

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00088263	2 Total pages filed: 18	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Mr.	FIRST John W.	MI MI	OFFICE USE ONLY Date Received ELECTRONICALLY FILED 01/15/2025
	NICKNAME	LAST McQueeney	SUFFIX	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; ZIP CODE P.O. Box 100458 Fort Worth, TX 76185		Date Hand-delivered or Date Postmarked	
			Receipt #	Amount
			Date Processed	
			Date Imaged	
5 CAMPAIGN TREASURER NAME	MS / MRS / MR Mr.	FIRST Jay	MI MI	
	NICKNAME	LAST O'Jibway	SUFFIX	
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 316 Bailey Ave. Fort Worth, TX 76107			
7 CAMPAIGN TREASURER PHONE	AREA CODE (817)	PHONE NUMBER 975-9110	EXTENSION	
8 REPORT TYPE	<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)			
	<input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded modified reporting limit <input type="checkbox"/> Final Report (Attach C/OH-FR)			
9 PERIOD COVERED	Month Day Year 10/27/2024	THROUGH		Month Day Year 12/31/2024
10 ELECTION	ELECTION DATE Month Day Year 11/05/2024		ELECTION TYPE <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special	
11 OFFICE	OFFICE HELD (if any)		12 OFFICE SOUGHT (if known) State Representative District 97	

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

2 of 18

13 C / OH NAME McQueeney, John W. (Mr.)	14 Filer ID (Ethics Commission Filers) 00088263
--	---

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

16 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$	0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	63,050.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICAL EXPENDITURES	\$	77,255.87
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	209,980.34
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	150,100.00

17 AFFIDAVIT

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

 Mr. John W. McQueeney
 Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

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

Signature of officer administering

Printed name of officer administering

Title of officer administering oath

SUBTOTALS - C/OH**FORM C/OH
COVER SHEET PG 3**

3 of 18

18 FILER NAME McQueeney, John W. (Mr.)		19 Filer ID 00088263	(Ethics Commission Filers)
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT	
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$	63,050.00
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$	
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$	
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$	
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	77,255.87
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$	
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$	
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$	
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$	
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$	
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/11 Rpt: 4/18
2 FILER NAME McQueeney, John W. (Mr.)		3 Filer ID (Ethics Commission Filers) 00088263
4 Date 12/05/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ahlberg, Trevor (Mr.) <hr/> 6 Contributor address; City; State; Zip Code Irving, TX 75038	7 Amount of Contribution (\$) \$2,500.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Allen Boone Humphries Robinson LLP <hr/> Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) AmeriTex Pipe & Product LLC <hr/> Contributor address; City; State; Zip Code Seguin, TX 78156	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Associated Builders & Contractors of Texas PAC <hr/> Contributor address; City; State; Zip Code Austin, TX 78767	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Association of Nurse Anesthetists <hr/> Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/11 Rpt: 5/18
2 FILER NAME McQueeney, John W. (Mr.)		3 Filer ID (Ethics Commission Filers) 00088263
4 Date 12/02/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Berry, Marilyn (Ms.) <hr/> 6 Contributor address; City; State; Zip Code Fort Worth, TX 76116	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) Real Estate		9 Employer (See Instructions) Hillwood
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boenker, Quad (Mr.) <hr/> Contributor address; City; State; Zip Code Fort Worth , TX 76135	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) AI Boenker Insurance
Date 11/17/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brantley, George & Nancy <hr/> Contributor address; City; State; Zip Code Carlsbad, NM 88220	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Centene Corporation PAC <hr/> Contributor address; City; State; Zip Code St. Louis, MO 63105	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Craft PAC <hr/> Contributor address; City; State; Zip Code Austin, TX 78766	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/11 Rpt: 6/18
2 FILER NAME McQueeney, John W. (Mr.)		3 Filer ID (Ethics Commission Filers) 00088263
4 Date 11/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cripliver, Charles E (Ms.)	7 Amount of Contribution (\$) \$250.00
	6 Contributor address; City; State; Zip Code Fort Worth, TX 76107	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 11/20/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ford, Curtis (Mr.)	Amount of Contribution (\$) \$1,500.00
	Contributor address; City; State; Zip Code Austin 78746 Namibia	
Principal occupation / Job title (See Instructions) CEO		Employer (See Instructions) Media Choice
Date 11/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gilchrist, Stephen (Mr.)	Amount of Contribution (\$) \$5,000.00
	Contributor address; City; State; Zip Code Fort Worth, TX 76102	
Principal occupation / Job title (See Instructions) New vehicle dealer		Employer (See Instructions) Gilchrist Automotive
Date 12/09/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Greenberg Traurig, PA PAC	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Albany, NY 12207	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gulf States Toyota State PAC	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Houston, TX 77077	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/11 Rpt: 7/18
2 FILER NAME McQueeney, John W. (Mr.)		3 Filer ID (Ethics Commission Filers) 00088263
4 Date 11/14/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Houston Police Retired Officer Association PAC <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77219	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 11/19/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Husch Blackwell LLP <hr/> Contributor address; City; State; Zip Code St Louis, MO 63105	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) IBAT PAC <hr/> Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jackson Walker LLP PAC <hr/> Contributor address; City; State; Zip Code Dallas, TX 75201	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jasper, Karen & Joe <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76126	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) Franchisee		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/11 Rpt: 8/18
2 FILER NAME McQueeney, John W. (Mr.)		3 Filer ID (Ethics Commission Filers) 00088263
4 Date 12/11/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Linebarger Goggan Blair & Sampson, LLP <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78760	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Linebarger Goggan Blair & Sampson, LLP <hr/> Contributor address; City; State; Zip Code Austin, TX 78760	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) List, Amanda (Ms.) <hr/> Contributor address; City; State; Zip Code Austin, TX 78757	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/26/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Locke Lord LLP <hr/> Contributor address; City; State; Zip Code Dallas, TX 75201	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Longbow Partners <hr/> Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/11 Rpt: 9/18
2 FILER NAME McQueeney, John W. (Mr.)		3 Filer ID (Ethics Commission Filers) 00088263
4 Date 11/07/2024	5 Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00366559) NRG Energy Inc PAC <hr/> 6 Contributor address; City; State; Zip Code Princeton, NJ 08540	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nease, Nelson (Mr.) <hr/> Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Partner		Employer (See Instructions) Cross Oak Group
Date 10/29/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perot III, Henry Ross (Mr.) <hr/> Contributor address; City; State; Zip Code Dallas, TX 75219	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Vice President		Employer (See Instructions) Hillwood
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ruppert, Kyle (Mr.) <hr/> Contributor address; City; State; Zip Code Edinburg, TX 78539	Amount of Contribution (\$) \$5,300.00
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) West Edinburg Hustler, Inc.
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scott, Bruce (Mr.) <hr/> Contributor address; City; State; Zip Code Austin, TX 78703	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/11 Rpt: 10/18
2 FILER NAME McQueeney, John W. (Mr.)		3 Filer ID (Ethics Commission Filers) 00088263
4 Date 12/13/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) TX Bitcoin PAC <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78704	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 11/14/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tarrant Star Republican Women <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76112	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/02/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tex-Pipe PAC <hr/> Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texans for Reasonable Solutions PAC <hr/> Contributor address; City; State; Zip Code Austin, TX 78741	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Apartment Association <hr/> Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/11 Rpt: 11/18
2 FILER NAME McQueeney, John W. (Mr.)		3 Filer ID (Ethics Commission Filers) 00088263
4 Date 12/06/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Association of Builders PAC	7 Amount of Contribution (\$) \$1,000.00
6 Contributor address; City; State; Zip Code Austin, TX 78701		
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/12/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Beverage Alliance	Amount of Contribution (\$) \$2,500.00
Contributor address; City; State; Zip Code Austin, TX 78701		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/15/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Building Branch AGC PAC	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code Austin, TX 78701		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Correctional Officers PAC	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code Washington, DC 20036		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/03/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Health Care Association PAC	Amount of Contribution (\$) \$2,500.00
Contributor address; City; State; Zip Code Austin, TX 78701		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/11 Rpt: 12/18
2 FILER NAME McQueeney, John W. (Mr.)		3 Filer ID (Ethics Commission Filers) 00088263
4 Date 12/09/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Impact, a CRH PAC <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78726	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 11/25/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Land Title Association PAC <hr/> Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/04/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Trial Lawyers Association APC <hr/> Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Wildlife Association <hr/> Contributor address; City; State; Zip Code New Braunfels, TX 78132	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/05/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) The Storage Place <hr/> Contributor address; City; State; Zip Code Frisco, TX 75035	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/11 Rpt: 13/18
2 FILER NAME McQueeney, John W. (Mr.)		3 Filer ID (Ethics Commission Filers) 00088263
4 Date 11/19/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Titus, Jane (Ms.)	7 Amount of Contribution (\$)
	6 Contributor address; City; State; Zip Code Superior, CO 80027	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 10/28/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weekley, Richard (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Houston, TX 77027	
Principal occupation / Job title (See Instructions) Chairman		Employer (See Instructions) Weekley Development Company
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) White & Spirits Wholesalers of Texas PAC	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Austin, TX 78701	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 11/11/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whitehurst, David (Mr.)	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Addison, TX 75001	
Principal occupation / Job title (See Instructions) Attorney		Employer (See Instructions) Whitehurst & White LLP
Date 12/06/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wholesale Beer Distributors of Texas	Amount of Contribution (\$)
	Contributor address; City; State; Zip Code Austin, TX 78701	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 11/11 Rpt: 14/18
2 FILER NAME McQueeney, John W. (Mr.)		3 Filer ID (Ethics Commission Filers) 00088263
4 Date 11/01/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Barbara (Ms.) <hr/> 6 Contributor address; City; State; Zip Code Fort Worth , TX 76107	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/4 Rpt: 15/18	2 FILER NAME McQueeney, John W. (Mr.)	3 Filer ID (Ethics Commission Filers) 00088263
4 Date 12/31/2024	5 Payee name Anedot	
6 Amount (\$) \$471.44	7 Payee address; City; State; Zip Code 1920 McKinney Ave., 7th Floor Dallas, TX 75201	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Online processing fees
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/28/2024	Payee name Farrell Gjesdal Strategy Group	
Amount (\$) \$4,794.30	Payee address; City; State; Zip Code 4040 Hwy 6, Ste 200 College Station, TX 77845	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign advertising
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/26/2024	Payee name Farrell Gjesdal Strategy Group	
Amount (\$) \$9,640.00	Payee address; City; State; Zip Code 4040 Hwy 6, Ste 200 College Station, TX 77845	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign advertising
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1	Total pages Schedule F1: Sch: 2/4 Rpt: 16/18	2	FILER NAME McQueeney, John W. (Mr.)	3	Filer ID (Ethics Commission Filers) 00088263
4	Date 10/31/2024	5	Payee name Frost Bank		
6	Amount (\$) \$15.00	7	Payee address; City; State; Zip Code 6115 Camp Bowie Blvd. Fort Worth, TX 76116		
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Banking fees - Oct-Dec		
9		Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held			
	Date 10/31/2024		Payee name Johnson Strategies LLC		
	Amount (\$) \$15,000.00		Payee address; City; State; Zip Code 4612 Dusik Lane Austin, TX 78746		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign advertising		
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held			
	Date 10/28/2024		Payee name Mammoth Marketing Group		
	Amount (\$) \$18,352.89		Payee address; City; State; Zip Code 4500 Bissonnet Bellaire, TX 77401		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign advertising		
		Complete <u>ONLY</u> if direct expenditure to benefit C/OH Candidate/Officeholder name Office sought Office held			

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 3/4 Rpt: 17/18	2 FILER NAME McQueeney, John W. (Mr.)	3 Filer ID (Ethics Commission Filers) 00088263
4 Date 11/01/2024	5 Payee name Mammoth Marketing Group	
6 Amount (\$) \$5,905.46	7 Payee address; City; State; Zip Code 4500 Bissonnet Bellaire, TX 77401	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign mailer
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/22/2024	Payee name Norfleet Strategies	
Amount (\$) \$3,359.40	Payee address; City; State; Zip Code 504 W 12th St Austin, TX 78701	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Expense reimbursement
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/29/2024	Payee name Small, Matilda (Ms.)	
Amount (\$) \$4,000.00	Payee address; City; State; Zip Code 3131 SE Saint Lucie Blvd Stuart, FL 34997	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign staff salary
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 4/4 Rpt: 18/18	2 FILER NAME McQueeney, John W. (Mr.)	3 Filer ID (Ethics Commission Filers) 00088263
--	---	--

4 Date 11/19/2024	5 Payee name The Crescent
-----------------------------	-------------------------------------

6 Amount (\$) \$15,017.38	7 Payee address; City; State; Zip Code 3300 Camp Bowie Blvd Fort Worth, TX 76107
-------------------------------------	---

8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign election night event
---------------------------------	--	---

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
---	-----------------------------	---------------	-------------

Date 11/25/2024	Payee name VAN BIBBER, DEBBIE (Ms.)
--------------------	--

Amount (\$) \$700.00	Payee address; City; State; Zip Code 12609 Dessau Rd., Lot 519 Austin, TX 78754
-------------------------	---

PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign contract labor
-------------------------------	--	---

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
--	-----------------------------	---------------	-------------

--	--	--	--