, witness           | s my hand and seal of office.                                                                                 |            |           |                            |
|                                                                     |                                                                                         |                          |                                                                                                               |            |           |                            |
| Signature of officer ad                                             | Iministering oath                                                                       | Printed name             | e of officer administering oath                                                                               | Title      | of office | er administering oath      |

#### **SUBTOTALS - MPAC**

## FORM MPAC COVER SHEET PG 3

|                                                                                             |                                                                 |                                                                                |                |         | 3 of 7               |
|---------------------------------------------------------------------------------------------|-----------------------------------------------------------------|--------------------------------------------------------------------------------|----------------|---------|----------------------|
| <b>17</b> CO                                                                                | MMITTE                                                          | E NAME                                                                         | 18 Filer ID    | (Ethics | s Commission Filers) |
| Exc                                                                                         | Exotic Wildlife Association Political Action Committee 00058303 |                                                                                |                |         |                      |
| 19 SCH<br>NAM                                                                               | HEDULE                                                          | S                                                                              | UBTOTAL AMOUNT |         |                      |
| SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS                                               |                                                                 |                                                                                |                | \$      | 175.00               |
| 2.                                                                                          |                                                                 | SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS                    |                | \$      |                      |
| 3.                                                                                          |                                                                 | SCHEDULE B: PLEDGED CONTRIBUTIONS                                              |                | \$      |                      |
| 4.                                                                                          |                                                                 | SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO<br>ORGANIZATION   | R              | \$      |                      |
| 5. SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION |                                                                 |                                                                                |                | \$      |                      |
| 6.                                                                                          | X                                                               | SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG                    | ANIZATION      | \$      | 5.88                 |
| 7.                                                                                          | X                                                               | SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION       |                | \$      | 160.00               |
| 8.                                                                                          |                                                                 | SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR (                  | DRGANIZATION   | \$      |                      |
| 9.                                                                                          |                                                                 | SCHEDULE E: LOANS                                                              |                | \$      |                      |
| 10.                                                                                         | Х                                                               | SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS               | 6              | \$      | 1,000.00             |
| 11.                                                                                         |                                                                 | SCHEDULE F2: UNPAID INCURRED OBLIGATIONS                                       |                | \$      |                      |
| 12.                                                                                         |                                                                 | SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION               | ONS            | \$      |                      |
| 13.                                                                                         |                                                                 | SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD                                  |                | \$      |                      |
| 14.                                                                                         |                                                                 | SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION             | ONS            | \$      |                      |
| 15.                                                                                         |                                                                 | SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS I<br>TO FILER | RETURNED       | \$      |                      |
|                                                                                             |                                                                 |                                                                                |                |         |                      |

|   | MONETARY POLITICAL CONTRIBUTIONS |                                                                                                                            |                            |   | SCHEDULE A1                                   |         |  |
|---|----------------------------------|----------------------------------------------------------------------------------------------------------------------------|----------------------------|---|-----------------------------------------------|---------|--|
|   | The Instru                       | ction Guide explains how to complete this fo                                                                               | orm.                       | 1 | Total pages Schedule A1:<br>Sch: 1/1 Rpt: 4/7 |         |  |
| 2 | FILER NAME<br>Exotic Wildlin     | fe Association Political Action Committee                                                                                  |                            | 3 | Filer ID (Ethics Commission 00058303          | Filers) |  |
| 4 | Date 01/19/2024                  | <ul> <li>Full name of contributor</li></ul>                                                                                | )                          | 7 | Amount of Contribution (\$)                   | \$50.00 |  |
| • | Dringing oggu                    | Seguin, TX 78155 pation / Job title (See Instructions)                                                                     | Employer (See Instructions |   |                                               |         |  |
| 8 | Veterinarian                     | · · · · · · · · · · · · · · · · · · ·                                                                                      | employer (See instructions | ) |                                               |         |  |
|   | Date<br>01/19/2024               | Full name of contributor out-of-state PAC (ID#:<br>Moore, Pete<br>Contributor address; City; State; Zip Code               | )                          |   | Amount of Contribution (\$)                   | \$50.00 |  |
|   |                                  | Dallas, TX 75220                                                                                                           |                            |   |                                               |         |  |
|   | Principal occu<br>Real Estate    | pation / Job title (See Instructions)                                                                                      | Employer (See Instructions | ) |                                               |         |  |
|   | Date<br>01/19/2024               | Full name of contributor out-of-state PAC (ID#:_Seale, Charly  Contributor address; City; State; Zip Code                  | )                          |   | Amount of Contribution (\$)                   | \$25.00 |  |
|   |                                  | Kerrville, TX 78028                                                                                                        |                            |   |                                               |         |  |
|   |                                  | pation / Job title (See Instructions) Executive Director                                                                   | Employer (See Instructions | ) |                                               |         |  |
|   | Date<br>01/19/2024               | Full name of contributor out-of-state PAC (ID#:_ Wilson, Craig Contributor address; City; State; Zip Code Boerne, TX 78015 |                            |   | Amount of Contribution (\$)                   | \$50.00 |  |
|   | Principal occu                   | pation / Job title (See Instructions)                                                                                      | Employer (See Instructions | ) |                                               |         |  |
|   | Ranching &                       | Hunting Services                                                                                                           |                            |   |                                               |         |  |

## MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION

SCHEDULE C3

| The Instruction Guide explains how to complete this form. |                                                                     |   | 1 Total pages Schedule C3:<br>Sch: 1/1 Rpt: 5/7 |                            |      |  |
|-----------------------------------------------------------|---------------------------------------------------------------------|---|-------------------------------------------------|----------------------------|------|--|
|                                                           | FILER NAME Exotic Wildlife Association Political Action Committee   |   |                                                 | (Ethics Commission Filers) |      |  |
| 4 Date 01/19/2024                                         | 5 Corporation / Labor Organization name Exotic Wildlife Association | 6 | Amount (\$)                                     |                            | 5.25 |  |
| Date 01/04/2024                                           | Corporation / Labor Organization name Exotic Wildlife Association   |   | Amount (\$)                                     |                            | 0.63 |  |

# NON-MONETARY SUPPORT FROM CORPORATION SCHEDULE C4 **OR LABOR ORGANIZATION** 1 Total pages Schedule C4: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 6/7 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Exotic Wildlife Association Political Action Committee 00058303 Date 5 Corporation / Labor Organization name 6 Amount (\$) 01/25/2024 160.00 **Exotic Wildlife Association**

#### POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

#### SCHEDULE F1

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

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

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

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

|   | Contributing Donations Made By<br>Candidate/Officeholder/Politica<br>Credit Card Payment | Foundeverage Expense Polining Expense Inaver in District Gift/Awards/Memorials Expense Printing Expense Travel Out of District I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)  The Instruction Guide explains how to complete this form. |
|---|------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1 | Total pages Schedule F1:                                                                 | 2 FILER NAME 3 Filer ID (Ethics Commission Filers)                                                                                                                                                                                                                                           |
|   | Sch: 1/1 Rpt: 7/7                                                                        | Exotic Wildlife Association Political Action Committee 00058303                                                                                                                                                                                                                              |
| 4 | Date                                                                                     | 5 Payee name                                                                                                                                                                                                                                                                                 |
|   | 01/04/2024                                                                               | McLaughlin Campaign, Don                                                                                                                                                                                                                                                                     |
| 6 | Amount (\$)                                                                              | 7 Payee address; City; State; Zip Code                                                                                                                                                                                                                                                       |
|   | \$1,000.00                                                                               | P.O. Box 1707                                                                                                                                                                                                                                                                                |
|   |                                                                                          |                                                                                                                                                                                                                                                                                              |
|   | Expenditure from corporate funds                                                         | Uvalde, TX 78802                                                                                                                                                                                                                                                                             |
| 8 | PURPOSE                                                                                  | (a) Category (See Categories listed at the top of this schedule) (b) Description                                                                                                                                                                                                             |
|   | OF<br>EXPENDITURE                                                                        | Contributions/Donations Made By                                                                                                                                                                                                                                                              |
|   | ZAI ZIADITORZ                                                                            | Candidate/Officeholder/Political Committee                                                                                                                                                                                                                                                   |
|   |                                                                                          | Political Contribution                                                                                                                                                                                                                                                                       |
|   |                                                                                          |                                                                                                                                                                                                                                                                                              |
| 9 | Complete ONLY if direct expenditure to benefit C/OI                                      | Candidate/Officeholder name Office sought Office held                                                                                                                                                                                                                                        |
|   |                                                                                          |                                                                                                                                                                                                                                                                                              |