

GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM GPAC COVER SHEET PG 1

The GPAC Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00066524	2 Total pages filed: 172
3 COMMITTEE NAME Texas McDonald's Operators Association PAC, Inc.			OFFICE USE ONLY Date Received ELECTRONICALLY FILED 01/10/2026 Date Hand-delivered or Date Postmarked Receipt # Amount Date Processed Date Imaged
4 COMMITTEE ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 1001 E Tyler Athens, TX 75751		
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Mr. Kevin NICKNAME LAST SUFFIX Lilly		
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 1001 E Tyler Athens, TX 75751		
7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address	STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 1001 E Tyler Athens, TX 75751		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (214) 236-1053		
9 REPORT TYPE	<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Dissolution (Attach PAC-DR) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> 10th day after campaign treasurer termination <input type="checkbox"/> Runoff		
10 PERIOD COVERED	Month Day Year Month Day Year 07/01/2025 THROUGH 12/31/2025		
11 ELECTION	ELECTION DATE Month Day Year 03/03/2026	ELECTION TYPE <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special	

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GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM **GPAC**
COVER SHEET PG 2

12 COMMITTEE NAME Texas McDonald's Operators Association PAC, Inc.	13 Filer ID (Ethics Commission Filers) 00066524
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14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported
		B. Opposed
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	

15 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) <input type="checkbox"/> check here if this report qualifies for the higher itemization threshold	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 119,845.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 115.60
	4. TOTAL POLITICAL EXPENDITURES	\$ 36,401.14
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 226,308.67
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

16 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. Kevin Lilly

Signature of Campaign Treasurer

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 oath

Printed name of officer administering oath

Title of officer administering oath

SUBTOTALS - GPAC**FORM GPAC**
COVER SHEET PG 3
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17 COMMITTEE NAME Texas McDonald's Operators Association PAC, Inc.		18 Filer ID (Ethics Commission Filers) 00066524
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 119,845.00
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 C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
5.	<input type="checkbox"/> SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
6.	<input type="checkbox"/> SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
7.	<input type="checkbox"/> SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
8.	<input type="checkbox"/> SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
9.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
10.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 36,401.14
11.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
12.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
13.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
14.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
15.	<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: 1/159 Rpt: 4/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 07/18/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Acosta, Celia 6 Contributor address; City; State; Zip Code San Antonio, TX 78228	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 07/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Acosta, Celia Contributor address; City; State; Zip Code San Antonio, TX 78228	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 09/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Acosta, Celia Contributor address; City; State; Zip Code San Antonio, TX 78228	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 09/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Acosta, Celia Contributor address; City; State; Zip Code San Antonio, TX 78228	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 10/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Acosta, Celia Contributor address; City; State; Zip Code San Antonio, TX 78228	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/159 Rpt: 5/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 12/23/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Acosta, Celia <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78228	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Acosta, Celia <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78228	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 07/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Acosta, Luis <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78228	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 07/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Acosta, Luis <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78228	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 09/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Acosta, Luis <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78228	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/159 Rpt: 6/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 09/19/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Acosta, Luis <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78228	7 Amount of Contribution (\$) \$350.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 10/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Acosta, Luis <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78228	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Acosta, Luis <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78228	Amount of Contribution (\$) \$375.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Acosta, Luis <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78228	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 07/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Acosta, Maria <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78228	Amount of Contribution (\$) \$300.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/159 Rpt: 7/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 07/31/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Acosta, Maria <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78228	7 Amount of Contribution (\$) \$325.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 09/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Acosta, Maria <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78228	Amount of Contribution (\$) \$325.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 09/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Acosta, Maria <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78228	Amount of Contribution (\$) \$325.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 10/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Acosta, Maria <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78228	Amount of Contribution (\$) \$325.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Acosta, Maria <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78228	Amount of Contribution (\$) \$325.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/159 Rpt: 8/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 12/31/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Acosta, Maria 6 Contributor address; City; State; Zip Code San Antonio, TX 78228	7 Amount of Contribution (\$) \$325.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 07/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Acosta, Richard Contributor address; City; State; Zip Code San Antonio, TX 78228	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 07/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Acosta, Richard Contributor address; City; State; Zip Code San Antonio, TX 78228	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 09/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Acosta, Richard Contributor address; City; State; Zip Code San Antonio, TX 78228	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 09/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Acosta, Richard Contributor address; City; State; Zip Code San Antonio, TX 78228	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/159 Rpt: 9/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 10/24/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Acosta, Richard <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78228	7 Amount of Contribution (\$) \$400.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Acosta, Richard <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78228	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Acosta, Richard <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78228	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 08/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adcock, Bradley <hr/> Contributor address; City; State; Zip Code Kingwood, TX 77345	Amount of Contribution (\$) \$45.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 08/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adcock, Bradley <hr/> Contributor address; City; State; Zip Code Kingwood, TX 77345	Amount of Contribution (\$) \$45.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/159 Rpt: 10/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 09/26/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adcock, Bradley <hr/> 6 Contributor address; City; State; Zip Code Kingwood, TX 77345	7 Amount of Contribution (\$) \$45.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 10/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adcock, Bradley <hr/> Contributor address; City; State; Zip Code Kingwood, TX 77345	Amount of Contribution (\$) \$45.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adcock, Bradley <hr/> Contributor address; City; State; Zip Code Kingwood, TX 77345	Amount of Contribution (\$) \$45.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 12/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adcock, Bradley <hr/> Contributor address; City; State; Zip Code Kingwood, TX 77345	Amount of Contribution (\$) \$45.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 08/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adcock, Doug <hr/> Contributor address; City; State; Zip Code Houston, TX 77069	Amount of Contribution (\$) \$45.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/159 Rpt: 11/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 08/26/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adcock, Doug <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77069	7 Amount of Contribution (\$) \$45.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 09/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adcock, Doug <hr/> Contributor address; City; State; Zip Code Houston, TX 77069	Amount of Contribution (\$) \$45.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 10/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adcock, Doug <hr/> Contributor address; City; State; Zip Code Houston, TX 77069	Amount of Contribution (\$) \$45.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adcock, Doug <hr/> Contributor address; City; State; Zip Code Houston, TX 77069	Amount of Contribution (\$) \$45.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 12/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Adcock, Doug <hr/> Contributor address; City; State; Zip Code Houston, TX 77069	Amount of Contribution (\$) \$45.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/159 Rpt: 12/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 08/01/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Back, Dustin <hr/> 6 Contributor address; City; State; Zip Code Tomball, TX 77375	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 08/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Back, Dustin <hr/> Contributor address; City; State; Zip Code Tomball, TX 77375	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 09/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Back, Dustin <hr/> Contributor address; City; State; Zip Code Tomball, TX 77375	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 10/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Back, Dustin <hr/> Contributor address; City; State; Zip Code Tomball, TX 77375	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Back, Dustin <hr/> Contributor address; City; State; Zip Code Tomball, TX 77375	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/159 Rpt: 13/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 12/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Back, Dustin <hr/> 6 Contributor address; City; State; Zip Code Tomball, TX 77375	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 08/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bell, April <hr/> Contributor address; City; State; Zip Code Conroe, TX 77384	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 08/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bell, April <hr/> Contributor address; City; State; Zip Code Conroe, TX 77384	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 09/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bell, April <hr/> Contributor address; City; State; Zip Code Conroe, TX 77384	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 10/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bell, April <hr/> Contributor address; City; State; Zip Code Conroe, TX 77384	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 11/159 Rpt: 14/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 11/26/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bell, April <hr/> 6 Contributor address; City; State; Zip Code Conroe, TX 77384	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 12/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bell, April <hr/> Contributor address; City; State; Zip Code Conroe, TX 77384	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 08/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bentham, Denise <hr/> Contributor address; City; State; Zip Code Cypress, TX 77433	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 08/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bentham, Denise <hr/> Contributor address; City; State; Zip Code Cypress, TX 77433	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 09/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bentham, Denise <hr/> Contributor address; City; State; Zip Code Cypress, TX 77433	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 12/159 Rpt: 15/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 10/28/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bentham, Denise <hr/> 6 Contributor address; City; State; Zip Code Cypress, TX 77433	7 Amount of Contribution (\$) \$75.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bentham, Denise <hr/> Contributor address; City; State; Zip Code Cypress, TX 77433	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 12/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bentham, Denise <hr/> Contributor address; City; State; Zip Code Cypress, TX 77433	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 07/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blanton, Lori <hr/> Contributor address; City; State; Zip Code Weatherford, TX 76087	Amount of Contribution (\$) \$135.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 08/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blanton, Lori <hr/> Contributor address; City; State; Zip Code Weatherford, TX 76087	Amount of Contribution (\$) \$135.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 13/159 Rpt: 16/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 09/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blanton, Lori <hr/> 6 Contributor address; City; State; Zip Code Weatherford, TX 76087	7 Amount of Contribution (\$) \$135.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blanton, Lori <hr/> Contributor address; City; State; Zip Code Weatherford, TX 76087	Amount of Contribution (\$) \$135.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 11/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blanton, Lori <hr/> Contributor address; City; State; Zip Code Weatherford, TX 76087	Amount of Contribution (\$) \$135.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 12/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blanton, Lori <hr/> Contributor address; City; State; Zip Code Weatherford, TX 76087	Amount of Contribution (\$) \$135.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 08/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bolen, Gary <hr/> Contributor address; City; State; Zip Code Conroe, TX 77384	Amount of Contribution (\$) \$90.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 14/159 Rpt: 17/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 08/26/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bolen, Gary <hr/> 6 Contributor address; City; State; Zip Code Conroe, TX 77384	7 Amount of Contribution (\$) \$90.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 09/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bolen, Gary <hr/> Contributor address; City; State; Zip Code Conroe, TX 77384	Amount of Contribution (\$) \$90.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 10/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bolen, Gary <hr/> Contributor address; City; State; Zip Code Conroe, TX 77384	Amount of Contribution (\$) \$90.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bolen, Gary <hr/> Contributor address; City; State; Zip Code Conroe, TX 77384	Amount of Contribution (\$) \$90.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 12/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bolen, Gary <hr/> Contributor address; City; State; Zip Code Conroe, TX 77384	Amount of Contribution (\$) \$90.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 15/159 Rpt: 18/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 08/01/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Stuart 6 Contributor address; City; State; Zip Code Missouri City, TX 77459	7 Amount of Contribution (\$) \$105.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 08/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Stuart Contributor address; City; State; Zip Code Missouri City, TX 77459	Amount of Contribution (\$) \$105.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 09/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Stuart Contributor address; City; State; Zip Code Missouri City, TX 77459	Amount of Contribution (\$) \$135.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 10/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Stuart Contributor address; City; State; Zip Code Missouri City, TX 77459	Amount of Contribution (\$) \$135.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Stuart Contributor address; City; State; Zip Code Missouri City, TX 77459	Amount of Contribution (\$) \$135.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 16/159 Rpt: 19/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 12/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brown, Stuart 6 Contributor address; City; State; Zip Code Missouri City, TX 77459	7 Amount of Contribution (\$) \$135.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 08/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carreon, Daniel Contributor address; City; State; Zip Code Rosharon, TX 77583	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 08/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carreon, Daniel Contributor address; City; State; Zip Code Rosharon, TX 77583	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 09/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carreon, Daniel Contributor address; City; State; Zip Code Rosharon, TX 77583	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 10/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carreon, Daniel Contributor address; City; State; Zip Code Rosharon, TX 77583	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 17/159 Rpt: 20/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 11/26/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carreon, Daniel <hr/> 6 Contributor address; City; State; Zip Code Rosharon, TX 77583	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 12/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carreon, Daniel <hr/> Contributor address; City; State; Zip Code Rosharon, TX 77583	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 07/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carrillo, Anthony <hr/> Contributor address; City; State; Zip Code Midland, TX 79705	Amount of Contribution (\$) \$950.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 08/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carrillo, Anthony <hr/> Contributor address; City; State; Zip Code Midland, TX 79705	Amount of Contribution (\$) \$950.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 09/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carrillo, Anthony <hr/> Contributor address; City; State; Zip Code Midland, TX 79705	Amount of Contribution (\$) \$950.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 18/159 Rpt: 21/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 10/24/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carrillo, Anthony <hr/> 6 Contributor address; City; State; Zip Code Midland, TX 79705	7 Amount of Contribution (\$) \$950.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 11/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carrillo, Anthony <hr/> Contributor address; City; State; Zip Code Midland, TX 79705	Amount of Contribution (\$) \$950.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 12/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carrillo, Anthony <hr/> Contributor address; City; State; Zip Code Midland, TX 79705	Amount of Contribution (\$) \$950.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 08/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Casas, Abner <hr/> Contributor address; City; State; Zip Code Dayton, TX 77535	Amount of Contribution (\$) \$45.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 08/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Casas, Abner <hr/> Contributor address; City; State; Zip Code Dayton, TX 77535	Amount of Contribution (\$) \$45.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 19/159 Rpt: 22/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 09/26/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Casas, Abner 6 Contributor address; City; State; Zip Code Dayton, TX 77535	7 Amount of Contribution (\$) \$45.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 10/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Casas, Abner Contributor address; City; State; Zip Code Dayton, TX 77535	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Casas, Abner Contributor address; City; State; Zip Code Dayton, TX 77535	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 12/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Casas, Abner Contributor address; City; State; Zip Code Dayton, TX 77535	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 08/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Casas, Jill Contributor address; City; State; Zip Code Dayton, TX 77535	Amount of Contribution (\$) \$45.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 20/159 Rpt: 23/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 08/26/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Casas, Jill <hr/> 6 Contributor address; City; State; Zip Code Dayton, TX 77535	7 Amount of Contribution (\$) \$45.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 09/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Casas, Jill <hr/> Contributor address; City; State; Zip Code Dayton, TX 77535	Amount of Contribution (\$) \$45.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 10/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Casas, Jill <hr/> Contributor address; City; State; Zip Code Dayton, TX 77535	Amount of Contribution (\$) \$45.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Casas, Jill <hr/> Contributor address; City; State; Zip Code Dayton, TX 77535	Amount of Contribution (\$) \$45.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 12/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Casas, Jill <hr/> Contributor address; City; State; Zip Code Dayton, TX 77535	Amount of Contribution (\$) \$45.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 21/159 Rpt: 24/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 08/01/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Casey, Laura <hr/> 6 Contributor address; City; State; Zip Code Kingwood, TX 77325	7 Amount of Contribution (\$) \$60.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 08/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Casey, Laura <hr/> Contributor address; City; State; Zip Code Kingwood, TX 77325	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 09/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Casey, Laura <hr/> Contributor address; City; State; Zip Code Kingwood, TX 77325	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 10/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Casey, Laura <hr/> Contributor address; City; State; Zip Code Kingwood, TX 77325	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Casey, Laura <hr/> Contributor address; City; State; Zip Code Kingwood, TX 77325	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 22/159 Rpt: 25/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 12/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Casey, Laura <hr/> 6 Contributor address; City; State; Zip Code Kingwood, TX 77325	7 Amount of Contribution (\$) \$60.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 07/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Childress, Keva <hr/> Contributor address; City; State; Zip Code Rockwall, TX 75032	Amount of Contribution (\$) \$165.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 08/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Childress, Keva <hr/> Contributor address; City; State; Zip Code Rockwall, TX 75032	Amount of Contribution (\$) \$165.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 09/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Childress, Keva <hr/> Contributor address; City; State; Zip Code Rockwall, TX 75032	Amount of Contribution (\$) \$165.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Childress, Keva <hr/> Contributor address; City; State; Zip Code Rockwall, TX 75032	Amount of Contribution (\$) \$165.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 23/159 Rpt: 26/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 11/17/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Childress, Keva 6 Contributor address; City; State; Zip Code Rockwall, TX 75032	7 Amount of Contribution (\$) \$165.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 12/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Childress, Keva Contributor address; City; State; Zip Code Rockwall, TX 75032	Amount of Contribution (\$) \$165.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 08/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Choma, Tiffany Contributor address; City; State; Zip Code Houston, TX 77092	Amount of Contribution (\$) \$45.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 08/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Choma, Tiffany Contributor address; City; State; Zip Code Houston, TX 77092	Amount of Contribution (\$) \$45.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 09/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Choma, Tiffany Contributor address; City; State; Zip Code Houston, TX 77092	Amount of Contribution (\$) \$45.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 24/159 Rpt: 27/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 10/28/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Choma, Tiffany <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77092	7 Amount of Contribution (\$) \$45.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Choma, Tiffany <hr/> Contributor address; City; State; Zip Code Houston, TX 77092	Amount of Contribution (\$) \$45.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 12/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Choma, Tiffany <hr/> Contributor address; City; State; Zip Code Houston, TX 77092	Amount of Contribution (\$) \$45.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 07/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cohen, Bill <hr/> Contributor address; City; State; Zip Code Levelland, TX 79336	Amount of Contribution (\$) \$125.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 08/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cohen, Bill <hr/> Contributor address; City; State; Zip Code Levelland, TX 79336	Amount of Contribution (\$) \$125.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 25/159 Rpt: 28/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 09/26/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cohen, Bill <hr/> 6 Contributor address; City; State; Zip Code Levelland, TX 79336	7 Amount of Contribution (\$) \$125.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 10/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cohen, Bill <hr/> Contributor address; City; State; Zip Code Levelland, TX 79336	Amount of Contribution (\$) \$125.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 11/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cohen, Bill <hr/> Contributor address; City; State; Zip Code Levelland, TX 79336	Amount of Contribution (\$) \$125.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 12/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cohen, Bill <hr/> Contributor address; City; State; Zip Code Levelland, TX 79336	Amount of Contribution (\$) \$125.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 07/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Conlan, Hampton <hr/> Contributor address; City; State; Zip Code Lampasas, TX 76550	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 26/159 Rpt: 29/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 07/31/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Conlan, Hampton <hr/> 6 Contributor address; City; State; Zip Code Lampasas, TX 76550	7 Amount of Contribution (\$) \$200.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 09/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Conlan, Hampton <hr/> Contributor address; City; State; Zip Code Lampasas, TX 76550	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 09/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Conlan, Hampton <hr/> Contributor address; City; State; Zip Code Lampasas, TX 76550	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 10/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Conlan, Hampton <hr/> Contributor address; City; State; Zip Code Lampasas, TX 76550	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Conlan, Hampton <hr/> Contributor address; City; State; Zip Code Lampasas, TX 76550	Amount of Contribution (\$) \$225.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 27/159 Rpt: 30/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 12/31/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Conlan, Hampton <hr/> 6 Contributor address; City; State; Zip Code Lampasas, TX 76550	7 Amount of Contribution (\$) \$225.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 07/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Conlan, Lynette <hr/> Contributor address; City; State; Zip Code Lampasas, TX 76550	Amount of Contribution (\$) \$225.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 07/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Conlan, Lynette <hr/> Contributor address; City; State; Zip Code Lampasas, TX 76550	Amount of Contribution (\$) \$225.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 09/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Conlan, Lynette <hr/> Contributor address; City; State; Zip Code Lampasas, TX 76550	Amount of Contribution (\$) \$225.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 09/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Conlan, Lynette <hr/> Contributor address; City; State; Zip Code Lampasas, TX 76550	Amount of Contribution (\$) \$225.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 28/159 Rpt: 31/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 10/24/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Conlan, Lynette <hr/> 6 Contributor address; City; State; Zip Code Lampasas, TX 76550	7 Amount of Contribution (\$) \$225.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Conlan, Lynette <hr/> Contributor address; City; State; Zip Code Lampasas, TX 76550	Amount of Contribution (\$) \$225.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Conlan, Lynette <hr/> Contributor address; City; State; Zip Code Lampasas, TX 76550	Amount of Contribution (\$) \$225.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 07/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Contreras, Shelly <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78221	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 07/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Contreras, Shelly <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78221	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 29/159 Rpt: 32/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 09/02/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Contreras, Shelly <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78221	7 Amount of Contribution (\$) \$75.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 09/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Contreras, Shelly <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78221	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 10/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Contreras, Shelly <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78221	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Contreras, Shelly <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78221	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Contreras, Shelly <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78221	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 30/159 Rpt: 33/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 07/25/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Credle, Susan <hr/> 6 Contributor address; City; State; Zip Code Clovis, NM 88101	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 08/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Credle, Susan <hr/> Contributor address; City; State; Zip Code Clovis, NM 88101	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 09/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Credle, Susan <hr/> Contributor address; City; State; Zip Code Clovis, NM 88101	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 10/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Credle, Susan <hr/> Contributor address; City; State; Zip Code Clovis, NM 88101	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 11/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Credle, Susan <hr/> Contributor address; City; State; Zip Code Clovis, NM 88101	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 31/159 Rpt: 34/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 12/16/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Credle, Susan <hr/> 6 Contributor address; City; State; Zip Code Clovis, NM 88101	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 07/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dana, Osman <hr/> Contributor address; City; State; Zip Code Amarillo, TX 79119	Amount of Contribution (\$) \$750.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 08/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dana, Osman <hr/> Contributor address; City; State; Zip Code Amarillo, TX 79119	Amount of Contribution (\$) \$750.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 09/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dana, Osman <hr/> Contributor address; City; State; Zip Code Amarillo, TX 79119	Amount of Contribution (\$) \$750.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 10/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dana, Osman <hr/> Contributor address; City; State; Zip Code Amarillo, TX 79119	Amount of Contribution (\$) \$750.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 32/159 Rpt: 35/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 11/21/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dana, Osman <hr/> 6 Contributor address; City; State; Zip Code Amarillo, TX 79119	7 Amount of Contribution (\$) \$750.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 12/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dana, Osman <hr/> Contributor address; City; State; Zip Code Amarillo, TX 79119	Amount of Contribution (\$) \$750.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 07/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) De Leon, Ignacio <hr/> Contributor address; City; State; Zip Code Laredo, TX 78043	Amount of Contribution (\$) \$225.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 07/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) De Leon, Ignacio <hr/> Contributor address; City; State; Zip Code Laredo, TX 78043	Amount of Contribution (\$) \$225.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 09/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) De Leon, Ignacio <hr/> Contributor address; City; State; Zip Code Laredo, TX 78043	Amount of Contribution (\$) \$225.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 33/159 Rpt: 36/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 09/19/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) De Leon, Ignacio <hr/> 6 Contributor address; City; State; Zip Code Laredo, TX 78043	7 Amount of Contribution (\$) \$225.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 10/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) De Leon, Ignacio <hr/> Contributor address; City; State; Zip Code Laredo, TX 78043	Amount of Contribution (\$) \$225.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) De Leon, Ignacio <hr/> Contributor address; City; State; Zip Code Laredo, TX 78043	Amount of Contribution (\$) \$225.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) De Leon, Ignacio <hr/> Contributor address; City; State; Zip Code Laredo, TX 78043	Amount of Contribution (\$) \$225.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 08/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) De la Garza, Deanna <hr/> Contributor address; City; State; Zip Code Brownsville, TX 78520	Amount of Contribution (\$) \$90.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 34/159 Rpt: 37/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 08/26/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) De la Garza, Deanna 6 Contributor address; City; State; Zip Code Brownsville, TX 78520	7 Amount of Contribution (\$) \$90.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 09/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) De la Garza, Deanna Contributor address; City; State; Zip Code Brownsville, TX 78520	Amount of Contribution (\$) \$90.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 10/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) De la Garza, Deanna Contributor address; City; State; Zip Code Brownsville, TX 78520	Amount of Contribution (\$) \$90.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) De la Garza, Deanna Contributor address; City; State; Zip Code Brownsville, TX 78520	Amount of Contribution (\$) \$90.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 12/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) De la Garza, Deanna Contributor address; City; State; Zip Code Brownsville, TX 78520	Amount of Contribution (\$) \$90.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 35/159 Rpt: 38/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 07/18/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) De la Garza, Hector <hr/> 6 Contributor address; City; State; Zip Code Brownsville, TX 78520	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 07/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) De la Garza, Hector <hr/> Contributor address; City; State; Zip Code Brownsville, TX 78520	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 09/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) De la Garza, Hector <hr/> Contributor address; City; State; Zip Code Brownsville, TX 78520	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 09/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) De la Garza, Hector <hr/> Contributor address; City; State; Zip Code Brownsville, TX 78520	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 10/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) De la Garza, Hector <hr/> Contributor address; City; State; Zip Code Brownsville, TX 78520	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 36/159 Rpt: 39/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 12/23/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) De la Garza, Hector <hr/> 6 Contributor address; City; State; Zip Code Brownsville, TX 78520	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) De la Garza, Hector <hr/> Contributor address; City; State; Zip Code Brownsville, TX 78520	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 07/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Del Barrio Jr., Alfredo <hr/> Contributor address; City; State; Zip Code McAllen, TX 78501	Amount of Contribution (\$) \$325.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 07/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Del Barrio Jr., Alfredo <hr/> Contributor address; City; State; Zip Code McAllen, TX 78501	Amount of Contribution (\$) \$325.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 09/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Del Barrio Jr., Alfredo <hr/> Contributor address; City; State; Zip Code McAllen, TX 78501	Amount of Contribution (\$) \$325.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 37/159 Rpt: 40/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 09/19/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Del Barrio Jr., Alfredo <hr/> 6 Contributor address; City; State; Zip Code McAllen, TX 78501	7 Amount of Contribution (\$) \$325.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 10/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Del Barrio Jr., Alfredo <hr/> Contributor address; City; State; Zip Code McAllen, TX 78501	Amount of Contribution (\$) \$325.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Del Barrio Jr., Alfredo <hr/> Contributor address; City; State; Zip Code McAllen, TX 78501	Amount of Contribution (\$) \$325.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Del Barrio Jr., Alfredo <hr/> Contributor address; City; State; Zip Code McAllen, TX 78501	Amount of Contribution (\$) \$325.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 07/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dobski, Anthony <hr/> Contributor address; City; State; Zip Code Laredo, TX 78041	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 38/159 Rpt: 41/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 07/31/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dobski, Anthony 6 Contributor address; City; State; Zip Code Laredo, TX 78041	7 Amount of Contribution (\$) \$75.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 09/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dobski, Anthony Contributor address; City; State; Zip Code Laredo, TX 78041	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 09/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dobski, Anthony Contributor address; City; State; Zip Code Laredo, TX 78041	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 10/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dobski, Anthony Contributor address; City; State; Zip Code Laredo, TX 78041	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dobski, Anthony Contributor address; City; State; Zip Code Laredo, TX 78041	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 39/159 Rpt: 42/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 12/31/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dobski, Anthony <hr/> 6 Contributor address; City; State; Zip Code Laredo, TX 78041	7 Amount of Contribution (\$) \$75.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 08/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elizondo, Kimberly <hr/> Contributor address; City; State; Zip Code Houston, TX 77205	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 08/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elizondo, Kimberly <hr/> Contributor address; City; State; Zip Code Houston, TX 77205	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 09/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elizondo, Kimberly <hr/> Contributor address; City; State; Zip Code Houston, TX 77205	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 10/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elizondo, Kimberly <hr/> Contributor address; City; State; Zip Code Houston, TX 77205	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 40/159 Rpt: 43/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 11/26/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elizondo, Kimberly <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77205	7 Amount of Contribution (\$) \$75.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 12/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elizondo, Kimberly <hr/> Contributor address; City; State; Zip Code Houston, TX 77205	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 07/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellis, Jordan <hr/> Contributor address; City; State; Zip Code Beaumont, TX 77702	Amount of Contribution (\$) \$325.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 07/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellis, Jordan <hr/> Contributor address; City; State; Zip Code Beaumont, TX 77702	Amount of Contribution (\$) \$325.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 09/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellis, Jordan <hr/> Contributor address; City; State; Zip Code Beaumont, TX 77702	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 41/159 Rpt: 44/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 09/19/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellis, Jordan <hr/> 6 Contributor address; City; State; Zip Code Beaumont, TX 77702	7 Amount of Contribution (\$) \$425.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 10/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellis, Jordan <hr/> Contributor address; City; State; Zip Code Beaumont, TX 77702	Amount of Contribution (\$) \$425.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellis, Jordan <hr/> Contributor address; City; State; Zip Code Beaumont, TX 77702	Amount of Contribution (\$) \$425.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellis, Jordan <hr/> Contributor address; City; State; Zip Code Beaumont, TX 77702	Amount of Contribution (\$) \$425.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 07/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellis, Russell <hr/> Contributor address; City; State; Zip Code Corpus Christi, TX 78414	Amount of Contribution (\$) \$375.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 42/159 Rpt: 45/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 07/31/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellis, Russell 6 Contributor address; City; State; Zip Code Corpus Christi, TX 78414	7 Amount of Contribution (\$) \$375.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 09/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellis, Russell Contributor address; City; State; Zip Code Corpus Christi, TX 78414	Amount of Contribution (\$) \$300.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 09/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellis, Russell Contributor address; City; State; Zip Code Corpus Christi, TX 78414	Amount of Contribution (\$) \$300.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 10/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellis, Russell Contributor address; City; State; Zip Code Corpus Christi, TX 78414	Amount of Contribution (\$) \$300.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellis, Russell Contributor address; City; State; Zip Code Corpus Christi, TX 78414	Amount of Contribution (\$) \$300.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 43/159 Rpt: 46/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 12/31/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ellis, Russell <hr/> 6 Contributor address; City; State; Zip Code Corpus Christi, TX 78414	7 Amount of Contribution (\$) \$300.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 07/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Estate of Dennis Meyer <hr/> Contributor address; City; State; Zip Code Hutto, TX 78634	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 07/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Estate of Dennis Meyer <hr/> Contributor address; City; State; Zip Code Hutto, TX 78634	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 09/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Estate of Dennis Meyer <hr/> Contributor address; City; State; Zip Code Hutto, TX 78634	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 09/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Estate of Dennis Meyer <hr/> Contributor address; City; State; Zip Code Hutto, TX 78634	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 44/159 Rpt: 47/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 10/24/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Estate of Dennis Meyer <hr/> 6 Contributor address; City; State; Zip Code Hutto, TX 78634	7 Amount of Contribution (\$) \$75.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Estate of Dennis Meyer <hr/> Contributor address; City; State; Zip Code Hutto, TX 78634	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Estate of Dennis Meyer <hr/> Contributor address; City; State; Zip Code Hutto, TX 78634	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 07/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Estate of Martha Mendoza <hr/> Contributor address; City; State; Zip Code Del Rio, TX 78840	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 07/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Estate of Martha Mendoza <hr/> Contributor address; City; State; Zip Code Del Rio, TX 78840	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 45/159 Rpt: 48/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 09/02/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Estate of Martha Mendoza <hr/> 6 Contributor address; City; State; Zip Code Del Rio, TX 78840	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 09/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Estate of Martha Mendoza <hr/> Contributor address; City; State; Zip Code Del Rio, TX 78840	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 10/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Estate of Martha Mendoza <hr/> Contributor address; City; State; Zip Code Del Rio, TX 78840	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Estate of Martha Mendoza <hr/> Contributor address; City; State; Zip Code Del Rio, TX 78840	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Estate of Martha Mendoza <hr/> Contributor address; City; State; Zip Code Del Rio, TX 78840	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 46/159 Rpt: 49/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 07/25/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fadke, Kenny 6 Contributor address; City; State; Zip Code Hobbs, NM 88240	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 08/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fadke, Kenny Contributor address; City; State; Zip Code Hobbs, NM 88240	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 09/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fadke, Kenny Contributor address; City; State; Zip Code Hobbs, NM 88240	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 10/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fadke, Kenny Contributor address; City; State; Zip Code Hobbs, NM 88240	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 11/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fadke, Kenny Contributor address; City; State; Zip Code Hobbs, NM 88240	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 47/159 Rpt: 50/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 12/16/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fadke, Kenny <hr/> 6 Contributor address; City; State; Zip Code Hobbs, NM 88240	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 07/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ferguson, Cynthia <hr/> Contributor address; City; State; Zip Code Austin, TX 78754	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 07/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ferguson, Cynthia <hr/> Contributor address; City; State; Zip Code Austin, TX 78754	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 09/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ferguson, Cynthia <hr/> Contributor address; City; State; Zip Code Austin, TX 78754	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 09/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ferguson, Cynthia <hr/> Contributor address; City; State; Zip Code Austin, TX 78754	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 48/159 Rpt: 51/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 10/24/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ferguson, Cynthia <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78754	7 Amount of Contribution (\$) \$75.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ferguson, Cynthia <hr/> Contributor address; City; State; Zip Code Austin, TX 78754	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ferguson, Cynthia <hr/> Contributor address; City; State; Zip Code Austin, TX 78754	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 07/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ferguson, Jimmy <hr/> Contributor address; City; State; Zip Code Austin, TX 78754	Amount of Contribution (\$) \$125.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 07/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ferguson, Jimmy <hr/> Contributor address; City; State; Zip Code Austin, TX 78754	Amount of Contribution (\$) \$125.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 49/159 Rpt: 52/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 09/02/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ferguson, Jimmy 6 Contributor address; City; State; Zip Code Austin, TX 78754	7 Amount of Contribution (\$) \$125.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 09/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ferguson, Jimmy Contributor address; City; State; Zip Code Austin, TX 78754	Amount of Contribution (\$) \$125.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 10/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ferguson, Jimmy Contributor address; City; State; Zip Code Austin, TX 78754	Amount of Contribution (\$) \$125.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ferguson, Jimmy Contributor address; City; State; Zip Code Austin, TX 78754	Amount of Contribution (\$) \$125.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ferguson, Jimmy Contributor address; City; State; Zip Code Austin, TX 78754	Amount of Contribution (\$) \$125.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 50/159 Rpt: 53/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 07/16/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frank-Silmon, Joy <hr/> 6 Contributor address; City; State; Zip Code Flower Mound, TX 75027	7 Amount of Contribution (\$) \$60.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 07/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frank-Silmon, Joy <hr/> Contributor address; City; State; Zip Code Flower Mound, TX 75027	Amount of Contribution (\$) \$125.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 07/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frank-Silmon, Joy <hr/> Contributor address; City; State; Zip Code Flower Mound, TX 75027	Amount of Contribution (\$) \$125.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 08/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frank-Silmon, Joy <hr/> Contributor address; City; State; Zip Code Flower Mound, TX 75027	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 09/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frank-Silmon, Joy <hr/> Contributor address; City; State; Zip Code Flower Mound, TX 75027	Amount of Contribution (\$) \$125.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 51/159 Rpt: 54/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 09/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frank-Silmon, Joy <hr/> 6 Contributor address; City; State; Zip Code Flower Mound, TX 75027	7 Amount of Contribution (\$) \$60.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 09/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frank-Silmon, Joy <hr/> Contributor address; City; State; Zip Code Flower Mound, TX 75027	Amount of Contribution (\$) \$125.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frank-Silmon, Joy <hr/> Contributor address; City; State; Zip Code Flower Mound, TX 75027	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 10/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frank-Silmon, Joy <hr/> Contributor address; City; State; Zip Code Flower Mound, TX 75027	Amount of Contribution (\$) \$125.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 11/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frank-Silmon, Joy <hr/> Contributor address; City; State; Zip Code Flower Mound, TX 75027	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 52/159 Rpt: 55/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 12/16/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frank-Silmon, Joy <hr/> 6 Contributor address; City; State; Zip Code Flower Mound, TX 75027	7 Amount of Contribution (\$) \$60.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frank-Silmon, Joy <hr/> Contributor address; City; State; Zip Code Flower Mound, TX 75027	Amount of Contribution (\$) \$125.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frank-Silmon, Joy <hr/> Contributor address; City; State; Zip Code Flower Mound, TX 75027	Amount of Contribution (\$) \$125.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 07/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Glaser, David <hr/> Contributor address; City; State; Zip Code Katy, TX 77494	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 07/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Glaser, David <hr/> Contributor address; City; State; Zip Code Katy, TX 77494	Amount of Contribution (\$) \$225.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 53/159 Rpt: 56/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 08/01/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Glaser, David <hr/> 6 Contributor address; City; State; Zip Code Katy, TX 77494	7 Amount of Contribution (\$) \$300.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 08/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Glaser, David <hr/> Contributor address; City; State; Zip Code Katy, TX 77494	Amount of Contribution (\$) \$300.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 09/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Glaser, David <hr/> Contributor address; City; State; Zip Code Katy, TX 77494	Amount of Contribution (\$) \$225.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 09/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Glaser, David <hr/> Contributor address; City; State; Zip Code Katy, TX 77494	Amount of Contribution (\$) \$225.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 09/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Glaser, David <hr/> Contributor address; City; State; Zip Code Katy, TX 77494	Amount of Contribution (\$) \$300.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 54/159 Rpt: 57/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 10/24/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Glaser, David <hr/> 6 Contributor address; City; State; Zip Code Katy, TX 77494	7 Amount of Contribution (\$) \$225.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 10/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Glaser, David <hr/> Contributor address; City; State; Zip Code Katy, TX 77494	Amount of Contribution (\$) \$300.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Glaser, David <hr/> Contributor address; City; State; Zip Code Katy, TX 77494	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Glaser, David <hr/> Contributor address; City; State; Zip Code Katy, TX 77494	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 12/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Glaser, David <hr/> Contributor address; City; State; Zip Code Katy, TX 77494	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 55/159 Rpt: 58/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 12/31/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Glaser, David <hr/> 6 Contributor address; City; State; Zip Code Katy, TX 77494	7 Amount of Contribution (\$) \$225.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 08/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Glaser, Phyllis <hr/> Contributor address; City; State; Zip Code Spring, TX 77391	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 08/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Glaser, Phyllis <hr/> Contributor address; City; State; Zip Code Spring, TX 77391	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 09/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Glaser, Phyllis <hr/> Contributor address; City; State; Zip Code Spring, TX 77391	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 10/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Glaser, Phyllis <hr/> Contributor address; City; State; Zip Code Spring, TX 77391	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 56/159 Rpt: 59/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 11/26/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Glaser, Phyllis <hr/> 6 Contributor address; City; State; Zip Code Spring, TX 77391	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 12/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Glaser, Phyllis <hr/> Contributor address; City; State; Zip Code Spring, TX 77391	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 08/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Glaser-Swift, Laurie <hr/> Contributor address; City; State; Zip Code Cypress, TX 77429	Amount of Contribution (\$) \$165.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 08/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Glaser-Swift, Laurie <hr/> Contributor address; City; State; Zip Code Cypress, TX 77429	Amount of Contribution (\$) \$165.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 09/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Glaser-Swift, Laurie <hr/> Contributor address; City; State; Zip Code Cypress, TX 77429	Amount of Contribution (\$) \$165.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 57/159 Rpt: 60/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 10/28/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Glaser-Swift, Laurie 6 Contributor address; City; State; Zip Code Cypress, TX 77429	7 Amount of Contribution (\$) \$165.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Glaser-Swift, Laurie Contributor address; City; State; Zip Code Cypress, TX 77429	Amount of Contribution (\$) \$165.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 12/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Glaser-Swift, Laurie Contributor address; City; State; Zip Code Cypress, TX 77429	Amount of Contribution (\$) \$165.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 07/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzales Jr., Vincente Contributor address; City; State; Zip Code Waco, TX 76703	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 07/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzales Jr., Vincente Contributor address; City; State; Zip Code Waco, TX 76703	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 58/159 Rpt: 61/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 09/02/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzales Jr., Vincente 6 Contributor address; City; State; Zip Code Waco, TX 76703	7 Amount of Contribution (\$) \$75.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 09/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzales Jr., Vincente Contributor address; City; State; Zip Code Waco, TX 76703	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 10/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzales Jr., Vincente Contributor address; City; State; Zip Code Waco, TX 76703	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzales Jr., Vincente Contributor address; City; State; Zip Code Waco, TX 76703	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gonzales Jr., Vincente Contributor address; City; State; Zip Code Waco, TX 76703	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 59/159 Rpt: 62/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 08/01/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grafmiller, Todd <hr/> 6 Contributor address; City; State; Zip Code Atascocita, TX 77346	7 Amount of Contribution (\$) \$105.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 08/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grafmiller, Todd <hr/> Contributor address; City; State; Zip Code Atascocita, TX 77346	Amount of Contribution (\$) \$105.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 09/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grafmiller, Todd <hr/> Contributor address; City; State; Zip Code Atascocita, TX 77346	Amount of Contribution (\$) \$105.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 10/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grafmiller, Todd <hr/> Contributor address; City; State; Zip Code Atascocita, TX 77346	Amount of Contribution (\$) \$120.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grafmiller, Todd <hr/> Contributor address; City; State; Zip Code Atascocita, TX 77346	Amount of Contribution (\$) \$120.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 60/159 Rpt: 63/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 12/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grafmiller, Todd <hr/> 6 Contributor address; City; State; Zip Code Atascocita, TX 77346	7 Amount of Contribution (\$) \$120.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 08/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gutierrez, David <hr/> Contributor address; City; State; Zip Code Houston, TX 77055	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 08/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gutierrez, David <hr/> Contributor address; City; State; Zip Code Houston, TX 77055	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 09/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gutierrez, David <hr/> Contributor address; City; State; Zip Code Houston, TX 77055	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 10/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gutierrez, David <hr/> Contributor address; City; State; Zip Code Houston, TX 77055	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 61/159 Rpt: 64/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 11/26/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gutierrez, David <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77055	7 Amount of Contribution (\$) \$150.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 12/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gutierrez, David <hr/> Contributor address; City; State; Zip Code Houston, TX 77055	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 08/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gutierrez, Michael <hr/> Contributor address; City; State; Zip Code Houston, TX 77055	Amount of Contribution (\$) \$45.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 08/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gutierrez, Michael <hr/> Contributor address; City; State; Zip Code Houston, TX 77055	Amount of Contribution (\$) \$45.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 09/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gutierrez, Michael <hr/> Contributor address; City; State; Zip Code Houston, TX 77055	Amount of Contribution (\$) \$45.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 62/159 Rpt: 65/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 10/28/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gutierrez, Michael 6 Contributor address; City; State; Zip Code Houston, TX 77055	7 Amount of Contribution (\$) \$45.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gutierrez, Michael Contributor address; City; State; Zip Code Houston, TX 77055	Amount of Contribution (\$) \$45.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 12/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gutierrez, Michael Contributor address; City; State; Zip Code Houston, TX 77055	Amount of Contribution (\$) \$45.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 07/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hardeman, Tommy Contributor address; City; State; Zip Code Southlake, TX 76092	Amount of Contribution (\$) \$45.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 08/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hardeman, Tommy Contributor address; City; State; Zip Code Southlake, TX 76092	Amount of Contribution (\$) \$45.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 63/159 Rpt: 66/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 09/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hardeman, Tommy <hr/> 6 Contributor address; City; State; Zip Code Southlake, TX 76092	7 Amount of Contribution (\$) \$45.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hardeman, Tommy <hr/> Contributor address; City; State; Zip Code Southlake, TX 76092	Amount of Contribution (\$) \$45.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 11/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hardeman, Tommy <hr/> Contributor address; City; State; Zip Code Southlake, TX 76092	Amount of Contribution (\$) \$45.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 12/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hardeman, Tommy <hr/> Contributor address; City; State; Zip Code Southlake, TX 76092	Amount of Contribution (\$) \$45.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 07/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harmon, David <hr/> Contributor address; City; State; Zip Code Abilene, TX 79602	Amount of Contribution (\$) \$125.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 64/159 Rpt: 67/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 08/22/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harmon, David <hr/> 6 Contributor address; City; State; Zip Code Abilene, TX 79602	7 Amount of Contribution (\$) \$125.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 09/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harmon, David <hr/> Contributor address; City; State; Zip Code Abilene, TX 79602	Amount of Contribution (\$) \$125.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 10/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harmon, David <hr/> Contributor address; City; State; Zip Code Abilene, TX 79602	Amount of Contribution (\$) \$125.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 11/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harmon, David <hr/> Contributor address; City; State; Zip Code Abilene, TX 79602	Amount of Contribution (\$) \$125.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 12/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harmon, David <hr/> Contributor address; City; State; Zip Code Abilene, TX 79602	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 65/159 Rpt: 68/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 07/16/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ingram, Tyrous <hr/> 6 Contributor address; City; State; Zip Code Frisco, TX 75034	7 Amount of Contribution (\$) \$405.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 08/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ingram, Tyrous <hr/> Contributor address; City; State; Zip Code Frisco, TX 75034	Amount of Contribution (\$) \$420.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 09/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ingram, Tyrous <hr/> Contributor address; City; State; Zip Code Frisco, TX 75034	Amount of Contribution (\$) \$420.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ingram, Tyrous <hr/> Contributor address; City; State; Zip Code Frisco, TX 75034	Amount of Contribution (\$) \$420.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 11/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ingram, Tyrous <hr/> Contributor address; City; State; Zip Code Frisco, TX 75034	Amount of Contribution (\$) \$420.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 66/159 Rpt: 69/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 12/16/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ingram, Tyrous <hr/> 6 Contributor address; City; State; Zip Code Frisco, TX 75034	7 Amount of Contribution (\$) \$390.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 07/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jairala, Celia <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78228	Amount of Contribution (\$) \$300.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 07/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jairala, Celia <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78228	Amount of Contribution (\$) \$300.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 09/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jairala, Celia <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78228	Amount of Contribution (\$) \$300.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 09/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jairala, Celia <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78228	Amount of Contribution (\$) \$300.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 67/159 Rpt: 70/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 10/24/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jairala, Celia <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78228	7 Amount of Contribution (\$) \$300.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jairala, Celia <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78228	Amount of Contribution (\$) \$325.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jairala, Celia <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78228	Amount of Contribution (\$) \$325.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 07/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jasper, Joe <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76116	Amount of Contribution (\$) \$180.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 08/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jasper, Joe <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76116	Amount of Contribution (\$) \$180.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 68/159 Rpt: 71/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 09/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jasper, Joe <hr/> 6 Contributor address; City; State; Zip Code Fort Worth, TX 76116	7 Amount of Contribution (\$) \$180.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jasper, Joe <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76116	Amount of Contribution (\$) \$180.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 11/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jasper, Joe <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76116	Amount of Contribution (\$) \$180.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 12/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jasper, Joe <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76116	Amount of Contribution (\$) \$180.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 07/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jasper, Karen <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76116	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 69/159 Rpt: 72/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 08/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jasper, Karen <hr/> 6 Contributor address; City; State; Zip Code Fort Worth, TX 76116	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 09/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jasper, Karen <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76116	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jasper, Karen <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76116	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 11/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jasper, Karen <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76116	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 12/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jasper, Karen <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76116	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 70/159 Rpt: 73/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 08/01/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kades, Ken 6 Contributor address; City; State; Zip Code Pasadena, TX 77505	7 Amount of Contribution (\$) \$570.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 08/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kades, Ken Contributor address; City; State; Zip Code Pasadena, TX 77505	Amount of Contribution (\$) \$570.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 09/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kades, Ken Contributor address; City; State; Zip Code Pasadena, TX 77505	Amount of Contribution (\$) \$570.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 10/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kades, Ken Contributor address; City; State; Zip Code Pasadena, TX 77505	Amount of Contribution (\$) \$570.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kades, Ken Contributor address; City; State; Zip Code Pasadena, TX 77505	Amount of Contribution (\$) \$570.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 71/159 Rpt: 74/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 12/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kades, Ken 6 Contributor address; City; State; Zip Code Pasadena, TX 77505	7 Amount of Contribution (\$) \$570.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 08/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kades, Matthew Contributor address; City; State; Zip Code Houston, TX 77024	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 08/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kades, Matthew Contributor address; City; State; Zip Code Houston, TX 77024	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 09/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kades, Matthew Contributor address; City; State; Zip Code Houston, TX 77024	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 10/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kades, Matthew Contributor address; City; State; Zip Code Houston, TX 77024	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 72/159 Rpt: 75/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 11/26/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kades, Matthew 6 Contributor address; City; State; Zip Code Houston, TX 77024	7 Amount of Contribution (\$) \$150.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 12/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kades, Matthew Contributor address; City; State; Zip Code Houston, TX 77024	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 08/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kades, Rachel Contributor address; City; State; Zip Code Webster, TX 77598	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 08/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kades, Rachel Contributor address; City; State; Zip Code Webster, TX 77598	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 09/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kades, Rachel Contributor address; City; State; Zip Code Webster, TX 77598	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 73/159 Rpt: 76/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 10/28/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kades, Rachel <hr/> 6 Contributor address; City; State; Zip Code Webster, TX 77598	7 Amount of Contribution (\$) \$75.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kades, Rachel <hr/> Contributor address; City; State; Zip Code Webster, TX 77598	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 12/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kades, Rachel <hr/> Contributor address; City; State; Zip Code Webster, TX 77598	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 07/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kantar, Sam <hr/> Contributor address; City; State; Zip Code Richland Hills, TX 76118	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 07/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kantar, Sam <hr/> Contributor address; City; State; Zip Code Richland Hills, TX 76118	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 74/159 Rpt: 77/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 07/31/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kantar, Sam <hr/> 6 Contributor address; City; State; Zip Code Richland Hills, TX 76118	7 Amount of Contribution (\$) \$200.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 08/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kantar, Sam <hr/> Contributor address; City; State; Zip Code Richland Hills, TX 76118	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 09/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kantar, Sam <hr/> Contributor address; City; State; Zip Code Richland Hills, TX 76118	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 09/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kantar, Sam <hr/> Contributor address; City; State; Zip Code Richland Hills, TX 76118	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 09/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kantar, Sam <hr/> Contributor address; City; State; Zip Code Richland Hills, TX 76118	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 75/159 Rpt: 78/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 10/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kantar, Sam 6 Contributor address; City; State; Zip Code Richland Hills, TX 76118	7 Amount of Contribution (\$) \$150.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 10/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kantar, Sam Contributor address; City; State; Zip Code Richland Hills, TX 76118	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 11/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kantar, Sam Contributor address; City; State; Zip Code Richland Hills, TX 76118	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 12/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kantar, Sam Contributor address; City; State; Zip Code Richland Hills, TX 76118	Amount of Contribution (\$) \$165.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kantar, Sam Contributor address; City; State; Zip Code Richland Hills, TX 76118	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 76/159 Rpt: 79/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 12/31/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kantar, Sam <hr/> 6 Contributor address; City; State; Zip Code Richland Hills, TX 76118	7 Amount of Contribution (\$) \$200.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 08/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keiser, Merle <hr/> Contributor address; City; State; Zip Code Houston, TX 77069	Amount of Contribution (\$) \$45.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 08/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keiser, Merle <hr/> Contributor address; City; State; Zip Code Houston, TX 77069	Amount of Contribution (\$) \$45.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 09/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keiser, Merle <hr/> Contributor address; City; State; Zip Code Houston, TX 77069	Amount of Contribution (\$) \$45.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 10/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keiser, Merle <hr/> Contributor address; City; State; Zip Code Houston, TX 77069	Amount of Contribution (\$) \$45.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 77/159 Rpt: 80/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 11/26/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keiser, Merle <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77069	7 Amount of Contribution (\$) \$45.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 12/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keiser, Merle <hr/> Contributor address; City; State; Zip Code Houston, TX 77069	Amount of Contribution (\$) \$45.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 07/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelley, Jon <hr/> Contributor address; City; State; Zip Code Richardson, TX 75080	Amount of Contribution (\$) \$135.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 08/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelley, Jon <hr/> Contributor address; City; State; Zip Code Richardson, TX 75080	Amount of Contribution (\$) \$135.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 09/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelley, Jon <hr/> Contributor address; City; State; Zip Code Richardson, TX 75080	Amount of Contribution (\$) \$135.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 78/159 Rpt: 81/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 10/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelley, Jon <hr/> 6 Contributor address; City; State; Zip Code Richardson, TX 75080	7 Amount of Contribution (\$) \$135.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 11/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelley, Jon <hr/> Contributor address; City; State; Zip Code Richardson, TX 75080	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 12/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelley, Jon <hr/> Contributor address; City; State; Zip Code Richardson, TX 75080	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 08/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kessler, Suzanne <hr/> Contributor address; City; State; Zip Code Spring, TX 77379	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 08/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kessler, Suzanne <hr/> Contributor address; City; State; Zip Code Spring, TX 77379	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 79/159 Rpt: 82/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 09/26/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kessler, Suzanne 6 Contributor address; City; State; Zip Code Spring, TX 77379	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 10/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kessler, Suzanne Contributor address; City; State; Zip Code Spring, TX 77379	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kessler, Suzanne Contributor address; City; State; Zip Code Spring, TX 77379	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 12/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kessler, Suzanne Contributor address; City; State; Zip Code Spring, TX 77379	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 07/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kiesel, Cory Contributor address; City; State; Zip Code Vista, CA 92084	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 80/159 Rpt: 83/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 08/22/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kiesel, Cory 6 Contributor address; City; State; Zip Code Vista, CA 92084	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 09/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kiesel, Cory Contributor address; City; State; Zip Code Vista, CA 92084	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 10/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kiesel, Cory Contributor address; City; State; Zip Code Vista, CA 92084	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 11/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kiesel, Cory Contributor address; City; State; Zip Code Vista, CA 92084	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 12/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kiesel, Cory Contributor address; City; State; Zip Code Vista, CA 92084	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 81/159 Rpt: 84/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 07/18/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kinney, Daniel <hr/> 6 Contributor address; City; State; Zip Code Bastrop, TX 78602	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 07/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kinney, Daniel <hr/> Contributor address; City; State; Zip Code Bastrop, TX 78602	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 09/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kinney, Daniel <hr/> Contributor address; City; State; Zip Code Bastrop, TX 78602	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 09/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kinney, Daniel <hr/> Contributor address; City; State; Zip Code Bastrop, TX 78602	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 10/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kinney, Daniel <hr/> Contributor address; City; State; Zip Code Bastrop, TX 78602	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 82/159 Rpt: 85/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 12/23/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kinney, Daniel <hr/> 6 Contributor address; City; State; Zip Code Bastrop, TX 78602	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kinney, Daniel <hr/> Contributor address; City; State; Zip Code Bastrop, TX 78602	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 07/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kinney, Jason <hr/> Contributor address; City; State; Zip Code Bastrop, TX 78602	Amount of Contribution (\$) \$175.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 07/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kinney, Jason <hr/> Contributor address; City; State; Zip Code Bastrop, TX 78602	Amount of Contribution (\$) \$175.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 09/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kinney, Jason <hr/> Contributor address; City; State; Zip Code Bastrop, TX 78602	Amount of Contribution (\$) \$175.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 83/159 Rpt: 86/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 09/19/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kinney, Jason 6 Contributor address; City; State; Zip Code Bastrop, TX 78602	7 Amount of Contribution (\$) \$175.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 10/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kinney, Jason Contributor address; City; State; Zip Code Bastrop, TX 78602	Amount of Contribution (\$) \$175.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kinney, Jason Contributor address; City; State; Zip Code Bastrop, TX 78602	Amount of Contribution (\$) \$175.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kinney, Jason Contributor address; City; State; Zip Code Bastrop, TX 78602	Amount of Contribution (\$) \$175.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 07/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kumar, Andy Contributor address; City; State; Zip Code Colleyville, TX 76034	Amount of Contribution (\$) \$240.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 84/159 Rpt: 87/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 08/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kumar, Andy 6 Contributor address; City; State; Zip Code Colleyville, TX 76034	7 Amount of Contribution (\$) \$240.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 09/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kumar, Andy Contributor address; City; State; Zip Code Colleyville, TX 76034	Amount of Contribution (\$) \$240.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kumar, Andy Contributor address; City; State; Zip Code Colleyville, TX 76034	Amount of Contribution (\$) \$240.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 11/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kumar, Andy Contributor address; City; State; Zip Code Colleyville, TX 76034	Amount of Contribution (\$) \$240.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 12/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kumar, Andy Contributor address; City; State; Zip Code Colleyville, TX 76034	Amount of Contribution (\$) \$240.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 85/159 Rpt: 88/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 07/16/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lilly, Kevin <hr/> 6 Contributor address; City; State; Zip Code Athens, TX 75751	7 Amount of Contribution (\$) \$330.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 08/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lilly, Kevin <hr/> Contributor address; City; State; Zip Code Athens, TX 75751	Amount of Contribution (\$) \$330.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 09/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lilly, Kevin <hr/> Contributor address; City; State; Zip Code Athens, TX 75751	Amount of Contribution (\$) \$330.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lilly, Kevin <hr/> Contributor address; City; State; Zip Code Athens, TX 75751	Amount of Contribution (\$) \$330.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 11/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lilly, Kevin <hr/> Contributor address; City; State; Zip Code Athens, TX 75751	Amount of Contribution (\$) \$330.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 86/159 Rpt: 89/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 12/16/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lilly, Kevin <hr/> 6 Contributor address; City; State; Zip Code Athens, TX 75751	7 Amount of Contribution (\$) \$330.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 07/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lim, Maria <hr/> Contributor address; City; State; Zip Code Marble Falls, TX 78654	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 07/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lim, Maria <hr/> Contributor address; City; State; Zip Code Marble Falls, TX 78654	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 09/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lim, Maria <hr/> Contributor address; City; State; Zip Code Marble Falls, TX 78654	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 09/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lim, Maria <hr/> Contributor address; City; State; Zip Code Marble Falls, TX 78654	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 87/159 Rpt: 90/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 10/24/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lim, Maria <hr/> 6 Contributor address; City; State; Zip Code Marble Falls, TX 78654	7 Amount of Contribution (\$) \$75.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lim, Maria <hr/> Contributor address; City; State; Zip Code Marble Falls, TX 78654	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lim, Maria <hr/> Contributor address; City; State; Zip Code Marble Falls, TX 78654	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 07/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lopez-McWilliams, Karen <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76182	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 08/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lopez-McWilliams, Karen <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76182	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 88/159 Rpt: 91/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 09/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lopez-McWilliams, Karen <hr/> 6 Contributor address; City; State; Zip Code Fort Worth, TX 76182	7 Amount of Contribution (\$) \$60.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lopez-McWilliams, Karen <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76182	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 11/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lopez-McWilliams, Karen <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76182	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 12/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lopez-McWilliams, Karen <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76182	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 07/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lozano, Jose <hr/> Contributor address; City; State; Zip Code Plano, TX 75024	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 89/159 Rpt: 92/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 08/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lozano, Jose 6 Contributor address; City; State; Zip Code Plano, TX 75024	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 09/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lozano, Jose Contributor address; City; State; Zip Code Plano, TX 75024	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lozano, Jose Contributor address; City; State; Zip Code Plano, TX 75024	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 11/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lozano, Jose Contributor address; City; State; Zip Code Plano, TX 75024	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 12/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lozano, Jose Contributor address; City; State; Zip Code Plano, TX 75024	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 90/159 Rpt: 93/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 07/18/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lutito Jr., David <hr/> 6 Contributor address; City; State; Zip Code Jonestown, TX 78645	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 07/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lutito Jr., David <hr/> Contributor address; City; State; Zip Code Jonestown, TX 78645	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 09/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lutito Jr., David <hr/> Contributor address; City; State; Zip Code Jonestown, TX 78645	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 09/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lutito Jr., David <hr/> Contributor address; City; State; Zip Code Jonestown, TX 78645	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 10/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lutito Jr., David <hr/> Contributor address; City; State; Zip Code Jonestown, TX 78645	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 91/159 Rpt: 94/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 12/23/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lutito Jr., David <hr/> 6 Contributor address; City; State; Zip Code Jonestown, TX 78645	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lutito Jr., David <hr/> Contributor address; City; State; Zip Code Jonestown, TX 78645	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 07/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lutito Jr., Edward <hr/> Contributor address; City; State; Zip Code Jonestown, TX 78645	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 07/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lutito Jr., Edward <hr/> Contributor address; City; State; Zip Code Jonestown, TX 78645	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 09/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lutito Jr., Edward <hr/> Contributor address; City; State; Zip Code Jonestown, TX 78645	Amount of Contribution (\$) \$425.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 92/159 Rpt: 95/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 09/19/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lutito Jr., Edward <hr/> 6 Contributor address; City; State; Zip Code Jonestown, TX 78645	7 Amount of Contribution (\$) \$425.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 10/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lutito Jr., Edward <hr/> Contributor address; City; State; Zip Code Jonestown, TX 78645	Amount of Contribution (\$) \$425.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lutito Jr., Edward <hr/> Contributor address; City; State; Zip Code Jonestown, TX 78645	Amount of Contribution (\$) \$425.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lutito Jr., Edward <hr/> Contributor address; City; State; Zip Code Jonestown, TX 78645	Amount of Contribution (\$) \$425.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 08/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Majors, Angela <hr/> Contributor address; City; State; Zip Code Humble, TX 77346	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 93/159 Rpt: 96/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 08/26/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Majors, Angela 6 Contributor address; City; State; Zip Code Humble, TX 77346	7 Amount of Contribution (\$) \$30.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 09/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Majors, Angela Contributor address; City; State; Zip Code Humble, TX 77346	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 10/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Majors, Angela Contributor address; City; State; Zip Code Humble, TX 77346	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Majors, Angela Contributor address; City; State; Zip Code Humble, TX 77346	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 12/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Majors, Angela Contributor address; City; State; Zip Code Humble, TX 77346	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 94/159 Rpt: 97/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 07/18/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marasco, Danielle <hr/> 6 Contributor address; City; State; Zip Code Laredo, TX 78041	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 07/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marasco, Danielle <hr/> Contributor address; City; State; Zip Code Laredo, TX 78041	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 09/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marasco, Danielle <hr/> Contributor address; City; State; Zip Code Laredo, TX 78041	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 09/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marasco, Danielle <hr/> Contributor address; City; State; Zip Code Laredo, TX 78041	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 10/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marasco, Danielle <hr/> Contributor address; City; State; Zip Code Laredo, TX 78041	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 95/159 Rpt: 98/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 12/23/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marasco, Danielle <hr/> 6 Contributor address; City; State; Zip Code Laredo, TX 78041	7 Amount of Contribution (\$) \$275.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marasco, Danielle <hr/> Contributor address; City; State; Zip Code Laredo, TX 78041	Amount of Contribution (\$) \$275.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 07/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martin, Kevin <hr/> Contributor address; City; State; Zip Code Altus, OK 73521	Amount of Contribution (\$) \$45.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 08/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martin, Kevin <hr/> Contributor address; City; State; Zip Code Altus, OK 73521	Amount of Contribution (\$) \$45.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 09/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martin, Kevin <hr/> Contributor address; City; State; Zip Code Altus, OK 73521	Amount of Contribution (\$) \$45.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 96/159 Rpt: 99/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 10/24/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martin, Kevin <hr/> 6 Contributor address; City; State; Zip Code Altus, OK 73521	7 Amount of Contribution (\$) \$45.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 11/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martin, Kevin <hr/> Contributor address; City; State; Zip Code Altus, OK 73521	Amount of Contribution (\$) \$45.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 12/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martin, Kevin <hr/> Contributor address; City; State; Zip Code Altus, OK 73521	Amount of Contribution (\$) \$45.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 07/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Massey, Daniel <hr/> Contributor address; City; State; Zip Code Coppell, TX 75019	Amount of Contribution (\$) \$210.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 08/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Massey, Daniel <hr/> Contributor address; City; State; Zip Code Coppell, TX 75019	Amount of Contribution (\$) \$210.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 97/159 Rpt: 100/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 09/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Massey, Daniel <hr/> 6 Contributor address; City; State; Zip Code Coppell, TX 75019	7 Amount of Contribution (\$) \$210.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Massey, Daniel <hr/> Contributor address; City; State; Zip Code Coppell, TX 75019	Amount of Contribution (\$) \$210.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 11/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Massey, Daniel <hr/> Contributor address; City; State; Zip Code Coppell, TX 75019	Amount of Contribution (\$) \$210.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 12/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Massey, Daniel <hr/> Contributor address; City; State; Zip Code Coppell, TX 75019	Amount of Contribution (\$) \$210.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 07/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Massey, William <hr/> Contributor address; City; State; Zip Code Coppell, TX 75019	Amount of Contribution (\$) \$105.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 98/159 Rpt: 101/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 08/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Massey, William <hr/> 6 Contributor address; City; State; Zip Code Coppell, TX 75019	7 Amount of Contribution (\$) \$105.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 09/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Massey, William <hr/> Contributor address; City; State; Zip Code Coppell, TX 75019	Amount of Contribution (\$) \$105.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Massey, William <hr/> Contributor address; City; State; Zip Code Coppell, TX 75019	Amount of Contribution (\$) \$105.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 11/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Massey, William <hr/> Contributor address; City; State; Zip Code Coppell, TX 75019	Amount of Contribution (\$) \$105.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 12/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Massey, William <hr/> Contributor address; City; State; Zip Code Coppell, TX 75019	Amount of Contribution (\$) \$105.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 99/159 Rpt: 102/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 07/18/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mazzu, Kevin 6 Contributor address; City; State; Zip Code San Antonio, TX 78257	7 Amount of Contribution (\$) \$125.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 07/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mazzu, Kevin Contributor address; City; State; Zip Code San Antonio, TX 78257	Amount of Contribution (\$) \$125.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 09/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mazzu, Kevin Contributor address; City; State; Zip Code San Antonio, TX 78257	Amount of Contribution (\$) \$125.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 09/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mazzu, Kevin Contributor address; City; State; Zip Code San Antonio, TX 78257	Amount of Contribution (\$) \$125.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 10/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mazzu, Kevin Contributor address; City; State; Zip Code San Antonio, TX 78257	Amount of Contribution (\$) \$125.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 100/159 Rpt: 103/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 12/23/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mazzu, Kevin 6 Contributor address; City; State; Zip Code San Antonio, TX 78257	7 Amount of Contribution (\$) \$125.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mazzu, Kevin Contributor address; City; State; Zip Code San Antonio, TX 78257	Amount of Contribution (\$) \$125.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 07/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McKinney, Steve Contributor address; City; State; Zip Code Tomball, TX 77373	Amount of Contribution (\$) \$175.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 07/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McKinney, Steve Contributor address; City; State; Zip Code Tomball, TX 77373	Amount of Contribution (\$) \$175.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 08/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McKinney, Steve Contributor address; City; State; Zip Code Magnolia, TX 77354	Amount of Contribution (\$) \$285.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 101/159 Rpt: 104/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 08/26/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McKinney, Steve <hr/> 6 Contributor address; City; State; Zip Code Tomball, TX 77373	7 Amount of Contribution (\$) \$285.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 09/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McKinney, Steve <hr/> Contributor address; City; State; Zip Code Tomball, TX 77373	Amount of Contribution (\$) \$175.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 09/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McKinney, Steve <hr/> Contributor address; City; State; Zip Code Tomball, TX 77373	Amount of Contribution (\$) \$175.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 09/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McKinney, Steve <hr/> Contributor address; City; State; Zip Code Tomball, TX 77373	Amount of Contribution (\$) \$285.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 10/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McKinney, Steve <hr/> Contributor address; City; State; Zip Code Tomball, TX 77373	Amount of Contribution (\$) \$175.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 102/159 Rpt: 105/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 10/28/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McKinney, Steve <hr/> 6 Contributor address; City; State; Zip Code Tomball, TX 77373	7 Amount of Contribution (\$) \$285.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McKinney, Steve <hr/> Contributor address; City; State; Zip Code Tomball, TX 77373	Amount of Contribution (\$) \$285.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McKinney, Steve <hr/> Contributor address; City; State; Zip Code Tomball, TX 77373	Amount of Contribution (\$) \$175.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 12/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McKinney, Steve <hr/> Contributor address; City; State; Zip Code Tomball, TX 77373	Amount of Contribution (\$) \$285.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McKinney, Steve <hr/> Contributor address; City; State; Zip Code Tomball, TX 77373	Amount of Contribution (\$) \$175.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 103/159 Rpt: 106/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 07/18/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mendoza, Frank <hr/> 6 Contributor address; City; State; Zip Code Del Rio, TX 78840	7 Amount of Contribution (\$) \$200.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 07/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mendoza, Frank <hr/> Contributor address; City; State; Zip Code Del Rio, TX 78840	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 09/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mendoza, Frank <hr/> Contributor address; City; State; Zip Code Del Rio, TX 78840	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 09/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mendoza, Frank <hr/> Contributor address; City; State; Zip Code Del Rio, TX 78840	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 10/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mendoza, Frank <hr/> Contributor address; City; State; Zip Code Del Rio, TX 78840	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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4 Date 12/23/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mendoza, Frank <hr/> 6 Contributor address; City; State; Zip Code Del Rio, TX 78840	7 Amount of Contribution (\$) \$200.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mendoza, Frank <hr/> Contributor address; City; State; Zip Code Del Rio, TX 78840	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 08/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Carla <hr/> Contributor address; City; State; Zip Code Houston, TX 77092	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 08/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Carla <hr/> Contributor address; City; State; Zip Code Houston, TX 77092	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 09/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Carla <hr/> Contributor address; City; State; Zip Code Houston, TX 77092	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

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8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Carla Contributor address; City; State; Zip Code Houston, TX 77092	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 12/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Carla Contributor address; City; State; Zip Code Houston, TX 77092	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 07/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Kevin Contributor address; City; State; Zip Code Houston, TX 77092	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 07/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Kevin Contributor address; City; State; Zip Code Houston, TX 77092	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

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4 Date 08/01/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Kevin <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77092	7 Amount of Contribution (\$) \$90.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 08/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Kevin <hr/> Contributor address; City; State; Zip Code Houston, TX 77092	Amount of Contribution (\$) \$90.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 09/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Kevin <hr/> Contributor address; City; State; Zip Code Houston, TX 77092	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
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Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

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8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 08/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moss, Daniel Contributor address; City; State; Zip Code Stafford, TX 77477	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 08/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moss, Daniel Contributor address; City; State; Zip Code Stafford, TX 77477	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 09/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moss, Daniel Contributor address; City; State; Zip Code Stafford, TX 77477	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 10/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moss, Daniel Contributor address; City; State; Zip Code Stafford, TX 77477	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

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8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 12/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moss, Daniel Contributor address; City; State; Zip Code Stafford, TX 77477	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 08/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moss, Dave Contributor address; City; State; Zip Code Stafford, TX 77477	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 08/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moss, Dave Contributor address; City; State; Zip Code Stafford, TX 77477	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 09/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moss, Dave Contributor address; City; State; Zip Code Stafford, TX 77477	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

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8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moss, Dave Contributor address; City; State; Zip Code Stafford, TX 77477	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 12/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moss, Dave Contributor address; City; State; Zip Code Stafford, TX 77477	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 08/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Munroe, Sam Contributor address; City; State; Zip Code Houston, TX 77098	Amount of Contribution (\$) \$225.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 08/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Munroe, Sam Contributor address; City; State; Zip Code Houston, TX 77098	Amount of Contribution (\$) \$225.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 09/26/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Munroe, Sam <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77098	7 Amount of Contribution (\$) \$225.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 10/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Munroe, Sam <hr/> Contributor address; City; State; Zip Code Houston, TX 77098	Amount of Contribution (\$) \$225.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Munroe, Sam <hr/> Contributor address; City; State; Zip Code Houston, TX 77098	Amount of Contribution (\$) \$225.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 12/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Munroe, Sam <hr/> Contributor address; City; State; Zip Code Houston, TX 77098	Amount of Contribution (\$) \$225.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 07/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Reilly, Chuck <hr/> Contributor address; City; State; Zip Code Plano, TX 75023	Amount of Contribution (\$) \$330.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 08/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Reilly, Chuck <hr/> 6 Contributor address; City; State; Zip Code Plano, TX 75023	7 Amount of Contribution (\$) \$330.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 09/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Reilly, Chuck <hr/> Contributor address; City; State; Zip Code Plano, TX 75023	Amount of Contribution (\$) \$330.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Reilly, Chuck <hr/> Contributor address; City; State; Zip Code Plano, TX 75023	Amount of Contribution (\$) \$330.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 11/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Reilly, Chuck <hr/> Contributor address; City; State; Zip Code Plano, TX 75023	Amount of Contribution (\$) \$330.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 12/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Reilly, Chuck <hr/> Contributor address; City; State; Zip Code Plano, TX 75023	Amount of Contribution (\$) \$330.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

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2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 07/18/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oquin, Anna <hr/> 6 Contributor address; City; State; Zip Code Brownsville, TX 78520	7 Amount of Contribution (\$) \$300.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 07/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oquin, Anna <hr/> Contributor address; City; State; Zip Code Brownsville, TX 78520	Amount of Contribution (\$) \$325.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 09/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oquin, Anna <hr/> Contributor address; City; State; Zip Code Brownsville, TX 78520	Amount of Contribution (\$) \$325.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 09/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oquin, Anna <hr/> Contributor address; City; State; Zip Code Brownsville, TX 78520	Amount of Contribution (\$) \$325.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 10/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oquin, Anna <hr/> Contributor address; City; State; Zip Code Brownsville, TX 78520	Amount of Contribution (\$) \$325.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

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4 Date 12/23/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oquin, Anna <hr/> 6 Contributor address; City; State; Zip Code Brownsville, TX 78520	7 Amount of Contribution (\$) \$350.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oquin, Anna <hr/> Contributor address; City; State; Zip Code Brownsville, TX 78520	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 07/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pacheco, Elena <hr/> Contributor address; City; State; Zip Code Del Rio, TX 78840	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 07/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pacheco, Elena <hr/> Contributor address; City; State; Zip Code Del Rio, TX 78840	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 09/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pacheco, Elena <hr/> Contributor address; City; State; Zip Code Del Rio, TX 78840	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

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8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 10/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pacheco, Elena <hr/> Contributor address; City; State; Zip Code Del Rio, TX 78840	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pacheco, Elena <hr/> Contributor address; City; State; Zip Code Del Rio, TX 78840	Amount of Contribution (\$) \$25.00
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Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 07/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pacheco, Manuel <hr/> Contributor address; City; State; Zip Code Del Rio, TX 78840	Amount of Contribution (\$) \$25.00
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8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 09/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pacheco, Manuel <hr/> Contributor address; City; State; Zip Code Del Rio, TX 78840	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
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4 Date 12/31/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pacheco, Manuel <hr/> 6 Contributor address; City; State; Zip Code Del Rio, TX 78840	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 08/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perez, Carrie <hr/> Contributor address; City; State; Zip Code Friendswood, TX 77546	Amount of Contribution (\$) \$90.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 08/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perez, Carrie <hr/> Contributor address; City; State; Zip Code Friendswood, TX 77546	Amount of Contribution (\$) \$90.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 09/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perez, Carrie <hr/> Contributor address; City; State; Zip Code Friendswood, TX 77546	Amount of Contribution (\$) \$105.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 10/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perez, Carrie <hr/> Contributor address; City; State; Zip Code Friendswood, TX 77546	Amount of Contribution (\$) \$105.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 118/159 Rpt: 121/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 11/26/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perez, Carrie <hr/> 6 Contributor address; City; State; Zip Code Friendswood, TX 77546	7 Amount of Contribution (\$) \$105.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 12/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perez, Carrie <hr/> Contributor address; City; State; Zip Code Friendswood, TX 77546	Amount of Contribution (\$) \$105.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 08/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Quijano, Nelly <hr/> Contributor address; City; State; Zip Code Pasadena, TX 77505	Amount of Contribution (\$) \$270.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 08/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Quijano, Nelly <hr/> Contributor address; City; State; Zip Code Pasadena, TX 77505	Amount of Contribution (\$) \$270.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 09/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Quijano, Nelly <hr/> Contributor address; City; State; Zip Code Pasadena, TX 77505	Amount of Contribution (\$) \$270.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 119/159 Rpt: 122/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 10/28/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Quijano, Nelly <hr/> 6 Contributor address; City; State; Zip Code Pasadena, TX 77505	7 Amount of Contribution (\$) \$270.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Quijano, Nelly <hr/> Contributor address; City; State; Zip Code Pasadena, TX 77505	Amount of Contribution (\$) \$270.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 12/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Quijano, Nelly <hr/> Contributor address; City; State; Zip Code Pasadena, TX 77505	Amount of Contribution (\$) \$270.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 07/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Raabe, Dale <hr/> Contributor address; City; State; Zip Code Kingsville, TX 78364	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 07/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Raabe, Dale <hr/> Contributor address; City; State; Zip Code Kingsville, TX 78364	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 120/159 Rpt: 123/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 09/02/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Raabe, Dale 6 Contributor address; City; State; Zip Code Kingsville, TX 78364	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 09/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Raabe, Dale Contributor address; City; State; Zip Code Kingsville, TX 78364	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 10/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Raabe, Dale Contributor address; City; State; Zip Code Kingsville, TX 78364	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Raabe, Dale Contributor address; City; State; Zip Code Kingsville, TX 78364	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Raabe, Dale Contributor address; City; State; Zip Code Kingsville, TX 78364	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 121/159 Rpt: 124/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 07/25/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robillard, Rick <hr/> 6 Contributor address; City; State; Zip Code Lubbock, TX 79407	7 Amount of Contribution (\$) \$135.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 08/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robillard, Rick <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79407	Amount of Contribution (\$) \$135.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 09/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robillard, Rick <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79407	Amount of Contribution (\$) \$135.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 10/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robillard, Rick <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79407	Amount of Contribution (\$) \$135.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 11/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robillard, Rick <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79407	Amount of Contribution (\$) \$135.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 122/159 Rpt: 125/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 12/16/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robillard, Rick <hr/> 6 Contributor address; City; State; Zip Code Lubbock, TX 79407	7 Amount of Contribution (\$) \$135.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 07/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, Carlos <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78248	Amount of Contribution (\$) \$125.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 07/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, Carlos <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78248	Amount of Contribution (\$) \$125.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 09/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, Carlos <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78248	Amount of Contribution (\$) \$125.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 09/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, Carlos <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78248	Amount of Contribution (\$) \$125.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 123/159 Rpt: 126/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 10/24/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, Carlos <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78248	7 Amount of Contribution (\$) \$125.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, Carlos <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78248	Amount of Contribution (\$) \$125.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, Carlos <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78248	Amount of Contribution (\$) \$125.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 07/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roetzel, Pat <hr/> Contributor address; City; State; Zip Code Mansfield, TX 76093	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 08/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roetzel, Pat <hr/> Contributor address; City; State; Zip Code Mansfield, TX 76093	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 124/159 Rpt: 127/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 09/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roetzel, Pat 6 Contributor address; City; State; Zip Code Mansfield, TX 76093	7 Amount of Contribution (\$) \$60.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roetzel, Pat Contributor address; City; State; Zip Code Mansfield, TX 76093	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 11/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roetzel, Pat Contributor address; City; State; Zip Code Mansfield, TX 76093	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 12/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roetzel, Pat Contributor address; City; State; Zip Code Mansfield, TX 76093	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 07/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ross III, Winston Contributor address; City; State; Zip Code Austin, TX 78755	Amount of Contribution (\$) \$375.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 07/31/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ross III, Winston <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78755	7 Amount of Contribution (\$) \$375.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 09/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ross III, Winston <hr/> Contributor address; City; State; Zip Code Austin, TX 78755	Amount of Contribution (\$) \$375.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 09/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ross III, Winston <hr/> Contributor address; City; State; Zip Code Austin, TX 78755	Amount of Contribution (\$) \$375.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 10/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ross III, Winston <hr/> Contributor address; City; State; Zip Code Austin, TX 78755	Amount of Contribution (\$) \$375.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ross III, Winston <hr/> Contributor address; City; State; Zip Code Austin, TX 78755	Amount of Contribution (\$) \$375.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 126/159 Rpt: 129/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 12/31/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ross III, Winston <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78755	7 Amount of Contribution (\$) \$375.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 07/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ross Jr., Winston <hr/> Contributor address; City; State; Zip Code Austin, TX 78755	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 07/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ross Jr., Winston <hr/> Contributor address; City; State; Zip Code Austin, TX 78755	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 09/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ross Jr., Winston <hr/> Contributor address; City; State; Zip Code Austin, TX 78755	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 09/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ross Jr., Winston <hr/> Contributor address; City; State; Zip Code Austin, TX 78755	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 127/159 Rpt: 130/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 10/24/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ross Jr., Winston <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78755	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ross Jr., Winston <hr/> Contributor address; City; State; Zip Code Austin, TX 78755	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ross Jr., Winston <hr/> Contributor address; City; State; Zip Code Austin, TX 78755	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 07/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Salazar, Maria <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78216	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 07/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Salazar, Maria <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78216	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 128/159 Rpt: 131/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 09/02/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Salazar, Maria 6 Contributor address; City; State; Zip Code San Antonio, TX 78216	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 09/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Salazar, Maria Contributor address; City; State; Zip Code San Antonio, TX 78216	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 10/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Salazar, Maria Contributor address; City; State; Zip Code San Antonio, TX 78216	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Salazar, Maria Contributor address; City; State; Zip Code San Antonio, TX 78216	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Salazar, Maria Contributor address; City; State; Zip Code San Antonio, TX 78216	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 129/159 Rpt: 132/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 07/18/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Salazar Jr., Jose <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78216	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 07/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Salazar Jr., Jose <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78216	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 09/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Salazar Jr., Jose <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78216	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 09/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Salazar Jr., Jose <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78216	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 10/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Salazar Jr., Jose <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78216	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 130/159 Rpt: 133/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 12/23/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Salazar Jr., Jose 6 Contributor address; City; State; Zip Code San Antonio, TX 78216	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Salazar Jr., Jose Contributor address; City; State; Zip Code San Antonio, TX 78216	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 08/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schmid, Mark Contributor address; City; State; Zip Code Richmond, TX 77469	Amount of Contribution (\$) \$45.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 08/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schmid, Mark Contributor address; City; State; Zip Code Richmond, TX 77469	Amount of Contribution (\$) \$45.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 09/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schmid, Mark Contributor address; City; State; Zip Code Richmond, TX 77469	Amount of Contribution (\$) \$45.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 131/159 Rpt: 134/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 10/28/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schmid, Mark 6 Contributor address; City; State; Zip Code Richmond, TX 77469	7 Amount of Contribution (\$) \$45.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schmid, Mark Contributor address; City; State; Zip Code Richmond, TX 77469	Amount of Contribution (\$) \$45.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 12/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schmid, Mark Contributor address; City; State; Zip Code Richmond, TX 77469	Amount of Contribution (\$) \$45.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 08/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schmid, Michael Contributor address; City; State; Zip Code Richmond, TX 77469	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 08/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schmid, Michael Contributor address; City; State; Zip Code Richmond, TX 77469	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 132/159 Rpt: 135/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 09/26/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schmid, Michael <hr/> 6 Contributor address; City; State; Zip Code Richmond, TX 77469	7 Amount of Contribution (\$) \$75.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 10/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schmid, Michael <hr/> Contributor address; City; State; Zip Code Richmond, TX 77469	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schmid, Michael <hr/> Contributor address; City; State; Zip Code Richmond, TX 77469	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 12/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schmid, Michael <hr/> Contributor address; City; State; Zip Code Richmond, TX 77469	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 07/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schuster, Troy <hr/> Contributor address; City; State; Zip Code Lufkin, TX 75901	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 133/159 Rpt: 136/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 08/18/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schuster, Troy <hr/> 6 Contributor address; City; State; Zip Code Lufkin, TX 75901	7 Amount of Contribution (\$) \$60.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 09/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schuster, Troy <hr/> Contributor address; City; State; Zip Code Lufkin, TX 75901	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 10/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schuster, Troy <hr/> Contributor address; City; State; Zip Code Lufkin, TX 75901	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 11/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schuster, Troy <hr/> Contributor address; City; State; Zip Code Lufkin, TX 75901	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 12/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schuster, Troy <hr/> Contributor address; City; State; Zip Code Lufkin, TX 75901	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 134/159 Rpt: 137/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 07/18/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shields, Veronica 6 Contributor address; City; State; Zip Code San Antonio, TX 78246	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 07/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shields, Veronica Contributor address; City; State; Zip Code San Antonio, TX 78246	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 09/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shields, Veronica Contributor address; City; State; Zip Code San Antonio, TX 78246	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 09/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shields, Veronica Contributor address; City; State; Zip Code San Antonio, TX 78246	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 10/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shields, Veronica Contributor address; City; State; Zip Code San Antonio, TX 78246	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 135/159 Rpt: 138/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 12/23/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shields, Veronica 6 Contributor address; City; State; Zip Code San Antonio, TX 78246	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shields, Veronica Contributor address; City; State; Zip Code San Antonio, TX 78246	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 07/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Jeanie Contributor address; City; State; Zip Code Dobbin, TX 77333	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 07/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Jeanie Contributor address; City; State; Zip Code Dobbin, TX 77333	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 09/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Jeanie Contributor address; City; State; Zip Code Dobbin, TX 77333	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 136/159 Rpt: 139/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 09/19/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Jeanie 6 Contributor address; City; State; Zip Code Dobbin, TX 77333	7 Amount of Contribution (\$) \$200.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 10/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Jeanie Contributor address; City; State; Zip Code Dobbin, TX 77333	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Jeanie Contributor address; City; State; Zip Code Dobbin, TX 77333	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Jeanie Contributor address; City; State; Zip Code Dobbin, TX 77333	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 07/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Jeff Contributor address; City; State; Zip Code DeSoto, TX 75115	Amount of Contribution (\$) \$45.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 08/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Jeff 6 Contributor address; City; State; Zip Code DeSoto, TX 75115	7 Amount of Contribution (\$) \$45.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 09/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Jeff Contributor address; City; State; Zip Code DeSoto, TX 75115	Amount of Contribution (\$) \$45.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Jeff Contributor address; City; State; Zip Code DeSoto, TX 75115	Amount of Contribution (\$) \$45.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 11/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Jeff Contributor address; City; State; Zip Code DeSoto, TX 75115	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 12/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Jeff Contributor address; City; State; Zip Code DeSoto, TX 75115	Amount of Contribution (\$) \$45.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 138/159 Rpt: 141/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 07/25/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Snowberger, Chris <hr/> 6 Contributor address; City; State; Zip Code Clovis, NM 88102	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 08/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Snowberger, Chris <hr/> Contributor address; City; State; Zip Code Clovis, NM 88102	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 09/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Snowberger, Chris <hr/> Contributor address; City; State; Zip Code Clovis, NM 88102	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 10/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Snowberger, Chris <hr/> Contributor address; City; State; Zip Code Clovis, NM 88102	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 11/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Snowberger, Chris <hr/> Contributor address; City; State; Zip Code Clovis, NM 88102	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 139/159 Rpt: 142/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 12/16/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Snowberger, Chris <hr/> 6 Contributor address; City; State; Zip Code Clovis, NM 88102	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 07/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Snowberger, Robyn <hr/> Contributor address; City; State; Zip Code Clovis, NM 88102	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 08/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Snowberger, Robyn <hr/> Contributor address; City; State; Zip Code Clovis, NM 88102	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 09/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Snowberger, Robyn <hr/> Contributor address; City; State; Zip Code Clovis, NM 88102	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 10/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Snowberger, Robyn <hr/> Contributor address; City; State; Zip Code Clovis, NM 88102	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 140/159 Rpt: 143/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 11/21/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Snowberger, Robyn <hr/> 6 Contributor address; City; State; Zip Code Clovis, NM 88102	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 12/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Snowberger, Robyn <hr/> Contributor address; City; State; Zip Code Clovis, NM 88102	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 08/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Soudagar, Sarem <hr/> Contributor address; City; State; Zip Code Spring, TX 77379	Amount of Contribution (\$) \$195.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 08/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Soudagar, Sarem <hr/> Contributor address; City; State; Zip Code Spring, TX 77379	Amount of Contribution (\$) \$195.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 09/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Soudagar, Sarem <hr/> Contributor address; City; State; Zip Code Spring, TX 77379	Amount of Contribution (\$) \$165.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 141/159 Rpt: 144/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 10/28/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Soudagar, Sarem <hr/> 6 Contributor address; City; State; Zip Code Spring, TX 77379	7 Amount of Contribution (\$) \$165.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Soudagar, Sarem <hr/> Contributor address; City; State; Zip Code Spring, TX 77379	Amount of Contribution (\$) \$165.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 12/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Soudagar, Sarem <hr/> Contributor address; City; State; Zip Code Spring, TX 77379	Amount of Contribution (\$) \$165.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 08/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spann, Warren <hr/> Contributor address; City; State; Zip Code Sugar Land, TX 77479	Amount of Contribution (\$) \$90.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 08/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spann, Warren <hr/> Contributor address; City; State; Zip Code Sugar Land, TX 77479	Amount of Contribution (\$) \$90.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 142/159 Rpt: 145/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 09/26/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spann, Warren <hr/> 6 Contributor address; City; State; Zip Code Sugar Land, TX 77479	7 Amount of Contribution (\$) \$90.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 10/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spann, Warren <hr/> Contributor address; City; State; Zip Code Sugar Land, TX 77479	Amount of Contribution (\$) \$90.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spann, Warren <hr/> Contributor address; City; State; Zip Code Sugar Land, TX 77479	Amount of Contribution (\$) \$90.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 12/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spann, Warren <hr/> Contributor address; City; State; Zip Code Sugar Land, TX 77479	Amount of Contribution (\$) \$90.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 07/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stagg, Fabiola <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78230	Amount of Contribution (\$) \$125.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 143/159 Rpt: 146/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 07/31/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stagg, Fabiola <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78230	7 Amount of Contribution (\$) \$125.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 09/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stagg, Fabiola <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78230	Amount of Contribution (\$) \$125.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 09/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stagg, Fabiola <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78230	Amount of Contribution (\$) \$125.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 10/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stagg, Fabiola <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78230	Amount of Contribution (\$) \$125.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stagg, Fabiola <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78230	Amount of Contribution (\$) \$125.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 144/159 Rpt: 147/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 12/31/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stagg, Fabiola 6 Contributor address; City; State; Zip Code San Antonio, TX 78230	7 Amount of Contribution (\$) \$150.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 07/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stagg, Nedrick Contributor address; City; State; Zip Code San Antonio, TX 78230	Amount of Contribution (\$) \$775.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 07/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stagg, Nedrick Contributor address; City; State; Zip Code San Antonio, TX 78230	Amount of Contribution (\$) \$775.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 09/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stagg, Nedrick Contributor address; City; State; Zip Code San Antonio, TX 78230	Amount of Contribution (\$) \$775.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 09/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stagg, Nedrick Contributor address; City; State; Zip Code San Antonio, TX 78230	Amount of Contribution (\$) \$800.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 145/159 Rpt: 148/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 10/24/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stagg, Nedrick 6 Contributor address; City; State; Zip Code San Antonio, TX 78230	7 Amount of Contribution (\$) \$800.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stagg, Nedrick Contributor address; City; State; Zip Code San Antonio, TX 78230	Amount of Contribution (\$) \$825.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stagg, Nedrick Contributor address; City; State; Zip Code San Antonio, TX 78230	Amount of Contribution (\$) \$825.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 07/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Story, Bill Contributor address; City; State; Zip Code El Paso, TX 79925	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 08/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Story, Bill Contributor address; City; State; Zip Code El Paso, TX 79925	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 146/159 Rpt: 149/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 09/26/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Story, Bill <hr/> 6 Contributor address; City; State; Zip Code El Paso, TX 79925	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 10/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Story, Bill <hr/> Contributor address; City; State; Zip Code El Paso, TX 79925	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 11/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Story, Bill <hr/> Contributor address; City; State; Zip Code El Paso, TX 79925	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 12/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Story, Bill <hr/> Contributor address; City; State; Zip Code El Paso, TX 79925	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 07/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Straza, Jamie <hr/> Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$225.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 07/31/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Straza, Jamie <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78704	7 Amount of Contribution (\$) \$225.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 09/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Straza, Jamie <hr/> Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$225.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 09/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Straza, Jamie <hr/> Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$225.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 10/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Straza, Jamie <hr/> Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$225.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Straza, Jamie <hr/> Contributor address; City; State; Zip Code Austin, TX 78704	Amount of Contribution (\$) \$225.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 148/159 Rpt: 151/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 12/31/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Straza, Jamie <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78704	7 Amount of Contribution (\$) \$225.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vaneck, Jerry <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78258	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) Self
Date 07/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vargas, Hugo <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79424	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 08/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vargas, Hugo <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79424	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 09/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vargas, Hugo <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79424	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 149/159 Rpt: 152/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 10/24/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vargas, Hugo <hr/> 6 Contributor address; City; State; Zip Code Lubbock, TX 79424	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 11/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vargas, Hugo <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79424	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 12/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vargas, Hugo <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79424	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 07/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Varghese, Denny <hr/> Contributor address; City; State; Zip Code Childress, TX 79201	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 08/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Varghese, Denny <hr/> Contributor address; City; State; Zip Code Childress, TX 79201	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 150/159 Rpt: 153/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 09/26/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Varghese, Denny <hr/> 6 Contributor address; City; State; Zip Code Childress, TX 79201	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 10/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Varghese, Denny <hr/> Contributor address; City; State; Zip Code Childress, TX 79201	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 11/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Varghese, Denny <hr/> Contributor address; City; State; Zip Code Childress, TX 79201	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 12/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Varghese, Denny <hr/> Contributor address; City; State; Zip Code Childress, TX 79201	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 07/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Washington, Martin <hr/> Contributor address; City; State; Zip Code Austin, TX 78750	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 151/159 Rpt: 154/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 07/31/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Washington, Martin 6 Contributor address; City; State; Zip Code Austin, TX 78750	7 Amount of Contribution (\$) \$150.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 09/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Washington, Martin Contributor address; City; State; Zip Code Austin, TX 78750	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 09/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Washington, Martin Contributor address; City; State; Zip Code Austin, TX 78750	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 10/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Washington, Martin Contributor address; City; State; Zip Code Austin, TX 78750	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Washington, Martin Contributor address; City; State; Zip Code Austin, TX 78750	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 152/159 Rpt: 155/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 12/31/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Washington, Martin <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78750	7 Amount of Contribution (\$) \$150.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 07/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wezeman, Robert <hr/> Contributor address; City; State; Zip Code McQueeney, TX 78123	Amount of Contribution (\$) \$175.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 07/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wezeman, Robert <hr/> Contributor address; City; State; Zip Code McQueeney, TX 78123	Amount of Contribution (\$) \$175.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 09/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wezeman, Robert <hr/> Contributor address; City; State; Zip Code McQueeney, TX 78123	Amount of Contribution (\$) \$175.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 09/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wezeman, Robert <hr/> Contributor address; City; State; Zip Code McQueeney, TX 78123	Amount of Contribution (\$) \$175.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 153/159 Rpt: 156/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 10/24/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wezeman, Robert <hr/> 6 Contributor address; City; State; Zip Code McQueeney, TX 78123	7 Amount of Contribution (\$) \$200.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 12/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wezeman, Robert <hr/> Contributor address; City; State; Zip Code McQueeney, TX 78123	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wezeman, Robert <hr/> Contributor address; City; State; Zip Code McQueeney, TX 78123	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 07/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whealy, David <hr/> Contributor address; City; State; Zip Code Breckenridge, TX 79424	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 08/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whealy, David <hr/> Contributor address; City; State; Zip Code Breckenridge, TX 79424	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 154/159 Rpt: 157/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 09/26/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whealy, David <hr/> 6 Contributor address; City; State; Zip Code Breckenridge, TX 79424	7 Amount of Contribution (\$) \$75.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 10/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whealy, David <hr/> Contributor address; City; State; Zip Code Breckenridge, TX 79424	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 11/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whealy, David <hr/> Contributor address; City; State; Zip Code Breckenridge, TX 79424	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 12/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whealy, David <hr/> Contributor address; City; State; Zip Code Breckenridge, TX 79424	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 08/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whitaker, Billy <hr/> Contributor address; City; State; Zip Code Houston, TX 77098	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 155/159 Rpt: 158/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 08/26/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whitaker, Billy <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77098	7 Amount of Contribution (\$) \$60.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 09/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whitaker, Billy <hr/> Contributor address; City; State; Zip Code Houston, TX 77098	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 10/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whitaker, Billy <hr/> Contributor address; City; State; Zip Code Houston, TX 77098	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whitaker, Billy <hr/> Contributor address; City; State; Zip Code Houston, TX 77098	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 12/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whitaker, Billy <hr/> Contributor address; City; State; Zip Code Houston, TX 77098	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 156/159 Rpt: 159/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 07/16/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) York, Craig 6 Contributor address; City; State; Zip Code Dallas, TX 75238	7 Amount of Contribution (\$) \$210.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 08/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) York, Craig Contributor address; City; State; Zip Code Dallas, TX 75238	Amount of Contribution (\$) \$210.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 09/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) York, Craig Contributor address; City; State; Zip Code Dallas, TX 75238	Amount of Contribution (\$) \$210.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) York, Craig Contributor address; City; State; Zip Code Dallas, TX 75238	Amount of Contribution (\$) \$210.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 11/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) York, Craig Contributor address; City; State; Zip Code Dallas, TX 75238	Amount of Contribution (\$) \$210.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 157/159 Rpt: 160/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 12/16/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) York, Craig <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75238	7 Amount of Contribution (\$) \$210.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 07/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Young, Lynann <hr/> Contributor address; City; State; Zip Code Flint, TX 75762	Amount of Contribution (\$) \$45.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 08/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Young, Lynann <hr/> Contributor address; City; State; Zip Code Flint, TX 75762	Amount of Contribution (\$) \$45.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 09/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Young, Lynann <hr/> Contributor address; City; State; Zip Code Flint, TX 75762	Amount of Contribution (\$) \$45.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Young, Lynann <hr/> Contributor address; City; State; Zip Code Flint, TX 75762	Amount of Contribution (\$) \$45.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 158/159 Rpt: 161/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 11/17/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Young, Lynann 6 Contributor address; City; State; Zip Code Flint, TX 75762	7 Amount of Contribution (\$) \$45.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 12/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Young, Lynann Contributor address; City; State; Zip Code Flint, TX 75762	Amount of Contribution (\$) \$45.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 07/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Young, William Contributor address; City; State; Zip Code Flint, TX 75762	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 08/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Young, William Contributor address; City; State; Zip Code Flint, TX 75762	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 09/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Young, William Contributor address; City; State; Zip Code Flint, TX 75762	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 159/159 Rpt: 162/172
2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524
4 Date 10/15/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Young, William <hr/> 6 Contributor address; City; State; Zip Code Flint, TX 75762	7 Amount of Contribution (\$) \$15.00
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 11/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Young, William <hr/> Contributor address; City; State; Zip Code Flint, TX 75762	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 12/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Young, William <hr/> Contributor address; City; State; Zip Code Flint, TX 75762	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

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: 1/10 Rpt:	2 FILER NAME Texas McDonald's Operators Association PAC, Inc.	3 Filer ID (Ethics Commission Filers) 00066524
4 Date 07/08/2025	5 Payee name Carriage House Partners	
6 Amount (\$) \$5,000.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1111 Guadalupe St Austin, TX 78701	
8 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 Consulting services
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 08/08/2025	Candidate/Officeholder name Office sought Office held	
Payee name Carriage House Partners		
Amount (\$) \$5,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1111 Guadalupe 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 Consulting services
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/08/2025	Candidate/Officeholder name Office sought Office held	
Payee name Carriage House Partners		
Amount (\$) \$5,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1111 Guadalupe 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 Consulting services
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

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: 2/10 Rpt:	2 FILER NAME Texas McDonald's Operators Association PAC, Inc.	3 Filer ID (Ethics Commission Filers) 00066524
4 Date 10/08/2025	5 Payee name Carriage House Partners	
6 Amount (\$) \$5,000.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 1111 Guadalupe St Austin, TX 78701	
8 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 Consulting services
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 11/08/2025	Candidate/Officeholder name Office sought Office held	
Payee name Carriage House Partners		
Amount (\$) \$5,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1111 Guadalupe 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 Consulting services
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 12/08/2025	Candidate/Officeholder name Office sought Office held	
Payee name Carriage House Partners		
Amount (\$) \$5,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1111 Guadalupe 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 Consulting services
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 12/08/2025	Candidate/Officeholder name Office sought Office held	
Payee name Carriage House Partners		
Amount (\$) \$5,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 1111 Guadalupe 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 Consulting services
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

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: 3/10 Rpt:	2 FILER NAME Texas McDonald's Operators Association PAC, Inc.	3 Filer ID (Ethics Commission Filers) 00066524
4 Date 07/15/2025	5 Payee name Dan Jefferson Tax and Financial Consulting	
6 Amount (\$) \$150.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 400 S Zang Blvd Ste 620 Dallas, TX 75208	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 08/15/2025	Candidate/Officeholder name Office sought Office held	
Payee name Dan Jefferson Tax and Financial Consulting		
Amount (\$) \$150.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 400 S Zang Blvd Ste 620 Dallas, TX 75208	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/15/2025	Candidate/Officeholder name Office sought Office held	
Payee name Dan Jefferson Tax and Financial Consulting		
Amount (\$) \$150.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 400 S Zang Blvd Ste 620 Dallas, TX 75208	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

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: 4/10 Rpt:	2 FILER NAME Texas McDonald's Operators Association PAC, Inc.	3 Filer ID (Ethics Commission Filers) 00066524
4 Date 10/15/2025	5 Payee name Dan Jefferson Tax and Financial Consulting	
6 Amount (\$) \$150.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 400 S Zang Blvd Ste 620 Dallas, TX 75208	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/15/2025	Payee name Dan Jefferson Tax and Financial Consulting	
Amount (\$) \$150.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 400 S Zang Blvd Ste 620 Dallas, TX 75208	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/15/2025	Payee name Dan Jefferson Tax and Financial Consulting	
Amount (\$) \$150.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 400 S Zang Blvd Ste 620 Dallas, TX 75208	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting fees
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: 5/10 Rpt:	2 FILER NAME Texas McDonald's Operators Association PAC, Inc.	3 Filer ID (Ethics Commission Filers) 00066524
4 Date 07/09/2025	5 Payee name Intuit	
6 Amount (\$) \$115.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 2535 Garcia Lane Mountain View, CA 94043	
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 QuickBooks online monthly fee
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 08/09/2025	Candidate/Officeholder name Office sought Office held	
Date 08/09/2025	Payee name Intuit	
Amount (\$) \$130.18 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2535 Garcia Lane Mountain View, CA 94043	
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 QuickBooks online monthly fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 09/09/2025	Candidate/Officeholder name Office sought Office held	
Date 09/09/2025	Payee name Intuit	
Amount (\$) \$122.59 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 2535 Garcia Lane Mountain View, CA 94043	
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 QuickBooks online monthly fee
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

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: 6/10 Rpt:		2 FILER NAME Texas McDonald's Operators Association PAC, Inc.		3 Filer ID (Ethics Commission Filers) 00066524	
4 Date 10/09/2025		5 Payee name Intuit			
6 Amount (\$) \$122.59 <input type="checkbox"/> Expenditure from corporate funds		7 Payee address; City; State; Zip Code 2535 Garcia Lane Mountain View, CA 94043			
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 QuickBooks online monthly fee	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 11/09/2025		Payee name Intuit			
Amount (\$) \$122.59 <input type="checkbox"/> Expenditure from corporate funds		Payee address; City; State; Zip Code 2535 Garcia Lane Mountain View, CA 94043			
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 QuickBooks online monthly fee	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	
Date 12/09/2025		Payee name Intuit			
Amount (\$) \$122.59 <input type="checkbox"/> Expenditure from corporate funds		Payee address; City; State; Zip Code 2535 Garcia Lane Mountain View, CA 94043			
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 QuickBooks online monthly fee	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought	

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: 7/10 Rpt:	2 FILER NAME Texas McDonald's Operators Association PAC, Inc.	3 Filer ID (Ethics Commission Filers) 00066524
4 Date 07/15/2025	5 Payee name Sue Elkins CPA	
6 Amount (\$) \$175.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 6400 N Santa Fe Ave Ste A Oklahoma City, OK 73116	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/15/2025	Payee name Sue Elkins CPA	
Amount (\$) \$175.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 6400 N Santa Fe Ave Ste A Oklahoma City, OK 73116	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/15/2025	Payee name Sue Elkins CPA	
Amount (\$) \$175.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 6400 N Santa Fe Ave Ste A Oklahoma City, OK 73116	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting fees
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: 8/10 Rpt:	2 FILER NAME Texas McDonald's Operators Association PAC, Inc.	3 Filer ID (Ethics Commission Filers) 00066524
4 Date 10/15/2025	5 Payee name Sue Elkins CPA	
6 Amount (\$) \$175.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 6400 N Santa Fe Ave Ste A Oklahoma City, OK 73116	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting fees
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 11/15/2025	Candidate/Officeholder name Office sought Office held	
Payee name Sue Elkins CPA		
Amount (\$) \$175.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 6400 N Santa Fe Ave Ste A Oklahoma City, OK 73116	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 12/15/2025	Candidate/Officeholder name Office sought Office held	
Payee name Sue Elkins CPA		
Amount (\$) \$175.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 6400 N Santa Fe Ave Ste A Oklahoma City, OK 73116	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Accounting fees
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

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: 9/10 Rpt:	2 FILER NAME Texas McDonald's Operators Association PAC, Inc.	3 Filer ID (Ethics Commission Filers) 00066524
4 Date 07/15/2025	5 Payee name Watts, Kimberly	
6 Amount (\$) \$600.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code REDACTED PER 254.0401, ELEC. CODE Lewisville, TX 75067	
8 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 Services rendered
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/15/2025	Payee name Watts, Kimberly	
Amount (\$) \$600.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code REDACTED PER 254.0401, ELEC. CODE Lewisville, TX 75067	
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 Services rendered
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/15/2025	Payee name Watts, Kimberly	
Amount (\$) \$600.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code REDACTED PER 254.0401, ELEC. CODE Lewisville, TX 75067	
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 Services rendered
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: 10/10 Rpt:	2 FILER NAME Texas McDonald's Operators Association PAC, Inc.	3 Filer ID (Ethics Commission Filers) 00066524
4 Date 10/15/2025	5 Payee name Watts, Kimberly	
6 Amount (\$) \$600.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code REDACTED PER 254.0401, ELEC. CODE Lewisville, TX 75067	
8 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 Services rendered
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/15/2025	Payee name Watts, Kimberly	
Amount (\$) \$600.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code REDACTED PER 254.0401, ELEC. CODE Lewisville, TX 75067	
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 Services rendered
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/15/2025	Payee name Watts, Kimberly	
Amount (\$) \$600.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code REDACTED PER 254.0401, ELEC. CODE Lewisville, TX 75067	
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 Services rendered
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held