FORM GPAC GENERAL-PURPOSE COMMITTEE **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Filer ID 2 Total pages filed: The GPAC Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00066524 3 COMMITTEE NAME **OFFICE USE ONLY** Texas McDonald's Operators Association PAC, Inc. Date Received **ELECTRONICALLY FILED** 10/27/2024 4 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** 1001 E Tyler Date Hand-delivered or Date Postmarked Change of Address Athens, TX 75751 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mr. Kevin NAME NICKNAME LAST **SUFFIX** Lilly STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 1001 E Tyler STREET **ADDRESS** (Residence or Business) Athens, TX 75751 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 1001 E Tyler MAILING **ADDRESS** Athens, TX 75751 Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (214) 236-1053 **PHONE** REPORT January 15 30th day before election Dissolution (Attach PAC-DR) **TYPE** 8th day before election 10th day after campaign treasurer July 15 Runoff 10 PERIOD Year Month Day Year Day Month **COVERED THROUGH** 09/27/2024 10/26/2024 11 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year Primary Runoff Other 11/05/2024 χ General Special

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM GPAC COVER SHEET PG 2

12 COMMITTEE NAME			13 Filer ID	(Ethics Commission Filers)
Texas McDonald's Ope	rators Association PAC	C, Inc.	00066524	
14 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Keith Bell State Representative	e	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported		
		B. Opposed		
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)			
15 CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS M	D POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR MADE ELECTRONICALLY) qualifies for the higher itemization threshold	\$	0.00
	2. TOTAL POLITICA (OTHER THAN PLE	AL CONTRIBUTIONS EDGES, LOANS, OR GUARANTEES OF LOANS)	\$	30,300.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	D POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICA	L EXPENDITURES	\$	82,013.22
CONTRIBUTION BALANCE	5. TOTAL POLITICAL (OF THE REPORTIN	CONTRIBUTIONS MAINTAINED AS OF THE LAST G PERIOD	DAY \$	129,833.06
OUTSTANDING LOAN TOTALS		AMOUNT OF ALL OUTSTANDING LOANS AS OF T REPORTING PERIOD	HE \$	0.00
16 AFFIDAVIT	<u>'</u>		·	
		I swear, or affirm, under penalty of pe true and correct and includes all informunder Title 15, Election Code.		
		Mr. Ke	vin Lilly	
		Signature of Car	mpaign Treası	urer
AFFIX NOTARY	STAMP / SEAL ABOVE			
Sworn to and subscribed	before me, by the said	, th	nis the	day
of	_, 20, to certify	which, witness my hand and seal of office.		
Signature of officer ad	ministering oath	Printed name of officer administering oath	Title of offi	cer administering oath

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12	COMMITTEE NAME					13 Filer ID	(Ethics Commission Filers)
	Texas McDonald's Oper	rators Association P	AC, Inc.			00066524	
14	COMMITTEE	1. Candidates	A. Supported	Cole Hefner	State Representati	ve	
	ACTIVITY	(Identify by name or, if applicable, classify by party.)					
	(Attach lists on plain		B. Opposed				
	paper to complete this report if necessary.)						
		2. Measures	A. Supported				
		(Describe by date and location of election and nature of issue.)					
			B. Opposed				
		3. Officeholders					
		Assisted (Identify by name or, if applicable, classify by party.)					
	COMMITTEE	Candidates	A Sunnorted	Cody Harris	State Representativ	./Ω	
	ACTIVITY	(Identify by name or, if		Couy mains	Siale Representativ	ve	
		applicable, classify by party.)					
	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed				
		2. Measures	A. Supported				
		(Describe by date and location of election and nature of issue.)					
			B. Opposed				
		Officeholders Assisted					
		(Identify by name or, if applicable, classify by party.)					
	COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Trent Ashby	State Representati	ve	
	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed				
		2. Measures	A. Supported				
		(Describe by date and location of election and nature of issue.)					
			B. Opposed				
		Officeholders Assisted					
		(Identify by name or, if applicable, classify by party.)					

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12 COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
Texas McDonald's Oper	ators Association P	AC, Inc.		00066524	
14 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Will Metcalf State Representation	I /e	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
COMMITTEE	1. Candidates	A. Supported	Stan Gerdes State Representat	ive	
ACTIVITY	(Identify by name or, if applicable, classify by party.)		, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
•	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Christian Manuel State Represe	entative	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				

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COMMITTEE NAME Texas McDonald's Oper COMMITTEE COMMITTEE ACTIVITY Attach lists on plain taper to complete this teport if necessary.)	rators Association P/ 1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Greg Bonnen State Representa	00066524	cs Commission Filers)			
COMMITTEE ACTIVITY Attach lists on plain laper to complete this	Candidates (Identify by name or, if	A. Supported	Greg Bonnen State Representa					
ACTIVITY Attach lists on plain paper to complete this	(Identify by name or, if		Greg Bonnen State Representa	tive				
aper to complete this				e Representative				
		B. Opposed						
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported						
		B. Opposed						
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)							
`OMMITTEE	<u> </u>	Δ Supported	Cody Vacut State Depresentati	·/O				
ACTIVITY	(Identify by name or, if		Cody vasul State Representati	ve				
Attach lists on plain aper to complete this eport if necessary.)		B. Opposed						
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported						
		B. Opposed						
	3. Officeholders Assisted (Identify by name or, if							
COMMITTEE	Candidates (Identify by name or, if	A. Supported	Ron Reynolds State Representa	ative				
Attach lists on plain paper to complete this eport if necessary.)		B. Opposed						
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported						
		B. Opposed						
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)							
	Attach lists on plain aper to complete this eport if necessary.) COMMITTEE CTIVITY Attach lists on plain aper to complete this	Assisted (Identify by name or, if applicable, classify by party.) Attach lists on plain apper to complete this apport if necessary.) 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) COMMITTEE CTIVITY 1. Candidates (Identify by name or, if applicable, classify by party.) Attach lists on plain aper to complete this apport if necessary.) 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted 3. Officeholders Assisted 3. Officeholders Assisted	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) Attach lists on plain aper to complete this apport if necessary.) 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) B. Opposed 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) B. Opposed 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) B. Opposed 2. Measures (Describe by date and location of election and nature of issue.) B. Opposed B. Opposed 3. Officeholders (Describe by date and location of election and nature of issue.) B. Opposed B. Opposed B. Opposed B. Opposed B. Opposed 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) B. Opposed	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) Attach lists on plain aper to complete this apport if necessary.) 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) B. Opposed 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) B. Opposed 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) Attach lists on plain aper to complete this apport if necessary.) B. Opposed 2. Measures (Describe by date and location and nature of issue.) B. Opposed B. Opposed	3. Officeholders Assisted (deemity by name or, if applicable, classify by party). COMMITTEE CTIVITY Attach lists on plain aper to complete this sport if necessary.) 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (defently by name or, if applicable, classify by party). B. Opposed 3. Officeholders Assisted (defently by name or, if applicable, classify by party). B. Opposed 3. Officeholders Assisted (defently by name or, if applicable, classify by party). B. Opposed 4. Supported B. Opposed CTIVITY B. Opposed CTIVITY Attach lists on plain aper to complete this sport if necessary.) B. Opposed A. Supported B. Opposed A. Supported B. Opposed A. Supported Committee (deemity by name or, if applicable, classify by party). B. Opposed Committee CTIVITY Attach lists on plain aper to complete this sport if necessary.) B. Opposed 3. Officeholders Assisted A. Supported B. Opposed B. Opposed 3. Opposed 3. Opposed 3. Opposed 3. Opposed 3. Opposed			

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12 COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
Texas McDonald's Operators Ass	ociation PAC, Inc.			00066524	
14 COMMITTEE 1. Candid (Identify by no	lates A. Supported	Jeffrey Barry S	State Representati	ive	
(Attach lists on plain paper to complete this report if necessary.)	B. Opposed				
2. Measu (Describe by location of ele nature of issu	date and ection and				
	B. Opposed				
Officel Assiste (Identify by n. applicable, cl	ed				
COMMITTEE 1. Candid	lates A. Supported	Rvan Guillen	State Representat	ive	
ACTIVITY (Identify by na		Tryan Gamen	State Representat	100	
(Attach lists on plain paper to complete this report if necessary.)	B. Opposed				
Measu (Describe by location of ele nature of issu	date and ection and				
	B. Opposed				
3. Officel Assiste (Identify by n. applicable, cl	ed				
COMMITTEE 1. Candid ACTIVITY (Identify by n.	lates A. Supported	Todd Hunter	State Representat	ive	
(Attach lists on plain paper to complete this report if necessary.)	B. Opposed				
2. Measu (Describe by location of ele nature of issu	date and ection and				
	B. Opposed				
Officel Assiste (Identify by n. applicable, cl	ed				
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12 COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
Texas McDonald's Oper	ators Association P	AC, Inc.		00066524	
14 COMMITTEE	1. Candidates		Oscar Longoria State Represen	<u>I</u> tative	
ACTIVITY	(Identify by name or, if applicable, classify by party.)				
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures	A. Supported			
	(Describe by date and location of election and nature of issue.)				
		B. Opposed			
	3. Officeholders Assisted (Identify by name or, if				
001111777	applicable, classify by party.)				
COMMITTEE ACTIVITY	Candidates (Identify by name or, if	A. Supported	Armando Martinez State Repres	sentative	
	applicable, classify by party.)				
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures	A. Supported			
	(Describe by date and location of election and nature of issue.)				
		B. Opposed			
	Officeholders Assisted				
	(Identify by name or, if applicable, classify by party.)				
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Terry Canales State Representa	ative	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures	A. Supported			
	(Describe by date and location of election and nature of issue.)				
		B. Opposed			
	Officeholders Assisted				
	(Identify by name or, if applicable, classify by party.)				

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12 COMMITTEE NAME			13 Filer ID	(Ethics Commission Filers)
Texas McDonald's Operators Asso	ciation PAC, Inc.		00066524	
14 COMMITTEE 1. Candida (Identify by nar applicable, class	A. Supported	J.M. Lozano State Representativ	/e	
(Attach lists on plain paper to complete this report if necessary.)	B. Opposed			
2. Measur (Describe by di location of elec nature of issue	ate and tion and			
	B. Opposed			
3. Officeho Assister (Identify by nar applicable, clas	d ne or, if			
COMMITTEE 1. Candida	ates A. Supported	Donna Howard State Representa	ative	
ACTIVITY (Identify by nar applicable, class	ne or, if	Bolling Howard Clade Represent	auve	
(Attach lists on plain paper to complete this report if necessary.)	B. Opposed			
2. Measur (Describe by d location of elec nature of issue	ate and tion and			
	B. Opposed			
3. Officeho Assisted (Identify by nar applicable, clar	d ne or, if			
COMMITTEE 1. Candida (Identify by nar applicable, class	ates A. Supported	Gina Hinojosa State Representa	tive	
(Attach lists on plain paper to complete this report if necessary.)	B. Opposed			
2. Measur (Describe by di location of elec nature of issue	ate and tion and			
	B. Opposed			
3. Officeho Assister (Identify by nar applicable, clas	d ne or, if			
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12 COMMITTEE NAME						13 Filer ID		(Ethic	s Comm	ission Fil	ers)
Texas McDonald's Ope	rators Association P	AC, Inc.				000665	24				
14 COMMITTEE ACTIVITY	Candidates (Identify by name or, if	A. Suppo	orted	Brad Buckley State Repre	esentat	ive					
(Attach lists on plain	applicable, classify by party.)	B. Oppos	sed								
paper to complete this report if necessary.)											
	2. Measures	A. Suppo	rted								
	(Describe by date and location of election and nature of issue.)										
		B. Oppos	sed								
	Officeholders Assisted										
	(Identify by name or, if applicable, classify by party.)										
COMMITTEE	1. Candidates	A. Suppo	rted	Pat Curry State Represen	ntative						
ACTIVITY	(Identify by name or, if										
	applicable, classify by party.)										
(Attach lists on plain paper to complete this report if necessary.)		B. Oppos	sed								
	2. Measures	A. Suppo	rted								
	(Describe by date and location of election and nature of issue.)										
		В. Орро	sed								
	3. Officeholders Assisted										
	(Identify by name or, if applicable, classify by party.)										
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		orted	Matt Shaheen State Repr	resenta	tive					
(Attach lists on plain paper to complete this report if necessary.)		B. Oppos	sed								
	2. Measures	A. Suppo	rted								
	(Describe by date and location of election and nature of issue.)										
		B. Oppos	sed								
	3. Officeholders										
	Assisted (Identify by name or, if applicable, classify by party.)										

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	COMMITTEE NAME					13 Filer ID	(Ethics Commission Filers)
	Texas McDonald's Oper	rators Association P	AC, Inc.			00066524	
	COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Jeff Leach Stat	e Representative		
	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed				
		2. Measures (Describe by date and location of election and nature of issue.)	A. Supported				
			B. Opposed				
		3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)					
	COMMITTEE	1. Candidates		Stan Lambort 9	State Representa	tive	
	ACTIVITY	(Identify by name or, if applicable, classify by party.)		Stair Lambert	nate representa	uve	
	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed				
		2. Measures (Describe by date and location of election and nature of issue.)	A. Supported				
			B. Opposed				
		Officeholders Assisted (Identify by name or, if					
		applicable, classify by party.)					
	COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Drew Darby St	ate Representati	ve	
	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed				
		2. Measures (Describe by date and location of election and nature of issue.)	A. Supported				
			B. Opposed				
		3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)					

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OMMITTEE NAME Exas McDonald's Oper OMMITTEE CTIVITY Ittach lists on plain uper to complete this port if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.) 2. Measures (Describe by date and location of election and nature of issue.)	A. Supported	Eddie Morales State Represe	13 Filer ID 00066524 entative	(Ethics Commission Filers)
OMMITTEE CTIVITY ttach lists on plain uper to complete this	Candidates (Identify by name or, if applicable, classify by party.) Measures (Describe by date and location of election and	A. SupportedB. OpposedA. Supported	Eddie Morales State Represe		
CTIVITY ttach lists on plain uper to complete this	(Identify by name or, if applicable, classify by party.) 2. Measures (Describe by date and location of election and	B. Opposed A. Supported	Eddie Morales State Represe	entative	
per to complete this	(Describe by date and location of election and	A. Supported			
	(Describe by date and location of election and				
		B. Opposed			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
OMMITTEE	1. Candidates	A. Supported	Vincent Perez State Represer	ntative	
CTIVITY	(Identify by name or, if applicable, classify by party.)				
per to complete this		B. Opposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	3. Officeholders Assisted				
	1. Candidates (Identify by name or, if applicable, classify by party.)		Joe Moody State Representat	ive	
per to complete this		B. Opposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
	OMMITTEE CTIVITY Attach lists on plain aper to complete this port if necessary.) OMMITTEE CTIVITY Attach lists on plain aper to complete this port if necessary.)	(Identify by name or, if applicable, classify by party.) attach lists on plain aper to complete this port if necessary.) 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) DMMITTEE CTIVITY 1. Candidates (Identify by name or, if applicable, classify by party.) attach lists on plain aper to complete this port if necessary.) 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	(Identify by name or, if applicable, classify by party.) B. Opposed 2. Measures (Describe by date and location of election and nature of issue.) B. Opposed 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) DMMITTEE CTIVITY 1. Candidates (Identify by name or, if applicable, classify by party.) B. Opposed B. Opposed 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) B. Opposed B. Opposed CTIVITY 2. Measures (Describe by date and location of election and nature of issue.) A. Supported B. Opposed B. Opposed B. Opposed B. Opposed B. Opposed A. Supported B. Opposed B. Opposed A. Supported Complete this port if necessary.)	(Identify by name or, if applicable, classify by party.) B. Opposed B. Opposed C. Measures (Describe by date and location of lection and nature of issue.) B. Opposed C. Measures (Describe by date and location of lection and nature of issue.) B. Opposed B. Opposed A. Supported Describe by name or, if applicable, classify by party.) Committee CTIVITY C. Candidates (Identify by name or, if applicable, classify by party.) D. Opposed C. Measures (Identify by name or, if applicable, classify by party.) B. Opposed B. Opposed C. Measures (Identify by name or, if applicable, classify by party.) B. Opposed B. Opposed B. Opposed B. Opposed C. Measures (Describe by date and location of lection and nature of issue.) B. Opposed C. Measures (Describe by date and location of lection and nature of issue.) B. Opposed C. Measures (Describe by date and location of lection and nature of issue.) B. Opposed	Ittach lists on plain aper to complete this port if necessary.) 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) DMMITTEE CTIVITY 1. Candidates (Identify by name or, if applicable, classify by party.) B. Opposed 3. Opposed 3. Opposed 3. Opposed 3. Opposed 4. Supported Joe Moody State Representative (Identify by name or, if applicable, classify by party.) B. Opposed 5. Candidates (Identify by name or, if applicable, classify by party.) B. Opposed B. Opposed B. Opposed B. Opposed B. Opposed B. Opposed 3. Opposed B. Opposed B. Opposed 3. Opposed 3. Opposed B. Opposed

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MITTEE NAME IS McDonald's Ope MITTEE VITY Ch lists on plain r to complete this t if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.) 2. Measures	A. Supported	Claudia Ordaz	State Represent	13 Filer ID 00066524 ative	(Ethics Commission Filers)
MITTEE VITY ch lists on plain r to complete this	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Claudia Ordaz S	State Represent		
VITY ch lists on plain r to complete this	(Identify by name or, if applicable, classify by party.)		Claudia Ordaz \$	State Represent	ative	
r to complete this	2. Measures	B. Opposed				
	2. Measures					
	(Describe by date and location of election and nature of issue.)	A. Supported				
		B. Opposed				
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)					
MITTEE	1. Candidates	A. Supported	Dustin Burrows	State Represer	tative	
VITY	(Identify by name or, if applicable, classify by party.)					
ch lists on plain r to complete this t if necessary.)		B. Opposed				
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported				
		B. Opposed				
	Officeholders Assisted (Identify by name or, if					
	applicable, classify by party.)					
	1. Candidates (Identify by name or, if applicable, classify by party.)		Ken King State	Representative		
r to complete this		B. Opposed				
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported				
		B. Opposed				
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)					
	MITTEE VITY ch lists on plain r to complete this t if necessary.)	(Identify by name or, if applicable, classify by party.) ch lists on plain r to complete this t if necessary.) 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (Identify by name or, if	(Identify by name or, if applicable, classify by party.) B. Opposed 2. Measures (Describe by date and location of election and nature of issue.) B. Opposed A. Supported B. Opposed 3. Officeholders Assisted (Identify by name or, if	(Identify by name or, if applicable, classify by party.) B. Opposed 2. Measures (Describe by date and location of election and nature of issue.) B. Opposed A. Supported B. Opposed	(Identify by name or, if applicable, classify by party.) B. Opposed 2. Measures (Describe by date and location of election and nature of issue.) B. Opposed A. Supported B. Opposed A. Supported B. Opposed	(Identify by name or, if applicable, classify by party.) B. Opposed 2. Measures (Describe by date and location of election and nature of issue.) B. Opposed A. Supported B. Opposed 3. Officeholders Assisted (Identify by name or, if

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12 COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
Texas McDonald's Operate	ors Association PA	AC, Inc.		00066524	
	Candidates		Candy Noble State Representat	l	
ACTIVITY (Id	entify by name or, if plicable, classify by party.)	22,4	candy resid claic representati		
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
2.	Measures	A. Supported			
loc	escribe by date and cation of election and ture of issue.)				
		B. Opposed			
(Id	Officeholders Assisted lentify by name or, if				
	plicable, classify by party.)	A Cupperted	Daman Daman In Civil D	o o o o t = the co	
A CTIV //TV/	Candidates entify by name or, if	A. Supported	Ramon Romero, Jr. State Repr	esentative	
ар	plicable, classify by party.)				
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	Measures	A. Supported			
loc	escribe by date and cation of election and ture of issue.)				
		B. Opposed			
3.	Officeholders Assisted				
(Id ap	entify by name or, if plicable, classify by party.)				
ACTIVITY (Id	Candidates entify by name or, if plicable, classify by party.)	A. Supported	John McQueeney State Repres	sentative	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
2.	Measures	A. Supported			
loc	escribe by date and cation of election and ture of issue.)				
		B. Opposed			
3.	Officeholders Assisted				
	entify by name or, if plicable, classify by party.)				

FORM GPAC ADDENDUM

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				1 age 11 01 00
12 COMMITTEE NAME			13 Filer ID	(Ethics Commission Filers)
Texas McDonald's Operators Asso	ciation PAC, Inc.		00066524	
14 COMMITTEE 1. Candidate (Identify by nar applicable, class	A. Supported	Giovanni Capriglione State Rep	Dresentative	
(Attach lists on plain paper to complete this report if necessary.)	B. Opposed			
2. Measure (Describe by di location of elec nature of issue	ate and tion and			
	B. Opposed			
3. Officeho Assisted (Identify by nar applicable, clas	d ne or, if			
COMMITTEE 1. Candida	ites A Supported	Charlie Geren State Represen	tative	
ACTIVITY (Identify by nar applicable, class	ne or, if	Chance Geren State Represen	lative	
(Attach lists on plain paper to complete this report if necessary.)	B. Opposed			
2. Measur (Describe by di location of elec nature of issue	ate and tion and			
	B. Opposed			
3. Officeho Assisted (Identify by nar applicable, clas	ne or, if			
COMMITTEE 1. Candida (Identify by nar applicable, class	ates A. Supported	Rafael Anchia State Represen	tative	
(Attach lists on plain paper to complete this report if necessary.)	B. Opposed			
2. Measur (Describe by di location of elec nature of issue	ate and tion and			
	B. Opposed			
3. Officeho Assisted (Identify by nar applicable, clas	ne or, if			
1	<u>'</u>			

FORM GPAC ADDENDUM

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						1 age 10 01 00
12	COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
	Texas McDonald's Oper	rators Association P	AC, Inc.		00066524	
14	COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Jared Patterson State Represe	ntative	
	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
		2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
			B. Opposed			
		3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
	COMMITTEE	1. Candidates	A. Supported	Morgan Meyer State Represen	tative	
	ACTIVITY	(Identify by name or, if applicable, classify by party.)		Morgan Weyer State Represen	tative	
	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
		2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
			B. Opposed			
		3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
	COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Angie Chen Button State Repre	esentative	
	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
		2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
			B. Opposed			-
		3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				

FORM GPAC ADDENDUM

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							1 age 10 01 00
12	COMMITTEE NAME					13 Filer ID	(Ethics Commission Filers)
	Texas McDonald's Oper	rators Association P	AC, Inc.			00066524	
14	COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Rhetta Bowe	rs State Represen	I tative	
	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed				
		2. Measures (Describe by date and location of election and nature of issue.)	A. Supported				
			B. Opposed				
		3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)					
	COMMITTEE	1. Candidates	A. Supported	John Bryant	State Representat	ive	
	ACTIVITY	(Identify by name or, if applicable, classify by party.)		John Bryant	State Representati	100	
	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed				
		2. Measures (Describe by date and location of election and nature of issue.)	A. Supported				
			B. Opposed				
		3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)					
	COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Philip Cortez	State Representat	ive	
	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed				
		2. Measures (Describe by date and location of election and nature of issue.)	A. Supported				
			B. Opposed				
		3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)					

FORM GPAC ADDENDUM

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						1 ago 11 01 00
12	COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
	Texas McDonald's Oper	rators Association P	AC, Inc.		00066524	
	COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Sam Harless State Representat	ive	
	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
		2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
			B. Opposed			
		3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
	COMMITTEE	1. Candidates	A. Supported	Charles Cunningham State Rep	oresentative	
	ACTIVITY	(Identify by name or, if applicable, classify by party.)		Ghanes Gammigham State Rep	oresemanve	
	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
		2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
			B. Opposed			
		3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
	COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Ann Johnson State Representa	ative	
	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
		2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
			B. Opposed			
		3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				

FORM GPAC ADDENDUM

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COMMITTEE NAME Fexas McDonald's Oper COMMITTEE	rators Association P	AC, Inc.			13 Filer ID	(Ethics Commission Filers)
	rators Association P	AC, Inc.				
COMMITTEE					00066524	
ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Jon Rosenthal	State Represent	ative	
Attach lists on plain paper to complete this eport if necessary.)		B. Opposed				
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported				
		B. Opposed				
	Officeholders Assisted (Identify by name or, if applicable, classify by party.)					
COMMITTEE	1. Candidates	A. Supported	John Bucy, III	State Representa	ative	
ACTIVITY	(Identify by name or, if		Judy, III	Ciato Hoprosonia	auvo	
Attach lists on plain paper to complete this eport if necessary.)		B. Opposed				
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported				
		B. Opposed				
	3. Officeholders Assisted					
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Lacey Hull St	ate Representativ	е	
Attach lists on plain paper to complete this report if necessary.)		B. Opposed				
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported				
		B. Opposed				
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)					
	COMMITTEE ACTIVITY Attach lists on plain aper to complete this eport if necessary.) COMMITTEE ACTIVITY Attach lists on plain aper to complete this	2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) Attach lists on plain apper to complete this apport if necessary.) 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) Attach lists on plain larger to complete this eport if necessary.) 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) B. Opposed 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) B. Opposed 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) COMMITTEE (CTIVITY 1. Candidates (Identify by name or, if applicable, classify by party.) B. Opposed 2. Measures (Identify by name or, if applicable, classify by party.) B. Opposed 2. Measures (Identify by name or, if applicable, classify by party.) B. Opposed 3. Officeholders Assisted 4. Supported In Candidates (Identify by name or, if applicable, classify by party.) B. Opposed 3. Officeholders Assisted 4. Supported In Candidates (Identify by name or, if applicable, classify by party.) B. Opposed 3. Officeholders Assisted 4. Supported In Candidates (Identify by name or, if applicable, classify by party.) B. Opposed	2. Measures (Describe by date and location of election and nature of issue.) B. Opposed 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) 2. Measures (Identify by name or, if applicable, classify by party.) B. Opposed 1. Candidates (Identify by name or, if applicable, classify by party.) 2. Measures (Describe by date and location of election and nature of issue.) B. Opposed 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) COMMITTEE (CTIVITY Attach lists on plain applicable, classify by party.) COMMITTEE (CTIVITY 1. Candidates (Identify by name or, if applicable, classify by party.) B. Opposed 2. Measures (Identify by name or, if applicable, classify by party.) B. Opposed 1. Candidates (Identify by name or, if applicable, classify by party.) B. Opposed 2. Measures (Describe by date and location of election and nature of issue.) B. Opposed 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) B. Opposed 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) B. Opposed	2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party). Attach lists on plain aper to complete this eport if necessary.) 2. Measures (Describe by date and location and nature of issue.) 3. Officeholders (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) B. Opposed 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) B. Opposed 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) B. Opposed 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) B. Opposed 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) B. Opposed 4. Supported B. Opposed 5. Opposed 6. Supported 6. Supported 6. Supported 6. Supported 6. Supported 8. Opposed 6. Opposed 7. Measures (Describe by date and location of election and nature of issue.) 8. Opposed 8. Opposed 9. Opposed 1. Candidates (Describe by date and location of election and nature of issue.) 8. Opposed 9. Opposed 1. Candidates (Describe by date and location of election and nature of issue.) 8. Opposed 9. Opposed 1. Officeholders (Describe by date and location of election and nature of issue.) 9. Opposed	2. Measures (Describe by date and location of election and nature of issue.) B. Opposed 3. Officeholders Assisted (Describe by date and location of election and nature of issue.) B. Opposed 3. Officeholders Assisted (Describe by date and location of election and nature of issue.) Attach lists on plain apper to complete this eport if necessary.) 2. Measures (Describe by date and location of election and nature of issue.) B. Opposed 3. Officeholders Assisted (Describe by date and location of complete this eport if necessary.) COMMITTEE CTIVITY 1. Candidates (Describe by date and location of complete this eport if necessary.) COMMITTEE CTIVITY 2. Measures (Describe by date and location of leaction and nature of issue.) B. Opposed 3. Officeholders Assisted (Describe by date and location of election and nature of issue.) B. Opposed 2. Measures (Describe by date and location of election and nature of issue.) B. Opposed 3. Officeholders Assisted 4. Supported 5. Opposed 6. Opposed

FORM GPAC ADDENDUM

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					_
COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
Texas McDonald's Oper				00066524	
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Armando Walle State Represen	tative	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Harold Dutton, Jr. State Repres	sentative	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Ana Hernandez State Represen	tative	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
		•			

FORM GPAC ADDENDUM

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	TTEE NAME					13	Filer ID	(Ethics Com	mission Filers)
Texas	McDonald's Ope	rators Association P	AC, Inc.				00066524		
14 COMMI ACTIVIT		Candidates (Identify by name or, if applicable, classify by party.)		Mary Ann	Perez State Rep	presenta	itive		
paper to	lists on plain complete this necessary.)		B. Opposed						
		2. Measures (Describe by date and location of election and nature of issue.)	A. Supported						
			B. Opposed						
		Officeholders Assisted (Identify by name or, if applicable, classify by party.)							
COMMI ACTIVI		Candidates (Identify by name or, if applicable, classify by party.)		Hubert Vo	State Represent	tative			
paper to	lists on plain complete this necessary.)		B. Opposed						
		2. Measures (Describe by date and location of election and nature of issue.)	A. Supported						
			B. Opposed						
		3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)							
COMMI ACTIVI		Candidates (Identify by name or, if applicable, classify by party.)		Bryan Hug	hes State Senat	ntor			
paper to	lists on plain complete this necessary.)		B. Opposed						
		2. Measures (Describe by date and location of election and nature of issue.)	A. Supported						
			B. Opposed						
		3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)							
		(Identify by name or, if							

FORM GPAC ADDENDUM

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						1 age 21 01 00
12	COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
	Texas McDonald's Oper	rators Association P	AC, Inc.		00066524	
	COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Brandon Creighton State Senato	or	
	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
		2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
			B. Opposed			
		3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
	COMMITTEE	1. Candidates	A. Supported	Charles Schwertner State Sena	etor	
	ACTIVITY	(Identify by name or, if applicable, classify by party.)		Charles Schwerther State Sens	atoi	
	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
		2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
			B. Opposed			
		3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
	COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Carol Alvarado State Senator		
	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
		2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
			B. Opposed			
		3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				

FORM GPAC ADDENDUM

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													raye z	2 01 93
12	COMMITTEE NAME								:	13 Filer ID		(Ethics C	Commissio	n Filers)
	Texas McDonald's Ope	rators Association P	AC, In	nc.						000665	524			
	COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		upported	Angel	a Paxton	State	Senato	or					
	(Attach lists on plain paper to complete this report if necessary.)		B. O	pposed										
		2. Measures	A. Sı	upported										
		(Describe by date and location of election and nature of issue.)												
			B. O	pposed										
		3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)												
	COMMITTEE	Candidates	 	upported	Kally	Hancock	(State	Senato	nr					
	ACTIVITY	(Identify by name or, if applicable, classify by party.)		арропоа	Reliy	Tiancocr	Volute	Scriato	<i>)</i> 1					
	(Attach lists on plain paper to complete this report if necessary.)		B. O	pposed										
		2. Measures (Describe by date and location of election and nature of issue.)	A. Sı	upported										
			B. O	pposed										
		3. Officeholders Assisted												
		(Identify by name or, if applicable, classify by party.))											
	COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		upported	Natha	n Johns	on Sta	te Sena	ator					
	(Attach lists on plain paper to complete this report if necessary.)		B. O	pposed										
		2. Measures	A. Sı	upported										
		(Describe by date and location of election and nature of issue.)												
			B. O	pposed										
		3. Officeholders Assisted												
		(Identify by name or, if applicable, classify by party.)												

FORM GPAC **ADDENDUM**

			Page 23 01 95
12 COMMITTEE NAME	DAC Inc	,	Ethics Commission Filers)
Texas McDonald's Operators Association	PAC, Inc.	00066524	
14 COMMITTEE ACTIVITY 1. Candidates (Identify by name or, if applicable, classify by par	A. Supported Joan Huffman State Senator		
(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		
	B. Opposed		
3. Officeholders Assisted (Identify by name or, if applicable, classify by par	ty.)		
COMMITTEE ACTIVITY 1. Candidates (Identify by name or, if applicable, classify by par	A. Supported Jose Menendez State Senator		
(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		
	B. Opposed		
Officeholders Assisted (Identify by name or, if applicable, classify by par	ty.)		
COMMITTEE ACTIVITY 1. Candidates (Identify by name or, if applicable, classify by par	A. Supported Morgan LaMantia State Senat	or	
(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		
	B. Opposed		
Officeholders Assisted (Identify by name or, if applicable, classify by par	ty.)		

FORM GPAC ADDENDUM

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								Fage 24 01 93
12	COMMITTEE NAME						13 Filer ID	(Ethics Commission Filers)
	Texas McDonald's Oper	rators Association P	AC, Inc).			00066524	
	COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		oported	Charles Perry State S	Senator		
	(Attach lists on plain paper to complete this report if necessary.)		В. Ор	posed				
		2. Measures	A. Sup	oported				
		(Describe by date and location of election and nature of issue.)						
			В. Ор	posed				
		3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)						
	COMMITTEE	Candidates		norted	Cesar Blanco State S	`onator		
	ACTIVITY	(Identify by name or, if		oponeu	Cesai Bianco State S	eriator		
		applicable, classify by party.))					
	(Attach lists on plain paper to complete this report if necessary.)		В. Орг	posed				
		Measures (Describe by date and	A. Sur	oported				
		location of election and nature of issue.)						
			В. Ор	posed				
		Officeholders Assisted						
		(Identify by name or, if applicable, classify by party.))					
	COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		oported	Brent Hagenbuch Sta	ite Senator		
	(Attach lists on plain paper to complete this report if necessary.)		В. Ор	posed				
		2. Measures	A. Sup	oported				
		(Describe by date and location of election and nature of issue.)						
			В. Ор	posed				
		Officeholders Assisted						
		(Identify by name or, if applicable, classify by party.)						

GENERAL-PURPOSE COMMITTEE REPORT:

FORM GPAC

PURPOSE				ADDENDON
				Page 25 of 95
12 COMMITTEE NAME			13 Filer ID	(Ethics Commission Filers)
Texas McDonald's Operate			00066524	
	Candidates lentify by name or, if plicable, classify by party.)	A. Supported Robert Nichols State Senator		
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
	Measures escribe by date and cation of election and ture of issue.)	A. Supported		
		B. Opposed		
	Officeholders Assisted lentify by name or, if uplicable, classify by party.)			

SUBTOTALS - GPAC

FORM **GPAC**COVER SHEET PG 3

		26 of 95
17 COMMITTEE NAME Texas McDonald's Operators Association PAC, Inc.	18 Filer ID 00066524	(Ethics Commission Filers)
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 30,300.00
2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$
3. SCHEDULE B: PLEDGED CONTRIBUTIONS		\$
4. SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR ORGANIZATION	\$	
5. SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORI	PORATION OR	\$
6. SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR	ORGANIZATION	\$
7. SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LA ORGANIZATION	ABOR	\$
8. SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LAB	BOR ORGANIZATION	\$
9. SCHEDULE E: LOANS		\$
10. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBU	TIONS	\$ 82,013.22
11. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$
12. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRI	BUTIONS	\$
13. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$
14. SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRI	BUTIONS	\$
15. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTION TO FILER	ONS RETURNED	\$

	MONET	ARY POLITICAL CO	S		SCHEDUL	E A1	
	The Instruc	ction Guide explains how to	complete this form	n.	1	Total pages Schedule A1: Sch: 1/44 Rpt: 27/95	
2	FILER NAME Texas McDo	nald's Operators Association PAC	C, Inc.		3	Filer ID (Ethics Commission 00066524	n Filers)
4	Date 10/01/2024	Acosta, Celia	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	\$25.00
8	Principal occu	San Antonio, TX 78228 pation / Job title (See Instructions)	9	Employer (See Instructions	(s)		
Ĭ	Owner/Opera			self	,		
	Date Full name of contributor out-of-state PAC (ID#:) 10/23/2024 Acosta, Celia Contributor address; City; State; Zip Code San Antonio, TX 78228			Amount of Contribution (\$)	\$25.00		
		San Antonio, TX 78228					
	Owner/Opera	pation / Job title (See Instructions) ator		Employer (See Instructions self	5)		
	Date 10/01/2024				Amount of Contribution (\$)	\$325.00	
	Principal occur	San Antonio, TX 78228 pation / Job title (See Instructions)		Employer (See Instructions	·)		
	Owner/Opera			self	,		
	Date Full name of contributor out-of-state PAC (ID#:				Amount of Contribution (\$)	\$325.00	
	Principal occu Owner/Opera	San Antonio, TX 78228 pation / Job title (See Instructions) ator		Employer (See Instructions self	<u> </u> 5)		
	Date Full name of contributor out-of-state PAC (ID#:) 10/01/2024 Acosta, Maria Contributor address; City; State; Zip Code San Antonio, TX 78228			Amount of Contribution (\$)	\$300.00		
	Principal occu Owner/Opera	pation / Job title (See Instructions) ator		Employer (See Instructions self	5)		
			1				

	MONET	ARY POLITICAL (CONTRIBUTIO)N	IS		SCHEDUL	E A1
	The Instru	ction Guide explains hov	to complete this f	orr	n.	1	Total pages Schedule A1: Sch: 2/44 Rpt: 28/95	
2	FILER NAME Texas McDo	nald's Operators Association	PAC, Inc.			3	Filer ID (Ethics Commission 00066524	n Filers)
4	Date 10/23/2024	5 Full name of contributor Acosta, Maria6 Contributor address; City; S)	7	Amount of Contribution (\$)	\$300.00
		San Antonio, TX 78228	,	_				
8	Owner/Oper	pation / Job title (See Instructions ator	5)	9	Employer (See Instructions self	5)		
	Date 10/01/2024	Full name of contributor Acosta, Richard Contributor address; City; S	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$400.00
	Principal occu	San Antonio, TX 78228 pation / Job title (See Instructions	s)		Employer (See Instructions	<u> </u> s)		
	Owner/Opera	ator			self			
	Date 10/23/2024	Full name of contributor out-of-state PAC (ID#:) 4			Amount of Contribution (\$)	\$400.00		
		San Antonio, TX 78228						
	Principal occu Owner/Opera	pation / Job title (See Instructions ator	s)		Employer (See Instructions self	5)		
	Date 09/27/2024	Full name of contributor Adcock, Bradley Contributor address; City; S Kingwood, TX 77345)		Amount of Contribution (\$)	\$45.00
	Principal occu Owner/Opera	pation / Job title (See Instructions ator	s)		Employer (See Instructions self	5)		
	Date Full name of contributor out-of-state PAC (ID#:) 10/25/2024 Adcock, Bradley Contributor address; City; State; Zip Code Kingwood, TX 77345			Amount of Contribution (\$)	\$45.00			
	Principal occu Owner/Opera	pation / Job title (See Instructions ator	s)		Employer (See Instructions self	s)		
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	MONET	ARY POLITICAL (CONTRIBUTIO	N 	<u>.</u>		SCHEDULI	■ A1
	The Instru	ction Guide explains how	to complete this f	orr	n.	1	Total pages Schedule A1: Sch: 3/44 Rpt: 29/95	
2	FILER NAME Texas McDo	nald's Operators Association	PAC, Inc.			3	Filer ID (Ethics Commission 00066524	ı Filers)
4	Date 09/27/2024	5 Full name of contributor Adcock, Doug6 Contributor address; City; St	out-of-state PAC (ID#:_ ate; Zip Code)	7	Amount of Contribution (\$)	\$75.00
		Houston, TX 77069		_				
8	Principal occu Owner/Oper	pation / Job title (See Instructions ator)	9	Employer (See Instructions self	5)		
	Date 10/25/2024	Full name of contributor Adcock, Doug Contributor address; City; St					Amount of Contribution (\$)	\$75.00
		Houston, TX 77069 pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> s)		
	Owner/Oper	ator			self			
	Date 09/27/2024	Full name of contributor out-of-state PAC (ID#:) Back, Dustin Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$30.00		
		Tomball, TX 77375						
	Principal occu Owner/Opera	pation / Job title (See Instructions ator)		Employer (See Instructions self	5)		
	Date 10/25/2024	Full name of contributor Back, Dustin Contributor address; City; St Tomball, TX 77375	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$30.00
	Principal occu Owner/Opera	pation / Job title (See Instructions ator)		Employer (See Instructions self	5)		
	Date 09/27/2024	Full name of contributor Bell, April Contributor address; City; St	out-of-state PAC (ID#:_ ate; Zip Code				Amount of Contribution (\$)	\$15.00
	Principal occu Owner/Opera	pation / Job title (See Instructions ator)		Employer (See Instructions self	5)		
				1				

	MONEI	ARY POLITICAL (CONTRIBUTIO	N	IS		SCHEDUL	E A1
	The Instru	ction Guide explains how	to complete this f	orr	n.	1	Total pages Schedule A1: Sch: 4/44 Rpt: 30/95	
2	FILER NAME Texas McDo	nald's Operators Association	PAC, Inc.			3	Filer ID (Ethics Commission 00066524	n Filers)
4	Date 10/25/2024	5 Full name of contributor Bell, April6 Contributor address; City; St	out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	\$15.00
8	Principal occu Owner/Opera	Conroe, TX 77384 pation / Job title (See Instructions ator	s)	9	Employer (See Instructions self	5)		
	Date 09/27/2024	Full name of contributor Bentham, Denise Contributor address; City; S	out-of-state PAC (ID#:_ ate; Zip Code)	•	Amount of Contribution (\$)	\$90.00
	Cypress, TX 77433 Principal occupation / Job title (See Instructions) Owner/Operator Employer (See Instructions self		<u> </u> s)					
	Date 10/25/2024	Full name of contributor Bentham, Denise Contributor address; City; S	out-of-state PAC (ID#:_			•	Amount of Contribution (\$)	\$90.00
		Cypress, TX 77433	,			<u> </u>		
	Owner/Opera	pation / Job title (See Instructions ator	5)		Employer (See Instructions self	5)		
	Date 10/15/2024	Full name of contributor Blanton, Lori Contributor address; City; S Weatherford, TX 76087	out-of-state PAC (ID#:_)	•	Amount of Contribution (\$)	\$135.00
	Principal occu Owner/Opera	pation / Job title (See Instructions	s)		Employer (See Instructions self	<u>l</u> S)		
	Date Full name of contributor out-of-state PAC (ID#:) 09/27/2024 Bolen, Gary Contributor address; City; State; Zip Code Conroe, TX 77384		•	Amount of Contribution (\$)	\$75.00			
	Principal occu Owner/Opera	pation / Job title (See Instructions ator	s)		Employer (See Instructions self	5)		

	MONET	ARY POLITICAL CONTR	RIBUTION	S		SCHEDUL	E A1
	The Instru	ction Guide explains how to comp	olete this form	n.	1	Total pages Schedule A1: Sch: 5/44 Rpt: 31/95	
2	FILER NAME Texas McDo	nald's Operators Association PAC, Inc.			3	Filer ID (Ethics Commissio 00066524	n Filers)
4	Date 10/25/2024	 Full name of contributor out-of-st Bolen, Gary Contributor address; City; State; Zip Contributor 	tate PAC (ID#: de		7	Amount of Contribution (\$)	\$75.00
8		Conroe, TX 77384 pation / Job title (See Instructions)	9	Employer (See Instructions	 s)		
	Owner/Opera Date 09/27/2024		tate PAC (ID#:	self	-	Amount of Contribution (\$)	\$105.00
	Principal occu Owner/Opera	pation / Job title (See Instructions) ator		Employer (See Instructions self	5)		
	Date 10/25/2024	Full name of contributor out-of-state PAC (ID#:) Brown, Stuart Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$105.00	
		Missouri City, TX 77459 pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> s)		
	Owner/Operator Date Full name of contributor out-of-state PAC (ID#: 10/18/2024 Campbell, Irma Contributor address; City; State; Zip Code			self		Amount of Contribution (\$)	\$25.00
	Principal occu Owner/Opera	Alpine, TX 79831 pation / Job title (See Instructions) ator		Employer (See Instructions self	<u>l</u> s)		
	Date Full name of contributor out-of-state PAC (ID#:) O9/27/2024 Carreon, Daniel Contributor address; City; State; Zip Code Rosharon, TX 77583			Amount of Contribution (\$)	\$30.00		
	Principal occu Owner/Opera	pation / Job title (See Instructions) ator		Employer (See Instructions self	s)		
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	MONET	ARY POLITICAL (CONTRIBUTIO)N	IS		SCHEDUL	E A1
	The Instru	ction Guide explains how	to complete this f	orr	n.	1	Total pages Schedule A1: Sch: 6/44 Rpt: 32/95	
2	FILER NAME Texas McDo	nald's Operators Association	PAC, Inc.			3	Filer ID (Ethics Commission 00066524	n Filers)
4	Date 10/25/2024	5 Full name of contributor Carreon, Daniel6 Contributor address; City; St)	7	Amount of Contribution (\$)	\$30.00
		Rosharon, TX 77583						
8	Principal occu Owner/Oper	pation / Job title (See Instructions ator)	9	Employer (See Instructions self	s) 		
	Date 10/18/2024	Full name of contributor Carrillo, Anthony Contributor address; City; St	out-of-state PAC (ID#:_ ate; Zip Code)	•	Amount of Contribution (\$)	\$900.00
	Principal occu	Midland, TX 79705 pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> s)		
	Owner/Oper		,		self	,		
	Date 09/27/2024	Full name of contributor out-of-state PAC (ID#:) Casas, Abner Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$45.00		
		Dayton, TX 77535						
	Principal occu Owner/Opera	pation / Job title (See Instructions ator)		Employer (See Instructions self	5)		
	Date 10/25/2024	Full name of contributor Casas, Abner Contributor address; City; St Dayton, TX 77535	out-of-state PAC (ID#:_)	•	Amount of Contribution (\$)	\$45.00
	Principal occu Owner/Opera	pation / Job title (See Instructions ator)		Employer (See Instructions self	5)		
	Date Full name of contributor out-of-state PAC (ID#:) Casas, Jill Contributor address; City; State; Zip Code Dayton, TX 77535			Amount of Contribution (\$)	\$45.00			
	Principal occu Owner/Opera	pation / Job title (See Instructions ator)		Employer (See Instructions self	s)		
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	MONET	ARY POLITICAL (CONTRIBUTIO	N	S		SCHEDUL	E A1
	The Instruc	ction Guide explains how	to complete this f	orı	n.	1	Total pages Schedule A1: Sch: 7/44 Rpt: 33/95	
2	FILER NAME Texas McDo	nald's Operators Association	PAC, Inc.			3	Filer ID (Ethics Commission 00066524	n Filers)
4	Date 10/25/2024	5 Full name of contributor Casas, Jill6 Contributor address; City; S	out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	\$45.00
8	Principal occu	Dayton, TX 77535 pation / Job title (See Instructions	;)	9	Employer (See Instructions	<u>;)</u>		
Ü	Owner/Opera		,,	ľ	self	,,		
	Date Full name of contributor out-of-state PAC (ID#:) O9/27/2024 Casey, Laura Contributor address; City; State; Zip Code Kingwood, TX 77325			Amount of Contribution (\$)	\$45.00			
	D: : 1	<u> </u>	,	_	5 1 (0 1 1 1	<u></u>		
	Owner/Opera	pation / Job title (See Instructions ator	5)		Employer (See Instructions self	S)		
	Date 10/25/2024	Full name of contributor out-of-state PAC (ID#:) Casey, Laura Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$45.00		
		Kingwood, TX 77325						
	Principal occu Owner/Opera	pation / Job title (See Instructions ator	s)		Employer (See Instructions self	s)		
	Date Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$180.00		
	Principal occu Owner/Opera	pation / Job title (See Instructions ator	5)		Employer (See Instructions self	5)		
	Date Full name of contributor out-of-state PAC (ID#:) O9/27/2024 Choma, Tiffany Contributor address; City; State; Zip Code Houston, TX 77092		•	Amount of Contribution (\$)	\$15.00			
	Principal occu Owner/Opera	pation / Job title (See Instructions ator	5)		Employer (See Instructions self	s)		
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	MONEI	ARY POLITICAL C	ONTRIBUTIO	'N	S		SCHEDUL	E A1
	The Instru	ction Guide explains how	to complete this fo	orn	m.	1	Total pages Schedule A1: Sch: 8/44 Rpt: 34/95	
2	FILER NAME Texas McDo	onald's Operators Association I	PAC, Inc.			3	Filer ID (Ethics Commission 00066524	n Filers)
4	Date 10/25/2024	Full name of contributor Choma, TiffanyContributor address; City; Sta	out-of-state PAC (ID#:ate; Zip Code			7	Amount of Contribution (\$)	\$15.00
8	Principal occu	Houston, TX 77092)	9	Employer (See Instructions	 		
-	Owner/Opera		, 		self	,		
	Date 10/18/2024	Full name of contributor Cohen, Bill Contributor address; City; Sta	out-of-state PAC (ID#:ate; Zip Code)		Amount of Contribution (\$)	\$125.00
		Levelland, TX 79336						
	Principal occur Owner/Opera	upation / Job title (See Instructions) rator)		Employer (See Instructions self	s)		
	Date 10/01/2024	Full name of contributor out-of-state PAC (ID#:)			Amount of Contribution (\$)	\$150.00		
		Lampasas, TX 76550						
	Principal occu Owner/Opera	upation / Job title (See Instructions) rator)		Employer (See Instructions self	5)		
	Date 10/23/2024	Full name of contributor Conlan, Hampton Contributor address; City; Sta)		Amount of Contribution (\$)	\$150.00
	Principal occu Owner/Opera	upation / Job title (See Instructions) rator)		Employer (See Instructions self	5)		
	Date 10/01/2024	Full name of contributor Conlan, Lynette Contributor address; City; State Lampasas, TX 76550	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$175.00
	Principal occu Owner/Opera	upation / Job title (See Instructions) rator)		Employer (See Instructions self	5)		

	MONEI	ARY POLITICAL C	ONTRIBUTION	NS		SCHEDUL	E A1
	The Instru	ction Guide explains how	to complete this for	m.	1	Total pages Schedule A1: Sch: 9/44 Rpt: 35/95	
2	FILER NAME Texas McDo	nald's Operators Association F	PAC, Inc.		3	Filer ID (Ethics Commission 00066524	n Filers)
4	Date 10/23/2024	5 Full name of contributor Conlan, Lynette6 Contributor address; City; Sta	out-of-state PAC (ID#: te; Zip Code		7	Amount of Contribution (\$)	\$175.00
8	Principal occu	Lampasas, TX 76550 pation / Job title (See Instructions) ator	9	Employer (See Instructions	s)		
	Date 10/01/2024	Full name of contributor Contreras, Shelly Contributor address; City; Sta	out-of-state PAC (ID#: te; Zip Code			Amount of Contribution (\$)	\$75.00
		Principal occupation / Job title (See Instructions) Owner/Operator Employer (See Instruction self					
	Date 10/23/2024	Full name of contributor Contreras, Shelly Contributor address; City; Sta San Antonio, TX 78221	out-of-state PAC (ID#: te; Zip Code)		Amount of Contribution (\$)	\$75.00
	Principal occu Owner/Opera	pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> s)		
	Date 10/18/2024	Full name of contributor Credle, Susan Contributor address; City; Sta	out-of-state PAC (ID#: te; Zip Code			Amount of Contribution (\$)	\$75.00
	Principal occu Owner/Opera	pation / Job title (See Instructions)		Employer (See Instructions self	s)		
	Date 10/18/2024	Full name of contributor Dana, Osman Contributor address; City; Sta Amarillo, TX 79119	out-of-state PAC (ID#: te; Zip Code			Amount of Contribution (\$)	\$750.00
	Principal occu Owner/Opera	I pation / Job title (See Instructions) ator		Employer (See Instructions self	s)		

	MONEI	ARY POLITICAL (CONTRIBUTIO	N	IS		SCHEDUL	E A1
	The Instruc	ction Guide explains hov	v to complete this fo	orı	n.	1	Total pages Schedule A1: Sch: 10/44 Rpt: 36/95	
2	FILER NAME Texas McDo	nald's Operators Association	PAC. Inc.			3	Filer ID (Ethics Commission 00066524	n Filers)
4	Date	5 Full name of contributor	out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	
	10/01/2024	De Leon, Ignacio						\$200.00
		6 Contributor address; City; S	tate; Zip Code					
	Dringing con	Laredo, TX 78043	2)	_	Employer (Co.) Instructions	<u></u>		
8	Owner/Opera	pation / Job title (See Instructions ator	5)	9	Employer (See Instructions self	5)		
Date		Full name of contributor	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	
	10/23/2024	De Leon, Ignacio						\$175.00
	Contributor address; City; State; Zip Code							
		Laredo, TX 78043						
		pation / Job title (See Instructions	5)		Employer (See Instructions	s)		
	Owner/Operator self		_					
	Date	Full name of contributor	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$00.00
	09/27/2024	De la Garza, Deanna Contributor address; City; S	toto: Zin Codo					\$90.00
		Brownsville, TX 78520	ante, zip Gode					
	Principal occu	pation / Job title (See Instructions	5)	Г	Employer (See Instructions	<u> </u>		
	Owner/Opera	ator			self			
	Date	Full name of contributor	out-of-state PAC (ID#:_				Amount of Contribution (\$)	
	10/25/2024	De la Garza, Deanna						\$90.00
		Contributor address; City; S Brownsville, TX 78520	tate; Zip Code					
	Principal occu	pation / Job title (See Instructions	5)		Employer (See Instructions	5)		
	Owner/Opera	ator			self			
	Date	Full name of contributor	out-of-state PAC (ID#:_				Amount of Contribution (\$)	
	10/01/2024	De la Garza, Hector						\$50.00
		Contributor address; City; S Brownsville, TX 78520	tate; Zip Code					
	Principal occu	nation / Job title (See Instructions	5)		Employer (See Instructions	5)		
	Owner/Opera	ator			self			

	MONET	ARY POLITICAL C	CONTRIBUTIO	N	S		SCHEDUL	E A1
	The Instru	ction Guide explains how	to complete this fo	rr	n.	1	Total pages Schedule A1: Sch: 11/44 Rpt: 37/95	
2	FILER NAME Texas McDo	nald's Operators Association	PAC, Inc.			3	Filer ID (Ethics Commissio 00066524	n Filers)
4	Date 10/23/2024	5 Full name of contributorDe la Garza, Hector6 Contributor address; City; St	out-of-state PAC (ID#:ate; Zip Code			7	Amount of Contribution (\$)	\$50.00
		Brownsville, TX 78520						
8	Principal occu Owner/Oper	pation / Job title (See Instructions ator)	9	Employer (See Instructions self	s) 		
	Date 10/01/2024	Full name of contributor Del Barrio Jr., Alfredo Contributor address; City; St	out-of-state PAC (ID#: ate; Zip Code)		Amount of Contribution (\$)	\$300.00
	Principal occu	McAllen, TX 78501 pation / Job title (See Instructions)		Employer (See Instructions	<u>s)</u>		
	Owner/Opera		,		self	-,		
	Date 10/23/2024	Full name of contributor Del Barrio Jr., Alfredo Contributor address; City; St	out-of-state PAC (ID#:ate; Zip Code)		Amount of Contribution (\$)	\$300.00
		McAllen, TX 78501						
	Principal occu Owner/Opera	pation / Job title (See Instructions ator)		Employer (See Instructions self	5)		
	Date 10/01/2024	Full name of contributor Dobski, Anthony Contributor address; City; St Laredo, TX 78041	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$75.00
	Principal occu Owner/Opera	pation / Job title (See Instructions ator			Employer (See Instructions self	5)		
	Date 10/23/2024	Full name of contributor Dobski, Anthony Contributor address; City; St	out-of-state PAC (ID#:				Amount of Contribution (\$)	\$75.00
	Principal occu Owner/Opera	pation / Job title (See Instructions ator			Employer (See Instructions self	s)		
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	MONET	ARY POLITICAL C	CONTRIBUTIO	N	<u>.</u>		SCHEDUL	E A1
	The Instru	ction Guide explains how	to complete this fo	rr	m.	1	Total pages Schedule A1: Sch: 12/44 Rpt: 38/95	
2	FILER NAME Texas McDo	nald's Operators Association	PAC, Inc.			3	Filer ID (Ethics Commission 00066524	n Filers)
4	Date 09/27/2024	5 Full name of contributorElizondo, Kimberly6 Contributor address; City; St	out-of-state PAC (ID#:ate; Zip Code			7	Amount of Contribution (\$)	\$45.00
		Houston, TX 77205						
8	Principal occu Owner/Oper	pation / Job title (See Instructions ator)	9	Employer (See Instructions self	s) 		
	Date 10/25/2024	Full name of contributor Elizondo, Kimberly Contributor address; City; St	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$45.00
	Principal occu	Houston, TX 77205 pation / Job title (See Instructions	<u>)</u>		Employer (See Instructions	<i>(</i>)		
	Owner/Oper		,		self	-,		
	Date 10/01/2024	Full name of contributor Ellis, Jordan Contributor address; City; St	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$275.00
		Beaumont, TX 77702						
	Principal occu Owner/Opera	pation / Job title (See Instructions ator	()		Employer (See Instructions self	5)		
	Date 10/23/2024	Full name of contributor Ellis, Jordan Contributor address; City; St Beaumont, TX 77702	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$275.00
	Principal occu Owner/Opera	pation / Job title (See Instructions ator)		Employer (See Instructions self	5)		
	Date 10/01/2024	Full name of contributor Ellis, Russell Contributor address; City; St Corpus Christi, TX 78414	out-of-state PAC (ID#:_			-	Amount of Contribution (\$)	\$375.00
	Principal occu Owner/Opera	pation / Job title (See Instructions ator)		Employer (See Instructions self	5)		

	MONET	ARY POLITICAL C	CONTRIBUTIO	N	S		SCHEDUL	E A1
	The Instru	ction Guide explains how	to complete this fo	orr	n.	1	Total pages Schedule A1: Sch: 13/44 Rpt: 39/95	
2	FILER NAME Texas McDo	nald's Operators Association	PAC, Inc.			3	Filer ID (Ethics Commission 00066524	n Filers)
4	Date 10/23/2024	5 Full name of contributorEllis, Russell6 Contributor address; City; St)	7	Amount of Contribution (\$)	\$375.00
		Corpus Christi, TX 78414						
8	Principal occu Owner/Oper	pation / Job title (See Instructions ator)	9	Employer (See Instructions self	5)		
	Date 10/01/2024	Full name of contributor Estate of Jose Lopez Ferg Contributor address; City; St	·			•	Amount of Contribution (\$)	\$25.00
	Principal occu	Austin, TX 78754 pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> 5)		
	Owner/Oper	ator			self			
	Date 10/23/2024	Full name of contributor Estate of Jose Lopez Ferg Contributor address; City; St)		Amount of Contribution (\$)	\$25.00
		Austin, TX 78754						
	Principal occu Owner/Opera	pation / Job title (See Instructions ator			Employer (See Instructions self	5)		
	Date 10/01/2024	Full name of contributor Estate of Martha Mendoza Contributor address; City; St Del Rio, TX 78840					Amount of Contribution (\$)	\$25.00
	Principal occu Owner/Opera	pation / Job title (See Instructions ator)		Employer (See Instructions self	<u>1 </u>		
	Date 10/23/2024	Full name of contributor Estate of Martha Mendoza Contributor address; City; St Del Rio, TX 78840					Amount of Contribution (\$)	\$25.00
	Principal occu Owner/Opera	pation / Job title (See Instructions ator			Employer (See Instructions self	5)		

	MONEI	ARY POLITICAL C	ONTRIBUTION	N	S		SCHEDUL	E A1
	The Instru	ction Guide explains how	to complete this fo	rn	n.	1	Total pages Schedule A1: Sch: 14/44 Rpt: 40/95	
2	FILER NAME Texas McDo	onald's Operators Association I	PAC, Inc.			3	Filer ID (Ethics Commission 00066524	າ Filers)
4	Date 10/18/2024	Full name of contributorFadke, KennyContributor address; City; State	out-of-state PAC (ID#:			7	Amount of Contribution (\$)	\$15.00
8	Dringinal occu	Hobbs, NM 88240	<u></u>	<u> </u>	Employer (See Instructions	·,		
ه ا	Owner/Opera	rator			self			
	Date 10/01/2024	Full name of contributor Ferguson, Cynthia Contributor address; City; Sta	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$75.00
	Principal occu	Austin, TX 78754 upation / Job title (See Instructions)	s)	_	Employer (See Instructions	<u> </u> ;)		
	Owner/Opera	ator			self			
	Date 10/23/2024	Full name of contributor Ferguson, Cynthia Contributor address; City; Sta	out-of-state PAC (ID#:				Amount of Contribution (\$)	\$75.00
		Austin, TX 78754						
	Principal occu Owner/Opera	upation / Job title (See Instructions) rator)		Employer (See Instructions self	5)		
	Date 10/01/2024	Full name of contributor Ferguson, Jimmy Contributor address; City; Sta					Amount of Contribution (\$)	\$125.00
	Principal occu Owner/Opera	upation / Job title (See Instructions) rator)		Employer (See Instructions self	5)		
	Date 10/23/2024	Full name of contributor Ferguson, Jimmy Contributor address; City; Sta	out-of-state PAC (ID#:				Amount of Contribution (\$)	\$125.00
	Principal occu Owner/Opera	upation / Job title (See Instructions) rator)		Employer (See Instructions self	5)		
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	MONET	ARY POLITICAL CONT	TRIBUTION	S		SCHEDUL	E A1
	The Instruc	ction Guide explains how to co	mplete this form	n.	1	Total pages Schedule A1: Sch: 15/44 Rpt: 41/95	
2	FILER NAME Texas McDo	nald's Operators Association PAC, In	nc.		3	Filer ID (Ethics Commission 00066524	n Filers)
4	Date 10/01/2024	Frank-Silmon, Joy	of-state PAC (ID#:		7	Amount of Contribution (\$)	\$125.00
8	Principal occu	Flower Mound, TX 75027 pation / Job title (See Instructions)	l _a	Employer (See Instructions	;) 		
Ŭ	Owner/Opera			self	',		
	Date 10/15/2024	Full name of contributor out-out-out-out-out-out-out-out-out-out-				Amount of Contribution (\$)	\$60.00
		Flower Mound, TX 75027					
	Owner/Opera	pation / Job title (See Instructions) ator		Employer (See Instructions self	5)		
	Date 10/23/2024	Full name of contributor out-out-out-out-out-out-out-out-out-out-	of-state PAC (ID#:			Amount of Contribution (\$)	\$125.00
		Flower Mound, TX 75027					
	Principal occu Owner/Opera	pation / Job title (See Instructions) ator		Employer (See Instructions self	5)		
	Date 09/27/2024	Glaser, David	of-state PAC (ID#:			Amount of Contribution (\$)	\$275.00
	Principal occu Owner/Opera	pation / Job title (See Instructions) ator		Employer (See Instructions self	5)		
	Date 10/01/2024	Full name of contributor out-of Glaser, David Contributor address; City; State; Zip of Katy, TX 77494	of-state PAC (ID#:			Amount of Contribution (\$)	\$225.00
	Principal occu Owner/Opera	pation / Job title (See Instructions) ator		Employer (See Instructions self	5)		
			'				

	MONET	ARY POLITICAL (CONTRIBUTIO)N	S		SCHEDUL	E A1
	The Instru	ction Guide explains how	to complete this fo	orr	n.	1	Total pages Schedule A1: Sch: 16/44 Rpt: 42/95	
2	FILER NAME Texas McDo	nald's Operators Association	PAC, Inc.			3	Filer ID (Ethics Commission 00066524	n Filers)
4	Date 10/23/2024	5 Full name of contributor Glaser, David6 Contributor address; City; St)	7	Amount of Contribution (\$)	\$225.00
L		Katy, TX 77494		_				
8	Owner/Oper	pation / Job title (See Instructions ator	;)	9	Employer (See Instructions self	5)		
	Date 10/25/2024	Full name of contributor Glaser, David Contributor address; City; S	out-of-state PAC (ID#:_ ate; Zip Code)		Amount of Contribution (\$)	\$275.00
_	Principal occu	Katy, TX 77494 pation / Job title (See Instructions	;)		Employer (See Instructions self	<u> </u> s)		
	Date 09/27/2024	Full name of contributor Glaser, Phyllis Contributor address; City; S	out-of-state PAC (ID#:_			•	Amount of Contribution (\$)	\$30.00
	Principal occu	Spring, TX 77391 pation / Job title (See Instructions	s)		Employer (See Instructions self	<u> </u> s)		
	Date 10/25/2024	Full name of contributor Glaser, Phyllis Contributor address; City; S Spring, TX 77391	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$30.00
	Principal occu	pation / Job title (See Instructions	s)		Employer (See Instructions self	<u>l</u> s)		
	Date 09/27/2024	Full name of contributor Glaser-Swift, Laurie Contributor address; City; S Cypress, TX 77429	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$150.00
	Principal occu Owner/Opera	pation / Job title (See Instructions ator	s)		Employer (See Instructions self	5)		

	MONET	ARY POLITICAL C	CONTRIBUTIO	N 			SCHEDUL	E A1
	The Instru	ction Guide explains how	to complete this fo	orr	m.	1	Total pages Schedule A1: Sch: 17/44 Rpt: 43/95	
2	FILER NAME Texas McDo	nald's Operators Association	PAC, Inc.			3	Filer ID (Ethics Commission 00066524	n Filers)
4	Date 10/25/2024	5 Full name of contributorGlaser-Swift, Laurie6 Contributor address; City; St)	7	Amount of Contribution (\$)	\$150.00
		Cypress, TX 77429						
8	Principal occu Owner/Oper	pation / Job title (See Instructions ator)	9	Employer (See Instructions self	5)		
	Date 10/01/2024	Full name of contributor Gonzales Jr., Vincente Contributor address; City; St	out-of-state PAC (ID#:_ ate; Zip Code				Amount of Contribution (\$)	\$75.00
	Principal occu	Waco, TX 76703 pation / Job title (See Instructions)		Employer (See Instructions	<u>s)</u>		
	Owner/Oper		,		self	-,		
	Date 10/23/2024	Full name of contributor Gonzales Jr., Vincente Contributor address; City; St	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$75.00
		Waco, TX 76703						
	Principal occu Owner/Opera	pation / Job title (See Instructions ator)		Employer (See Instructions self	5)		
	Date 09/27/2024	Full name of contributor Grafmiller, Todd Contributor address; City; St Atascocita, TX 77346	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$90.00
	Principal occu Owner/Opera	pation / Job title (See Instructions ator)		Employer (See Instructions self	5)		
	Date 10/25/2024	Full name of contributor Grafmiller, Todd Contributor address; City; St Atascocita, TX 77346	out-of-state PAC (ID#:_ ate; Zip Code				Amount of Contribution (\$)	\$90.00
	Principal occu Owner/Opera	pation / Job title (See Instructions ator)		Employer (See Instructions self	5)		

	MONET	ARY POLITICAL C	ONTRIBUTIO	N	S		SCHEDUL	E A1
	The Instruc	ction Guide explains how	to complete this fo	orr	n.	1	Total pages Schedule A1: Sch: 18/44 Rpt: 44/95	
2	FILER NAME Texas McDo	nald's Operators Association	PAC, Inc.			3	Filer ID (Ethics Commission 00066524	n Filers)
4	Date 09/27/2024	5 Full name of contributor Gutierrez, David6 Contributor address; City; St	out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	\$180.00
8		Houston, TX 77055 pation / Job title (See Instructions)	9	Employer (See Instructions	s)		
	Owner/Opera Date 10/25/2024	Full name of contributor Gutierrez, David Contributor address; City; St Houston, TX 77055			self		Amount of Contribution (\$)	\$180.00
	Principal occu Owner/Opera	pation / Job title (See Instructions ator)		Employer (See Instructions self	<u>s)</u>		
	Date 09/27/2024	Full name of contributor Gutierrez, Michael Contributor address; City; St	out-of-state PAC (ID#:_ ate; Zip Code)		Amount of Contribution (\$)	\$15.00
		Houston, TX 77055 pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> s)		
	Owner/Opera Date 10/25/2024	Full name of contributor Gutierrez, Michael Contributor address; City; St Houston, TX 77055			self		Amount of Contribution (\$)	\$15.00
	Principal occu Owner/Opera	pation / Job title (See Instructions)		Employer (See Instructions self	<u> </u>		
	Date 10/15/2024	Full name of contributor Hardeman, Tommy Contributor address; City; St Southlake, TX 76092	out-of-state PAC (ID#:_ ate; Zip Code)		Amount of Contribution (\$)	\$30.00
	Principal occu Owner/Opera	pation / Job title (See Instructions ator)		Employer (See Instructions self	s)		

	MONET	ARY POLITICAL (CONTRIBUTIO	<u>N</u>	S		SCHEDUL	E A1
	The Instru	ction Guide explains how	to complete this fo	orr	m.	1	Total pages Schedule A1: Sch: 19/44 Rpt: 45/95	
2	FILER NAME Texas McDo	nald's Operators Association	PAC, Inc.			3	Filer ID (Ethics Commission 00066524	n Filers)
4	Date 10/18/2024	5 Full name of contributor Harmon, David6 Contributor address; City; St)	7	Amount of Contribution (\$)	\$125.00
		Abilene, TX 79602		_				
8	Principal occu Owner/Oper	pation / Job title (See Instructions ator	;)	9	Employer (See Instructions self	5)		
	Date 10/01/2024	Full name of contributor Ingram, Tyrous Contributor address; City; St	out-of-state PAC (ID#:_ ate; Zip Code				Amount of Contribution (\$)	\$330.00
	Principal occu	Frisco, TX 75034 pation / Job title (See Instructions	s)		Employer (See Instructions	 ;)		
	Owner/Oper		,		self	,		
	Date 10/01/2024	Full name of contributor Jairala, Celia Contributor address; City; Si	out-of-state PAC (ID#:_ ate; Zip Code				Amount of Contribution (\$)	\$300.00
		San Antonio, TX 78228						
	Principal occu Owner/Opera	pation / Job title (See Instructions ator	s)		Employer (See Instructions self	s)		
	Date 10/23/2024	Full name of contributor Jairala, Celia Contributor address; City; Si San Antonio, TX 78228	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$300.00
	Principal occu Owner/Opera	pation / Job title (See Instructions ator	5)		Employer (See Instructions self	s)		
	Date 10/15/2024	Full name of contributor Jasper, Joe Contributor address; City; St	out-of-state PAC (ID#:_				Amount of Contribution (\$)	\$180.00
	Principal occu Owner/Opera	pation / Job title (See Instructions ator	s)		Employer (See Instructions self	;)		

	MONET	ARY POLITICAL C	CONTRIBUTIO	N	IS		SCHEDUL	E A1
	The Instru	ction Guide explains how	to complete this fo	orr	n.	1	Total pages Schedule A1: Sch: 20/44 Rpt: 46/95	
2	FILER NAME Texas McDo	nald's Operators Association	PAC, Inc.			3	Filer ID (Ethics Commission 00066524	n Filers)
4	Date 10/15/2024	5 Full name of contributor Jasper, Karen6 Contributor address; City; St	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	\$15.00
		Fort Worth, TX 76116	, 1	_				
8	Owner/Oper	pation / Job title (See Instructions ator	·)	9	Employer (See Instructions self	5)		
	Date 09/27/2024	Full name of contributor Kades, Ken Contributor address; City; St	out-of-state PAC (ID#:_ ate; Zip Code				Amount of Contribution (\$)	\$570.00
	Principal occu	Pasadena, TX 77505 pation / Job title (See Instructions	s) [Employer (See Instructions	<u> </u> s)		
	Owner/Oper		,		self	,		
	Date 10/25/2024	Full name of contributor Kades, Ken Contributor address; City; St	out-of-state PAC (ID#:_ ate; Zip Code)		Amount of Contribution (\$)	\$570.00
		Pasadena, TX 77505						
	Principal occu Owner/Opera	pation / Job title (See Instructions ator)		Employer (See Instructions self	5)		
	Date 09/27/2024	Full name of contributor Kades, Matthew Contributor address; City; St Houston, TX 77024	out-of-state PAC (ID#:_ ate; Zip Code)		Amount of Contribution (\$)	\$150.00
	Principal occu Owner/Opera	pation / Job title (See Instructions ator)		Employer (See Instructions self	5)		
	Date 10/25/2024	Full name of contributor Kades, Matthew Contributor address; City; St Houston, TX 77024	out-of-state PAC (ID#:_)	-	Amount of Contribution (\$)	\$150.00
	Principal occu Owner/Opera	pation / Job title (See Instructions ator)		Employer (See Instructions self	s)		

	MONET	ARY POLITICAL C	CONTRIBUTIO	N			SCHEDUL	E A1
	The Instru	ction Guide explains how	to complete this fo	orr	m.	1	Total pages Schedule A1: Sch: 21/44 Rpt: 47/95	
2	FILER NAME Texas McDo	nald's Operators Association	PAC, Inc.			3	Filer ID (Ethics Commissio 00066524	n Filers)
4	Date 09/27/2024	5 Full name of contributor Kades, Rachel6 Contributor address; City; St	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	\$75.00
		Webster, TX 77598						
8	Principal occu Owner/Oper	pation / Job title (See Instructions ator)	9	Employer (See Instructions self	5)		
	Date 10/25/2024	Full name of contributor Kades, Rachel Contributor address; City; St	out-of-state PAC (ID#:			•	Amount of Contribution (\$)	\$75.00
	Principal occu	Webster, TX 77598 pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> s)		
	Owner/Oper		,		self	,		
	Date 10/01/2024	Full name of contributor Kantar, Sam Contributor address; City; St	out-of-state PAC (ID#:ate; Zip Code)	•	Amount of Contribution (\$)	\$200.00
		Richland Hills, TX 76118						
	Principal occu Owner/Opera	pation / Job title (See Instructions ator)		Employer (See Instructions self	5)		
	Date 10/15/2024	Full name of contributor Kantar, Sam Contributor address; City; St Richland Hills, TX 76118	out-of-state PAC (ID#:ate; Zip Code				Amount of Contribution (\$)	\$120.00
	Principal occu Owner/Opera	pation / Job title (See Instructions ator)		Employer (See Instructions self	5)		
	Date 10/23/2024	Full name of contributor Kantar, Sam Contributor address; City; St Richland Hills, TX 76118	out-of-state PAC (ID#:_				Amount of Contribution (\$)	\$200.00
	Principal occu Owner/Opera	pation / Job title (See Instructions ator)		Employer (See Instructions self	<u>.</u> S)		

	MONEI	ARY POLITICAL C	CONTRIBUTIO	Ν	IS		SCHEDUL	E A1
	The Instru	ction Guide explains how	to complete this fo	orr	n.	1	Total pages Schedule A1: Sch: 22/44 Rpt: 48/95	
2	FILER NAME Texas McDo	onald's Operators Association	PAC, Inc.			3	Filer ID (Ethics Commission 00066524	n Filers)
4	Date 09/27/2024	5 Full name of contributor Keiser, Merle6 Contributor address; City; St	out-of-state PAC (ID#:_			7	Amount of Contribution (\$)	\$45.00
8	Principal occu Owner/Opera	Houston, TX 77069 pation / Job title (See Instructions ator)	9	Employer (See Instructions self	5)		
	Date 10/25/2024	Full name of contributor Keiser, Merle Contributor address; City; St Houston, TX 77069	out-of-state PAC (ID#:_ ate; Zip Code				Amount of Contribution (\$)	\$45.00
	Principal occu Owner/Opera	pation / Job title (See Instructions)		Employer (See Instructions self	<u> </u>		
	Date 10/15/2024	Full name of contributor Kelley, Jon Contributor address; City; St	out-of-state PAC (ID#:_ ate; Zip Code			•	Amount of Contribution (\$)	\$135.00
	Principal occu	Richardson, TX 75080 pation / Job title (See Instructions)		Employer (See Instructions	;) 		
	Owner/Opera		,		self	-,		
	Date 09/27/2024	Full name of contributor Kelly, Howard Contributor address; City; St Houston, TX 77205	out-of-state PAC (ID#:_ ate; Zip Code				Amount of Contribution (\$)	\$30.00
	Principal occu Owner/Opera	pation / Job title (See Instructions)		Employer (See Instructions self	<u>l</u> s)		
	Date 10/25/2024	Full name of contributor Kelly, Howard Contributor address; City; St Houston, TX 77205	out-of-state PAC (ID#:_				Amount of Contribution (\$)	\$30.00
	Principal occu Owner/Opera	pation / Job title (See Instructions ator)		Employer (See Instructions self	5)		

	MONET	ARY POLITICAL C	CONTRIBUTIO	N 	S		SCHEDULI	■ A1
	The Instru	ction Guide explains how	to complete this fo	orr	n.	1	Total pages Schedule A1: Sch: 23/44 Rpt: 49/95	
2	FILER NAME Texas McDo	nald's Operators Association	PAC, Inc.			3	Filer ID (Ethics Commission 00066524	Filers)
4	Date 09/27/2024	5 Full name of contributor Kessler, Suzanne6 Contributor address; City; St	out-of-state PAC (ID#:_ ate; Zip Code)	7	Amount of Contribution (\$)	\$30.00
		Spring, TX 77379						
8	Owner/Opera	pation / Job title (See Instructions ator)	9	Employer (See Instructions self	5)		
	Date 10/25/2024	Full name of contributor Kessler, Suzanne Contributor address; City; St	out-of-state PAC (ID#:_ ate; Zip Code				Amount of Contribution (\$)	\$30.00
		Spring, TX 77379 pation / Job title (See Instructions	·)		Employer (See Instructions	<u> </u> s)		
	Owner/Opera	ator			self			
	Date 10/18/2024				Amount of Contribution (\$)	\$50.00		
		Vista, CA 92084						
	Principal occu Owner/Opera	pation / Job title (See Instructions ator)		Employer (See Instructions self	5)		
	Date 10/01/2024	Full name of contributor Kinney, Daniel Contributor address; City; St Bastrop, TX 78602	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$50.00
	Principal occu Owner/Opera	pation / Job title (See Instructions ator)		Employer (See Instructions self	5)		
	Date 10/23/2024	Full name of contributor Kinney, Daniel Contributor address; City; St Bastrop, TX 78602	out-of-state PAC (ID#:_				Amount of Contribution (\$)	\$50.00
	Principal occu Owner/Opera	pation / Job title (See Instructions ator)		Employer (See Instructions self	s)		
			•					

	MONET	ARY POLITICAL C	CONTRIBUTIO)N	S		SCHEDUL	E A1
	The Instru	ction Guide explains how	to complete this f	orr	n.	1	Total pages Schedule A1: Sch: 24/44 Rpt: 50/95	
2	FILER NAME Texas McDo	nald's Operators Association	PAC, Inc.			3	Filer ID (Ethics Commission 00066524	n Filers)
4	Date 10/01/2024	5 Full name of contributor Kinney, Jason6 Contributor address; City; St)	7	Amount of Contribution (\$)	\$150.00
	Dringing Lagor	Bastrop, TX 78602	.	•	Franks or (Cook batterations			
8	Owner/Oper	pation / Job title (See Instructions ator)	9	Employer (See Instructions self	5)		
	Date 10/23/2024	Full name of contributor Kinney, Jason Contributor address; City; St	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$150.00
	Principal occu	Bastrop, TX 78602 pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> s)		
	Owner/Oper		,		self	,		
	Date 10/15/2024			•	Amount of Contribution (\$)	\$240.00		
		Colleyville, TX 76034						
	Principal occu Owner/Opera	pation / Job title (See Instructions ator)		Employer (See Instructions self	s)		
	Date 10/15/2024	Full name of contributor Lilly, Kevin Contributor address; City; St Athens, TX 75751	out-of-state PAC (ID#:_				Amount of Contribution (\$)	\$330.00
	Principal occu Owner/Opera	pation / Job title (See Instructions ator)		Employer (See Instructions self	5)		
	Date 10/01/2024	Full name of contributor Lim, Maria Contributor address; City; St Marble Falls, TX 78654	out-of-state PAC (ID#:_)	-	Amount of Contribution (\$)	\$50.00
				Employer (See Instructions self	5)			

	MONET	Second S			SCHEDULI	■ A1		
	The Instru	ction Guide explains how	to complete this f	orr	m.	1	Total pages Schedule A1: Sch: 25/44 Rpt: 51/95	
2	FILER NAME Texas McDo	nald's Operators Association	PAC, Inc.			3	Filer ID (Ethics Commission 00066524	Filers)
4	Date 10/23/2024	Lim, Maria	<u> </u>			7	Amount of Contribution (\$)	\$50.00
8	Principal occu Owner/Oper)	9		5)		
	Date 10/15/2024	Lopez-McWilliams, Karen	<u> </u>)		Amount of Contribution (\$)	\$60.00
	Principal occu	·)	<u> </u>	Employer (See Instructions	<u>:)</u>		
	Owner/Opera		,			"		
	Date 10/15/2024	Full name of contributor out-of-state PAC (ID#:) 5/2024 Lozano, Jose		•	Amount of Contribution (\$)	\$45.00		
		Plano, TX 75024						
	Principal occu Owner/Opera)		Employer (See Instructions self	5)		
	Date 10/01/2024	Lutito Jr., David Contributor address; City; St	<u> </u>		,		Amount of Contribution (\$)	\$25.00
	Principal occu Owner/Opera	`)		Employer (See Instructions self	5)		
	Date 10/23/2024	Lutito Jr., David Contributor address; City; St					Amount of Contribution (\$)	\$25.00
	Principal occu Owner/Opera	`)		Employer (See Instructions self	<u>.</u> S)		

	MONET	ARY POLITICAL CO	ONTRIBUTION	S		SCHEDUL	E A1
	The Instruc	ction Guide explains how to	complete this forr	m.	1	Total pages Schedule A1: Sch: 26/44 Rpt: 52/95	
2	FILER NAME Texas McDo	nald's Operators Association PA	.C, Inc.		3	Filer ID (Ethics Commission 00066524	n Filers)
4	Date 10/01/2024	5 Full name of contributor Lutito Jr., Edward6 Contributor address; City; State	out-of-state PAC (ID#:; Zip Code		7	Amount of Contribution (\$)	\$375.00
8		Jonestown, TX 78645 pation / Job title (See Instructions)	9	Employer (See Instructions	j 5)		
	Owner/Opera Date 10/23/2024	Full name of contributor Lutito Jr., Edward Contributor address; City; State Jonestown, TX 78645	out-of-state PAC (ID#:;	self		Amount of Contribution (\$)	\$375.00
	Principal occu Owner/Opera	pation / Job title (See Instructions) ator		Employer (See Instructions self	<u>(</u>		
	Date 09/27/2024	Full name of contributor Majors, Angela Contributor address; City; State	out-of-state PAC (ID#:; ; Zip Code			Amount of Contribution (\$)	\$30.00
		Humble, TX 77346 pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> 5)		
	Owner/Opera Date 10/25/2024	Full name of contributor Majors, Angela Contributor address; City; State Humble, TX 77346	out-of-state PAC (ID#:; Zip Code	self		Amount of Contribution (\$)	\$30.00
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions self	<u> </u> 5)		
	Date 10/01/2024	Full name of contributor Marasco, Danielle Contributor address; City; State Laredo, TX 78041	out-of-state PAC (ID#:;)		Amount of Contribution (\$)	\$250.00
	Principal occu Owner/Opera	pation / Job title (See Instructions) ator		Employer (See Instructions self	5)		

	MONET	ARY POLITICAL (CONTRIBUTIO	N	IS		SCHEDUL	E A1
	The Instru	ction Guide explains how	to complete this fo	orr	n.	1	Total pages Schedule A1: Sch: 27/44 Rpt: 53/95	
2	FILER NAME Texas McDo	nald's Operators Association	PAC, Inc.			3	Filer ID (Ethics Commission 00066524	n Filers)
4	Date 10/23/2024	5 Full name of contributor Marasco, Danielle6 Contributor address; City; St	out-of-state PAC (ID#:ate; Zip Code)	7	Amount of Contribution (\$)	\$250.00
		Laredo, TX 78041	, I	_	5 1 (0 1 1 1			
8	Owner/Oper	pation / Job title (See Instructions ator)	9	Employer (See Instructions self	5)		
	Date 10/18/2024	Full name of contributor Martin, Kevin Contributor address; City; St	out-of-state PAC (ID#:			•	Amount of Contribution (\$)	\$45.00
	Principal occu	Altus, OK 73521 pation / Job title (See Instructions	s) [Employer (See Instructions	<u> </u>		
	Owner/Oper		,		self	,		
	Date 10/15/2024				Amount of Contribution (\$)	\$195.00		
		Coppell, TX 75019						
	Principal occu Owner/Opera	pation / Job title (See Instructions ator)		Employer (See Instructions self	5)		
	Date 10/15/2024	Full name of contributor Massey, William Contributor address; City; St Coppell, TX 75019	out-of-state PAC (ID#:_ ate; Zip Code)		Amount of Contribution (\$)	\$105.00
	Principal occu Owner/Opera	pation / Job title (See Instructions ator)		Employer (See Instructions self	5)		
	Date 10/01/2024	Full name of contributor Mazzu, Kevin Contributor address; City; St San Antonio, TX 78257	out-of-state PAC (ID#:_				Amount of Contribution (\$)	\$125.00
	Principal occu Owner/Opera	pation / Job title (See Instructions ator	s)		Employer (See Instructions self	5)		

	MONET	Soperators Association PAC, Inc. 5			SCHEDUL	E A1		
	The Instru	ction Guide explains how	to complete this fo	rr	m.	1	Total pages Schedule A1: Sch: 28/44 Rpt: 54/95	
2	FILER NAME Texas McDo	onald's Operators Association	PAC, Inc.			3	Filer ID (Ethics Commission 00066524	n Filers)
4	Date 10/23/2024	Mazzu, Kevin)	7	Amount of Contribution (\$)	\$125.00
8	Principal occu Owner/Oper)	9		5)		
	Date 09/27/2024	McKinney, Steve	_)	•	Amount of Contribution (\$)	\$255.00
	Principal occu	_	s)		Employer (See Instructions	 s)		
	Owner/Oper							
	Date 10/01/2024	/01/2024 McKinney, Steve			Amount of Contribution (\$)	\$175.00		
		Tomball, TX 77373						
	Principal occu Owner/Opera)		Employer (See Instructions self	5)		
	Date 10/23/2024	McKinney, Steve Contributor address; City; St			,		Amount of Contribution (\$)	\$175.00
	Principal occu Owner/Opera)		Employer (See Instructions self	5)		
	Date 10/25/2024	McKinney, Steve Contributor address; City; St)		Amount of Contribution (\$)	\$255.00
	Principal occu Owner/Opera				Employer (See Instructions self	s)		
			1					

	MONET	ARY POLITICAL (CONTRIBUTIO)N	S		SCHEDUL	E A1
	The Instru	ction Guide explains how	to complete this fo	orr	n.	1	Total pages Schedule A1: Sch: 29/44 Rpt: 55/95	
2	FILER NAME Texas McDo	nald's Operators Association	PAC, Inc.			3	Filer ID (Ethics Commission 00066524	n Filers)
4	Date 10/01/2024	5 Full name of contributor Mendoza, Frank6 Contributor address; City; St)	7	Amount of Contribution (\$)	\$200.00
_	Dringing aggr	Del Rio, TX 78840	<u> </u>	•	Employer (Coo Instructions	<u></u>		
8	Owner/Oper	pation / Job title (See Instructions ator	()	9	Employer (See Instructions self	5)		
	Date 10/23/2024	Full name of contributor Mendoza, Frank Contributor address; City; St	out-of-state PAC (ID#:_ ate; Zip Code)	•	Amount of Contribution (\$)	\$200.00
	Principal occu	Del Rio, TX 78840 pation / Job title (See Instructions	·)		Employer (See Instructions	<u> </u> s)		
	Owner/Opera	ator			self			
	Date 10/01/2024			•	Amount of Contribution (\$)	\$75.00		
		Hutto, TX 78634						
	Principal occu Owner/Opera	pation / Job title (See Instructions ator)		Employer (See Instructions self	5)		
	Date 10/23/2024	Full name of contributor Meyer, Dennis Contributor address; City; Si Hutto, TX 78634	out-of-state PAC (ID#:_)		Amount of Contribution (\$)	\$75.00
	Principal occu Owner/Opera	pation / Job title (See Instructions ator)		Employer (See Instructions self	5)		
	Date 09/27/2024	Full name of contributor Moore, Carla Contributor address; City; Si Houston, TX 77092	out-of-state PAC (ID#:_ ate; Zip Code				Amount of Contribution (\$)	\$90.00
	Principal occu Owner/Opera	pation / Job title (See Instructions ator)		Employer (See Instructions self	s)		

	MONET	Sometimes Soperators Soperators Soperators Sociation PAC, Inc.			SCHEDULI	■ A1		
	The Instru	ction Guide explains hov	to complete this f	orr	m.	1	Total pages Schedule A1: Sch: 30/44 Rpt: 56/95	
2	FILER NAME Texas McDo	nald's Operators Association	PAC, Inc.			3	Filer ID (Ethics Commission 00066524	Filers)
4	Date 10/25/2024	Moore, Carla)	7	Amount of Contribution (\$)	\$90.00
				_				
8	Principal occu Owner/Oper		s) 	9		5)		
	Date 09/27/2024	Moore, Kevin)		Amount of Contribution (\$)	\$90.00
	Principal occu		s)		Employer (See Instructions	 s)		
	Owner/Oper	ator			self			
	Date 10/01/2024	01/2024 Moore, Kevin			Amount of Contribution (\$)	\$50.00		
		Houston, TX 77092						
	Principal occu Owner/Opera		s)		Employer (See Instructions self	5)		
	Date 10/23/2024	Moore, Kevin Contributor address; City; S				•	Amount of Contribution (\$)	\$50.00
	Principal occu Owner/Opera		s)		Employer (See Instructions self	5)		
	Date 10/25/2024	Moore, Kevin Contributor address; City; S					Amount of Contribution (\$)	\$90.00
	Principal occu Owner/Opera		s)		Employer (See Instructions self	5)		

	MONET	ARY POLITICAL CONTR	RIBUTION	S		SCHEDUL	E A1
	The Instruc	ction Guide explains how to comp	lete this form	n.	1	Total pages Schedule A1: Sch: 31/44 Rpt: 57/95	
2	FILER NAME Texas McDo	nald's Operators Association PAC, Inc.			3	Filer ID (Ethics Commission 00066524	n Filers)
4	Date 09/27/2024	 Full name of contributor out-of-star Moss, Daniel Contributor address; City; State; Zip Cod)	7	Amount of Contribution (\$)	\$30.00
8		Stafford, TX 77477 pation / Job title (See Instructions)	9	Employer (See Instructions	s)		
	Owner/Opera Date 10/25/2024	Full name of contributor out-of-sta	ate PAC (ID#:	self		Amount of Contribution (\$)	\$30.00
	Principal occu Owner/Opera	pation / Job title (See Instructions) ator		Employer (See Instructions self	<u>s)</u>		
	Date 09/27/2024	Full name of contributor out-of-sta Moss, Dave Contributor address; City; State; Zip Cod	ate PAC (ID#:)	•	Amount of Contribution (\$)	\$30.00
		Stafford, TX 77477 pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> s)		
	Owner/Opera Date 10/25/2024	Full name of contributor out-of-sta		self	-	Amount of Contribution (\$)	\$30.00
	Principal occu Owner/Opera	pation / Job title (See Instructions) ator		Employer (See Instructions self	<u>s)</u>		
	Date 09/27/2024	Munroe, Sam	ate PAC (ID#:			Amount of Contribution (\$)	\$225.00
	Principal occu Owner/Opera	pation / Job title (See Instructions) ator		Employer (See Instructions self	s)		
			•				

	MONET	Somald's Operators Association PAC, Inc. 5			SCHEDUL	E A1		
	The Instru	ction Guide explains how	to complete this f	orr	m.	1	Total pages Schedule A1: Sch: 32/44 Rpt: 58/95	
2	FILER NAME Texas McDo	nald's Operators Association	PAC, Inc.			3	Filer ID (Ethics Commission 00066524	n Filers)
4	Date 10/25/2024	Munroe, Sam)	7	Amount of Contribution (\$)	\$225.00
	Delinational annual			_	Frankrije (Ozakatovski			
8	Owner/Oper		5)	9		5)		
	Date 10/15/2024	O'Reilly, Chuck Contributor address; City; S)		Amount of Contribution (\$)	\$315.00
	Principal occu		s)		Employer (See Instructions	 s)		
	Owner/Oper	ator			self			
	Date 10/01/2024	01/2024 Oquin, Anna			Amount of Contribution (\$)	\$375.00		
		Brownsville, TX 78520						
	Principal occu Owner/Opera		s)		Employer (See Instructions self	s)		
	Date 10/23/2024	Oquin, Anna Contributor address; City; S	<u> </u>				Amount of Contribution (\$)	\$375.00
	Principal occu Owner/Opera		s)		Employer (See Instructions self	5)		
	Date 10/01/2024	Pacheco, Elena Contributor address; City; S					Amount of Contribution (\$)	\$25.00
	Principal occupation / Job title (See Instructions) Employer (See Instructions)		Employer (See Instructions self	s)				

	MONET	ARY POLITICAL CONT	RIBUTION	S		SCHEDULE	E A1
	The Instruc	ction Guide explains how to con	nplete this form	n.	1	Total pages Schedule A1: Sch: 33/44 Rpt: 59/95	
2	FILER NAME Texas McDo	nald's Operators Association PAC, Inc	<u>, </u>		3	Filer ID (Ethics Commission 00066524	n Filers)
4	Date 10/23/2024	 5 Full name of contributor out-of Pacheco, Elena 6 Contributor address; City; State; Zip C 			7	Amount of Contribution (\$)	\$25.00
8	Principal occu	Del Rio, TX 78840 pation / Job title (See Instructions)	9	Employer (See Instructions	 - s)		
	Owner/Opera Date 10/01/2024		-state PAC (ID#:	self		Amount of Contribution (\$)	\$25.00
	Principal occu Owner/Opera	pation / Job title (See Instructions)		Employer (See Instructions self	<u> </u> 5)		
	Date 10/23/2024	Full name of contributor out-of Pacheco, Manuel Contributor address; City; State; Zip C	-state PAC (ID#:			Amount of Contribution (\$)	\$25.00
		Del Rio, TX 78840 pation / Job title (See Instructions)		Employer (See Instructions	 - s)		
	Owner/Opera Date 09/27/2024	Full name of contributor out-of	-state PAC (ID#:	self		Amount of Contribution (\$)	\$60.00
	Principal occu	Friendswood, TX 77546 pation / Job title (See Instructions) ator		Employer (See Instructions self	<u> </u> ;)		
	Date 10/25/2024	Full name of contributor out-of	-state PAC (ID#:)		Amount of Contribution (\$)	\$60.00
	Principal occu Owner/Opera	pation / Job title (See Instructions) ator		Employer (See Instructions self	s)		

	MONET	Donald's Operators Association PAC, Inc. 5			SCHEDUL	E A1		
	The Instru	ction Guide explains how	to complete this fo	orr	n.	1	Total pages Schedule A1: Sch: 34/44 Rpt: 60/95	
2	FILER NAME Texas McDo	nald's Operators Association	PAC, Inc.			3	Filer ID (Ethics Commission 00066524	n Filers)
4	Date 09/27/2024	Quijano, Nelly	_)	7	Amount of Contribution (\$)	\$270.00
			, ,	_				
8	Principal occu Owner/Oper)	9		5)		
	Date 10/25/2024	Quijano, Nelly	_)	•	Amount of Contribution (\$)	\$270.00
	Principal occu	i ·) I		Employer (See Instructions	<u> </u>		
	Owner/Opera		,			-,		
	Date 10/01/2024	te Full name of contributor out-of-state PAC (ID#:) //01/2024 Raabe, Dale		•	Amount of Contribution (\$)	\$250.00		
		Kingsville, TX 78364						
	Principal occu Owner/Opera)		Employer (See Instructions self	5)		
	Date 10/23/2024	Raabe, Dale Contributor address; City; St					Amount of Contribution (\$)	\$250.00
	Principal occu Owner/Opera)		Employer (See Instructions self	5)		
	Date 10/18/2024	Robillard, Rick Contributor address; City; St	_)	-	Amount of Contribution (\$)	\$135.00
	Principal occupation / Job title (See Instructions) Employer (See Instructions)			Employer (See Instructions self	5)			

	MONETARY POLITICAL CONTRIBUTIONS						SCHEDUL	E A1
	The Instruc	ction Guide explains how	to complete this fo	rr	m.	1	Total pages Schedule A1: Sch: 35/44 Rpt: 61/95	
2	FILER NAME Texas McDo	nald's Operators Association F	PAC, Inc.			3	Filer ID (Ethics Commission 00066524	n Filers)
4	Date 10/01/2024	5 Full name of contributor Rodriguez, Carlos6 Contributor address; City; Sta	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	\$100.00
_	Dringing Loon	San Antonio, TX 78248 pation / Job title (See Instructions)	T.	_	Employer (See Instructions	<u></u>		
8		ner/Operator self		s) 				
	Date Full name of contributor out-of-state PAC (ID#:) 10/23/2024 Rodriguez, Carlos Contributor address; City; State; Zip Code		•	Amount of Contribution (\$)	\$100.00			
				Employer (See Instructions	<u> </u> s)			
	Owner/Operator self							
	Date Full name of contributor out-of-state PAC (ID#:) 10/15/2024 Roetzel, Pat Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$60.00			
		Mansfield, TX 76093						
	Principal occu Owner/Opera	pation / Job title (See Instructions) ator			Employer (See Instructions self	5)		
	Date Full name of contributor out-of-state PAC (ID#:) 10/01/2024 Ross III, Winston Contributor address; City; State; Zip Code Austin, TX 78755			Amount of Contribution (\$)	\$375.00			
	Principal occu Owner/Opera	pation / Job title (See Instructions) ator			Employer (See Instructions self	5)		
	Date Full name of contributor out-of-state PAC (ID#:) 10/23/2024 Ross III, Winston Contributor address; City; State; Zip Code Austin, TX 78755		•	Amount of Contribution (\$)	\$375.00			
	Principal occu Owner/Opera	pation / Job title (See Instructions) ator			Employer (See Instructions self	s)		
			1					

	MONETARY POLITICAL CONTRIBUTIONS						SCHEDUL	E A1
	The Instru	ction Guide explains how	to complete this fo	orr	n.	1	Total pages Schedule A1: Sch: 36/44 Rpt: 62/95	
2	FILER NAME Texas McDo	nald's Operators Association	PAC, Inc.			3	Filer ID (Ethics Commission 00066524	n Filers)
4	Date 10/01/2024	5 Full name of contributor Ross Jr., Winston6 Contributor address; City; St	out-of-state PAC (ID#:_ ate; Zip Code)	7	Amount of Contribution (\$)	\$50.00
		Austin, TX 78755						
8	8 Principal occupation / Job title (See Instructions) Owner/Operator 9 Employer (See Instructions) self		s) 					
	Date Full name of contributor out-of-state PAC (ID#:) 10/23/2024 Ross Jr., Winston Contributor address; City; State; Zip Code		•	Amount of Contribution (\$)	\$50.00			
	Austin, TX 78755 Principal occupation / Job title (See Instructions) Employer (See Instructions		 - s)					
	Owner/Operator self		•					
	Date 10/01/2024				Amount of Contribution (\$)	\$25.00		
		San Antonio, TX 78216						
	Principal occu Owner/Opera	pation / Job title (See Instructions ator)		Employer (See Instructions self	5)		
	Date Full name of contributor out-of-state PAC (ID#:) 10/23/2024 Salazar, Maria Contributor address; City; State; Zip Code San Antonio, TX 78216			•	Amount of Contribution (\$)	\$25.00		
	Principal occu Owner/Opera	pation / Job title (See Instructions ator)		Employer (See Instructions self	5)		
	Date Full name of contributor out-of-state PAC (ID#:) 10/01/2024 Salazar Jr., Jose Contributor address; City; State; Zip Code San Antonio, TX 78216			Amount of Contribution (\$)	\$100.00			
	Principal occu Owner/Opera	pation / Job title (See Instructions ator	r)		Employer (See Instructions self	5)		

	MONETARY POLITICAL CONTRIBUTIONS						SCHEDULE A1		
	The Instruc	ction Guide explains how	to complete this fo	orr	n.	1	Total pages Schedule A1: Sch: 37/44 Rpt: 63/95		
2	FILER NAME Texas McDo	nald's Operators Association	PAC, Inc.			3	Filer ID (Ethics Commission 00066524	n Filers)	
4	Date 10/23/2024	5 Full name of contributor Salazar Jr., Jose6 Contributor address; City; St	out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	\$100.00	
8	Principal occu	San Antonio, TX 78216 pation / Job title (See Instructions)	9	Employer (See Instructions	<u> </u>			
•	Owner/Opera		,	•	self	-,			
	Date Full name of contributor out-of-state PAC (ID#:) Schmid, Mark Contributor address; City; State; Zip Code		•	Amount of Contribution (\$)	\$45.00				
	Richmond, TX 77469								
	Principal occupation / Job title (See Instructions) Owner/Operator Employer (See Instructions) self			s)					
	Date Full name of contributor out-of-state PAC (ID#:) 10/25/2024 Schmid, Mark Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$45.00				
		Richmond, TX 77469							
	Principal occu Owner/Opera	pation / Job title (See Instructions ator)		Employer (See Instructions self	s)			
	Date Full name of contributor out-of-state PAC (ID#:) 09/27/2024 Schmid, Michael Contributor address; City; State; Zip Code Richmond, TX 77469		•	Amount of Contribution (\$)	\$75.00				
	Principal occu Owner/Opera	pation / Job title (See Instructions ator)		Employer (See Instructions self	5)			
	Date Full name of contributor out-of-state PAC (ID#:) 10/25/2024 Schmid, Michael Contributor address; City; State; Zip Code Richmond, TX 77469			Amount of Contribution (\$)	\$75.00				
	Principal occu Owner/Opera	pation / Job title (See Instructions ator)		Employer (See Instructions self	s)			
			'						

	MONETARY POLITICAL CONTRIBUTIONS				IS .		SCHEDULE	■ A1
	The Instru	ction Guide explains how	to complete this fo	orr	n.	1	Total pages Schedule A1: Sch: 38/44 Rpt: 64/95	
2	FILER NAME Texas McDo	onald's Operators Association F	PAC, Inc.			3	Filer ID (Ethics Commission 00066524	Filers)
4	Date 10/21/2024	Full name of contributor Schuster, Troy Contributor address; City; Sta	out-of-state PAC (ID#:ate; Zip Code)	7	Amount of Contribution (\$)	\$60.00
8	Lufkin, TX 75901 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions)		:)					
	Owner/Opera		,		self	·)		
	Date Full name of contributor out-of-state PAC (ID#:) 10/01/2024 Shields, Veronica Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$50.00			
	San Antonio, TX 78246 Principal occupation / Job title (See Instructions) Employer (See Instruction			 				
	Owner/Operator self							
	Date 10/23/2024				Amount of Contribution (\$)	\$50.00		
		San Antonio, TX 78246						
	Principal occu Owner/Opera	ipation / Job title (See Instructions) rator)		Employer (See Instructions self	s)		
	Date Full name of contributor out-of-state PAC (ID#:) 09/27/2024 Smith, Hazel Contributor address; City; State; Zip Code Houston, TX 77004				Amount of Contribution (\$)	\$90.00		
	Principal occu Owner/Opera	upation / Job title (See Instructions))		Employer (See Instructions self	<u>. </u>		
	Date Full name of contributor out-of-state PAC (ID#:) 10/25/2024 Smith, Hazel Contributor address; City; State; Zip Code Houston, TX 77004				Amount of Contribution (\$)	\$90.00		
	Principal occu Owner/Opera	upation / Job title (See Instructions) rator)		Employer (See Instructions self	5)		

	MONETARY POLITICAL CONTRIBUTIONS						SCHEDUL	E A1
	The Instru	ction Guide explains hov	to complete this f	orr	n.	1	Total pages Schedule A1: Sch: 39/44 Rpt: 65/95	
2	FILER NAME Texas McDo	nald's Operators Association	PAC, Inc.			3	Filer ID (Ethics Commission 00066524	n Filers)
4	Date 10/01/2024	5 Full name of contributor Smith, Jeanie6 Contributor address; City; S				7	Amount of Contribution (\$)	\$200.00
	Dringing Lagor	Dobbin, TX 77333		<u> </u>	Franks or (Cook both others			
8	8 Principal occupation / Job title (See Instructions) Owner/Operator 9 Employer (See Instructions) self		5)					
	Date Full name of contributor out-of-state PAC (ID#:) 10/23/2024 Smith, Jeanie Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$200.00			
	Dobbin, TX 77333 Principal occupation / Job title (See Instructions) Employer (See Instructions		<u> </u> s)					
	Owner/Operator self							
	Date Full name of contributor out-of-state PAC (ID#:) 10/15/2024 Smith, Jeff Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$45.00			
		DeSoto, TX 75115						
	Principal occu Owner/Opera	pation / Job title (See Instructions ator	s)		Employer (See Instructions self	5)		
	Date Full name of contributor out-of-state PAC (ID#:) 10/18/2024 Snowberger, Chris Contributor address; City; State; Zip Code Clovis, NM 88102			•	Amount of Contribution (\$)	\$25.00		
	Principal occu Owner/Opera	pation / Job title (See Instructions ator	s)		Employer (See Instructions self	5)		
	Date Full name of contributor out-of-state PAC (ID#:) 10/18/2024 Snowberger, Robyn Contributor address; City; State; Zip Code Clovis, NM 88102			Amount of Contribution (\$)	\$25.00			
	Principal occu Owner/Opera	pation / Job title (See Instructions ator	s)		Employer (See Instructions self	s)		

	MONETARY POLITICAL CONTRIBUTIONS						SCHEDULE A1		
	The Instruc	ction Guide explains how	to complete this fo	rr	m.	1	Total pages Schedule A1: Sch: 40/44 Rpt: 66/95		
2	FILER NAME Texas McDo	nald's Operators Association	PAC, Inc.			3	Filer ID (Ethics Commission 00066524	n Filers)	
4	Date 09/27/2024	5 Full name of contributor Soudagar, Sarem6 Contributor address; City; St	out-of-state PAC (ID#:_)	7	Amount of Contribution (\$)	\$195.00	
8	Principal occu	Spring, TX 77379 pation / Job title (See Instructions)	9	Employer (See Instructions	 			
	Owner/Opera		,		self	•			
	Date Full name of contributor out-of-state PAC (ID#:) 10/25/2024 Soudagar, Sarem Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$195.00				
	Spring, TX 77379								
	Owner/Opera	pation / Job title (See Instructions ator)		Employer (See Instructions self	5)			
	Date Full name of contributor out-of-state PAC (ID#:)		Π	Amount of Contribution (\$)					
	09/27/2024 Spann, Warren Contributor address; City; State; Zip Code			(,)	\$90.00				
		Sugar Land, TX 77479							
	Principal occu Owner/Opera	pation / Job title (See Instructions ator)		Employer (See Instructions self	s)			
	Date Full name of contributor out-of-state PAC (ID#:) 10/25/2024 Spann, Warren Contributor address; City; State; Zip Code Sugar Land, TX 77479			Amount of Contribution (\$)	\$90.00				
	Principal occu Owner/Opera	pation / Job title (See Instructions ator)		Employer (See Instructions self	5)			
	Date Full name of contributor out-of-state PAC (ID#:) 10/01/2024 Stagg, Fabiola Contributor address; City; State; Zip Code San Antonio, TX 78230			Amount of Contribution (\$)	\$100.00				
	Principal occu Owner/Opera	pation / Job title (See Instructions ator)		Employer (See Instructions self	s)			
			,						

	MONETARY POLITICAL CONTRIBUTIONS					SCHEDULE A1			
	The Instru	ction Guide explains how	to complete this f	orr	n.	1	Total pages Schedule A1: Sch: 41/44 Rpt: 67/95		
2	FILER NAME Texas McDo	nald's Operators Association	PAC, Inc.			3	Filer ID (Ethics Commission 00066524	n Filers)	
4	Date 10/23/2024	5 Full name of contributor Stagg, Fabiola6 Contributor address; City; Stage Contributor address; City; Stage Contributor address; City; Stage Contributor	out-of-state PAC (ID#:_			7	Amount of Contribution (\$)	\$100.00	
		San Antonio, TX 78230		_					
8	8 Principal occupation / Job title (See Instructions) Owner/Operator 9 Employer (See Instructions) self		5)						
	Date Full name of contributor out-of-state PAC (ID#:) 10/01/2024 Stagg, Nedrick Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$725.00				
	San Antonio, TX 78230 Principal occupation / Job title (See Instructions) Employer (See Instructions)		 s)						
	Owner/Operator self								
	Date 10/23/2024				Amount of Contribution (\$)	\$725.00			
		San Antonio, TX 78230							
	Principal occu Owner/Opera	pation / Job title (See Instructions ator	5)		Employer (See Instructions self	5)			
	Date Full name of contributor out-of-state PAC (ID#:) 10/18/2024 Story, Bill Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$25.00			
	Principal occu Owner/Opera	El Paso, TX 79925 pation / Job title (See Instructions ator	s)		Employer (See Instructions self	<u>I</u> S)			
	Date Full name of contributor out-of-state PAC (ID#:) 10/01/2024 Straza, Jamie Contributor address; City; State; Zip Code Austin, TX 78704			Amount of Contribution (\$)	\$200.00				
	Principal occu Owner/Opera	pation / Job title (See Instructions ator	s)		Employer (See Instructions self	5)			

	MONETARY POLITICAL CONTRIBUTIONS						SCHEDUL	E A1
	The Instru	ction Guide explains how	to complete this fo	orr	n.	1	Total pages Schedule A1: Sch: 42/44 Rpt: 68/95	
2	FILER NAME Texas McDo	nald's Operators Association	PAC, Inc.			3	Filer ID (Ethics Commission 00066524	n Filers)
4	Date 10/23/2024	5 Full name of contributor Straza, Jamie6 Contributor address; City; Si	out-of-state PAC (ID#:_ ate; Zip Code)	7	Amount of Contribution (\$)	\$200.00
_	<u> </u>	Austin, TX 78704		_				
8	Owner/Oper	pation / Job title (See Instructions ator	;)	9	Employer (See Instructions self	5)		
	Date Full name of contributor out-of-state PAC (ID#:) 10/18/2024 Vargas, Hugo Contributor address; City; State; Zip Code		•	Amount of Contribution (\$)	\$100.00			
	Lubbock, TX 79424 Principal occupation / Job title (See Instructions) Employer (See Instructions		<u> </u> s)					
	Owner/Operator self							
	Date 10/18/2024				Amount of Contribution (\$)	\$25.00		
		Childress, TX 79201						
	Principal occu Owner/Opera	pation / Job title (See Instructions	s)		Employer (See Instructions self	<u>I</u> S)		
	Date Full name of contributor out-of-state PAC (ID#:) 10/01/2024 Washington, Martin Contributor address; City; State; Zip Code Austin, TX 78750			Amount of Contribution (\$)	\$150.00			
	Principal occu Owner/Opera	pation / Job title (See Instructions ator	s)		Employer (See Instructions self	5)		
	Date Full name of contributor out-of-state PAC (ID#:) 10/23/2024 Washington, Martin Contributor address; City; State; Zip Code Austin, TX 78750			Amount of Contribution (\$)	\$150.00			
	Principal occu Owner/Opera	pation / Job title (See Instructions ator	s)		Employer (See Instructions self	s)		

	MONETARY POLITICAL CONTRIBUTIONS					SCHEDULE A1		
	The Instruc	ction Guide explains how to complete	e this for	n.	1	Total pages Schedule A1: Sch: 43/44 Rpt: 69/95		
2	FILER NAME Texas McDo	nald's Operators Association PAC, Inc.			3	Filer ID (Ethics Commission 00066524	n Filers)	
4	Date 10/01/2024	 Full name of contributor			7	Amount of Contribution (\$)	\$175.00	
8		McQueeney, TX 78123 pation / Job title (See Instructions)	9	Employer (See Instructions	<u> </u> s)			
	Owner/Operator self Date Full name of contributor out-of-state PAC (ID#:			Amount of Contribution (\$)	\$175.00			
	Principal occupation / Job title (See Instructions) Owner/Operator Employer (See Instruction self			<u> </u> S)				
	Date Full name of contributor out-of-state PAC (ID#:) 10/18/2024 Whealy, David Contributor address; City; State; Zip Code		•	Amount of Contribution (\$)	\$75.00			
	•	Breckenridge, TX 79424 pation / Job title (See Instructions) ator		Employer (See Instructions	<u> </u> S)			
	Owner/Operator self Date Full name of contributor out-of-state PAC (ID#:) 09/27/2024 Whitaker, Billy Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$45.00			
	Principal occu Owner/Opera	Houston, TX 77098 pation / Job title (See Instructions) ator		Employer (See Instructions self	<u> </u> s)			
	Date Full name of contributor out-of-state PAC (ID#:) 10/25/2024 Whitaker, Billy Contributor address; City; State; Zip Code Houston, TX 77098			Amount of Contribution (\$)	\$45.00			
	Principal occu Owner/Opera	pation / Job title (See Instructions) ator		Employer (See Instructions self	5)			

	MONET	ARY POLITICAL CONTRIBUTION	DNS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 44/44 Rpt: 70/95	
2	FILER NAME Texas McDo	onald's Operators Association PAC, Inc.		3	Filer ID (Ethics Commission 00066524	n Filers)
4	Date 10/18/2024	 Full name of contributor out-of-state PAC (ID#:_ Wilson, Eric Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$)	\$175.00
8	Principal occu	San Angelo, TX 76903 pation / Job title (See Instructions)	9 Employer (See Instructions	.)		
•	Owner/Oper		self	')		
	Date Full name of contributor out-of-state PAC (ID#:) 10/15/2024 York, Craig Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$210.00	
	Principal occu	Dallas, TX 75238 spation / Job title (See Instructions)	Employer (See Instructions	_		
	Owner/Operator self			')		
	Date Full name of contributor out-of-state PAC (ID#:) 10/15/2024 Young, Lynann Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$45.00	
		Flint, TX 75762				
	Principal occu Owner/Oper	pation / Job title (See Instructions) ator	Employer (See Instructions self	5)		
	Date Full name of contributor out-of-state PAC (ID#:) 10/15/2024 Young, William Contributor address; City; State; Zip Code Flint, TX 75762			Amount of Contribution (\$)	\$15.00	
	Principal occu Owner/Oper	pation / Job title (See Instructions) ator	Employer (See Instructions self	5)		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Condidate/Officeholder/Politics

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

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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
Groun Guru i ayınıcını	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 1/25 Rpt: 71/95	Texas McDonald's Operators Association PAC, Inc. 00066524
4 Date	5 Payee name
10/08/2024	Ana Hernandez Campaign
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,000.00	PO Box 15538
— Forest dit us from	
Expenditure from corporate funds	Houston, TX 77220
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
	Candidate/Officeholder/Political Committee
	campaign contribution
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
10/08/2024	Angela Paxton Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	PO Box 2878
Expenditure from	
corporate funds	McKinney, TX 75070
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
	Candidate/Officeholder/Political Committee
	campaign contribution
Operation ONE Wife discont	On didn't Office helder game Office south
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
10/08/2024	Angie Chen Button Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	PO Box 832748
Expenditure from corporate funds	Richardson, TX 75083
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
LAFLINDITURE	Candidate/Officeholder/Political Committee
	campaign contribution
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experiulture to benefit C/OI	1

POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 2/25 Rpt: 72/95	Texas McDonald's Operators Association PAC, Inc. 00066524
4 Date	5 Payee name
10/08/2024	Ann Johnson Campaign
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,000.00	PO Box 56386
Expenditure from corporate funds	Houston, TX 77256
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
	Candidate/Officeholder/Political Committee
	oampaigh contribution
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
10/08/2024	Armando Martinez Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	PO Box 1651
Expenditure from	
corporate funds	Weslaco, TX 78599
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Candidate/Officeholder/Political Committee
	can pagn continuation.
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
10/08/2024	Armando Walle Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	4101 Washington Ave
Expenditure from corporate funds	Houston, TX 77007
PURPOSE	1
OF	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By (b) Description Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Candidate/Officeholder/Political Committee
	campaign contribution
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experience to beliefit 6/01	·

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1: Sch: 3/25 Rpt: 73/95	2 FILER NAME Texas McDonald's Operators Association PAC, Inc. 3 Filer ID (Ethics Commission Filers) 00066524
4 Date	5 Payee name
10/08/2024	Bonnen Greg Campaign
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,000.00	PO Box 1183
Expenditure from corporate funds	Friendswood, TX 77549
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense campaign contribution
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
10/08/2024	Brad Buckley Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	1321 Pershing Drive
Expenditure from corporate funds	Killeen, TX 76549
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense campaign contribution
Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held
Date	Payee name
10/08/2024	Brandon Creighton Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	2257 N Loop 336 W Ste 140-366
Expenditure from corporate funds	Conroe, TX 77304
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense campaign contribution
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

Advertising Expense Accounting/Banking

Event Expense Fees

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense

Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	· · · · · · · · · · · · · · · · · · ·
Sch: 4/25 Rpt: 74/95	Texas McDonald's Operators Association PAC, Inc. 00066524
4 Date	5 Payee name
10/08/2024	Brent Hagenbuch Campaign
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,000.00	2800 Shoreline Dr #310
Expenditure from corporate funds	Denton, TX 76210
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
	Candidate/Officeholder/Political Committee
	campaign contribution
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1
Date	Payee name
10/08/2024	Bryan Hughes Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	PO Box 450
Evnanditura from	
Expenditure from corporate funds	Mineola, TX 75773
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
	Candidate/Officeholder/Political Committee
	campaight contribution
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
10/08/2024	Burrows Dustin Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$2,500.00	PO Box 2569 Lubbock
Expenditure from corporate funds	Lubbock, TX 79408
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T.
	Candidate/Officeholder/Political Committee
	outhpage continuation
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Candidate/Officeholder/Politica Credit Card Payment	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: 5/25 Rpt: 75/95	Texas McDonald's Operators Association PAC, Inc. 00066524
4 Date	5 Payee name
10/08/2024	Carol Alvarado Campaign
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,000.00	PO Box 230842
Expenditure from corporate funds	Houston, TX 77223
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
EXI ENDITORE	Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense
	campaign contribution
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
10/08/2024	Carriage House Partners
Amount (\$)	Payee address; City; State; Zip Code
\$5,000,00	1111 Guadalupe St
40,000.00	
Expenditure from corporate funds	Austin, TX 78701
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	consulting services
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
10/08/2024	Cesar Blanco Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	PO Box 929
Expenditure from corporate funds	El Paso, TX 79946
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense
	campaign contribution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	1

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Credit Card Payment	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1: Sch: 6/25 Rpt: 76/95	2 FILER NAME Texas McDonald's Operators Association PAC, Inc. 3 Filer ID (Ethics Commission Filers) 00066524
4 Date 10/08/2024	5 Payee name Charles Cunningham Campaign
6 Amount (\$) \$1,000.00	7 Payee address; City; State; Zip Code PO Box 41964
Expenditure from corporate funds	Houston, TX 77241
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense campaign contribution
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date 10/08/2024	Payee name Charles Perry Campaign
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code PO Box 94806
Expenditure from corporate funds	Lubbock, TX 79493
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense campaign contribution
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date 10/08/2024	Payee name Charles Schwertner Campaign
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code PO Box 2448
Expenditure from corporate funds	Georgetown, TX 78627
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense campaign contribution
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Commi Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
4. Tatal name Calculula E4.	C File D MANE
1 Total pages Schedule F1: Sch: 7/25 Rpt: 77/95	2 FILER NAME Texas McDonald's Operators Association PAC, Inc. 3 Filer ID (Ethics Commission Filers) 00066524
4 Date	5 Payee name
10/08/2024	Charlie Geren Campaign
6 Amount (\$) \$2,500.00	7 Payee address; City; State; Zip Code PO Box 1440
Ψ2,500.00	FO BOX 1440
Expenditure from corporate funds	Fort Worth, TX 76101
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
	Candidate/Officeholder/Political Committee
	campaign contribution
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
10/08/2024	Christian Manuel Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	3801 Turtle Creek Dr.
Expenditure from corporate funds	Port Arthur, TX 77642
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
EXPENDITURE	Candidate/Officeholder/Political Committee
	campaign contribution
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
10/08/2024	Claudia Ordaz Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	PO Box 71738
Expenditure from corporate funds	El Paso, TX 79917
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
EXI ENDITORE	Candidate/Officeholder/Political Committee
	campaign contribution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Commi Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
4. Total maria Calcadula F1.	,
1 Total pages Schedule F1: Sch: 8/25 Rpt: 78/95	2 FILER NAME3 Filer ID(Ethics Commission Filers)Texas McDonald's Operators Association PAC, Inc.00066524
4 Date	5 Payee name
10/08/2024	Cody Harris Campaign
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,500.00	1007 N. Mallard St
- Evpanditura from	
Expenditure from corporate funds	Palestine, TX 75801
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T.
	Candidate/Officeholder/Political Committee
	campaigh continuation
O Commission ONII V if diment	Condidate/Office helder name Office accepts
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
10/08/2024	Cody Vasut Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	PO Box 2724
+-,	
Expenditure from corporate funds	Angleton, TX 77516
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Candidate/Officeholder/Political Committee
	Campaign Continuation
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	o
Date	Payee name
10/08/2024	Cole Hefner Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	P.O. Box 167
Evnanditura from	
Expenditure from corporate funds	Mount Pleasant, TX 75456
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
	Candidate/Officeholder/Political Committee
	campaign contribution
Complete <u>ONLY</u> if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	y

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

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

Candidate/Officeholder/Politica		
Credit Card Payment	The Instruction Guide explains how to complete this form.	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)	
Sch: 9/25 Rpt: 79/95	Texas McDonald's Operators Association PAC, Inc. 00066524	
4 Date	5 Payee name	
10/15/2024	Dan Jefferson Tax and Financial Consulting	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$150.00	400 S Zang Blvd	
Expenditure from	Ste 620	
corporate funds	Dallas, TX 75208	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense	
	Accounting fees	
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/OI	Н	
Date	Payee name	\equiv
10/08/2024	Donna Howard Campaign	
Amount (\$)	Payee address; City; State; Zip Code	
\$1,000.00	PO Box 5375	
Expenditure from		
corporate funds	Austin, TX 78763	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T. Check if Austin TV officeholdes living suppose	
	Candidate/Officeholder/Political Committee Campaign contribution	
	Sampaign commission	
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/OI	H	
Date	Payee name	_
10/08/2024	Drew Darby Campaign	
Amount (\$)	Payee address; City; State; Zip Code	
\$1,000.00	PO Box 3284	
Expenditure from corporate funds	San Angelo, TX 76902	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.	
	Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense campaign contribution	
	Campaign contribution	
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	_
expenditure to benefit C/OI		
		_

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

Contributions/ Donations Made B Candidate/Officeholder/Politica Credit Card Payment	d Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)
<u> </u>	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 10/25 Rpt: 80/95	Texas McDonald's Operators Association PAC, Inc. 00066524
4 Date	5 Payee name
10/08/2024	Eddie Morales Campaign
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,000.00	325 Hillcrest Blvd
- Formanditure Const	
Expenditure from corporate funds	Eagle Pass, TX 78852
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
-	Candidate/Officeholder/Political Committee Campaign contribution
	campaign continuution
O Complete CAU V if dire	Condidate/Officeholder name Office cought
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H
Date	Payee name
10/08/2024	Giovanni Capriglione Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	PO Box 92007
φ1,000.00	1 0 000 32001
Expenditure from	0. 111.1 . TV 7000
corporate funds	Southlake, TX 76092
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Candidate/Officeholder/Political Committee
	Sampang. Samulation
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Date	Payeo namo
10/09/2024	Payee name Harland Clarke
Amount (\$)	Payee address; City; State; Zip Code
\$517.28	15955 La Cantera Pkwy
Expenditure from	
corporate funds	San Antonio, TX 78256
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Office Overhead/Rental Expense Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense
	check order
Complete CNU V Stalling	Constitute (Office healder no year
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	11.

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
	<u> </u>
1 Total pages Schedule F1:	
Sch: 11/25 Rpt: 81/95	Texas McDonald's Operators Association PAC, Inc. 00066524
4 Date	5 Payee name
10/08/2024	Harold Dutton Jr. Campaign
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,000.00	3801 Kirby Drive, Suite 411
Expenditure from corporate funds	Houston, TX 77098
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Contributions/Donations Made By Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Candidate/Officeholder/Political Committee
	campaign contribution
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1
Date	Payee name
10/08/2024	Hinojosa Gina Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	PO Box 300095
. ,	
Expenditure from	Austin, TX 78703
corporate funds	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	campaign contribution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	o
Data	David and the second se
Date	Payee name
10/08/2024	Hubert Vo Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$2,500.00	PO Box 2227
Expenditure from	
corporate funds	Alief, TX 77411
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
EXI ENDITORE	Candidate/Officeholder/Political Committee
	campaign contribution
0 1. 6	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
5. po a a. a to bollone 0/01	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
	· · · · · · · · · · · · · · · · · · ·
1 Total pages Schedule F1: Sch: 12/25 Rpt: 82/95	2 FILER NAME Texas McDonald's Operators Association PAC, Inc. 3 Filer ID (Ethics Commission Filers) 00066524
4 Date	5 Payee name
10/09/2024	Intuit
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$95.94	2535 Garcia Lane
Expenditure from corporate funds	Mountain View, CA 94043
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EVENDITUE	Fees Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Check if Austin, TX, officeholder living expense
	QuickBooks online monthly fee
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
10/08/2024	J.M. Lozano Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	727 Arroyo Drive
Expenditure from corporate funds	Kingsville, TX 78363
•	The state of the s
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Candidate/Officeholder/Political Committee
	campaigh contribution
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
10/08/2024	Jared Patterson Campaign
	<u> </u>
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	PO Box 5419
Expenditure from corporate funds	Frisco, TX 75035
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Candidate/Officeholder/Political Committee
	campaign contribution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Event Expense Loan Repayment/Reimbursement Fees Office Overhead/Rental Expense Food/Beverage Expense Polling Expense Frinting Expense Legal Services Salaries/Mages/Contract Labor

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: 13/25 Rpt: 83/95	Texas McDonald's Operators Association PAC, Inc. 3 File ID (Entits Commission Files) 00066524
4 Date	5 Payee name
10/08/2024	Jeff Leach Campaign
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,000.00	PO Box 866186
Expenditure from corporate funds	Plano, TX 75086
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T.
	Candidate/Officeholder/Political Committee
	campaign contribution
Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
Date	Payee name
10/08/2024	Jeffrey Barry Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	4418 Broadway Street
\$1,000.00	4416 Bloduwdy Stieet
Expenditure from	
corporate funds	Pearland, TX 77588
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Contributions/Donations Made By Contributions/Donations Made By Contributions/Donations Made By
EXPENDITURE	Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense
	campaign contribution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Date	Payee name
10/08/2024	Joan Huffman Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	3733-1 Westheimer #40
, -,	
Expenditure from	
corporate funds	Houston, TX 77027
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
EXPENDITORE	Candidate/Officeholder/Political Committee
	campaign contribution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

Candidate/Officeholder/Politica	
Credit Card Payment	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 14/25 Rpt: 84/95	Texas McDonald's Operators Association PAC, Inc. 00066524
4 Date	5 Payee name
10/08/2024	Joe Moody Campaign
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,000.00	PO Box 920827
Expenditure from corporate funds	El Paso, TX 79902
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Candidate/Officeholder/Political Committee
	campaign contribution
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experience to benefit ever	
Date	Payee name
10/08/2024	John Bryant Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	PO Box 140977
Expenditure from corporate funds	Dallas, TX 75214
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
LAFENDITORE	Candidate/Officeholder/Political Committee
	campaign contribution
Commission ONLY if dispose	Condidate/Officeholder some
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
10/08/2024	John Bucy III Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	PO Box 536
Expenditure from	
corporate funds	Austin, TX 78767
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
	Candidate/Officeholder/Political Committee
	campaign continuuton
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Commi Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (setter a extension pat listed above)

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
4 Tatal manua Cabadula E4.	
1 Total pages Schedule F1: Sch: 15/25 Rpt: 85/95	2 FILER NAME Texas McDonald's Operators Association PAC, Inc. 3 Filer ID (Ethics Commission Filers) 00066524
4 Date	5 Payee name
10/08/2024	John McQueeney Campaign
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$2,500.00	PO Box 100458
Expenditure from	
corporate funds	Fort Worth, TX 76185
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
EXI ENDITORE	Candidate/Officeholder/Political Committee
	campaign contribution
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
10/08/2024	Jon Rosenthal Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	PO Box 667204
Expenditure from corporate funds	Houston, TX 77266
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T. Check if travel outside of Texas. Complete Schedule T.
	Candidate/Officeholder/Political Committee
	campaigh contribution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
10/08/2024	Jose Menedez Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	PO Box 100833
Expenditure from corporate funds	San Antonio, TX 78201
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
	Candidate/Officeholder/Political Committee
	campaign contribution
Complete CNII V if direct	Candidate/Officeholder name Office sought Office held
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense

Advertising Expense Accounting/Banking Consulting Expense

Fees Food/Beverage Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	
Sch: 16/25 Rpt: 86/95	Texas McDonald's Operators Association PAC, Inc. 00066524
4 Date	5 Payee name
10/08/2024	Keith Bell Campaign
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,000.00	PO Box 1178
Expenditure from corporate funds	Forney, TX 75126
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Candidate/Officeholder/Political Committee
	campaign contribution
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
experiditure to beriefit C/O	
Date	Payee name
10/08/2024	Kelly Hancock Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	PO Box 821349
Expenditure from corporate funds	North Richland Hills, TX 76182
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
EXPENDITORE	Candidate/Officeholder/Political Committee
	campaign contribution
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
10/08/2024	Ken King Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	PO Box 517
Expenditure from corporate funds	Canadian, TX 79014
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
EXPENDITURE	Candidate/Officeholder/Political Committee
	campaign contribution
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
3.,50	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
4. Tatal name Calculula E4.	C File D MANE
1 Total pages Schedule F1: Sch: 17/25 Rpt: 87/95	2 FILER NAME Texas McDonald's Operators Association PAC, Inc. 3 Filer ID (Ethics Commission Filers) 00066524
4 Date	5 Payee name
10/08/2024	Lacey Hull Campaign
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,000.00	PO Box 19231
Expenditure from	Houston, TV 77224
corporate funds	Houston, TX 77224
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
EXPENDITORE	Candidate/Officeholder/Political Committee
	campaign contribution
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
10/08/2024	Mary Ann Perez Campaign
Amount (t)	, , , , , , , , , , , , , , , , , , , ,
Amount (\$)	
\$1,000.00	PO Box 262432
Expenditure from corporate funds	Houston, TX 77207
•	I
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
	Candidate/Officeholder/Political Committee
	campaign contribution
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Davies name
	Payee name
10/08/2024	Matt Shaheen Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	3917 Malton Drive
, ,	
Expenditure from	Diama TV 75005
corporate funds	Plano, TX 75025
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
EXPENDITORE	Candidate/Officeholder/Political Committee
	campaign contribution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services The Instruction Guide explains h	Office Ov Polling Ex Printing E Salaries/	erhea cpense 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: 18/25 Rpt: 88/95		Texas McDonald's Operators Association	on PAC	, Ind	С.		00066524
4	Date	5	Payee name				<u> </u>	
	10/08/2024		Morgan LaMantia Campaign					
6	Amount (\$)	7	Payee address; City; State;	Zip Co	ode			
	\$1,000.00		1324 E. Madison St.	•				
	Expenditure from corporate funds		Brownsville, TX 78520					
8	PURPOSE OF	(a)	Category (See Categories listed at the top of this sche	edule)	(b)	Description		
	EXPENDITURE		Contributions/Donations Made By Candidate/Officeholder/Political Commi	ittoo				de of Texas. Complete Schedule T. officeholder living expense
			Candidate/Officeriolder/Political Commi	illee		campaign co		
						1 0		
9	Complete ONLY if direct	(Candidate/Officeholder name O	office sou	ı <u> </u>			Office held
	expenditure to benefit C/OI	Н						
	Date		Payee name					
	10/08/2024		Morgan Meyer Campaign					
	Amount (\$)		Payee address; City; State;	Zip Co	ode			
	\$1,000.00		3838 Oak Lawn Avenue, Suite 400					
	"							
	Expenditure from corporate funds		Dallas, TX 75219					
	PURPOSE	(a)	Category (See Categories listed at the top of this sche	edule)	(b)	Description		
	OF EXPENDITURE		Contributions/Donations Made By					de of Texas. Complete Schedule T.
			Candidate/Officeholder/Political Commi	ittee		ш		officeholder living expense
						campaign co	HUH	buttori
	Complete ONLY if direct	<u> </u>	Candidate/Officeholder name O	Office sou	laht Iaht			Office held
	expenditure to benefit C/O				·9···			
	Date		Payee name					
	10/08/2024		Nathan Johnson Campaign					
	Amount (\$)	\vdash		Zip Co	ode			
	\$1,000.00		PO Box 670994	, ,				
	. ,							
	Expenditure from corporate funds		Dallas, TX 75367					
	PURPOSE OF	(a)	Category (See Categories listed at the top of this sche	edule)	(b)	Description		
	EXPENDITURE		Contributions/Donations Made By Candidate/Officeholder/Political Committee	ittoo		브		de of Texas. Complete Schedule T. officeholder living expense
			Candidate/Officeriolde//Folitical Collitti	illee		campaign col		· '
						, 5		
	Complete ONLY if direct		Candidate/Officeholder name O	office sou	ıght			Office held
	expenditure to benefit C/OI	Н						

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
4 Total marca Cabadula F1.	2 Files ID (Files Commission Files)
1 Total pages Schedule F1: Sch: 19/25 Rpt: 89/95	2 FILER NAME3 Filer ID(Ethics Commission Filers)Texas McDonald's Operators Association PAC, Inc.00066524
4 Date	5 Payee name
10/08/2024	Noble Candy Campaign
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,500.00	1105 E. Main Street #223
Expenditure from	Allon TV 75002
corporate funds	Allen, TX 75002
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
LXI ENDITORE	Candidate/Officeholder/Political Committee
	campaign contribution
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
10/08/2024	Oscar Longoria Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$1,500.00	PO Box 4224
Expenditure from corporate funds	Mission, TX 78572
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
LAFENDITORE	Candidate/Officeholder/Political Committee
	campaign contribution
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
10/08/2024	Pat Curry Campaign
Amount (\$)	
\$1,000.00	204 Woodhew Drive
— Forest diture (co. co.	
Expenditure from corporate funds	Waco, TX 76712
-	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	campaign contribution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	1

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Com Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	l Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)
	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	
Sch: 20/25 Rpt: 90/95	Texas McDonald's Operators Association PAC, Inc. 00066524
4 Date	5 Payee name
10/08/2024	Philip Cortez Campaign
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,000.00	PO Box 276155
, ,	
Expenditure from	Can Antonia TV 70227
corporate funds	San Antonio, TX 78227
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Candidate/Officeholder/Political Committee
	ouripaigh continuation
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	
Date	Payee name
10/08/2024	Rafael Anchia Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	PO Box 2910
Expenditure from corporate funds	Austin, TX 78768
PURPOSE	
OF	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By (b) Description Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Candidate/Officeholder living expense
	campaign contribution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	-i
Data	Davies same
Date 10/08/2024	Payee name
	Ramon Romero Jr. Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	PO Box 181
Expenditure from	
corporate funds	Fort Worth, TX 76101
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Contributions/Donations Made By
EXPENDITURE	Candidate/Officeholder/Political Committee
	campaign contribution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political C Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (outer a category not listed above)

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	l Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)
	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	
Sch: 21/25 Rpt: 91/95	Texas McDonald's Operators Association PAC, Inc. 00066524
4 Date	5 Payee name
10/08/2024	Rhetta Bowers Campaign
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,000.00	3526 Lakeview Pkwy., Ste B-211
Expenditure from corporate funds	Rowlett, TX 75088
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
EXPENDITURE	Candidate/Officeholder/Political Committee
	campaign contribution
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	-
Date	Payee name
10/25/2024	Robert Nichols Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	P.O. Box 2347
Expenditure from corporate funds	Jacksonville, TX 75766
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
_, _, _, _, _, _, _, _, _, _, _, _, _, _	Candidate/Officeholder/Political Committee
	campaign contribution
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
10/08/2024	Ron Reynolds Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	6140 Hwy 6 South #233
- Forest divine Cons	
Expenditure from corporate funds	Missouri City, TX 77459
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
EXPENDITORE	Candidate/Officeholder/Political Committee
	campaign contribution
0 1. 6	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Commit Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	
Sch: 22/25 Rpt: 92/95	Texas McDonald's Operators Association PAC, Inc. 00066524
4 Date	5 Payee name
10/08/2024	Ryan Guillen Campaign
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,000.00	5346 E. US Hwy 83, Bdg A, STE 5-A
Expenditure from corporate funds	Rio Grande City, TX 78582
8 PURPOSE	
OF	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By (b) Description Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Continuouions/Donations Made By Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense
	campaign contribution
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Date	Payeo namo
10/08/2024	Payee name Sam Harless Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	15814 Champion Forest PMB 312
Expenditure from	
corporate funds	Spring, TX 77379
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
EXPENDITORE	Candidate/Officeholder/Political Committee
	campaign contribution
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experientare to benefit 6/01	'
Date	Payee name
10/08/2024	Stan Gerdes Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	PO Box 1060
Expenditure from corporate funds	Smithville, TX 78957
-	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Contributions/Donations Made By
EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Contributions/Donations Made By Candidate/Officeholder/Political Committee Contributions/Donations Made By Check if ravel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	campaign contribution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Com Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Candidate/Officeholder/Politica	
Credit Card Payment	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 23/25 Rpt: 93/95	Texas McDonald's Operators Association PAC, Inc. 00066524
4 Date	5 Payee name
10/08/2024	Stan Lambert Campaign
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,000.00	PO Box 3752
Expenditure from corporate funds	Abilene, TX 79604
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Candidate/Officeholder/Political Committee
	campaign contribution
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
10/15/2024	Sue Elkins CPA
Amount (\$)	Payee address; City; State; Zip Code
\$150.00	6400 N Santa Fe Ave
Expenditure from	Ste A
corporate funds	Oklahoma City, OK 73116
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T.
	Check if Austin, TX, officeholder living expense Accounting fees
	Accounting tees
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Davisa nama
10/08/2024	Payee name Terry Canales Campaign
Amount (\$)	Payee address; City; State; Zip Code 310 S Closner Blvd
\$1,000.00	310 S Clostiel Biva
Expenditure from	
corporate funds	Edinburg, TX 78539
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	campaign contribution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Candidate/Officeholder/Politica Credit Card Payment	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: 24/25 Rpt: 94/95	Texas McDonald's Operators Association PAC, Inc. 00066524
4 Date	5 Payee name
10/08/2024	Todd Hunter Campaign
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,000.00	445 Cape Henry
Expenditure from corporate funds	Corpus Christi, TX 78412
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
-	Candidate/Officeholder/Political Committee
	campaign contribution
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
10/08/2024	Trent Ashby Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	PO Box 412
Expenditure from corporate funds	Lufkin, TX 75902
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
	Candidate/Officeholder/Political Committee
	campaign contribution
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
10/08/2024	Vincent Perez Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	PO Box 71309
Expenditure from corporate funds	El Paso, TX 79917
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense
	campaign contribution
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

Candidate/Officenoider/Politica	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 25/25 Rpt: 95/95	Texas McDonald's Operators Association PAC, Inc. 00066524
4 Date	5 Payee name
10/15/2024	Watts, Kimberly
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$600.00	1412 Berne Lane
Expenditure from corporate funds	Lewisville, TX 75067
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Salaries/Wages/Contract Labor
	services rendered
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
10/08/2024	Will Metcalf Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	PO Box 454
+ -,	
Expenditure from corporate funds	Conroe, TX 77305
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
	Candidate/Officeholder/Political Committee
	campaigh contribution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	