# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

# FORM C/OH COVER SHEET PG 1

The C/OH Instruction	Guide explains how to c	complete this form.	1 Filer ID (Ethics Comm 00087820		2 Total pages fil 5	led: 51
3 CANDIDATE /	MS / MRS / MR	FIRST		MI		JSE ONLY
OFFICEHOLDER		Don E.				
NAME		Don E.			Date Received	
					ELECTRONIC	ALLY FILED
	NICKNAME	LAST		SUFFIX	01/07/2025	
		McLaughlin		Jr.		
		-				
4 CANDIDATE / OFFICEHOLDER	ADDRESS / PO BOX;	APT / SUITE #; CIT	Υ;	ZIP CODE	Date Hand-delivered o	r Date Postmarked
MAILING	PO Box 1707					-
ADDRESS					Receipt #	Amount
Change of Address	Uvalde, TX 78802					
					Date Processed	
					Date Imaged	
5 CAMPAIGN	MS / MRS / MR	FIRST		MI		
TREASURER		Steve				
NAME						
	NICKNAME	LAST		SUFFIX		
		McNew				
6 CAMPAIGN	STREET ADDRESS (N	O PO BOX PLEASE);	AP	T / SUITE #; CITY;	STA	ATE; ZIP CODE
TREASURER ADDRESS	PO Box 1707					
(Residence or Business)	Uvalde, TX 78802					
7 CAMPAIGN	AREA CODE	PHONE NUMBER	EXTENSION			
TREASURER	(830) 278-7157					
PHONE	(000) 210-1101					
8 REPORT						
TYPE	X January 15	30th day before		Runoff	15th day after ca	mnaign treasurer
					appointment (offi	
	July 15	8th day before	election	Exceeded modified	Final Report (Atta	ach C/OH-FR)
				reporting limit	-	
9 PERIOD	Month Day	/ear		Month Day	Year	
COVERED	10/27/2024		HROUGH	12/31/202		
10 ELECTION	ELECTION DA	те		ELECTION TYPE		
10 ELECTION			Primary		Other	
	Month Day		lindiy			
			Seneral	Special		
11 OFFICE	OFFICE HELD (if any)	I		12 OFFICE SOUGHT	(if known)	
	State Representative	Place Uvalde Distri	ct 80 Uvalde		. ,	
		GO T	FO PAGE 2			
Forms provided by Te	exas Ethics Commissio	n \\\\\\\	hics.state.tx.u	s	Verei	on V4.1.0.5dd2ace2
i onno provided by Te		·· •••••••••••••••••••••••••••••••••••		5	VEISI	JII VH.I.U.JUUZAUEZ

## **CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS**

McLaughlin Jr., Don E.

13 C / OH NAME

#### FORM C/OH **COVER SHEET PG 2** 2 of 51

(Ethics Commission Filers)

14 Filer ID

00087820									
15 NOTICE FROM POLITICAL COMMITTEF(S)	FROM candidate / officeholder. These expenditures may have been made without the candidate's or officeholder's knowledge or								
Additional Pages	COMMITTEE TYPE	COMMITTEE TYPE COMMITTEE NAME							
	X GENERAL	Texas Alliance for Life PAC							
		COMMITTEE ADDRESS							
		000 Centre Park Dr.							
		Suite 380							
		Austin, TX 78754							
		COMMITTEE CAMPAIGN TREASURER NAME							
		Shaw, James							
		COMMITTEE CAMPAIGN TREASURER ADDRESS							
		4505 Corazon Cv							
		Round Rock, TX 78681							
16 CONTRIBUTION TOTALS		I IIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, ES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$	0.00					
		CAL CONTRIBUTIONS PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	254,427.58					
EXPENDITURE TOTALS									
	\$	84,695.76							
CONTRIBUTION BALANCE	5. TOTAL POLITIC REPORTING PE	CAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE ERIOD	\$	68,335.29					
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCI OF THE REPOR	PAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY RTING PERIOD	\$	115,000.00					
17 AFFIDAVIT	•								
		I swear, or affirm, under penalty of perjury, that the acc true and correct and includes all information required to under Title 15, Election Code.							
		Don E. McLaughlin Jr.							
		Signature of Candidate or Officehole	der						
AFFIX NO	TARY STAMP / SEAL AB	OVE							
Sworn to and subso	cribed before me, by the s	aid, this the		day					
		ertify which, witness my hand and seal of office.							
Signature of offic	cer administering	Printed name of officer administering Title of officer	administe	ering oath					
Forms provided by Te	xas Ethics Commission	n www.ethics.state.tx.us	Version \	/4.1.0.5dd2ace2					

SUBTOTALS - C/OH		FORM C/OH
	CC	OVER SHEET PG 3 3 of 51
18 FILER NAME McLaughlin Jr., Don E.	19 Filer ID 00087820	(Ethics Commission Filers)
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1. X SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		<b>\$</b> 59,311.79
2. X SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		<b>\$</b> 195,115.79
3. SCHEDULE B: PLEDGED CONTRIBUTIONS		\$
4. X SCHEDULE E: LOANS		<b>\$</b> 50,000.00
5. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	<b>\$</b> 84,695.76
6. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$
7. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$
8. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$
9. SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS		\$
10. SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS	OF C/OH	\$
11. SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$
12. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$
		•

#### MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 1/18 Rpt: 4/51 2 FILER NAME Filer ID (Ethics Commission Filers) 3 McLaughlin Jr., Don E. 00087820 Date 4 **5** Full name of contributor out-of-state PAC (ID#: 7 Amount of Contribution (\$) 12/04/2024 Associated Builders & Contractors of Texas PAC \$1,000.00 6 Contributor address; City; State; Zip Code Austin, TX 78767 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 12/06/2024 \$100.00 Barrow, James Contributor address; City; State; Zip Code San Antonio, TX 78209 Principal occupation / Job title (See Instructions) Employer (See Instructions) Attorney Barrow Law Office Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: 11/07/2024 \$1,561.52 Beasley, Kennon Contributor address; City; State; Zip Code Driftwood, TX 78619 Principal occupation / Job title (See Instructions) Employer (See Instructions) **Real Estate Broker KPG** Commercial Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 11/26/2024 Brodbeck, Neal \$260.25 Contributor address; City; State; Zip Code New Braunfels, TX 78130 Principal occupation / Job title (See Instructions) Employer (See Instructions) Banker Sonora Bank Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 11/07/2024 \$350.00 Capt, Carper Contributor address; City; State; Zip Code Uvalde, TX 78801 Principal occupation / Job title (See Instructions) Employer (See Instructions) Retired Self

	The Instru	ction Guide explains how to complete this f	form.	1	Total pages Schedule A1: Sch: 2/18 Rpt: 5/51	
2	FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
	McLaughlin .	Jr., Don E.			00087820	
	Date 12/03/2024	5 Full name of contributor out-of-state PAC (ID#: Carnes, J. Allen	)	7	Amount of Contribution (\$)	\$500.00
		6 Contributor address; City; State; Zip Code		1		
		Uvalde, TX 78802				
8	Principal occu	ipation / Job title (See Instructions)	9 Employer (See Instructions			
	Owner		Winter Garden Produce	!		
	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	11/20/2024	Carriage House Partners, LLC				\$1,000.00
		Contributor address; City; State; Zip Code		1		
		Austin, TX 78701				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Date	Full name of contributor out-of-state PAC (ID#:_	)	Γ	Amount of Contribution (\$)	
	12/04/2024	Dicke, Frankie			· ····································	\$250.00
		Contributor address; City; State; Zip Code		ł		
		Uvalde, TX 78802				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u>-</u> 5)		
	Retired		Retired			
	Date	Full name of contributor out-of-state PAC (ID#:_	)	Γ	Amount of Contribution (\$)	
	11/05/2024	Eason, Dan				\$350.00
		Contributor address; City; State; Zip Code		1		
		San Antonio, TX 78213				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	5)		
	CEO		Uvalco			
F	Date	Full name of contributor out-of-state PAC (ID#:_	)	Γ	Amount of Contribution (\$)	
	11/05/2024	Faglie, Kelly				\$500.00
		Contributor address; City; State; Zip Code				
		Uvalde, TX 78801				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Retired		Retired	,		
<u> </u>						

	The Instru	ction Guide explains how to com	plete this for	m.	1	Total pages Schedule A1: Sch: 3/18 Rpt: 6/51	
2	FILER NAME				3	Filer ID (Ethics Commission	Filers)
	McLaughlin	Jr., Don E.				00087820	,
4	Date	5 Full name of contributor out-of-	state PAC (ID#:	)	7	Amount of Contribution (\$)	
	11/07/2024	Foster, Chad					\$500.00
		6 Contributor address; City; State; Zip C					
		Uvalde, TX 78801					
8	Principal occu Owner	pation / Job title (See Instructions)	9	Employer (See Instructions Black Rock Managemer			
	Date	Full name of contributor 🛛 out-of-	state PAC (ID#:	)		Amount of Contribution (\$)	
	11/05/2024	Franklin's Auto Service					\$300.00
		Contributor address; City; State; Zip C					
		Uvalde, TX 78801					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	)		
⊨	Date	Full name of contributor out-of-	state PAC (ID#:	)		Amount of Contribution (\$)	
	12/03/2024	Gager, Stephanie					\$104.10
		Contributor address; City; State; Zip C					
		Uvalde, TX 78801					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	)		
	Retired			Retired			
	Date	Full name of contributor 🗌 out-of-	state PAC (ID#:	)		Amount of Contribution (\$)	
	11/02/2024	Green, Don					\$104.10
		Contributor address; City; State; Zip C					
		Von Ormy, TX 78073					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	)		
	Owner			Somerset Crossing			
	Date	Full name of contributor 🛛 out-of-	-state PAC (ID#:	)		Amount of Contribution (\$)	
	12/02/2024	Homepac of Texas					\$500.00
		Contributor address; City; State; Zip C	ode				
		Austin, TX 78701					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	)		
			•				

MONET	ARY POLITICAL CONTRIBUTIC	NS	SCHEDULE A1
The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A1: Sch: 4/18 Rpt: 7/51
2 FILER NAME McLaughlin			3 Filer ID (Ethics Commission Filers) 00087820
4 Date 11/14/2024			7 Amount of Contribution (\$) \$250.00
	Houston, TX 77219		
8 Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions)	)
Date 12/07/2024	Full name of contributor out-of-state PAC (ID#:_ Hurt, Melinda Contributor address; City; State; Zip Code Dilley, TX 78017	)	Amount of Contribution (\$) \$1,041.02
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions)	<u> </u>
Rancher		Self	
Date 12/03/2024	Full name of contributorout-of-state PAC (ID#: IBAT PAC Contributor address; City; State; Zip Code		Amount of Contribution (\$) \$500.00
Principal occu	Austin, TX 78701 upation / Job title (See Instructions)	Employer (See Instructions)	;)
		<u> </u>	
Date 10/30/2024	Full name of contributor out-of-state PAC (ID#: Joseph, Thomas Contributor address; City; State; Zip Code Jourdanton, TX 78026	)	Amount of Contribution (\$) \$100.00
Principal occu Retired	upation / Job title (See Instructions)	Employer (See Instructions) Retired	)
Date	Full name of contributor out-of-state PAC (ID#:		Amount of Contribution (\$)
12/01/2024	Kercheville, Scott Contributor address; City; State; Zip Code	,	\$100.00
	San Antonio, TX 78229		
Principal occu Doctor	upation / Job title (See Instructions)	Employer (See Instructions) UT Health Science Cent	

SCHEDULE	A1
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The Instru	ction Guide explains how to complete this f	form.	1	Total pages Schedule A1: Sch: 5/18 Rpt: 8/51	
2 FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
McLaughlin .	Jr., Don E.			00087820	
4 Date 11/01/2024	5 Full name of contributor out-of-state PAC (ID#: Kilday, Lisa	)	7	Amount of Contribution (\$)	\$260.25
	6 Contributor address; City; State; Zip Code		·		
	Sugar Land, TX 77479				
8 Principal occu Retired	ipation / Job title (See Instructions)	9 Employer (See Instructions Retired	s)		
Date	Full name of contributor out-of-state PAC (ID#:_	)	Τ	Amount of Contribution (\$)	
11/27/2024	Klein, Randy				\$250.00
	Contributor address; City; State; Zip Code				
	Uvalde, TX 78801	<u> </u>	<u> </u>		
Principal occu Rancher	ipation / Job title (See Instructions)	Employer (See Instructions Self	s)		
Date	Full name of contributor out-of-state PAC (ID#:	)	Ī	Amount of Contribution (\$)	
11/01/2024	L&L Farms				\$1,000.00
	Batesville, TX 78829				
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	s)		
Date	Full name of contributor out-of-state PAC (ID#:_	)	Ι	Amount of Contribution (\$)	
12/03/2024	Langford, HT				\$100.00
	Contributor address; City; State; Zip Code				
	Uvalde, TX 78801				
Principal occu Owner	ipation / Job title (See Instructions)	Employer (See Instructions Langford Investments	s)		
Date	Full name of contributor out-of-state PAC (ID#:	)	Ī	Amount of Contribution (\$)	
12/11/2024	Linebarger Goggan Blair & Sampson, LLP				\$500.00
	Contributor address; City; State; Zip Code				
	Austin, TX 78760				
Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	s)		
		1			

	The Instru	ction Guide explains how to complete th	is form.	1	Total pages Schedule A1: Sch: 6/18 Rpt: 9/51	
2	FILER NAME			3	Filer ID (Ethics Commissio	n Filers)
	McLaughlin .	Jr., Don E.			00087820	-
4	Date	5 Full name of contributor out-of-state PAC (	ID#:)	7	Amount of Contribution (\$)	
	12/03/2024	Lozano, Hugo				\$104.10
		6 Contributor address; City; State; Zip Code		1		
		Houston, TX 77056				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Owner		Q2 Technologies.com			
	Date	Full name of contributor 🛛 out-of-state PAC (	ID#:)	Γ	Amount of Contribution (\$)	
	11/26/2024	Marceaux, Robert				\$104.10
		Contributor address; City; State; Zip Code		1		
		Abbeville, LA 70510				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Retired		Retired			
	Date	Full name of contributor out-of-state PAC (	ID#:)		Amount of Contribution (\$)	
	12/06/2024	Marquardt, Rhonda				\$100.00
		Contributor address; City; State; Zip Code		1		
		Uvalde, TX 78801	i			
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Self		Estate Sale Liquidator			
	Date	Full name of contributor 🛛 out-of-state PAC (	ID#:)		Amount of Contribution (\$)	
	12/02/2024	Matz and Company, LLC				\$500.00
		Contributor address; City; State; Zip Code		]		
⊢	<u> </u>	Austin, TX 78703		Ĺ		
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
				_		
	Date	Full name of contributor out-of-state PAC (	ID#:)		Amount of Contribution (\$)	
	11/26/2024	Maxey, Merlin				\$260.25
		Contributor address; City; State; Zip Code				
		Unalda TV 70001				
⊢	<u> </u>	Uvalde, TX 78801		Ĺ		
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Owner		Maxey Energy			

	-					
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 7/18 Rpt: 10/51	
2	FILER NAME			3	Filer ID (Ethics Commission	nn Filers)
-	McLaughlin			ľ	00087820	
4	Date	5 Full name of contributor out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
	12/14/2024	McDonald, Deborah				\$2,000.00
		6 Contributor address; City; State; Zip Code		1		
		Uvalde, TX 78801				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	S)		
	CPA		Colemen, Horton & Co.			
	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	11/27/2024	McGlothlin, James				\$104.10
				1		
		······································				
		Houston, TX 77055				
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	s)		
	Retired		Retired			
-	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	12/09/2024	McWhorther, Janice				\$300.00
		Contributor address; City; State; Zip Code		•		<b>T</b>
		Uvalde, TX 78801				
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Retired		Retired			
	Date	Full name of contributor Out-of-state PAC (ID#:	)	Г	Amount of Contribution (\$)	
	11/26/2024	Milner, Barry	,			\$104.10
	±±, ± ;, ± = =	Contributor address; City; State; Zip Code		1		<b>*=</b> •
		Pearland, TX 77581				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	President		Exploreco International			
	Date	Full name of contributor Out-of-state PAC (ID#:	)	Τ	Amount of Contribution (\$)	
	12/09/2024	Nelson, Mary Ellen				\$1,000.00
		Contributor address; City; State; Zip Code		1		. ,
		Corpus Christi, TX 78413				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Rancher		Self			
-						

	The Instru	ction Guide explains how to	complete this fo	orm.	1	Total pages Schedule A1: Sch: 8/18 Rpt: 11/51	
2	FILER NAME				3	Filer ID (Ethics Commissio	on Filers)
	McLaughlin .	Jr., Don E.				00087820	,
4	Date	5 Full name of contributor	out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
	12/04/2024	Nuetze, James					\$5,205.08
		6 Contributor address; City; State;	Zip Code		1		
		Uvalde, TX 78801					
8		pation / Job title (See Instructions)		9 Employer (See Instructions	5)		
	CEO			Mr. Cartenders			
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	12/03/2024	Nuetze, Tad					\$250.00
		Contributor address; City; State;	Zip Code				
		Lhudda TV 70001					
	Deinsinglasse	Uvalde, TX 78801	r		Ĺ		
	Owner	pation / Job title (See Instructions)		Employer (See Instructions Storage Solution	5)		
				Storage Solution			
	Date		out-of-state PAC (ID#:	)		Amount of Contribution (\$)	<b>#1</b> 000 00
	11/07/2024	Olcott, Michael					\$1,000.00
		Contributor address; City; State;	Zip Code				
		Fort Worth, TX 76126					
⊢	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	L;)		
	Candidate			State Rep	,		
⊨	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	12/01/2024	Oncor Texas State PAC		/			\$1,500.00
		Contributor address; City; State;	7in Code				
		Dallas, TX 75202					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	10/27/2024	Park, John					\$500.00
		Contributor address; City; State;	Zip Code				
L		San Antonio, TX 78209					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Vice Preside	nt		Comerica Bank			

	The Instru	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 9/18 Rpt: 12/51	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	McLaughlin 、				00087820	/
4	Date	5 Full name of contributor out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
	12/06/2024	Park, John				\$104.10
		6 Contributor address; City; State; Zip Code		1		
		San Antonio, TX 78209				
8	Principal occu	upation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Vice Preside	ent	Comerica Bank			
	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	11/27/2024	Price Cattle Co.				\$250.00
		Contributor address; City; State; Zip Code		1		
		Uvalde, TX 78801				
	Principal occu	ipation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	11/07/2024	RKW Special, LLC			······	\$250.00
				ł		+
		Uvalde, TX 78802				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	5)		
⊢	Date	Full name of contributor out-of-state PAC (ID#:_	)	Γ	Amount of Contribution (\$)	
	11/07/2024	RKW Special, LLC				\$500.00
		Contributor address; City; State; Zip Code		1		
	I	Uvalde, TX 78802				
	Principal occu	upation / Job title (See Instructions)	Employer (See Instructions	5)		
⊨	Date	Full name of contributor out-of-state PAC (ID#:	<u>,                                    </u>	Г	Amount of Contribution (\$)	
	12/12/2024	Ramirez, J. Edmundo				\$104.10
	I	Contributor address; City; State; Zip Code		ł		
	I					
	I					
	l	Laredo, TX 78041				
	Principal occu	Ipation / Job title (See Instructions)	Employer (See Instructions	<u> </u>		
	Self		Self	,		

The Inst	ruction Guide explains how to complete this	form.	1 Total pages Schedule A1: Sch: 10/18 Rpt: 13/51	
2 FILER NAI	Æ		3 Filer ID (Ethics Commission	ı Filers)
McLaugh	in Jr., Don E.		00087820	
4 Date 12/03/202	5 Full name of contributor out-of-state PAC (ID#: Riggs, Weldon	)	7 Amount of Contribution (\$)	\$25.00
	6 Contributor address; City; State; Zip Code			
	Floresville, TX 78114			
8 Principal o Retired	ccupation / Job title (See Instructions)	9 Employer (See Instructions Retired	;)	
Date	Full name of contributor out-of-state PAC (ID#:	·)	Amount of Contribution (\$)	
12/05/202	A Rotan, Matthew			\$100.00
	Houston, TX 77024			
Principal o	ccupation / Job title (See Instructions)	Employer (See Instructions	<u> </u>	
Partner		Marble Capital LP	9	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
11/26/202				\$104.10
	Contributor address; City; State; Zip Code			
	Laredo, TX 78046	•		
Principal o Retired	ccupation / Job title (See Instructions)	Employer (See Instructions Retired	.)	
Date	Full name of contributor out-of-state PAC (ID#:	·)	Amount of Contribution (\$)	
11/07/202	4 Sage Wellness			\$350.00
	Contributor address; City; State; Zip Code			
	Uvalde, TX 78801			
Principal o	ccupation / Job title (See Instructions)	Employer (See Instructions	;)	
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)	
11/19/202				\$1,500.00
	Contributor address; City; State; Zip Code			
	San Antonio, TX 78249			
Principal o	ccupation / Job title (See Instructions)	Employer (See Instructions	;)	
		1		

	The Instruc	ction Guide explains how to complete this f	orm.	1	Total pages Schedule A1: Sch: 11/18 Rpt: 14/51	
2	FILER NAME			3	Filer ID (Ethics Commission	n Filers)
	McLaughlin .	Jr., Don E.			00087820	
4	Date	5 Full name of contributor out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
	12/04/2024	Sasser, M. Stuart (Mr.)				\$250.00
		6 Contributor address; City; State; Zip Code		1		
		Corpus Christi, TX 78404				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions			
	Manager		Sasser Resources, LLC			
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	10/29/2024	Schatzline, Nathan				\$250.00
		Contributor address; City; State; Zip Code				
		Fort Worth, TX 76161				
$\vdash$	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Campaign		Nate for Texas			
⊨	Date	Full name of contributor Out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	11/07/2024	Schrutka, Misti	/			\$500.00
	<b>11</b> , <b>0</b> <u>-</u> .					+
		Contributor address, Gity, State, Lip Sour				
		Uvalde, TX 78801				
⊢	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> 5)		
	Sales	· · · · · · · · · · · · · · · · · · ·	DKM Enterprises	,		
╞	Date	Full name of contributor Out-of-state PAC (ID#:		<u> </u>	Amount of Contribution (\$)	
	11/29/2024	Full name of contributor out-of-state PAC (ID#: Slaughter III, Joseph	)			\$250.00
	11/29/2024					Φ200.00
		Contributor address; City; State; Zip Code				
		Laredo, TX 78044				
┝	Drincinal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u>ا</u>		
	Realtor	pallon / Job lille (See instructions)	Employer (See Instructions Self	5)		
L			3011 	_		
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	10/30/2024	Soward, David				\$100.00
		Contributor address; City; State; Zip Code				
		Jourdanton, TX 78026				
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Sheriff		Atascosa County			

					_		
	The Instru	ction Guide explains how to co	omplete this for	m.	1	Total pages Schedule A1: Sch: 12/18 Rpt: 15/51	
2	FILER NAME				3	Filer ID (Ethics Commissio	on Filers)
	McLaughlin .					00087820	,
4	Date	5 Full name of contributor out	t-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
	12/03/2024	Spiers, Jon					\$250.00
		6 Contributor address; City; State; Zip	p Code				
		1					
		Houston, TX 77005					
8		upation / Job title (See Instructions)	9	Employer (See Instructions	;)		
	Surgeon			Spiers Group			
	Date	Full name of contributor	t-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	11/01/2024	 Stidham, Jason					\$350.00
		Contributor address; City; State; Zip					
		1					
		Uvalde, TX 78801					
	Principal occu	upation / Job title (See Instructions)		Employer (See Instructions	<u>ل</u> ے (		
	Owner			Sentry Security			
-	Date	Full name of contributor out	t-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	12/11/2024	TBA Bank PAC - State	、 <u> </u>			• •	\$500.00
		Contributor address; City; State; Zip	n Code	,			
			, 0000				
		1					
		Austin, TX 78701					
	Principal occu	upation / Job title (See Instructions)		Employer (See Instructions	<u>ا</u> ن)		
-	Date	Full name of contributor out	t-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	11/12/2024	TSA PAC					\$1,500.00
		Contributor address; City; State; Zip	n Code				
			, 0000				
		1					
		Austin, TX 78701					
	Principal occu	upation / Job title (See Instructions)		Employer (See Instructions	<u>ا</u> ن)		
╞	Date	Full name of contributor	t-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	12/04/2024	Tarski Law				······	\$250.00
		Contributor address; City; State; Zip	n Code	,			·
			50000				
		1					
		Uvalde, TX 78801					
	Principal occu	I Ipation / Job title (See Instructions)		Employer (See Instructions	<u>ا</u> چ)		
	F	,			,		
			L				

#### MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 13/18 Rpt: 16/51 2 FILER NAME Filer ID (Ethics Commission Filers) 3 McLaughlin Jr., Don E. 00087820 Date 4 **5** Full name of contributor out-of-state PAC (ID#: 7 Amount of Contribution (\$) 12/11/2024 Texans for Reasonable Solutions PAC \$500.00 6 Contributor address; City; State; Zip Code Austin, TX 78741 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 12/02/2024 \$100.00 Texas Alliance for Life PAC Contributor address; City; State; Zip Code Austin, TX 78754 Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) Date 10/27/2024 \$750.00 Texas Apartment Assoc. PAC ..... Contributor address; City; State; Zip Code Austin, TX 78701 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 11/30/2024 \$500.00 **Texas Funeral Directors Association PAC** Contributor address; City; State; Zip Code Austin 78741 Namibia Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#:\_ 11/25/2024 \$1,000.00 Texas Land Title Assoc. PAC Contributor address; City; State; Zip Code Austin, TX 78701 Principal occupation / Job title (See Instructions) Employer (See Instructions)

#### MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 14/18 Rpt: 17/51 2 FILER NAME Filer ID (Ethics Commission Filers) 3 McLaughlin Jr., Don E. 00087820 Date 4 5 Full name of contributor out-of-state PAC (ID#: 7 Amount of Contribution (\$) 12/03/2024 Texas Manufactured Housing Assoc., Inc. \$500.00 6 Contributor address; City; State; Zip Code Austin, TX 78759 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 11/21/2024 \$500.00 Texas Medical Association PAC Contributor address; City; State; Zip Code Austin, TX 78701 Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor Amount of Contribution (\$) Date out-of-state PAC (ID#: 12/06/2024 **Texas Optometric PAC** \$1,000.00 Contributor address; City; State; Zip Code Austin, TX 78705 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 12/10/2024 Texas Produce Assoc., Tex PAC \$750.00 Contributor address; City; State; Zip Code Mission, TX 78572 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor Amount of Contribution (\$) out-of-state PAC (ID#: 11/13/2024 \$4,000.00 **Texas Sands PAC** Contributor address; City; State; Zip Code Austin, TX 78701 Principal occupation / Job title (See Instructions) Employer (See Instructions)

#### MONETARY POLITICAL CONTRIBUTIONS SCHEDULE A1 1 Total pages Schedule A1: The Instruction Guide explains how to complete this form. Sch: 15/18 Rpt: 18/51 2 FILER NAME Filer ID (Ethics Commission Filers) 3 McLaughlin Jr., Don E. 00087820 Date 4 5 Full name of contributor out-of-state PAC (ID#: 7 Amount of Contribution (\$) 12/02/2024 **Texas Star Alliance** \$1,000.00 6 Contributor address; City; State; Zip Code Houston, TX 77019 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 11/22/2024 Texas State Assoc. of Fire Fighters PAC \$250.00 Contributor address; City; State; Zip Code Austin, TX 78701 Principal occupation / Job title (See Instructions) Employer (See Instructions) Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) Date 11/19/2024 Texas Trial Lawyers Assoc. PAC \$2,500.00 Contributor address; City; State; Zip Code Austin, TX 78701 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 11/18/2024 \$500.00 The American Electric Power Co. Texas Committee for Responsible Contributor address; City; State; Zip Code Washington, DC 20004 Principal occupation / Job title (See Instructions) Employer (See Instructions) Date Full name of contributor out-of-state PAC (ID#: Amount of Contribution (\$) 11/22/2024 \$250.00 The Independent Insurance Agents of Texas PAC Contributor address; City; State; Zip Code Austin, TX 78768 Principal occupation / Job title (See Instructions) Employer (See Instructions)

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	The Instru	ction Guide explains how	v to complete this f	orm.	1	Total pages Schedule A1: Sch: 16/18 Rpt: 19/51	
2	FILER NAME				3	Filer ID (Ethics Commissio	on Filers)
	McLaughlin .					00087820	,
4	Date	5 Full name of contributor	out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
	11/04/2024	Tidwell, Walter					\$500.00
		6 Contributor address; City; S	State; Zip Code		1		
		Uvalde, TX 78801					
8		upation / Job title (See Instructions	s)	9 Employer (See Instructions	;)		
	Procurement	t		DKM Enterprise			
	Date	Full name of contributor	out-of-state PAC (ID#:_	)	Γ	Amount of Contribution (\$)	
	12/02/2024	Troxclair PC					\$1,000.00
		Contributor address; City; S			1		
		Austin, TX 78701					
	Principal occu	upation / Job title (See Instructions	s)	Employer (See Instructions	;)		
			1				
	Date	Full name of contributor	x out-of-state PAC (ID#:	C00064766 )	Γ	Amount of Contribution (\$)	
	10/27/2024	UPSPAC					\$1,000.00
		Contributor address; City; S	state; Zip Code				
			· ·				
				ļ			
		Washington, DC 20003			_		
	Principal occu	upation / Job title (See Instructions	s)	Employer (See Instructions	;)		
	Date	Full name of contributor	out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	10/27/2024	Valentine, Charles	-	ļ			\$200.00
		Contributor address; City; S	State; Zip Code				
				ļ			
		Uvalde, TX 78801					
	Principal occu	upation / Job title (See Instructions	s)	Employer (See Instructions	;)		
	Retired			Retired			
Γ	Date	Full name of contributor	X out-of-state PAC (ID#:		Γ	Amount of Contribution (\$)	
	11/29/2024	Vulcan Materials Co. PAC	ວ				\$500.00
		Contributor address; City; S	state; Zip Code		1		
		Birmingham, AL 35238-50	.014				
	Principal occu	upation / Job title (See Instructions	s)	Employer (See Instructions	;)		
			1				
$\vdash$							

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	The Instru	ction Guide explains how to complete this f	iorm.	1	Total pages Schedule A1: Sch: 17/18 Rpt: 20/51	
2	FILER NAME			3	Filer ID (Ethics Commissio	on Filers)
	McLaughlin .	Jr., Don E.			00087820	///////////////////////////////////////
4	Date	5 Full name of contributor out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	
	11/06/2024	Wagnon, Robert				\$1,561.52
		6 Contributor address; City; State; Zip Code				
		Houston, TX 77030				
8	Principal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	;)		
	CEO		Republic State Mortgage	е		
╞	Date	Full name of contributor out-of-state PAC (ID#:_	)	Γ	Amount of Contribution (\$)	
	12/03/2024	Weisinger, Vickie				\$50.00
		Uvalde, TX 78801				
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	;)		
	Retired		Retired			
F	Date	Full name of contributor out-of-state PAC (ID#:	)	Γ	Amount of Contribution (\$)	
	12/11/2024	Weisman, John				\$5,000.00
		Contributor address; City; State; Zip Code				
	Deitopical agai	New Braunfels, TX 78132-3412	Turnels ver (See Jestrustions			
	Principal occu President	pation / Job title (See Instructions)	Employer (See Instructions Colorado Materials, LTD			
				, —		
	Date	Full name of contributor out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	11/05/2024	White, Cheryl				\$300.00
		Contributor address; City; State; Zip Code				
	D i sizzi ees	Uvalde, TX 78801		Ĺ		
		pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Mom		Self	—		
	Date	Full name of contributor out-of-state PAC (ID#:_	)		Amount of Contribution (\$)	
	12/02/2024	Wholesale Beer Distributors of Texas				\$1,000.00
		Contributor address; City; State; Zip Code				
		Austin, TX 78701				
$\vdash$	Principal occu	I pation / Job title (See Instructions)	Employer (See Instructions	<u>ا</u> چ)		
	·					
			1			
4						

	MONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A1
	The Instruction Guide explains how to complete this form.			1	Total pages Schedule A1: Sch: 18/18 Rpt: 21/51
2	FILER NAME	Jr., Don E.		3	Filer ID (Ethics Commission Filers) 00087820
4	Date 12/10/2024	<ul> <li>5 Full name of contributor out-of-state PAC (ID#:</li> <li>Wine and Spirits Wholesales of Texas PAC</li> <li>6 Contributor address; City; State; Zip Code</li> <li>Austin, TX 78701</li> </ul>	)	7	Amount of Contribution (\$) \$2,000.00
8	Principal occu	1	Employer (See Instructions)	)	
	Date     Full name of contributor     out-of-state PAC (ID#:)       11/27/2024     Zimmerman, Darrell       Contributor address; City; State; Zip Code			Amount of Contribution (\$) \$100.00	
		Uvalde, TX 78801			
	Principal occu Retired	pation / Job title (See Instructions)	Employer (See Instructions)	)	

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A2: Sch: 1/3 Rpt: 22/51
2 FILER NAME McLaughlin			3 Filer ID (Ethics Commission Filers) 00087820
<sup>4</sup> TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	UTIONS	\$
5 Date 10/29/2024			8 Amount of 9 In-kind contribution contribution (\$) description \$335.20   Travel
	Austin, TX 78767		I Check if travel outside of Texas. Complete Schedule T.
<b>10</b> Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON	-JUDICIAL) (See instructions)
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contributor's job title	(FOR JUDICIAL) (See instructions)
14 Contributor's	employer/law firm (FOR JUDICIAL)	<b>15</b> Law firm of contributo	r's spouse (if any) (FOR JUDICIAL)
16 If contributor i	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)	I	
Date 11/01/2024	Full name of contributor out-of-state PAC (ID#: Greg Abbott Campaign Contributor address; City; State; Zip Code	)	Amount of In-kind contribution contribution (\$) description \$19,071.35   Canvassing
	Austin, TX 78767		Check if travel outside of Texas. Complete Schedule T.
Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	-JUDICIAL) (See instructions)
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contributo	r's spouse (if any) (FOR JUDICIAL)
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
Date 11/01/2024	Full name of contributor out-of-state PAC (ID#: Greg Abbott Campaign Contributor address; City; State; Zip Code	)	Amount of In-kind contribution contribution (\$) description \$4,538.69   Texting
	Austin, TX 78767		I I Check if travel outside of Texas. Complete Schedule T.
Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	-JUDICIAL) (See instructions)
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contributo	r's spouse (if any) (FOR JUDICIAL)
If contributor i	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)	1	

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A2: Sch: 2/3 Rpt: 23/51		
2 FILER NAME McLaughlin			3 Filer ID (Ethics Commission Filers) 00087820		
<sup>4</sup> TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	UTIONS	\$		
5 Date 11/06/2024			8 Amount of 9 In-kind contribution contribution (\$) description \$1,201.25 I Texting		
	Austin, TX 78767		Check if travel outside of Texas. Complete Schedule T.		
<b>10</b> Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON	-JUDICIAL) (See instructions)		
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contributor's job title	(FOR JUDICIAL) (See instructions)		
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm of contributo	r's spouse (if any) (FOR JUDICIAL)		
16 If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)				
Date 11/06/2024	Full name of contributor out-of-state PAC (ID#: Greg Abbott Campaign Contributor address; City; State; Zip Code	)	Amount of In-kind contribution contribution (\$) description \$229.60 I Travel		
	Austin, TX 78767		Check if travel outside of Texas. Complete Schedule T.		
Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	-JUDICIAL) (See instructions)		
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)		
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contributo	Law firm of contributor's spouse (if any) (FOR JUDICIAL)		
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)				
Date 11/13/2024	Full name of contributor out-of-state PAC (ID#: Greg Abbott Campaign Contributor address; City; State; Zip Code	)	Amount of In-kind contribution contribution (\$) description \$12,739.70 I Canvassing		
	Austin, TX 78767		Check if travel outside of Texas. Complete Schedule T.		
Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	-JUDICIAL) (See instructions)		
Contributor's	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instructions)		
Contributor's	employer/law firm (FOR JUDICIAL)	Law firm of contributo	r's spouse (if any) (FOR JUDICIAL)		
If contributor	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)				

# NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

The Instru	ction Guide explains how to complete this f	orm.	1 Total pages Schedule A2: Sch: 3/3 Rpt: 24/51
2 FILER NAME			3 Filer ID (Ethics Commission Filers)
McLaughlin			00087820
<sup>4</sup> TOTAL OF	UNITEMIZED IN-KIND POLITICAL CONTRIB	UTIONS	\$
5 Date	6 Full name of contributor out-of-state PAC (ID#:	)	8 Amount of 9 In-kind contribution
10/29/2024	Texans for Lawsuit Reform PAC		contribution (\$) description
	7 Contributor address; City; State; Zip Code		\$120,000.00 Political Advertising
	Austin, TX 78701		Check if travel outside of Texas. Complete Schedule T.
10 Principal occu	upation / Job title (FOR NON-JUDICIAL) (See instructions)	11 Employer (FOR NON	I-JUDICIAL) (See instructions)
12 Contributor's	principal occupation (FOR JUDICIAL)	13 Contributor's job title	(FOR JUDICIAL) (See instructions)
14 Contributor's	employer/law firm (FOR JUDICIAL)	15 Law firm of contribute	pr's spouse (if any) (FOR JUDICIAL)
		15 Law IIIII of Contribute	s spouse (ii any) (FOR JODICIAL)
16 If contributor i	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of In-kind contribution contribution (\$) description
11/01/2024	Texans for Lawsuit Reform PAC		\$37,000.00 Political Advertising
	Contributor address; City; State; Zip Code		
Dringinglass	Austin, TX 78701		Check if travel outside of Texas. Complete Schedule T.
Principal occl	upation / Job title (FOR NON-JUDICIAL) (See instructions)	Employer (FOR NON	I-JUDICIAL) (See instructions)
Contributorio	principal accuration (FOD JUDICIAL)	Contributor's ish title	(FOR JUDICIAL) (See instructions)
Continuators	principal occupation (FOR JUDICIAL)	Contributor's job title	(FOR JUDICIAL) (See instituctions)
Contributorio		Low firm of contribute	
Contributors	employer/law firm (FOR JUDICIAL)	Law IIIm of contribute	pr's spouse (if any) (FOR JUDICIAL)
If contributor	is a shild law firm of parant(a) (if any) (FOD 11 DICIAL)		
	is a child, law firm of parent(s) (if any) (FOR JUDICIAL)		

	LOANS					SCHEDULE E
	The Instructio	n Guide explains ho	ow to complete this f	orm.		ges Schedule E: 1 Rpt: 25/51
2	FILER NAME McLaughlin Jr., I	Don E.			3 Filer ID 000878	(Ethics Commission Filers) 320
4	TOTAL OF UN	ITEMIZED LOANS				\$
5	Date of loan 12/11/2024	7 Name of lender McLaughlin, Don	out-of-state PA	C (ID#:	)	9 Loan Amount (\$) \$50,000.00
6	Is lender a financial institution?	8 Lender address;	City; State;	Zip Code		10 Interest Rate
	No	Uvalde, TX 78802				<b>11</b> Maturity Date
12	Principal occupation	on / Job title (See Instructio	ns)	13 Employer (See Instructions DKM Enterprises	6)	
14	Description of Coll	ateral		15 Check if personal funds we	ere deposited	l into political account (See Instructions)
16	GUARANTOR INFORMATION	<b>17</b> Name of guarantor		I		19 Amount Guaranteed (\$)
	X not applicable	<b>18</b> Guarantor address;	City; State;	Zip Code		
20	Principal occupation	) DN		21 Employer (See Instructions	5)	

	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 Exp Legal Services The Instruction Guide	Travel in District Travel Out of Dis	quipment & Related Expense							
1	Total pages Schedule F1:	2 FILE	R NAME				3	Filer ID	(Ethics Commission Filers)			
	Sch: 1/26 Rpt: 26/51		McLaughlin Jr., Don E. 00087820									
4	Date 11/01/2024	-	Payee name Alejandro, Gloria									
6	Amount (\$) \$1,375.00											
8	8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Poll Watcher											
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candio	late/Officeholder name	C	Office souç	ht		Office he	eld			
	Date	Paye	e name									
	11/06/2024	Aleja	ndro, Gloria									
	Amount (\$)       Payee address;       City;       State;       Zip Code         \$195.00       601 Sunrise Ave       Uvalde, TX 78801											
	PURPOSE OF EXPENDITURE		gory (See Categories listed at the te ries/Wages/Contract Labo		edule)		ı, TX	ide of Texas. Comp , officeholder living				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held						eld				
	Date	Paye	e name									
	11/19/2024	Aleja	ndro, Gloria									
	Amount (\$) \$201.18		e address; City; Sunrise Ave	State;	Zip Coo	le						
		Uval	de, TX 78801									
	PURPOSE OF EXPENDITURE		gory (See Categories listed at the tr ries/Wages/Contract Labo		edule)		ı, TX	ide of Texas. Comp , officeholder living				
	Complete ONLY if direct expenditure to benefit C/OF	Candio	late/Officeholder name	C	Office sou	ht		Office he	eld			

POLITICAL EXPENDITURES FROM POLITICAL
CONTRIBUTIONS

	EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		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:		3 Filer ID (Ethics Commission Filers)							
T	Sch: 2/26 Rpt: 27/51	McLaughlin Jr., Don E. 00087820								
4	Date	5 Payee name								
	11/01/2024	Briones, Rachel								
6	6 Amount (\$) \$475.00 7 Payee address; City; State; Zip Code 408 N. 23rd St. Carrizo Springs, TX 78834									
8	PURPOSE	(a) Cotogony (a construction of the state the state that (b) Description								
8       PURPOSE OF EXPENDITURE       (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor       (b) Description         Image: Check if Austin, TX, officeholder living expense Poll Watcher       Check if Austin, TX, officeholder living expense										
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							
	Date	Payee name								
11/05/2024 Briones, Rachel										
Amount (\$) Payee address; City; State; Zip Code										
	\$125.00	408 N. 23rd St. Carrizo Springs, TX 78834								
	PURPOSE OF EXPENDITURE		itside of Texas. Complete Schedule T. IX, officeholder living expense							
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held H								
	Date	Payee name								
	11/06/2024	Broadway 830								
	Amount (\$)	Payee address; City; State; Zip Code								
	\$5,360.00	100 E. Main St.								
		Uvalde, TX 78801								
	PURPOSE OF EXPENDITURE		itside of Texas. Complete Schedule T. FX, officeholder living expense							
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held							

	EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees         Office Overhead/Rental Expense         Transpond           Food/Beverage Expense         Polling Expense         Trave           e By -         Gift/Awards/Memorials Expense         Printing Expense         Trave							Travel in District Travel Out of Dis	quipment & Related Expense	
1	Total pages Schedule F1:	<b>2</b> F	ILER NAME						3	Filer ID	(Ethics Commission Filers)
	Sch: 3/26 Rpt: 28/51		AcLaughlin Jr.,	00087820	``````````````````````````````````````						
4	Date 11/04/2024		Payee name Cash, Cash								
6	Amount (\$) \$6,000.00	7       Payee address;       City;       State;       Zip Code         \$6,000.00       PO Box 1707         Uvalde, TX 78802									
8       PURPOSE OF EXPENDITURE       (a) Category (See Categories listed at the top of this schedule) Food/Beverage Expense       (b) Description         Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Laredo Watch Party											
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officehc	lder name	C	Office sou	ght			Office he	eld
	Date	F	Payee name								
11/05/2024 Cash, Cash											
	Amount (\$)     Payee address;     City;     State;     Zip Code       \$160.00     PO Box 1707     Uvalde, TX 78802										
	PURPOSE OF EXPENDITURE	(a) (		egories listed at the top	o of this sche	edule)		1	, TX,	le of Texas. Com officeholder living ch Party	
	Complete ONLY if direct expenditure to benefit C/OF		andidate/Officehc	lder name	C	Dffice sou	ght			Office he	eld
	Date	F	Payee name								
	11/05/2024		Cash, Cash								
	Amount (\$) \$1,600.00		Payee address; PO Box 1707	City;	State;	Zip Co	de				
		ι	Jvalde, TX 788	02							
	PURPOSE OF EXPENDITURE			egories listed at the top /Contract Labo		edule)		4	, TX,	le of Texas. Com officeholder living	
	Complete ONLY if direct expenditure to benefit C/OF		andidate/Officehc	lder name	C	Dffice sou	ght			Office he	eld

	EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense Fees Food/Beverage Ex Gitt/Awards/Memor Imittee Legal Services The Instruction	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: 4/26 Rpt: 29/51		McLaughlin Jr., Don E. 00087820								
4	Date	5	Payee name								
	10/30/2024		Castillo, Yvonne								
6	Amount (\$)	7 Payee address; City; State; Zip Code									
	\$600.00		129 Fairway Lane								
			Laredo, TX 78041								
8	PURPOSE OF	(a)	Category (See Categories listed		edule)	(b) Description					
	EXPENDITURE		Salaries/Wages/Contract	Labor				ide of Texas. Complete Schedule T. , officeholder living expense			
						Call Center	I, IA,	, uncertoider hving expense			
9	Complete ONLY if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Dffice sou	ht		Office held			
	Date		Payee name								
	11/01/2024		De La O, David								
Amount (\$) Payee address; City; State; Zip Code											
	\$600.00 2003 Durango Ave										
			Laredo, TX 78046								
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed Salaries/Wages/Contract		edule)		n, TX,	ide of Texas. Complete Schedule T. , officeholder living expense			
	Complete ONLY if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Dffice sou	ht		Office held			
	Date		Payee name								
	10/27/2024		De La O, David								
	Amount (\$)		Payee address; City;	State <sup>.</sup>	Zip Co	le					
	\$600.00		2003 Durango Ave	Otato,	2.6 000						
			Laredo, TX 78046								
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed Salaries/Wages/Contract		edule)		n, TX,	ide of Texas. Complete Schedule T. , officeholder living expense			
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		candidate/Officeholder name	C	Dffice sou	ht		Office held			

POLITICAL EXPENDITURES FROM POLITICAL
CONTRIBUTIONS

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment										
<b>1</b> Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)									
Sch: 5/26 Rpt: 30/51	McLaughlin Jr., Don E. 00087820									
4 Date	5 Payee name									
11/01/2024	Delgado, Carlos									
6 Amount (\$)	(\$) 7 Payee address; City; State; Zip Code									
\$545.19	834 S. Getty									
	Apt. 603									
	Uvalde, TX 78801									
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description									
EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.									
	Poll Watcher									
9 Complete <u>ONLY</u> if direct	Candidate/Officeholder name Office sought Office held									
expenditure to benefit C/O										
Date	Payee name									
11/06/2024 Delgado, Carlos										
Amount (\$) Payee address; City; State; Zip Code										
\$215.00 834 S. Getty										
	Apt. 603									
	Uvalde, TX 78801									
DUDDOCE										
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor									
EXPENDITURE	Salaries/Wages/Contract Labor Check if travel outside of Texas. Complete Schedule T.									
	Poll Watcher									
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held									
expenditure to benefit C/O										
Date	Payee name									
11/12/2024	Delgado, Carlos									
Amount (\$)	Payee address; City; State; Zip Code									
\$250.00	834 S. Getty									
φ230.00										
	Apt. 603									
	Uvalde, TX 78801									
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description									
OF EXPENDITURE	Salaries/Wages/Contract Labor									
	Check if Austin, TX, officeholder living expense									
	Sign Pick Up									
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held									

POLITICAL EXPENDITURES FROM POLITICAL
CONTRIBUTIONS

	EXPENDITURE CATEGORIES FOR BOX 8(a)											
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense     Loan Repayment/Reimbursement Office Overhead/Rental Expense     Solicitation/Fundraising Expense Transportation Equipment & Relate Travel in District       Food/Beverage Expense     Polling Expense     Travel in District       Gift/Awards/Memorials Expense     Printing Expense     Travel out of District       Legal Services     Salaries/Wages/Contract Labor     OTHER (enter a category not listed							quipment & Related Expense trict		
1	Total pages Schedule F1:	2	FILER NAME					3	Filer ID	(Ethics Commission Filers)		
	Sch: 6/26 Rpt: 31/51		McLaughlin Jr., Don E. 00087820									
4	Date	5	Payee name									
	12/19/2024		Engstrom, Nick									
6	Amount (\$)	7	Payee address;	City;	State; Zip	Cod	9					
	\$6,000.00		3403 Harmon A	ve.								
			Unit 556									
			Austin, TX 7870	5								
8	PURPOSE	(0)										
°	OF	(a)		egories listed at the top of	this schedule)	ľ	b) Description	outsi	de of Texas. Com	nlete Schedule T		
	EXPENDITURE		Salaries/Wages	Contract Labor					officeholder living			
							Staff		Ū			
9         Complete ONLY if direct expenditure to benefit C/OH         Candidate/Officeholder name         Office sought         Office held								eld				
	Date		Payee name									
	10/30/2024		Escamilla, Marc	0								
Amount (\$) Payee address; City; State; Zip Code												
	\$1,560.00		3312 Guadalup	-	otato, <u> </u>		-					
	φ1,500.00		SSIZ Guadalup	- 51.								
			Laredo, TX 780	43								
	PURPOSE OF EXPENDITURE	(a)	Category (See Cat Salaries/Wages	egories listed at the top of /Contract Labor	this schedule)	(			de of Texas. Com , officeholder living			
	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł	Candidate/Officeholder name Office sought Office held						eld				
	Date		Payee name									
	11/01/2024		Escamilla, Marc	0								
	Amount (\$)	-	Payee address;	City;	State; Zip	) Cod	<u>a</u>					
	\$800.00		3312 Guadalup		Olule, Zip	, 000	5					
	\$000.00		SSIZ Oudualup	5 01.								
			Laredo, TX 780	43								
	PURPOSE	(a)		egories listed at the top of	this schedule)	(	b) Description					
	OF EXPENDITURE		Salaries/Wages	/Contract Labor				ı, TX,	de of Texas. Com , officeholder living			
	Complete ONLY if direct		Candidate/Officeho	lder name	Office	soug	าt		Office he	eld		
	expenditure to benefit C/OI	Н				5						
-												

	EXPENDITURE CATEGORIES FOR BOX 8(a)											
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees         Office Overhead/Rental Expense         Tr           Food/Beverage Expense         Polling Expense         Tr           By -         Gift/Awards/Memorials Expense         Printing Expense         Tr						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: 7/26 Rpt: 32/51		McLaughlin Jr., Don E. 00087820									
4	Date 11/04/2024		Payee name Escamilla, Marco									
6	Amount (\$)	7	Payee address; City;	State <sup>.</sup>	Zip Co	le						
-	\$1,915.00											
8	PURPOSE	(a)		6.1. · · ·		(h) Description						
	OF	OF Salaries/Mages/Contract Labor										
9 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH												
	Date		Payee name									
11/12/2024 Escamilla, Marco												
Amount (\$) Payee address; City; State; Zip Code												
	\$1,600.00											
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top Salaries/Wages/Contract Labor		dule)		ı, TX,	ide of Texas. Complete Schedule T. , officeholder living expense				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	Of	ffice sou	ıht		Office held				
	Date		Payee name									
	10/27/2024		Escamilla, Marco									
	Amount (\$) \$800.00		Payee address; City; 3312 Guadalupe St.	State;	Zip Co	le						
			Laredo, TX 78043									
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the top Salaries/Wages/Contract Labor		dule)		ı, ТХ,	ide of Texas. Complete Schedule T. , officeholder living expense				
	Complete ONLY if direct expenditure to benefit C/OF		andidate/Officeholder name	Of	ffice sou	Jht		Office held				

	EXPENDITURE CATEGORIES FOR BOX 8(a)										
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	FeesOffice Overhead/Rental ExpenseTFood/Beverage ExpensePolling ExpenseTGift/Awards/Memorials ExpensePrinting ExpenseT						Travel in District Travel Out of Dist	uipment & Related Expense		
1	Total pages Schedule F1:	2	FILER NAME	E				3	Filer ID	(Ethics Commission Filers)	
	Sch: 8/26 Rpt: 33/51		McLaughlin Jr., Don E. 00087820								
4	Date	5	Payee name								
	11/18/2024		Escamilla, I	Marco							
6	Amount (\$)	7	Payee addre	ss; City;	State	; Zip Co	de				
	\$2,257.00		3312 Guad	alupe St.							
			Laredo, TX	78043							
8	PURPOSE OF	(a)		ee Categories listed a	t the top of this sch	nedule)	(b) Description				
	EXPENDITURE		Food/Bever	age Expense					ide of Texas. Comp		
									, officeholder living	r poll watchers	
							Reinbursen	ient		poir wateriers	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Off	ceholder name	(	Office sou	ght		Office he	ld	
	Date		Payee name								
	11/25/2024		Escamilla, I	Marco							
Amount (\$) Payee address; City; State; Zip Code											
	\$1,600.00 3312 Guadalupe St.										
			Laredo, TX	78043							
	PURPOSE OF EXPENDITURE	(a)		ee Categories listed a ages/Contract		nedule)		n, TX,	ide of Texas. Comp , officeholder living		
	Complete ONLY if direct expenditure to benefit C/O		Candidate/Off	Office sou	ght	t Office held					
	Date		Payee name								
	12/06/2024		Escamilla, I	Marco							
	Amount (\$)		Payee addre	ss; City;	State	; Zip Co	de				
	\$800.00		3312 Guad			, 1					
			Laredo, TX	78043							
	PURPOSE OF EXPENDITURE	(a)		ee Categories listed a ages/Contract		nedule)		n, TX,	ide of Texas. Comp , officeholder living K <b>E</b> F		
	Complete ONLY if direct expenditure to benefit C/O		Candidate/Off	ceholder name	(	Office sou	ght		Office he	ld	

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		Office Ove Polling Exp Printing Ex Salaries/W	Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Salaries/Wages/Contract Labor			Travel in District Travel Out of Dist	quipment & Related Expense
1	Total pages Schedule F1:	2	· · · · · · · · · · · · · · · · · · ·				2	Filer ID	(Ethics Commission Filers)	
-	Sch: 9/26 Rpt: 34/51		McLaughlin Jr., Don E.						00087820	(
4	Date 12/12/2024		5 Payee name Escamilla, Marco							
6	Amount (\$) \$800.00	7 Payee address; City; State; Zip Code 3312 Guadalupe St. Laredo, TX 78043								
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Staff								
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Office sou	lht			Office he	ld
	Date		Payee name							
	12/17/2024		Escamilla, Marco							
	Amount (\$) \$2,400.00		Payee address; City; 3312 Guadalupe St.	State;	; Zip Co	le				
	PURPOSE OF EXPENDITURE	(a)	Laredo, TX 78043 Category <sub>(See Categories listed at the I</sub> Salaries/Wages/Contract Lab		edule)		eck if travel o		de of Texas. Comp officeholder living	
	Complete ONLY if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Dffice sou	lht			Office he	ld
	Date		Payee name							
	11/13/2024		Facebook							
	Amount (\$) \$794.30		Payee address; City; 1 Hacker Way	State;	; Zip Co	le				
			Menlo Park, CA 94025							
	PURPOSE OF EXPENDITURE		Category (See Categories listed at the Advertising Expense	top of this sch	edule)		eck if travel o		de of Texas. Comp officeholder living	
	Complete ONLY if direct expenditure to benefit C/OF		andidate/Officeholder name	C	Dffice sou	Iht			Office he	ld

EXPENDITURE CATEGORIES FOR BOX 8(a)								
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Event Expense     Loan Repayment/Reimbursement       Fees     Office Overhead/Rental Expense       Food/Beverage Expense     Polling Expense       Gift/Awards/Memorials Expense     Printing Expense				Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)	
1	Total pages Schedule F1:	2	FILER NAME	Filer ID (Ethics Commission Filers)				
-	Sch: 10/26 Rpt: 35/51	-	McLaughlin Jr., Don E.				00087820	
4	Date	5	Payee name					
	10/27/2024		First State Bank of Uvalde					
6	Amount (\$) \$20.00	<ul> <li>Payee address; City; State; Zip Code</li> <li>200 E. Nopal</li> <li>Uvalde, TX 78801</li> </ul>						
8	PURPOSE OF EXPENDITURE	(a)	ategory (See Categories listed at the top of this schedule)       (b) Description         Ccounting/Banking       Check if travel outside of Texas. Complete Schedule T.         Check if Austin, TX, officeholder living expense       Bank Fee					
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Officeholder name C	Office sou	ght		Office held	
	Date		Payee name					
	10/27/2024		First State Bank of Uvalde					
	Amount (\$)		Payee address; City; State;	Zip Co	de			
	\$20.00		200 E. Nopal Uvalde, TX 78801					
PURPOSE OF EXPENDITURE		(a)					de of Texas. Complete Schedule T. officeholder living expense	
Complete <u>ONLY</u> if direct expenditure to benefit C/OF			Candidate/Officeholder name Office sought Office held					
	Date Payee name							
	10/31/2024		First State Bank of Uvalde					
	Amount (\$) \$20.00		Payee address; City; State; 200 E. Nopal	Zip Co	de			
			Uvalde, TX 78801					
	PURPOSE OF EXPENDITURE	(a)	Category (See Categories listed at the top of this sche Accounting/Banking	edule)			de of Texas. Complete Schedule T. officeholder living expense	
Complete <u>ONLY</u> if direct Candidate/Officeholder name Officepolder of the complete to benefit C/OH					ght		Office held	

EXPENDITURE CATEGORIES FOR BOX 8(a)									
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Off Food/Beverage Expense Pol Gift/Awards/Memorials Expense Pri	n Repayment/Reimbursement ce Overhead/Rental Expense ing Expense aries/Wages/Contract Labor to complete this form.	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:	LER NAME	3 Filer ID (Ethics Commission Filers)						
	Sch: 11/26 Rpt: 36/51	cLaughlin Jr., Don E.	00087820						
4	Date 11/01/2024	5 Payee name Flores, Abigail							
6	Amount (\$) \$3,450.00	7 Payee address; City; State; Zip Code 116 E. Campbell							
		Uvalde, TX 78801							
8	PURPOSE OF EXPENDITURE	<ul> <li>(a) Category (See Categories listed at the top of this schedule)</li> <li>Salaries/Wages/Contract Labor</li> <li>(b) Description         <ul> <li>Check if travel outside of Texas. Complete Schedule T.</li> <li>Check if Austin, TX, officeholder living expense</li> <li>Poll Watchers</li> </ul> </li> </ul>							
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	ndidate/Officeholder name Offic	e sought	Office held					
	Date	ayee name							
	11/01/2024	lores, Abigail							
	Amount (\$) \$213.72	ayee address; City; State; Zi 16 E. Campbell valde, TX 78801	o Code						
	PURPOSE OF EXPENDITURE	ategory (See Categories listed at the top of this schedule ood/Beverage Expense	outside of Texas. Complete Schedule T. h, TX, officeholder living expense II Watchers						
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held							
	Date	ayee name							
	11/06/2024	ores, Abigail							
	Amount (\$) \$2,100.00	ayee address; City; State; Zi 16 E. Campbell	o Code						
		valde, TX 78801							
	PURPOSE OF EXPENDITURE	ategory (See Categories listed at the top of this schedule alaries/Wages/Contract Labor	Check if travel	outside of Texas. Complete Schedule T. h, TX, officeholder living expense S					
	Complete ONLY if direct expenditure to benefit C/OF	ndidate/Officeholder name Offic	e sought	Office held					

		EXPENDITURE CATEGORIES FOR BOX 8(a)	
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		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:		<b>3</b> Filer ID (Ethics Commission Filers)
1	Sch: 12/26 Rpt: 37/51	McLaughlin Jr., Don E.	00087820
4	Date	Payee name	
	10/28/2024	Flores, Dora	
6	Amount (\$) \$812.00	7 Payee address; City; State; Zip Code 605 N. Park Uvalde, TX 78801	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule)       (b) Description	
	OF EXPENDITURE	Salaries/Wages/Contract Labor	utside of Texas. Complete Schedule T. TX, officeholder living expense
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	11/06/2024	Flores, Dora	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$896.00	605 N. Park Uvalde, TX 78801	
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	10/30/2024	Gonzales, Leonor	
	Amount (\$) \$600.00	Payee address;City;State; Zip Code3309 Cortez St.	
		Laredo, TX 78043	
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held

EXPENDITURE CATEGORIES FOR BOX 8(a)											
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Com Credit Card Payment			nmittee	Legal Service	ge Expense ⁄Iemorials Expense	Office C Polling I Printing Salaries	Expens Expens Expens Wage	ise s/Contract Labor		Transportation E Travel in District Travel Out of Dis	
1	Total pages Schedule F1:	2	FILER NAME	E					3	Filer ID	(Ethics Commission Filers)
	Sch: 13/26 Rpt: 38/51		McLaughlin	Jr., Don	E.					00087820	
4	Date	5	Payee name								
	11/01/2024		Greenwalt,	Julie							
6	Amount (\$)	7	Payee addre	ss; Cit	y; S	itate; Zip C	Code				
	\$1,408.64		11 Leona ⊢	eights							
			Uvalde, TX	78801							
8	PURPOSE OF	(a)			listed at the top of th	is schedule)	(b)	Description			
	EXPENDITURE		Salaries/Wa	ages/Con	tract Labor						plete Schedule T.
								Poll Watcher		officeholder living	j expense
								i on watcher			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Candidate/Off	ceholder n	ame	Office so	bught			Office he	eld
	Date		Payee name								
	11/06/2024		Greenwalt,	Julie							
	Amount (\$)		Payee addre	ss; Cit	y; S	state; Zip C	Code				
	\$195.00		11 Leona ⊢	eights							
			Uvalde, TX								
	PURPOSE OF EXPENDITURE	(a)	Category <sub>(S</sub> Salaries/Wa		listed at the top of th tract Labor	is schedule)	(b)		ı, TX,	de of Texas. Com officeholder living	plete Schedule T. g expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł		Candidate/Off	ceholder n	ame	Office so	bught			Office he	eld
	Date		Payee name								
	11/19/2024		Greenwalt,	Julie							
	Amount (\$)		Payee addre	ss; Cit	v. S	state; Zip C	Code				
	\$129.54		11 Leona H		,						
				J							
			Uvalde, TX	78801							
	PURPOSE OF	(a)			listed at the top of th	is schedule)	(b)	Description	outsi	de of Texas. Com	plete Schedule T.
	EXPENDITURE		Salaries/Wa	ages/Con	ITACL LADOI				ı, TX,	officeholder living	
	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Off	ceholder n	ame	Office so	bught			Office he	eld

POLITICAL EXPENDITURES FROM POLITICAL
CONTRIBUTIONS

		EXPENDITURE CATEGORIES FOR BOX 8(a)	
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		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:		Filer ID (Ethics Commission Filers)
-	Sch: 14/26 Rpt: 39/51	McLaughlin Jr., Don E.	00087820
4	Date	5 Payee name	
	10/30/2024	HEB	
6	Amount (\$)	7 Payee address; City; State; Zip Code	
	\$1,050.00	201 E. Main	
		Uvalde, TX 78801	
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	
	OF EXPENDITURE		ttside of Texas. Complete Schedule T.
			<sup>T</sup> X, officeholder living expense
		Gas Calus	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	11/04/2024	HEB	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$300.00	201 E. Main	
	\$000.00		
		Uvalde, TX 78801	
	PURPOSE OF EXPENDITURE		tside of Texas. Complete Schedule T. 'X, officeholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	11/05/2024	HEB	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$63.08	201 E. Main	
		Uvalde, TX 78801	
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description	tside of Texas. Complete Schedule T.
	EXPENDITURE		X, officeholder living expense
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held
	expenditure to benefit C/OF	C C	

		EXPENDITURE CATEGORIES FOR BOX 8(a)						
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense     Loan Repayment/Reimbursement       Fees     Office Overhead/Rental Expense       Food/Beverage Expense     Polling Expense       Gift/Awards/Memorials Expense     Printing Expense       Legal Services     Salaries/Wages/Contract Labor	Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District OTHER (enter a category not listed above)					
_	Tatal same Oak adula E1							
1	Total pages Schedule F1: Sch: 15/26 Rpt: 40/51	McLaughlin Jr., Don E.	3         Filer ID         (Ethics Commission Filers)           00087820         00087820					
4	Date	Payee name						
	12/17/2024	HEB						
6	Amount (\$) \$813.52	Payee address; City; State; Zip Code 201 E. Main Uvalde, TX 78801						
8	PURPOSE	a) Category (See Categories listed at the top of this schedule) (b) Description						
	OF EXPENDITURE	Gift/Awards/Memorials Expense	utside of Texas. Complete Schedule T. TX, officeholder living expense Staff					
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held					
	Date	Payee name						
	12/19/2024	Hansen, Cassidy						
	Amount (\$)	Payee address; City; State; Zip Code						
	\$5,000.00	1800 Spring Stuebner Rd.						
		Apt. 5302						
		Austin, TX 77389						
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held					
	Date	Payee name						
	10/30/2024	Highland Clarke						
	Amount (\$) \$177.22	Payee address; City; State; Zip Code 15955 La Cantera Parkway						
		San Antonio, TX 78256						
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense					
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held					

		EXPENDITURE CATEGORIES FOR BOX 8(a)	
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense Loan Repayment/Reimbursemer Fees Office Overhead/Rental Expense Food/Beverage Expense Office Overhead/Rental Expense Gilf/Awards/Memorials Expense Salaries/Wages/Contract Labor The Instruction Guide explains how to complete this form.	
1	Total pages Schedule F1:	FILER NAME	<b>3</b> Filer ID (Ethics Commission Filers)
	Sch: 16/26 Rpt: 41/51	McLaughlin Jr., Don E.	00087820
4	Date 12/12/2024	Payee name Jesse Gonzales Campaign	
_			
6	Amount (\$) \$1,000.00	Payee address;City;State;ZipCode1000 Houston St.	
		Laredo, TX 78040	
8	PURPOSE OF EXPENDITURE	Candidate/Officeholder/Political Committee	vel outside of Texas. Complete Schedule T. stin, TX, officeholder living expense Contribution
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	12/19/2024	Kenney, Deanna	
	Amount (\$)	Payee address; City; State; Zip Code	
	\$1,000.00	3914 W. US Highway 90	
		Uvalde, TX 78801	
	PURPOSE OF EXPENDITURE		vel outside of Texas. Complete Schedule T. stin, TX, officeholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held
	Date	Payee name	
	12/19/2024	Kenney, Deanna	
	Amount (\$) \$1,000.00	Payee address; City; State; Zip Code 3914 W. US Highway 90	
		Uvalde, TX 78801	
	PURPOSE OF EXPENDITURE		vel outside of Texas. Complete Schedule T. stin, TX, officeholder living expense
	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL
CONTRIBUTIONS

EXPENDITURE CATEGORIES FOR BOX 8(a)					
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Event Expense     Loan Repayment/Reinbursement       Fees     Office Overhead/Rental Expense       Food/Beverage Expense     Polling Expense       Gift/Awards/Memorials Expense     Printing Expense       Legal Services     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)		
1	Total pages Schedule F1:		<b>3</b> Filer ID (Ethics Commission Filers)		
-	Sch: 17/26 Rpt: 42/51	McLaughlin Jr., Don E.	00087820		
4	Date 11/07/2024	Payee name Laredo Morning Times			
6	6 Amount (\$) \$500.00 \$500.00 \$5011 McPherson Suite 203A Laredo, TX 78041 • City; State; Zip Code				
8	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held		
	Date	Payee name			
	11/19/2024	Lilly & Company			
	Amount (\$)	Payee address; City; State; Zip Code			
	\$10,000.00	1005 Congress Ave			
		Suite 400 Austin, TX 78701			
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense		
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held		
	Date	Payee name			
	12/04/2024	Lilly & Company			
	Amount (\$) \$1,652.88	Payee address;City;State;ZipCode1005 Congress AveSuite 400Austin, TX 78701			
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held		

POLITICAL EXPENDITURES FROM POLITICAL
CONTRIBUTIONS

			EXPENDITURE		RIES FOR E	3OX 8(a)		
Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Candidate/Officeholder/Political Committee Credit Card Payment			Gift/Awards/Memorials E Legal Services	Fees         Office Overhead/Rental Expense           Food/Beverage Expense         Polling Expense           Gift/Awards/Memorials Expense         Printing Expense		Transportation Travel in Distric Travel Out of D		
1	Total pages Schedule F1:	2 FIL	ER NAME				3 Filer ID	(Ethics Commission Filers)
	Sch: 18/26 Rpt: 43/51	Мс	Laughlin Jr., Don E.				00087820	
4	Date	5 Pay	ee name					
	11/01/2024	Loz	ano, Irma					
6	Amount (\$) \$475.00	PO	ee address; City; Box 305 rizo Springs, TX 78834	State;	Zip Code			
8	PURPOSE	(a) Cat			( <b>r</b>	) Description		
0	OF		egory (See Categories listed at the aries/Wages/Contract La		edule) (	Check if travel	outside of Texas. Cor n, TX, officeholder livir	
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		idate/Officeholder name	C	Office sough	t	Office h	eld
	Date	Pay	ee name					
	11/05/2024	Loz	ano, Irma					
	Amount (\$)	Pay	ee address; City;	State;	Zip Code	;		
	\$125.00	_	Box 305 rizo Springs, TX 78834					
	PURPOSE OF EXPENDITURE		egory (See Categories listed at the aries/Wages/Contract La		<sub>edule)</sub> (k		outside of Texas. Coi I, TX, officeholder livir	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		idate/Officeholder name	C	Office sough	t	Office h	held
	Date	Pay	ee name					
	11/25/2024	Ma	ilchimp					
	Amount (\$) \$77.29	1 1	ee address; City; 5 N. Angier Ave NE	State;	Zip Code			
		Atla	anta, GA 30312					
	PURPOSE OF EXPENDITURE		egory (See Categories listed at the ce Overhead/Rental Exp		edule) (k		outside of Texas. Coi I, TX, officeholder livir	
	Complete ONLY if direct expenditure to benefit C/OF		idate/Officeholder name	C	Office sough	t	Office h	eld

		EXPENDITURE CATEGORIES FOR BOX 8(a)					
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		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	<b>3</b> Filer ID (Ethics Commission Filers)				
	Sch: 19/26 Rpt: 44/51	McLaughlin Jr., Don E.	00087820				
4	Date 12/24/2024	24 <b>5</b> Payee name Mailchimp					
6	Amount (\$) \$79.95						
8	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense				
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held				
	Date	Payee name					
	10/30/2024	Mancha, Jenelle					
	Amount (\$) \$600.00	Payee address; City; State; Zip Code 3415 Yorkshire st. Laredo, TX 78045					
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense				
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held				
	Date	Payee name					
	11/01/2024	Perez, Fransisca					
	Amount (\$) \$550.00	Payee address; City; State; Zip Code PO Bo 472					
		Carrizo Springs, TX 78834					
	PURPOSE OF EXPENDITURE		utside of Texas. Complete Schedule T. TX, officeholder living expense				
	Complete ONLY if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought	Office held				

POLITICAL EXPENDITURES FROM POLITICAL
CONTRIBUTIONS

				EXPEND	ITURE CATEG	ORIES FOR	BC	DX 8(a)				
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment											
_	T											
1	Total pages Schedule F1: Sch: 20/26 Rpt: 45/51									Filer ID 00087820	(Ethics Commiss	ion Filers)
4	Date	5	Payee name									
	11/05/2024		Perez, Fransisca									
6	Amount (\$) \$125.00		Payee addre PO Bo 472 Carrizo Spr			te; Zip Coo	de					
8	PURPOSE	(a)	Category			- de a de da X	(b)	Description				
8       PURPOSE         OF         EXPENDITURE    (a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Poll Watcher												
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Off	ceholder nar	ne	Office sou	ght			Office he	ld	
	Date		Payee name									
	11/01/2024		Perez, Meli	nda								
	Amount (\$)		Payee addre	ss; City;	Stat	te; Zip Co	de					
	\$850.00		202 Walker Carrizo Spr	St.	834							
	PURPOSE			-			(h)	Description				
	OF	(4)	Salaries/Wa		ed at the top of this s ICT Labor	schedule)	(5)	Check if travel		de of Texas. Comp officeholder living		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Off	ceholder nar	ne	Office sou	ght			Office he	ld	
	Date		Payee name									
	11/05/2024		Perez, Meli	nda								
	Amount (\$) \$275.00		Payee addre 202 Walker		Sta	te; Zip Coo	de					
			Carrizo Spr	ings, TX 78	834							
	PURPOSE OF EXPENDITURE	(a)	Category <sub>(S</sub> Salaries/Wa	-	ed at the top of this s ICT Labor	schedule)	(b)		, TX,	de of Texas. Comp officeholder living		
	Complete ONLY if direct expenditure to benefit C/OF		Candidate/Off	ceholder nar	ne	Office sou	ght			Office he	ld	

	EXPENDITURE CATEGORIES FOR BOX 8(a)											
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Food/Beverage Expense Polling Expense Travel in District By - Gift/Awards/Memorials Expense Printing Expense Travel Out of District								quipment & Related Expense		
1	Total pages Schedule F1:	2	FILER NAM	E					3	Filer ID	(Ethics Commission Filers)	
	Sch: 21/26 Rpt: 46/51		McLaughlin Jr., Don E. 00087820									
4	Date	5	Payee name									
	10/28/2024		Pleasanton Express									
6	Amount (\$) 7 Payee address; City; State; Zip Code											
	\$1,087.30		PO Box 88	0								
			Pleasantor	, TX 78064								
8	PURPOSE	<u> </u>			at the top of this sch	odulo)	(b)	Description				
	OF		Advertising		at the top of this son	euule)	• •		outsi	de of Texas. Com	plete Schedule T.	
	EXPENDITURE									officeholder living	expense	
								Newspaper A	١d			
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Off	iceholder name	e (	Office sou	ght			Office he	ld	
	Date		Payee name									
	11/27/2024		Pleasantor	Express								
	Amount (\$)		Payee addre	ess; City;	State;	Zip Co	de					
\$575.25 PO Box 880												
			Pleasantor	, TX 78064								
	PURPOSE OF EXPENDITURE		Category (S Advertising		at the top of this sch	edule)	(b)		, тх,	de of Texas. Comp officeholder living		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Off	iceholder name	e C	Office sou	ght			Office he	eld	
	Date		Payee name									
	11/01/2024		Ramirez, Ir	ma								
	Amount (\$)		Payee addre	ess; City;	State;	Zip Co	de					
	\$1,100.00		PO Box 17	2								
				rings, TX 7883								
	PURPOSE OF				at the top of this sch	edule)	(b)	Description		de of Texas. Com	olete Schedule T	
	EXPENDITURE		Salaries/W	ages/Contract	Labor					officeholder living		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Off	iceholder name	· (	Office sou	ght			Office he	ld	
	,											

POLITICAL EXPENDITURES FROM POLITICAL
CONTRIBUTIONS

	EXPENDITURE CATEGORIES FOR BOX 8(a)											
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment											
1	Total pages Schedule F1:	2										
-	Sch: 22/26 Rpt: 47/51		FILER NAME     3     Filer ID     (Ethics Com       McLaughlin Jr., Don E.     00087820									5011111013)
4	Date 12/02/2024		Payee name Remington Rese	arch Group								
6	Amount (\$)											
-	\$350.00		800 W. 47th St.		,							
			Suite 200									
			Kansas City, MC	6/112								
_		<u> </u>	-									
8	PURPOSE OF		Category (See Cate		f this sche	edule)	(b) [	Description			alata Oakadula T	
	EXPENDITURE		Consulting Expe	nse			F			officeholder living	plete Schedule T.	
							1	Texting				
								-				
9	Complete ONLY if direct expenditure to benefit C/O		Candidate/Officehol	der name	0	)ffice sou	ght			Office he	eld	
	Date		Payee name									
	11/01/2024		Suarez, Joe									
	Amount (\$)	City;	State;	Zip Co	de							
Amount (\$) Payee address; City; State; Zip Code \$833.14 321 W. Nopal												
			Uvalde, TX 7880	1								
	PURPOSE OF EXPENDITURE		Category (See Cate Salaries/Wages/		f this sche	edule)				le of Texas. Com officeholder living	plete Schedule T. g expense	
	Complete <u>ONLY</u> if direct expenditure to benefit C/Oł	Candidate/Officeholder name Office sought Office held H							eld			
	Date		Payee name									
	11/04/2024		Suarez, Joe									
-	Amount (\$)		Payee address;	City;	State <sup>.</sup>	Zip Co	de					
	\$239.42		321 W. Nopal		,							
	+======		0									
			Uvalde, TX 7880	1								
	PURPOSE OF		Category (See Cate		f this sche	edule)	(b) [	Description				
	EXPENDITURE		Salaries/Wages/	Contract Labor			Ľ			le of Texas. Com officeholder living	plete Schedule T. J expense	
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Officehol	der name	0	)ffice sou	ght			Office he	eld	

POLITICAL EXPENDITURES FROM POLITICAL
CONTRIBUTIONS

		EXPENDITURE CATEGORIES FOR BOX 8(a)
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica	
	Credit Card Payment	The Instruction Guide explains how to complete this form.
1	Total pages Schedule F1: Sch: 23/26 Rpt: 48/51	2       FILER NAME       3       Filer ID       (Ethics Commission Filers)         McLaughlin Jr., Don E.       00087820
4	Date 11/07/2024	5 Payee name Suarez, Joe
6	Amount (\$) \$150.00	7 Payee address; City; State; Zip Code 321 W. Nopal Uvalde, TX 78801
8	PURPOSE OF EXPENDITURE	<ul> <li>(a) Category (See Categories listed at the top of this schedule) Travel In District</li> <li>(b) Description         <ul> <li>Check if travel outside of Texas. Complete Schedule T.</li> <li>Check if Austin, TX, officeholder living expense</li> <li>Fuel for Sign Pick Up</li> </ul> </li> </ul>
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	11/08/2024	Suarez, Joe
	Amount (\$) \$561.08	Payee address; City; State; Zip Code 321 W. Nopal Uvalde, TX 78801
	PURPOSE OF EXPENDITURE	<ul> <li>(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor</li> <li>(b) Description         <ul> <li>Check if travel outside of Texas. Complete Schedule T.</li> <li>Check if Austin, TX, officeholder living expense</li> <li>Sign Pick Up</li> </ul> </li> </ul>
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	11/11/2024	Suarez, Joe
	Amount (\$) \$104.00	Payee address;     City;     State;     Zip Code       321 W. Nopal     State;     State;     State;
		Uvalde, TX 78801
	PURPOSE OF EXPENDITURE	<ul> <li>(a) Category (See Categories listed at the top of this schedule)</li> <li>Salaries/Wages/Contract Labor</li> <li>(b) Description         <ul> <li>Check if travel outside of Texas. Complete Schedule T.</li> <li>Check if Austin, TX, officeholder living expense</li> <li>Sign Pick Up</li> </ul> </li> </ul>
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF	Candidate/Officeholder name Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL
CONTRIBUTIONS

				EXPEN	DITURE CAT	EGORIES	S FOR I	3OX 8(a)						
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment									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: Sch: 24/26 Rpt: 49/51		FILER NAME     3     Filer ID     (Ethics Commission       McLaughlin Jr., Don E.     00087820									liers)		
4	Date	5	Payee name											
	11/20/2024		Suarez, Joe											
6	Amount (\$) \$50.00		Payee addres 321 W. Nop Uvalde, TX	al		State; Zi	ip Code	2						
8	PURPOSE	(a)	Category (Se	e Categories li	sted at the top of	this schedule	e) (t	) Description						
8       PURPOSE         OF         EXPENDITURE    (a) Category (See Categories listed at the top of this schedule) Travel In District (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Fuel Fuel														
9	Complete <u>ONLY</u> if direct expenditure to benefit C/O		Candidate/Offic	ceholder na	ıme	Offic	e sough	it		Office he	ld			
	Date		Payee name											
	11/20/2024		Suarez, Joe											
	Amount (\$)		Payee addres	s; City		State; Zi	ip Code	9						
	\$125.00		321 W. Nop Uvalde, TX	al										
	PURPOSE OF EXPENDITURE		Category <sub>(Se</sub> Salaries/Wa			this schedule	≥) (k		n, TX,	ide of Texas. Comp , officeholder living				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Offic	ceholder na	ume	Offic	e sough	nt		Office he	ld			
	Date		Payee name											
	10/30/2024		Suarez, Rol	ando										
	Amount (\$) \$945.00		Payee addres 4800 McPhe		,	State; Zi	ip Code	2						
			Laredo, TX											
	PURPOSE OF EXPENDITURE		Category <sub>(Se</sub> Salaries/Wa			this schedule	≥) (t			ide of Texas. Comp , officeholder living				
	Complete ONLY if direct expenditure to benefit C/OF		Candidate/Offic	ceholder na	ime	Offic	e sough	nt		Office he	ld			

	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 Expe Gitf/Awards/Memoria Legal Services The Instruction (	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:		<b>3</b> Filer ID (Ethics Commission Filers)									
	Sch: 25/26 Rpt: 50/51	McLaughlin Jr., Don E. 00087820										
4	Date 10/30/2024	5 Payee name Suarez, Rolando										
6	Amount (\$)	ayee address; City;	State; Zip C	ode								
	\$570.00	<ul> <li>7 Payee address; City; State; Zip Code</li> <li>4800 McPherson Rd.</li> <li>Laredo, TX 78041</li> </ul>										
8	PURPOSE		t the ten of this schedule)	(b) Description								
-	OF	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Call Center										
9 Complete <u>ONLY</u> if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH												
	Date	ayee name										
	11/25/2024	IS Post Office										
	Amount (\$)	ayee address; City;	State; Zip C	ode								
	\$8.68	03 S. Getty Ivalde, TX 78801										
	PURPOSE OF EXPENDITURE	ategory <sub>(See Categories listed a</sub> Office Overhead/Rental E			outside of Texas. Complete Schedule T. n, TX, officeholder living expense							
	Complete ONLY if direct expenditure to benefit C/OF	ndidate/Officeholder name	Office sou	ught	Office held							
	Date	ayee name										
	12/12/2024	IS Post Office										
	Amount (\$) \$8.68	ayee address; City; 03 S. Getty	State; Zip C	ode								
		lvalde, TX 78801										
	PURPOSE OF EXPENDITURE	ategory (See Categories listed a office Overhead/Rental E			outside of Texas. Complete Schedule T. n, TX, officeholder living expense							
	Complete ONLY if direct expenditure to benefit C/OF	ndidate/Officeholder name	Office sou	ıght	Office held							

	EXPENDITURE CATEGORIES FOR BOX 8(a)												
	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	Fees Office Overhead/Rental Expense Transportation 1 Food/Beverage Expense Polling Expense Travel in Distric By - Git/Awards/Memorials Expense Printing Expense Travel Out of Di											
1	Total pages Schedule F1:	2	FILER NAMI	E	Filer ID	(Ethics Commission Filers)							
	Sch: 26/26 Rpt: 51/51		McLaughlin Jr., Don E. 00087820										
4	Date	5	Payee name										
	11/07/2024		Uvalde Leader News										
6	Amount (\$)	7 Payee address; City; State; Zip Code											
\$1,489.84 404 Perez St.													
			Uvalde, TX	78801									
8	PURPOSE	(a)	Category (s		es listed at the top of	this schedule		b) Description					
	OF		Advertising			this schedule,	′  `		vel outs	side of Texas. Co	omplete Schedule T.		
	EXPENDITURE		5	•				Check if Au	ıstin, TX	<, officeholder livi	ing expense		
								Newspape	er Ads	5			
9 Complete <u>ONLY</u> if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH								held					
	Date		Payee name	1									
	12/09/2024		Uvalde Lea	der New	vs								
Amount (\$) Payee address; City; State; Zip Code													
	\$1,234.00		404 Perez		,	01010,		•					
	φ1,204.00		4041 0102	01.									
			Uvalde, TX	78801									
	PURPOSE	(a)	Category (S	ee Categori	es listed at the top of	this schedule)	) (	b) Description					
	OF EXPENDITURE		Advertising					Check if travel outside of Texas. Complete Schedule T.					
								<, officeholder livi	ing expense				
								Newspape	er Ad				
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Off	iceholder	name	Office	e soug	ht		Office	held		
	<u> </u>	_											
	Date		Payee name	•									
	11/05/2024		Wal Mart										
	Amount (\$)		Payee addre		City;	State; Zij	o Cod	е					
	\$57.86		300 E. Mai	n St.									
			Uvalde, TX	78801									
	PURPOSE	(a)	Category (S	ee Categori	es listed at the top of	this schedule)	) (	b) Description					
	OF EXPENDITURE		Polling Exp					Check if tra	vel outs	side of Texas. Co	omplete Schedule T.		
	EXPENDITORE								istin, TX	<, officeholder livi	ing expense		
								Tent					
	Complete <u>ONLY</u> if direct expenditure to benefit C/OF		Candidate/Off	iceholder	name	Office	e soug	ht		Office	held		