

**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 # <input type="text"/> Amount <input type="text"/> Date Processed Date Imaged				
4 COMMITTEE ADDRESS 1001 E Tyler <input type="checkbox"/> Change of Address Athens, TX 75751						
5 CAMPAIGN TREASURER NAME	MS / MRS / MR Mr.			FIRST Kevin	MI	
	NICKNAME Lilly	LAST	SUFFIX			
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); 1001 E Tyler Athens, TX 75751		APT / SUITE #;	CITY;	STATE;	ZIP CODE
7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address	STREET OR PO BOX; 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 07/01/2025	Day	Year	Month 12/31/2025	Day	Year
11 ELECTION	ELECTION DATE Month 03/03/2026	Day	Year	Primary <input checked="" type="checkbox"/>	Runoff <input type="checkbox"/>	Other <input type="checkbox"/>
				General <input type="checkbox"/>	Special <input type="checkbox"/>	

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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
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		
<p>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.</p> <p>Mr. Kevin Lilly _____ Signature of Campaign Treasurer</p>		
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	
1. <input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	
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	
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 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 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 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 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 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	7 Amount of Contribution (\$) \$350.00
	6 Contributor address; City; State; Zip Code San Antonio, TX 78228	
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	Amount of Contribution (\$) \$350.00
	Contributor address; City; State; Zip Code San Antonio, TX 78228	
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	Amount of Contribution (\$) \$375.00
	Contributor address; City; State; Zip Code San Antonio, TX 78228	
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	Amount of Contribution (\$) \$350.00
	Contributor address; City; State; Zip Code San Antonio, TX 78228	
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	Amount of Contribution (\$) \$300.00
	Contributor address; City; State; Zip Code San Antonio, TX 78228	
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 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 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 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 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 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	7 Amount of Contribution (\$) \$325.00
	6 Contributor address; City; State; Zip Code San Antonio, TX 78228	
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	Amount of Contribution (\$) \$400.00
	Contributor address; City; State; Zip Code San Antonio, TX 78228	
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	Amount of Contribution (\$) \$400.00
	Contributor address; City; State; Zip Code San Antonio, TX 78228	
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	Amount of Contribution (\$) \$400.00
	Contributor address; City; State; Zip Code San Antonio, TX 78228	
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	Amount of Contribution (\$) \$400.00
	Contributor address; City; State; Zip Code San Antonio, TX 78228	
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 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 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 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 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 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	7 Amount of Contribution (\$) \$45.00
	6 Contributor address; City; State; Zip Code Kingwood, TX 77345	
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	Amount of Contribution (\$) \$45.00
	Contributor address; City; State; Zip Code Kingwood, TX 77345	
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	Amount of Contribution (\$) \$45.00
	Contributor address; City; State; Zip Code Kingwood, TX 77345	
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	Amount of Contribution (\$) \$45.00
	Contributor address; City; State; Zip Code Kingwood, TX 77345	
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	Amount of Contribution (\$) \$45.00
	Contributor address; City; State; Zip Code Houston, TX 77069	
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 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 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 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 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 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	7 Amount of Contribution (\$) \$30.00
	6 Contributor address; City; State; Zip Code Tomball, TX 77375	
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	Amount of Contribution (\$) \$30.00
	Contributor address; City; State; Zip Code Tomball, TX 77375	
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	Amount of Contribution (\$) \$30.00
	Contributor address; City; State; Zip Code Tomball, TX 77375	
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	Amount of Contribution (\$) \$30.00
	Contributor address; City; State; Zip Code Tomball, TX 77375	
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	Amount of Contribution (\$) \$30.00
	Contributor address; City; State; Zip Code Tomball, TX 77375	
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	7 Amount of Contribution (\$) \$30.00
	6 Contributor address; City; State; Zip Code Tomball, TX 77375	
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	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code Conroe, TX 77384	
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	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code Conroe, TX 77384	
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	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code Conroe, TX 77384	
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	Amount of Contribution (\$) \$15.00
	Contributor address; City; State; Zip Code Conroe, TX 77384	
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 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 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 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 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 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	7 Amount of Contribution (\$) \$75.00	
	6 Contributor address; City; State; Zip Code Cypress, TX 77433		
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	Amount of Contribution (\$) \$75.00	
	Contributor address; City; State; Zip Code Cypress, TX 77433		
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	Amount of Contribution (\$) \$75.00	
	Contributor address; City; State; Zip Code Cypress, TX 77433		
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	Amount of Contribution (\$) \$135.00	
	Contributor address; City; State; Zip Code Weatherford, TX 76087		
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	Amount of Contribution (\$) \$135.00	
	Contributor address; City; State; Zip Code Weatherford, TX 76087		
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	7 Amount of Contribution (\$) \$135.00
	6 Contributor address; City; State; Zip Code Weatherford, TX 76087	
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	Amount of Contribution (\$) \$135.00
	Contributor address; City; State; Zip Code Weatherford, TX 76087	
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	Amount of Contribution (\$) \$135.00
	Contributor address; City; State; Zip Code Weatherford, TX 76087	
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	Amount of Contribution (\$) \$135.00
	Contributor address; City; State; Zip Code Weatherford, TX 76087	
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	Amount of Contribution (\$) \$90.00
	Contributor address; City; State; Zip Code Conroe, TX 77384	
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	7 Amount of Contribution (\$) \$90.00
	6 Contributor address; City; State; Zip Code Conroe, TX 77384	
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	Amount of Contribution (\$) \$90.00
	Contributor address; City; State; Zip Code Conroe, TX 77384	
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	Amount of Contribution (\$) \$90.00
	Contributor address; City; State; Zip Code Conroe, TX 77384	
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	Amount of Contribution (\$) \$90.00
	Contributor address; City; State; Zip Code Conroe, TX 77384	
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	Amount of Contribution (\$) \$90.00
	Contributor address; City; State; Zip Code Conroe, TX 77384	
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	7 Amount of Contribution (\$) \$135.00
	6 Contributor address; City; State; Zip Code Missouri City, TX 77459	
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	Amount of Contribution (\$) \$30.00
	Contributor address; City; State; Zip Code Rossharon, TX 77583	
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	Amount of Contribution (\$) \$30.00
	Contributor address; City; State; Zip Code Rossharon, TX 77583	
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	Amount of Contribution (\$) \$30.00
	Contributor address; City; State; Zip Code Rossharon, TX 77583	
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	Amount of Contribution (\$) \$30.00
	Contributor address; City; State; Zip Code Rossharon, TX 77583	
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	7 Amount of Contribution (\$) \$30.00
	6 Contributor address; City; State; Zip Code Rosharon, TX 77583	
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	Amount of Contribution (\$) \$30.00
	Contributor address; City; State; Zip Code Rosharon, TX 77583	
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	Amount of Contribution (\$) \$950.00
	Contributor address; City; State; Zip Code Midland, TX 79705	
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	Amount of Contribution (\$) \$950.00
	Contributor address; City; State; Zip Code Midland, TX 79705	
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	Amount of Contribution (\$) \$950.00
	Contributor address; City; State; Zip Code Midland, TX 79705	
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	7 Amount of Contribution (\$) \$950.00	
	6 Contributor address; City; State; Zip Code Midland, TX 79705		
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	Amount of Contribution (\$) \$950.00	
	Contributor address; City; State; Zip Code Midland, TX 79705		
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	Amount of Contribution (\$) \$950.00	
	Contributor address; City; State; Zip Code Midland, TX 79705		
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	Amount of Contribution (\$) \$45.00	
	Contributor address; City; State; Zip Code Dayton, TX 77535		
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	Amount of Contribution (\$) \$45.00	
	Contributor address; City; State; Zip Code Dayton, TX 77535		
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 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 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 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 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 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	7 Amount of Contribution (\$) \$60.00	
	6 Contributor address; City; State; Zip Code Kingwood, TX 77325		
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	Amount of Contribution (\$) \$60.00	
	Contributor address; City; State; Zip Code Kingwood, TX 77325		
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	Amount of Contribution (\$) \$60.00	
	Contributor address; City; State; Zip Code Kingwood, TX 77325		
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	Amount of Contribution (\$) \$60.00	
	Contributor address; City; State; Zip Code Kingwood, TX 77325		
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	Amount of Contribution (\$) \$60.00	
	Contributor address; City; State; Zip Code Kingwood, TX 77325		
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	7 Amount of Contribution (\$) \$60.00
	6 Contributor address; City; State; Zip Code Kingwood, TX 77325	
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	Amount of Contribution (\$) \$165.00
	Contributor address; City; State; Zip Code Rockwall, TX 75032	
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	Amount of Contribution (\$) \$165.00
	Contributor address; City; State; Zip Code Rockwall, TX 75032	
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	Amount of Contribution (\$) \$165.00
	Contributor address; City; State; Zip Code Rockwall, TX 75032	
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	Amount of Contribution (\$) \$165.00
	Contributor address; City; State; Zip Code Rockwall, TX 75032	
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

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	7 Amount of Contribution (\$) \$45.00
	6 Contributor address; City; State; Zip Code Houston, TX 77092	
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	Amount of Contribution (\$) \$45.00
	Contributor address; City; State; Zip Code Houston, TX 77092	
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	Amount of Contribution (\$) \$45.00
	Contributor address; City; State; Zip Code Houston, TX 77092	
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	Amount of Contribution (\$) \$125.00
	Contributor address; City; State; Zip Code Levelland, TX 79336	
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	Amount of Contribution (\$) \$125.00
	Contributor address; City; State; Zip Code Levelland, TX 79336	
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	7 Amount of Contribution (\$) \$125.00
	6 Contributor address; City; State; Zip Code Levelland, TX 79336	
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	Amount of Contribution (\$) \$125.00
	Contributor address; City; State; Zip Code Levelland, TX 79336	
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	Amount of Contribution (\$) \$125.00
	Contributor address; City; State; Zip Code Levelland, TX 79336	
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	Amount of Contribution (\$) \$125.00
	Contributor address; City; State; Zip Code Levelland, TX 79336	
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	Amount of Contribution (\$) \$200.00
	Contributor address; City; State; Zip Code Lampasas, TX 76550	
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	7 Amount of Contribution (\$) \$200.00	
	6 Contributor address; City; State; Zip Code Lampasas, TX 76550		
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	Amount of Contribution (\$) \$200.00	
	Contributor address; City; State; Zip Code Lampasas, TX 76550		
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	Amount of Contribution (\$) \$200.00	
	Contributor address; City; State; Zip Code Lampasas, TX 76550		
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	Amount of Contribution (\$) \$200.00	
	Contributor address; City; State; Zip Code Lampasas, TX 76550		
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	Amount of Contribution (\$) \$225.00	
	Contributor address; City; State; Zip Code Lampasas, TX 76550		
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	7 Amount of Contribution (\$) \$225.00
	6 Contributor address; City; State; Zip Code Lampasas, TX 76550	
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	Amount of Contribution (\$) \$225.00
	Contributor address; City; State; Zip Code Lampasas, TX 76550	
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	Amount of Contribution (\$) \$225.00
	Contributor address; City; State; Zip Code Lampasas, TX 76550	
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	Amount of Contribution (\$) \$225.00
	Contributor address; City; State; Zip Code Lampasas, TX 76550	
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	Amount of Contribution (\$) \$225.00
	Contributor address; City; State; Zip Code Lampasas, TX 76550	
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	7 Amount of Contribution (\$) \$225.00	
	6 Contributor address; City; State; Zip Code Lampasas, TX 76550		
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	Amount of Contribution (\$) \$225.00	
	Contributor address; City; State; Zip Code Lampasas, TX 76550		
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	Amount of Contribution (\$) \$225.00	
	Contributor address; City; State; Zip Code Lampasas, TX 76550		
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	Amount of Contribution (\$) \$75.00	
	Contributor address; City; State; Zip Code San Antonio, TX 78221		
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	Amount of Contribution (\$) \$75.00	
	Contributor address; City; State; Zip Code San Antonio, TX 78221		
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	7 Amount of Contribution (\$) \$75.00
	6 Contributor address; City; State; Zip Code San Antonio, TX 78221	
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	Amount of Contribution (\$) \$75.00
	Contributor address; City; State; Zip Code San Antonio, TX 78221	
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	Amount of Contribution (\$) \$75.00
	Contributor address; City; State; Zip Code San Antonio, TX 78221	
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	Amount of Contribution (\$) \$75.00
	Contributor address; City; State; Zip Code San Antonio, TX 78221	
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	Amount of Contribution (\$) \$75.00
	Contributor address; City; State; Zip Code San Antonio, TX 78221	
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	7 Amount of Contribution (\$) \$100.00	
	6 Contributor address; City; State; Zip Code Clovis, NM 88101		
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	Amount of Contribution (\$) \$100.00	
	Contributor address; City; State; Zip Code Clovis, NM 88101		
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	Amount of Contribution (\$) \$100.00	
	Contributor address; City; State; Zip Code Clovis, NM 88101		
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	Amount of Contribution (\$) \$100.00	
	Contributor address; City; State; Zip Code Clovis, NM 88101		
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	Amount of Contribution (\$) \$100.00	
	Contributor address; City; State; Zip Code Clovis, NM 88101		
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	7 Amount of Contribution (\$) \$100.00
	6 Contributor address; City; State; Zip Code Clovis, NM 88101	
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	Amount of Contribution (\$) \$750.00
	Contributor address; City; State; Zip Code Amarillo, TX 79119	
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	Amount of Contribution (\$) \$750.00
	Contributor address; City; State; Zip Code Amarillo, TX 79119	
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	Amount of Contribution (\$) \$750.00
	Contributor address; City; State; Zip Code Amarillo, TX 79119	
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	Amount of Contribution (\$) \$750.00
	Contributor address; City; State; Zip Code Amarillo, TX 79119	
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	7 Amount of Contribution (\$) \$750.00	
	6 Contributor address; City; State; Zip Code Amarillo, TX 79119		
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	Amount of Contribution (\$) \$750.00	
	Contributor address; City; State; Zip Code Amarillo, TX 79119		
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	Amount of Contribution (\$) \$225.00	
	Contributor address; City; State; Zip Code Laredo, TX 78043		
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	Amount of Contribution (\$) \$225.00	
	Contributor address; City; State; Zip Code Laredo, TX 78043		
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	Amount of Contribution (\$) \$225.00	
	Contributor address; City; State; Zip Code Laredo, TX 78043		
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	7 Amount of Contribution (\$) \$225.00	
	6 Contributor address; City; State; Zip Code Laredo, TX 78043		
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	Amount of Contribution (\$) \$225.00	
	Contributor address; City; State; Zip Code Laredo, TX 78043		
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	Amount of Contribution (\$) \$225.00	
	Contributor address; City; State; Zip Code Laredo, TX 78043		
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	Amount of Contribution (\$) \$225.00	
	Contributor address; City; State; Zip Code Laredo, TX 78043		
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	Amount of Contribution (\$) \$90.00	
	Contributor address; City; State; Zip Code Brownsville, TX 78520		
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	7 Amount of Contribution (\$) \$50.00			
	6 Contributor address; City; State; Zip Code Brownsville, TX 78520				
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	Amount of Contribution (\$) \$50.00			
	Contributor address; City; State; Zip Code Brownsville, TX 78520				
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	Amount of Contribution (\$) \$50.00			
	Contributor address; City; State; Zip Code Brownsville, TX 78520				
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	Amount of Contribution (\$) \$50.00			
	Contributor address; City; State; Zip Code Brownsville, TX 78520				
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	Amount of Contribution (\$) \$50.00			
	Contributor address; City; State; Zip Code Brownsville, TX 78520				
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 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 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 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 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 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	7 Amount of Contribution (\$) \$325.00
	6 Contributor address; City; State; Zip Code McAllen, TX 78501	
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	Amount of Contribution (\$) \$325.00
	Contributor address; City; State; Zip Code McAllen, TX 78501	
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	Amount of Contribution (\$) \$325.00
	Contributor address; City; State; Zip Code McAllen, TX 78501	
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	Amount of Contribution (\$) \$325.00
	Contributor address; City; State; Zip Code McAllen, TX 78501	
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	Amount of Contribution (\$) \$75.00
	Contributor address; City; State; Zip Code Laredo, TX 78041	
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	7 Amount of Contribution (\$) \$75.00
	6 Contributor address; City; State; Zip Code Laredo, TX 78041	
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	Amount of Contribution (\$) \$75.00
	Contributor address; City; State; Zip Code Laredo, TX 78041	
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	Amount of Contribution (\$) \$75.00
	Contributor address; City; State; Zip Code Laredo, TX 78041	
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	Amount of Contribution (\$) \$75.00
	Contributor address; City; State; Zip Code Laredo, TX 78041	
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	Amount of Contribution (\$) \$75.00
	Contributor address; City; State; Zip Code Laredo, TX 78041	
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	7 Amount of Contribution (\$) \$75.00
	6 Contributor address; City; State; Zip Code Laredo, TX 78041	
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	Amount of Contribution (\$) \$75.00
	Contributor address; City; State; Zip Code Houston, TX 77205	
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	Amount of Contribution (\$) \$75.00
	Contributor address; City; State; Zip Code Houston, TX 77205	
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	Amount of Contribution (\$) \$75.00
	Contributor address; City; State; Zip Code Houston, TX 77205	
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	Amount of Contribution (\$) \$75.00
	Contributor address; City; State; Zip Code Houston, TX 77205	
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 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 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 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 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 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	7 Amount of Contribution (\$) \$425.00	
	6 Contributor address; City; State; Zip Code Beaumont, TX 77702		
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	Amount of Contribution (\$) \$425.00	
	Contributor address; City; State; Zip Code Beaumont, TX 77702		
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	Amount of Contribution (\$) \$425.00	
	Contributor address; City; State; Zip Code Beaumont, TX 77702		
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	Amount of Contribution (\$) \$425.00	
	Contributor address; City; State; Zip Code Beaumont, TX 77702		
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	Amount of Contribution (\$) \$375.00	
	Contributor address; City; State; Zip Code Corpus Christi, TX 78414		
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	7 Amount of Contribution (\$) \$375.00	
	6 Contributor address; City; State; Zip Code Corpus Christi, TX 78414		
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	Amount of Contribution (\$) \$300.00	
	Contributor address; City; State; Zip Code Corpus Christi, TX 78414		
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	Amount of Contribution (\$) \$300.00	
	Contributor address; City; State; Zip Code Corpus Christi, TX 78414		
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	Amount of Contribution (\$) \$300.00	
	Contributor address; City; State; Zip Code Corpus Christi, TX 78414		
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	Amount of Contribution (\$) \$300.00	
	Contributor address; City; State; Zip Code Corpus Christi, TX 78414		
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	7 Amount of Contribution (\$) \$300.00
	6 Contributor address; City; State; Zip Code Corpus Christi, TX 78414	
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	Amount of Contribution (\$) \$75.00
	Contributor address; City; State; Zip Code Hutto, TX 78634	
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	Amount of Contribution (\$) \$75.00
	Contributor address; City; State; Zip Code Hutto, TX 78634	
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	Amount of Contribution (\$) \$75.00
	Contributor address; City; State; Zip Code Hutto, TX 78634	
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	Amount of Contribution (\$) \$75.00
	Contributor address; City; State; Zip Code Hutto, TX 78634	
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 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 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 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 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 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 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 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 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 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 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 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 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 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 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 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	7 Amount of Contribution (\$) \$75.00			
	6 Contributor address; City; State; Zip Code Austin, TX 78754				
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	Amount of Contribution (\$) \$75.00			
	Contributor address; City; State; Zip Code Austin, TX 78754				
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	Amount of Contribution (\$) \$75.00			
	Contributor address; City; State; Zip Code Austin, TX 78754				
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	Amount of Contribution (\$) \$125.00			
	Contributor address; City; State; Zip Code Austin, TX 78754				
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	Amount of Contribution (\$) \$125.00			
	Contributor address; City; State; Zip Code Austin, TX 78754				
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	7 Amount of Contribution (\$) \$125.00	
	6 Contributor address; City; State; Zip Code Austin, TX 78754		
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	Amount of Contribution (\$) \$125.00	
	Contributor address; City; State; Zip Code Austin, TX 78754		
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	Amount of Contribution (\$) \$125.00	
	Contributor address; City; State; Zip Code Austin, TX 78754		
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	Amount of Contribution (\$) \$125.00	
	Contributor address; City; State; Zip Code Austin, TX 78754		
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	Amount of Contribution (\$) \$125.00	
	Contributor address; City; State; Zip Code Austin, TX 78754		
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

<p>The Instruction Guide explains how to complete this form.</p>				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	7 Amount of Contribution (\$) \$60.00		
	6 Contributor address; City; State; Zip Code Flower Mound, TX 75027			
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	Amount of Contribution (\$) \$125.00		
	Contributor address; City; State; Zip Code Flower Mound, TX 75027			
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	Amount of Contribution (\$) \$125.00		
	Contributor address; City; State; Zip Code Flower Mound, TX 75027			
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	Amount of Contribution (\$) \$60.00		
	Contributor address; City; State; Zip Code Flower Mound, TX 75027			
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	Amount of Contribution (\$) \$125.00		
	Contributor address; City; State; Zip Code Flower Mound, TX 75027			
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 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 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 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 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 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 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 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 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 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 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 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 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 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 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 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	7 Amount of Contribution (\$) \$225.00	
	6 Contributor address; City; State; Zip Code Katy, TX 77494		
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	Amount of Contribution (\$) \$300.00	
	Contributor address; City; State; Zip Code Katy, TX 77494		
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	Amount of Contribution (\$) \$350.00	
	Contributor address; City; State; Zip Code Katy, TX 77494		
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	Amount of Contribution (\$) \$250.00	
	Contributor address; City; State; Zip Code Katy, TX 77494		
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	Amount of Contribution (\$) \$350.00	
	Contributor address; City; State; Zip Code Katy, TX 77494		
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	7 Amount of Contribution (\$) \$225.00	
	6 Contributor address; City; State; Zip Code Katy, TX 77494		
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	Amount of Contribution (\$) \$30.00	
	Contributor address; City; State; Zip Code Spring, TX 77391		
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	Amount of Contribution (\$) \$30.00	
	Contributor address; City; State; Zip Code Spring, TX 77391		
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	Amount of Contribution (\$) \$30.00	
	Contributor address; City; State; Zip Code Spring, TX 77391		
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	Amount of Contribution (\$) \$30.00	
	Contributor address; City; State; Zip Code Spring, TX 77391		
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 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 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)
Date 08/01/2025	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)
Date 08/26/2025	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)
Date 09/26/2025	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)

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	7 Amount of Contribution (\$) \$165.00	
	6 Contributor address; City; State; Zip Code Cypress, TX 77429		
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	Amount of Contribution (\$) \$165.00	
	Contributor address; City; State; Zip Code Cypress, TX 77429		
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	Amount of Contribution (\$) \$165.00	
	Contributor address; City; State; Zip Code Cypress, TX 77429		
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	Amount of Contribution (\$) \$75.00	
	Contributor address; City; State; Zip Code Waco, TX 76703		
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	Amount of Contribution (\$) \$75.00	
	Contributor address; City; State; Zip Code Waco, TX 76703		
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	7 Amount of Contribution (\$) \$75.00
	6 Contributor address; City; State; Zip Code Waco, TX 76703	
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	Amount of Contribution (\$) \$75.00
	Contributor address; City; State; Zip Code Waco, TX 76703	
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	Amount of Contribution (\$) \$75.00
	Contributor address; City; State; Zip Code Waco, TX 76703	
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	Amount of Contribution (\$) \$75.00
	Contributor address; City; State; Zip Code Waco, TX 76703	
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	Amount of Contribution (\$) \$75.00
	Contributor address; City; State; Zip Code Waco, TX 76703	
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 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 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 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 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 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 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 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 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 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 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	7 Amount of Contribution (\$) \$150.00	
	6 Contributor address; City; State; Zip Code Houston, TX 77055		
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	Amount of Contribution (\$) \$150.00	
	Contributor address; City; State; Zip Code Houston, TX 77055		
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	Amount of Contribution (\$) \$45.00	
	Contributor address; City; State; Zip Code Houston, TX 77055		
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	Amount of Contribution (\$) \$45.00	
	Contributor address; City; State; Zip Code Houston, TX 77055		
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	Amount of Contribution (\$) \$45.00	
	Contributor address; City; State; Zip Code Houston, TX 77055		
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	7 Amount of Contribution (\$) \$45.00
	6 Contributor address; City; State; Zip Code Houston, TX 77055	
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	Amount of Contribution (\$) \$45.00
	Contributor address; City; State; Zip Code Houston, TX 77055	
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	Amount of Contribution (\$) \$45.00
	Contributor address; City; State; Zip Code Houston, TX 77055	
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	Amount of Contribution (\$) \$45.00
	Contributor address; City; State; Zip Code Southlake, TX 76092	
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	Amount of Contribution (\$) \$45.00
	Contributor address; City; State; Zip Code Southlake, TX 76092	
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 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 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 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 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 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	7 Amount of Contribution (\$) \$125.00
	6 Contributor address; City; State; Zip Code Abilene, TX 79602	
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	Amount of Contribution (\$) \$125.00
	Contributor address; City; State; Zip Code Abilene, TX 79602	
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	Amount of Contribution (\$) \$125.00
	Contributor address; City; State; Zip Code Abilene, TX 79602	
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	Amount of Contribution (\$) \$125.00
	Contributor address; City; State; Zip Code Abilene, TX 79602	
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	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Abilene, TX 79602	
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 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 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 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 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 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	7 Amount of Contribution (\$) \$390.00
	6 Contributor address; City; State; Zip Code Frisco, TX 75034	
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	Amount of Contribution (\$) \$300.00
	Contributor address; City; State; Zip Code San Antonio, TX 78228	
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	Amount of Contribution (\$) \$300.00
	Contributor address; City; State; Zip Code San Antonio, TX 78228	
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	Amount of Contribution (\$) \$300.00
	Contributor address; City; State; Zip Code San Antonio, TX 78228	
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	Amount of Contribution (\$) \$300.00
	Contributor address; City; State; Zip Code San Antonio, TX 78228	
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	7 Amount of Contribution (\$) \$300.00	
	6 Contributor address; City; State; Zip Code San Antonio, TX 78228		
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	Amount of Contribution (\$) \$325.00	
	Contributor address; City; State; Zip Code San Antonio, TX 78228		
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	Amount of Contribution (\$) \$325.00	
	Contributor address; City; State; Zip Code San Antonio, TX 78228		
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	Amount of Contribution (\$) \$180.00	
	Contributor address; City; State; Zip Code Fort Worth, TX 76116		
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	Amount of Contribution (\$) \$180.00	
	Contributor address; City; State; Zip Code Fort Worth, TX 76116		
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 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 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 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 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 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 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 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 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 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 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	7 Amount of Contribution (\$) \$570.00
	6 Contributor address; City; State; Zip Code Pasadena, TX 77505	
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	Amount of Contribution (\$) \$570.00
	Contributor address; City; State; Zip Code Pasadena, TX 77505	
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	Amount of Contribution (\$) \$570.00
	Contributor address; City; State; Zip Code Pasadena, TX 77505	
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	Amount of Contribution (\$) \$570.00
	Contributor address; City; State; Zip Code Pasadena, TX 77505	
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	Amount of Contribution (\$) \$570.00
	Contributor address; City; State; Zip Code Pasadena, TX 77505	
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	7 Amount of Contribution (\$) \$570.00
	6 Contributor address; City; State; Zip Code Pasadena, TX 77505	
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	Amount of Contribution (\$) \$150.00
	Contributor address; City; State; Zip Code Houston, TX 77024	
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	Amount of Contribution (\$) \$150.00
	Contributor address; City; State; Zip Code Houston, TX 77024	
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	Amount of Contribution (\$) \$150.00
	Contributor address; City; State; Zip Code Houston, TX 77024	
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	Amount of Contribution (\$) \$150.00
	Contributor address; City; State; Zip Code Houston, TX 77024	
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	7 Amount of Contribution (\$) \$75.00
	6 Contributor address; City; State; Zip Code Webster, TX 77598	
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	Amount of Contribution (\$) \$75.00
	Contributor address; City; State; Zip Code Webster, TX 77598	
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	Amount of Contribution (\$) \$75.00
	Contributor address; City; State; Zip Code Webster, TX 77598	
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	Amount of Contribution (\$) \$150.00
	Contributor address; City; State; Zip Code Richland Hills, TX 76118	
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	Amount of Contribution (\$) \$200.00
	Contributor address; City; State; Zip Code Richland Hills, TX 76118	
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	7 Amount of Contribution (\$) \$200.00	
	6 Contributor address; City; State; Zip Code Richland Hills, TX 76118		
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	Amount of Contribution (\$) \$150.00	
	Contributor address; City; State; Zip Code Richland Hills, TX 76118		
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	Amount of Contribution (\$) \$200.00	
	Contributor address; City; State; Zip Code Richland Hills, TX 76118		
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	Amount of Contribution (\$) \$150.00	
	Contributor address; City; State; Zip Code Richland Hills, TX 76118		
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	Amount of Contribution (\$) \$200.00	
	Contributor address; City; State; Zip Code Richland Hills, TX 76118		
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	7 Amount of Contribution (\$) \$150.00	
	6 Contributor address; City; State; Zip Code Richland Hills, TX 76118		
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	Amount of Contribution (\$) \$200.00	
	Contributor address; City; State; Zip Code Richland Hills, TX 76118		
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	Amount of Contribution (\$) \$150.00	
	Contributor address; City; State; Zip Code Richland Hills, TX 76118		
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	Amount of Contribution (\$) \$165.00	
	Contributor address; City; State; Zip Code Richland Hills, TX 76118		
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	Amount of Contribution (\$) \$200.00	
	Contributor address; City; State; Zip Code Richland Hills, TX 76118		
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	7 Amount of Contribution (\$) \$200.00
	6 Contributor address; City; State; Zip Code Richland Hills, TX 76118	
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	Amount of Contribution (\$) \$45.00
	Contributor address; City; State; Zip Code Houston, TX 77069	
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	Amount of Contribution (\$) \$45.00
	Contributor address; City; State; Zip Code Houston, TX 77069	
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	Amount of Contribution (\$) \$45.00
	Contributor address; City; State; Zip Code Houston, TX 77069	
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	Amount of Contribution (\$) \$45.00
	Contributor address; City; State; Zip Code Houston, TX 77069	
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	7 Amount of Contribution (\$) \$45.00
	6 Contributor address; City; State; Zip Code Houston, TX 77069	
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	Amount of Contribution (\$) \$45.00
	Contributor address; City; State; Zip Code Houston, TX 77069	
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	Amount of Contribution (\$) \$135.00
	Contributor address; City; State; Zip Code Richardson, TX 75080	
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	Amount of Contribution (\$) \$135.00
	Contributor address; City; State; Zip Code Richardson, TX 75080	
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	Amount of Contribution (\$) \$135.00
	Contributor address; City; State; Zip Code Richardson, TX 75080	
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 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 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 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 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 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	7 Amount of Contribution (\$) \$50.00
	6 Contributor address; City; State; Zip Code Vista, CA 92084	
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	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Vista, CA 92084	
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	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Vista, CA 92084	
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	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Vista, CA 92084	
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	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Vista, CA 92084	
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 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 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 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 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 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	7 Amount of Contribution (\$) \$25.00	
	6 Contributor address; City; State; Zip Code Bastrop, TX 78602		
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	Amount of Contribution (\$) \$25.00	
	Contributor address; City; State; Zip Code Bastrop, TX 78602		
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	Amount of Contribution (\$) \$175.00	
	Contributor address; City; State; Zip Code Bastrop, TX 78602		
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	Amount of Contribution (\$) \$175.00	
	Contributor address; City; State; Zip Code Bastrop, TX 78602		
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	Amount of Contribution (\$) \$175.00	
	Contributor address; City; State; Zip Code Bastrop, TX 78602		
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	7 Amount of Contribution (\$) \$175.00	
	6 Contributor address; City; State; Zip Code Bastrop, TX 78602		
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	Amount of Contribution (\$) \$175.00	
	Contributor address; City; State; Zip Code Bastrop, TX 78602		
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	Amount of Contribution (\$) \$175.00	
	Contributor address; City; State; Zip Code Bastrop, TX 78602		
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	Amount of Contribution (\$) \$175.00	
	Contributor address; City; State; Zip Code Bastrop, TX 78602		
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	Amount of Contribution (\$) \$240.00	
	Contributor address; City; State; Zip Code Colleyville, TX 76034		
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	7 Amount of Contribution (\$) \$240.00
	6 Contributor address; City; State; Zip Code Colleyville, TX 76034	
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	Amount of Contribution (\$) \$240.00
	Contributor address; City; State; Zip Code Colleyville, TX 76034	
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	Amount of Contribution (\$) \$240.00
	Contributor address; City; State; Zip Code Colleyville, TX 76034	
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	Amount of Contribution (\$) \$240.00
	Contributor address; City; State; Zip Code Colleyville, TX 76034	
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	Amount of Contribution (\$) \$240.00
	Contributor address; City; State; Zip Code Colleyville, TX 76034	
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	7 Amount of Contribution (\$) \$330.00	
	6 Contributor address; City; State; Zip Code Athens, TX 75751		
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	Amount of Contribution (\$) \$330.00	
	Contributor address; City; State; Zip Code Athens, TX 75751		
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	Amount of Contribution (\$) \$330.00	
	Contributor address; City; State; Zip Code Athens, TX 75751		
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	Amount of Contribution (\$) \$330.00	
	Contributor address; City; State; Zip Code Athens, TX 75751		
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	Amount of Contribution (\$) \$330.00	
	Contributor address; City; State; Zip Code Athens, TX 75751		
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	7 Amount of Contribution (\$) \$330.00	
	6 Contributor address; City; State; Zip Code Athens, TX 75751		
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	Amount of Contribution (\$) \$75.00	
	Contributor address; City; State; Zip Code Marble Falls, TX 78654		
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	Amount of Contribution (\$) \$75.00	
	Contributor address; City; State; Zip Code Marble Falls, TX 78654		
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	Amount of Contribution (\$) \$75.00	
	Contributor address; City; State; Zip Code Marble Falls, TX 78654		
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	Amount of Contribution (\$) \$75.00	
	Contributor address; City; State; Zip Code Marble Falls, TX 78654		
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	7 Amount of Contribution (\$) \$75.00
	6 Contributor address; City; State; Zip Code Marble Falls, TX 78654	
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	Amount of Contribution (\$) \$75.00
	Contributor address; City; State; Zip Code Marble Falls, TX 78654	
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	Amount of Contribution (\$) \$75.00
	Contributor address; City; State; Zip Code Marble Falls, TX 78654	
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	Amount of Contribution (\$) \$60.00
	Contributor address; City; State; Zip Code Fort Worth, TX 76182	
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	Amount of Contribution (\$) \$60.00
	Contributor address; City; State; Zip Code Fort Worth, TX 76182	
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	7 Amount of Contribution (\$) \$60.00
	6 Contributor address; City; State; Zip Code Fort Worth, TX 76182	
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	Amount of Contribution (\$) \$60.00
	Contributor address; City; State; Zip Code Fort Worth, TX 76182	
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	Amount of Contribution (\$) \$60.00
	Contributor address; City; State; Zip Code Fort Worth, TX 76182	
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	Amount of Contribution (\$) \$60.00
	Contributor address; City; State; Zip Code Fort Worth, TX 76182	
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	Amount of Contribution (\$) \$30.00
	Contributor address; City; State; Zip Code Plano, TX 75024	
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	7 Amount of Contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code Jonestown, TX 78645	
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	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Jonestown, TX 78645	
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	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Jonestown, TX 78645	
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	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Jonestown, TX 78645	
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	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Jonestown, TX 78645	
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 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 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 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 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 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	7 Amount of Contribution (\$) \$425.00
	6 Contributor address; City; State; Zip Code Jonestown, TX 78645	
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	Amount of Contribution (\$) \$425.00
	Contributor address; City; State; Zip Code Jonestown, TX 78645	
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	Amount of Contribution (\$) \$425.00
	Contributor address; City; State; Zip Code Jonestown, TX 78645	
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	Amount of Contribution (\$) \$425.00
	Contributor address; City; State; Zip Code Jonestown, TX 78645	
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	Amount of Contribution (\$) \$30.00
	Contributor address; City; State; Zip Code Humble, TX 77346	
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	7 Amount of Contribution (\$) \$30.00
	6 Contributor address; City; State; Zip Code Humble, TX 77346	
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	Amount of Contribution (\$) \$30.00
	Contributor address; City; State; Zip Code Humble, TX 77346	
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	Amount of Contribution (\$) \$30.00
	Contributor address; City; State; Zip Code Humble, TX 77346	
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	Amount of Contribution (\$) \$30.00
	Contributor address; City; State; Zip Code Humble, TX 77346	
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	Amount of Contribution (\$) \$30.00
	Contributor address; City; State; Zip Code Humble, TX 77346	
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	7 Amount of Contribution (\$) \$250.00
	6 Contributor address; City; State; Zip Code Laredo, TX 78041	
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	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Laredo, TX 78041	
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	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Laredo, TX 78041	
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	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Laredo, TX 78041	
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	Amount of Contribution (\$) \$250.00
	Contributor address; City; State; Zip Code Laredo, TX 78041	
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	7 Amount of Contribution (\$) \$275.00
	6 Contributor address; City; State; Zip Code Laredo, TX 78041	
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	Amount of Contribution (\$) \$275.00
	Contributor address; City; State; Zip Code Laredo, TX 78041	
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	Amount of Contribution (\$) \$45.00
	Contributor address; City; State; Zip Code Altus, OK 73521	
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	Amount of Contribution (\$) \$45.00
	Contributor address; City; State; Zip Code Altus, OK 73521	
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	Amount of Contribution (\$) \$45.00
	Contributor address; City; State; Zip Code Altus, OK 73521	
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 Martin, Kevin	<input type="checkbox"/> out-of-state PAC (ID#: _____)	7 Amount of Contribution (\$) \$45.00	
	6 Contributor address; City; State; Zip Code Altus, OK 73521			
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self		
Date 11/21/2025	Full name of contributor Martin, Kevin	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution (\$) \$45.00	
	Contributor address; City; State; Zip Code Altus, OK 73521			
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self		
Date 12/16/2025	Full name of contributor Martin, Kevin	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution (\$) \$45.00	
	Contributor address; City; State; Zip Code Altus, OK 73521			
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self		
Date 07/16/2025	Full name of contributor Massey, Daniel	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution (\$) \$210.00	
	Contributor address; City; State; Zip Code Coppell, TX 75019			
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self		
Date 08/15/2025	Full name of contributor Massey, Daniel	<input type="checkbox"/> out-of-state PAC (ID#: _____)	Amount of Contribution (\$) \$210.00	
	Contributor address; City; State; Zip Code Coppell, TX 75019			
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 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 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 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 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 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 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 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 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 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 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 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	Amount of Contribution (\$) \$125.00	
	Contributor address; City; State; Zip Code San Antonio, TX 78257			
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	Amount of Contribution (\$) \$125.00		
	Contributor address; City; State; Zip Code San Antonio, TX 78257			
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	Amount of Contribution (\$) \$125.00		
	Contributor address; City; State; Zip Code San Antonio, TX 78257			
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	Amount of Contribution (\$) \$125.00		
	Contributor address; City; State; Zip Code San Antonio, TX 78257			
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	7 Amount of Contribution (\$) \$285.00	
	6 Contributor address; City; State; Zip Code Tomball, TX 77373		
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	Amount of Contribution (\$) \$175.00	
	Contributor address; City; State; Zip Code Tomball, TX 77373		
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	Amount of Contribution (\$) \$175.00	
	Contributor address; City; State; Zip Code Tomball, TX 77373		
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	Amount of Contribution (\$) \$285.00	
	Contributor address; City; State; Zip Code Tomball, TX 77373		
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	Amount of Contribution (\$) \$175.00	
	Contributor address; City; State; Zip Code Tomball, TX 77373		
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: 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 McKinney, Steve 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 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 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 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 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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 104/159 Rpt: 107/172
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#: _____) Mendoza, Frank	7 Amount of Contribution (\$) \$200.00	
	6 Contributor address; City; State; Zip Code Del Rio, TX 78840		
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	Amount of Contribution (\$) \$200.00	
	Contributor address; City; State; Zip Code Del Rio, TX 78840		
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	Amount of Contribution (\$) \$60.00	
	Contributor address; City; State; Zip Code Houston, TX 77092		
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	Amount of Contribution (\$) \$60.00	
	Contributor address; City; State; Zip Code Houston, TX 77092		
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	Amount of Contribution (\$) \$60.00	
	Contributor address; City; State; Zip Code Houston, TX 77092		
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: 105/159 Rpt: 108/172
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#: _____) Moore, Carla	7 Amount of Contribution (\$) \$60.00
	6 Contributor address; City; State; Zip Code Houston, TX 77092	
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	Amount of Contribution (\$) \$60.00
	Contributor address; City; State; Zip Code Houston, TX 77092	
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	Amount of Contribution (\$) \$60.00
	Contributor address; City; State; Zip Code Houston, TX 77092	
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	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Houston, TX 77092	
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	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code Houston, TX 77092	
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: 106/159 Rpt: 109/172
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 Moore, Kevin	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		
Date 08/26/2025	Full name of contributor Moore, Kevin	Contributor address; City; State; Zip Code Houston, TX 77092	Amount of Contribution (\$) \$90.00
	Principal occupation / Job title (See Instructions) Owner/Operator		
Date 09/02/2025	Full name of contributor Moore, Kevin	Contributor address; City; State; Zip Code Houston, TX 77092	Amount of Contribution (\$) \$50.00
	Principal occupation / Job title (See Instructions) Owner/Operator		
Date 09/19/2025	Full name of contributor Moore, Kevin	Contributor address; City; State; Zip Code Houston, TX 77092	Amount of Contribution (\$) \$50.00
	Principal occupation / Job title (See Instructions) Owner/Operator		
Date 09/26/2025	Full name of contributor Moore, Kevin	Contributor address; City; State; Zip Code Houston, TX 77092	Amount of Contribution (\$) \$90.00
	Principal occupation / Job title (See Instructions) Owner/Operator		

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 107/159 Rpt: 110/172
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 Moore, Kevin 6 Contributor address; City; State; Zip Code Houston, TX 77092	7 Amount of Contribution (\$) \$50.00
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#: _____) Moore, Kevin 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 11/26/2025	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 (\$) \$90.00
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#: _____) 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 12/30/2025	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 (\$) \$90.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 109/159 Rpt: 112/172
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#: _____) Moss, Daniel 6 Contributor address; City; State; Zip Code Stafford, TX 77477	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#: _____) 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

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.				1 Total pages Schedule A1: Sch: 110/159 Rpt: 113/172	
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#: _____) Moss, Dave	7 Amount of Contribution (\$) \$30.00			
	6 Contributor address; City; State; Zip Code Stafford, TX 77477				
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	Amount of Contribution (\$) \$30.00			
	Contributor address; City; State; Zip Code Stafford, TX 77477				
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	Amount of Contribution (\$) \$30.00			
	Contributor address; City; State; Zip Code Stafford, TX 77477				
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	Amount of Contribution (\$) \$225.00			
	Contributor address; City; State; Zip Code Houston, TX 77098				
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	Amount of Contribution (\$) \$225.00			
	Contributor address; City; State; Zip Code Houston, TX 77098				
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: 111/159 Rpt: 114/172
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 Munroe, Sam	<input type="checkbox"/> out-of-state PAC (ID#: 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 Munroe, Sam	<input type="checkbox"/> out-of-state PAC (ID#: 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 Munroe, Sam	<input type="checkbox"/> out-of-state PAC (ID#: 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 Munroe, Sam	<input type="checkbox"/> out-of-state PAC (ID#: 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 O'Reilly, Chuck	<input type="checkbox"/> out-of-state PAC (ID#: 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

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 112/159 Rpt: 115/172
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#: _____) O'Reilly, Chuck	7 Amount of Contribution (\$) \$330.00	
	6 Contributor address; City; State; Zip Code Plano, TX 75023		
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	Amount of Contribution (\$) \$330.00	
	Contributor address; City; State; Zip Code Plano, TX 75023		
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	Amount of Contribution (\$) \$330.00	
	Contributor address; City; State; Zip Code Plano, TX 75023		
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	Amount of Contribution (\$) \$330.00	
	Contributor address; City; State; Zip Code Plano, TX 75023		
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	Amount of Contribution (\$) \$330.00	
	Contributor address; City; State; Zip Code Plano, TX 75023		
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: 113/159 Rpt: 116/172
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#: _____) Oquin, Anna 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 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 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 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 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	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 114/159 Rpt: 117/172
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#: _____) Oquin, Anna	7 Amount of Contribution (\$) \$350.00	
	6 Contributor address; City; State; Zip Code Brownsville, TX 78520		
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	Amount of Contribution (\$) \$350.00	
	Contributor address; City; State; Zip Code Brownsville, TX 78520		
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	Amount of Contribution (\$) \$25.00	
	Contributor address; City; State; Zip Code Del Rio, TX 78840		
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	Amount of Contribution (\$) \$25.00	
	Contributor address; City; State; Zip Code Del Rio, TX 78840		
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	Amount of Contribution (\$) \$25.00	
	Contributor address; City; State; Zip Code Del Rio, TX 78840		
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: 115/159 Rpt: 118/172
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#: _____) Pacheco, Elena	7 Amount of Contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code Del Rio, TX 78840	
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	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Del Rio, TX 78840	
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	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Del Rio, TX 78840	
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#: _____) Pacheco, Elena	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Del Rio, TX 78840	
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	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Del Rio, TX 78840	
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: 116/159 Rpt: 119/172
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#: _____) Pacheco, Manuel 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 09/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pacheco, Manuel 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 09/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pacheco, Manuel 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#: _____) Pacheco, Manuel 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, Manuel 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

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	7 Amount of Contribution (\$) \$105.00	
	6 Contributor address; City; State; Zip Code Friendswood, TX 77546		
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	Amount of Contribution (\$) \$105.00	
	Contributor address; City; State; Zip Code Friendswood, TX 77546		
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	Amount of Contribution (\$) \$270.00	
	Contributor address; City; State; Zip Code Pasadena, TX 77505		
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	Amount of Contribution (\$) \$270.00	
	Contributor address; City; State; Zip Code Pasadena, TX 77505		
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	Amount of Contribution (\$) \$270.00	
	Contributor address; City; State; Zip Code Pasadena, TX 77505		
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	7 Amount of Contribution (\$) \$270.00	
	6 Contributor address; City; State; Zip Code Pasadena, TX 77505		
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	Amount of Contribution (\$) \$270.00	
	Contributor address; City; State; Zip Code Pasadena, TX 77505		
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	Amount of Contribution (\$) \$270.00	
	Contributor address; City; State; Zip Code Pasadena, TX 77505		
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	Amount of Contribution (\$) \$250.00	
	Contributor address; City; State; Zip Code Kingsville, TX 78364		
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	Amount of Contribution (\$) \$250.00	
	Contributor address; City; State; Zip Code Kingsville, TX 78364		
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

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

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	7 Amount of Contribution (\$) \$135.00
	6 Contributor address; City; State; Zip Code Lubbock, TX 79407	
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	Amount of Contribution (\$) \$135.00
	Contributor address; City; State; Zip Code Lubbock, TX 79407	
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	Amount of Contribution (\$) \$135.00
	Contributor address; City; State; Zip Code Lubbock, TX 79407	
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	Amount of Contribution (\$) \$135.00
	Contributor address; City; State; Zip Code Lubbock, TX 79407	
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	Amount of Contribution (\$) \$135.00
	Contributor address; City; State; Zip Code Lubbock, TX 79407	
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	7 Amount of Contribution (\$) \$135.00
	6 Contributor address; City; State; Zip Code Lubbock, TX 79407	
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	Amount of Contribution (\$) \$125.00
	Contributor address; City; State; Zip Code San Antonio, TX 78248	
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	Amount of Contribution (\$) \$125.00
	Contributor address; City; State; Zip Code San Antonio, TX 78248	
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	Amount of Contribution (\$) \$125.00
	Contributor address; City; State; Zip Code San Antonio, TX 78248	
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	Amount of Contribution (\$) \$125.00
	Contributor address; City; State; Zip Code San Antonio, TX 78248	
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
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4 Date 10/24/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, Carlos San Antonio, TX 78248	7 Amount of Contribution (\$) \$125.00
	6 Contributor address; City; State; Zip Code	
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 San Antonio, TX 78248	Amount of Contribution (\$) \$125.00
	Contributor address; City; State; Zip Code	
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions)
Date 12/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, Carlos San Antonio, TX 78248	Amount of Contribution (\$) \$125.00
	Contributor address; City; State; Zip Code	
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions)
Date 07/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roetzel, Pat Mansfield, TX 76093	Amount of Contribution (\$) \$60.00
	Contributor address; City; State; Zip Code	
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions)
Date 08/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roetzel, Pat Mansfield, TX 76093	Amount of Contribution (\$) \$60.00
	Contributor address; City; State; Zip Code	
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions)

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

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 125/159 Rpt: 128/172
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#: _____) Ross III, Winston	7 Amount of Contribution (\$) \$375.00
	6 Contributor address; City; State; Zip Code Austin, TX 78755	
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	Amount of Contribution (\$) \$375.00
	Contributor address; City; State; Zip Code Austin, TX 78755	
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	Amount of Contribution (\$) \$375.00
	Contributor address; City; State; Zip Code Austin, TX 78755	
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	Amount of Contribution (\$) \$375.00
	Contributor address; City; State; Zip Code Austin, TX 78755	
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	Amount of Contribution (\$) \$375.00
	Contributor address; City; State; Zip Code Austin, TX 78755	
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 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 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 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 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 Austin, TX 78755	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

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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	7 Amount of Contribution (\$) \$50.00			
	6 Contributor address; City; State; Zip Code Austin, TX 78755				
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	Amount of Contribution (\$) \$50.00			
	Contributor address; City; State; Zip Code Austin, TX 78755				
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	Amount of Contribution (\$) \$50.00			
	Contributor address; City; State; Zip Code Austin, TX 78755				
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	Amount of Contribution (\$) \$25.00			
	Contributor address; City; State; Zip Code San Antonio, TX 78216				
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	Amount of Contribution (\$) \$25.00			
	Contributor address; City; State; Zip Code San Antonio, TX 78216				
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

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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 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 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 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 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 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

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SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 130/159 Rpt: 133/172
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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

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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	7 Amount of Contribution (\$) \$45.00
	6 Contributor address; City; State; Zip Code Richmond, TX 77469	
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	Amount of Contribution (\$) \$45.00
	Contributor address; City; State; Zip Code Richmond, TX 77469	
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	Amount of Contribution (\$) \$45.00
	Contributor address; City; State; Zip Code Richmond, TX 77469	
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	Amount of Contribution (\$) \$75.00
	Contributor address; City; State; Zip Code Richmond, TX 77469	
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	Amount of Contribution (\$) \$75.00
	Contributor address; City; State; Zip Code Richmond, TX 77469	
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

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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#: _____) Schmid, Michael 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 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)
Date 11/26/2025	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)
Date 12/30/2025	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)
Date 07/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schuster, Troy 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)

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	7 Amount of Contribution (\$) \$60.00
	6 Contributor address; City; State; Zip Code Lufkin, TX 75901	
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	Amount of Contribution (\$) \$60.00
	Contributor address; City; State; Zip Code Lufkin, TX 75901	
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	Amount of Contribution (\$) \$60.00
	Contributor address; City; State; Zip Code Lufkin, TX 75901	
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	Amount of Contribution (\$) \$60.00
	Contributor address; City; State; Zip Code Lufkin, TX 75901	
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	Amount of Contribution (\$) \$60.00
	Contributor address; City; State; Zip Code Lufkin, TX 75901	
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self

MONETARY POLITICAL CONTRIBUTIONS

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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	7 Amount of Contribution (\$) \$50.00
	6 Contributor address; City; State; Zip Code San Antonio, TX 78246	
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	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code San Antonio, TX 78246	
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	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code San Antonio, TX 78246	
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	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code San Antonio, TX 78246	
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	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code San Antonio, TX 78246	
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	7 Amount of Contribution (\$) \$50.00
	6 Contributor address; City; State; Zip Code San Antonio, TX 78246	
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	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code San Antonio, TX 78246	
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	Amount of Contribution (\$) \$200.00
	Contributor address; City; State; Zip Code Dobbin, TX 77333	
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	Amount of Contribution (\$) \$200.00
	Contributor address; City; State; Zip Code Dobbin, TX 77333	
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	Amount of Contribution (\$) \$200.00
	Contributor address; City; State; Zip Code Dobbin, TX 77333	
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	7 Amount of Contribution (\$) \$200.00
	6 Contributor address; City; State; Zip Code Dobbin, TX 77333	
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	Amount of Contribution (\$) \$200.00
	Contributor address; City; State; Zip Code Dobbin, TX 77333	
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	Amount of Contribution (\$) \$200.00
	Contributor address; City; State; Zip Code Dobbin, TX 77333	
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	Amount of Contribution (\$) \$200.00
	Contributor address; City; State; Zip Code Dobbin, TX 77333	
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	Amount of Contribution (\$) \$45.00
	Contributor address; City; State; Zip Code DeSoto, TX 75115	
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: 137/159 Rpt: 140/172
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#: _____) 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 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 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 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 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 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 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 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 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 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 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 Snowberger, Robyn	7 Amount of Contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code Clovis, NM 88102	
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 12/16/2025	Full name of contributor Snowberger, Robyn	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Clovis, NM 88102	
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 08/01/2025	Full name of contributor Soudagar, Sarem	Amount of Contribution (\$) \$195.00
	Contributor address; City; State; Zip Code Spring, TX 77379	
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 08/26/2025	Full name of contributor Soudagar, Sarem	Amount of Contribution (\$) \$195.00
	Contributor address; City; State; Zip Code Spring, TX 77379	
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 09/26/2025	Full name of contributor Soudagar, Sarem	Amount of Contribution (\$) \$165.00
	Contributor address; City; State; Zip Code Spring, TX 77379	
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 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 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 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 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 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 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 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 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 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 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: 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	7 Amount of Contribution (\$) \$125.00	
	6 Contributor address; City; State; Zip Code San Antonio, TX 78230		
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	Amount of Contribution (\$) \$125.00	
	Contributor address; City; State; Zip Code San Antonio, TX 78230		
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	Amount of Contribution (\$) \$125.00	
	Contributor address; City; State; Zip Code San Antonio, TX 78230		
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	Amount of Contribution (\$) \$125.00	
	Contributor address; City; State; Zip Code San Antonio, TX 78230		
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	Amount of Contribution (\$) \$125.00	
	Contributor address; City; State; Zip Code San Antonio, TX 78230		
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: 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	7 Amount of Contribution (\$) \$150.00
	6 Contributor address; City; State; Zip Code San Antonio, TX 78230	
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	Amount of Contribution (\$) \$775.00
	Contributor address; City; State; Zip Code San Antonio, TX 78230	
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	Amount of Contribution (\$) \$775.00
	Contributor address; City; State; Zip Code San Antonio, TX 78230	
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	Amount of Contribution (\$) \$775.00
	Contributor address; City; State; Zip Code San Antonio, TX 78230	
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	Amount of Contribution (\$) \$800.00
	Contributor address; City; State; Zip Code San Antonio, TX 78230	
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

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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 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 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 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 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 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	

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The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 147/159 Rpt: 150/172
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#: _____) Straza, Jamie	7 Amount of Contribution (\$) \$225.00	
	6 Contributor address; City; State; Zip Code Austin, TX 78704		
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	Amount of Contribution (\$) \$225.00	
	Contributor address; City; State; Zip Code Austin, TX 78704		
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	Amount of Contribution (\$) \$225.00	
	Contributor address; City; State; Zip Code Austin, TX 78704		
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	Amount of Contribution (\$) \$225.00	
	Contributor address; City; State; Zip Code Austin, TX 78704		
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	Amount of Contribution (\$) \$225.00	
	Contributor address; City; State; Zip Code Austin, TX 78704		
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self	

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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	7 Amount of Contribution (\$) \$225.00
	6 Contributor address; City; State; Zip Code Austin, TX 78704	
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	Amount of Contribution (\$) \$50.00
	Contributor address; City; State; Zip Code San Antonio, TX 78258	
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	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Lubbock, TX 79424	
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	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Lubbock, TX 79424	
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	Amount of Contribution (\$) \$100.00
	Contributor address; City; State; Zip Code Lubbock, TX 79424	
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: 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 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 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 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 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 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	7 Amount of Contribution (\$) \$25.00
	6 Contributor address; City; State; Zip Code Childress, TX 79201	
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	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Childress, TX 79201	
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	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Childress, TX 79201	
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	Amount of Contribution (\$) \$25.00
	Contributor address; City; State; Zip Code Childress, TX 79201	
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	Amount of Contribution (\$) \$150.00
	Contributor address; City; State; Zip Code Austin, TX 78750	
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 Washington, Martin	7 Amount of Contribution (\$) \$150.00
	6 Contributor address; City; State; Zip Code Austin, TX 78750	
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 09/02/2025	Full name of contributor Washington, Martin	Amount of Contribution (\$) \$150.00
	Contributor address; City; State; Zip Code Austin, TX 78750	
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 09/19/2025	Full name of contributor Washington, Martin	Amount of Contribution (\$) \$150.00
	Contributor address; City; State; Zip Code Austin, TX 78750	
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 10/24/2025	Full name of contributor Washington, Martin	Amount of Contribution (\$) \$150.00
	Contributor address; City; State; Zip Code Austin, TX 78750	
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 12/23/2025	Full name of contributor Washington, Martin	Amount of Contribution (\$) \$150.00
	Contributor address; City; State; Zip Code Austin, TX 78750	
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 Washington, Martin	7 Amount of Contribution (\$) \$150.00
	6 Contributor address; City; State; Zip Code Austin, TX 78750	
8 Principal occupation / Job title (See Instructions) Owner/Operator		9 Employer (See Instructions) self
Date 07/18/2025	Full name of contributor Wezeman, Robert	Amount of Contribution (\$) \$175.00
	Contributor address; City; State; Zip Code McQueeney, TX 78123	
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 07/31/2025	Full name of contributor Wezeman, Robert	Amount of Contribution (\$) \$175.00
	Contributor address; City; State; Zip Code McQueeney, TX 78123	
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 09/02/2025	Full name of contributor Wezeman, Robert	Amount of Contribution (\$) \$175.00
	Contributor address; City; State; Zip Code McQueeney, TX 78123	
Principal occupation / Job title (See Instructions) Owner/Operator		Employer (See Instructions) self
Date 09/19/2025	Full name of contributor Wezeman, Robert	Amount of Contribution (\$) \$175.00
	Contributor address; City; State; Zip Code McQueeney, TX 78123	
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 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 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 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 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 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	7 Amount of Contribution (\$) \$75.00	
	6 Contributor address; City; State; Zip Code Breckenridge, TX 79424		
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	Amount of Contribution (\$) \$75.00	
	Contributor address; City; State; Zip Code Breckenridge, TX 79424		
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	Amount of Contribution (\$) \$75.00	
	Contributor address; City; State; Zip Code Breckenridge, TX 79424		
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	Amount of Contribution (\$) \$50.00	
	Contributor address; City; State; Zip Code Breckenridge, TX 79424		
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	Amount of Contribution (\$) \$60.00	
	Contributor address; City; State; Zip Code Houston, TX 77098		
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 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 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 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 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 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 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 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 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 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 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

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

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 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	7 Payee address; City; State; Zip Code 1111 Guadalupe St Austin, TX 78701	
<input type="checkbox"/> Expenditure from corporate funds	(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 ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/08/2025	Payee name Carriage House Partners	
Amount (\$) \$5,000.00	Payee address; City; State; Zip Code 1111 Guadalupe St Austin, TX 78701	
<input type="checkbox"/> Expenditure from corporate funds	(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 ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/08/2025	Payee name Carriage House Partners	
Amount (\$) \$5,000.00	Payee address; City; State; Zip Code 1111 Guadalupe St Austin, TX 78701	
<input type="checkbox"/> Expenditure from corporate funds	(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 ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 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	7 Payee address; City; State; Zip Code 1111 Guadalupe St Austin, TX 78701	
<input type="checkbox"/> Expenditure from corporate funds	(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 ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/08/2025	Payee name Carriage House Partners	
Amount (\$) \$5,000.00	Payee address; City; State; Zip Code 1111 Guadalupe St Austin, TX 78701	
<input type="checkbox"/> Expenditure from corporate funds	(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 ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/08/2025	Payee name Carriage House Partners	
Amount (\$) \$5,000.00	Payee address; City; State; Zip Code 1111 Guadalupe St Austin, TX 78701	
<input type="checkbox"/> Expenditure from corporate funds	(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 ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 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	7 Payee address; City; State; Zip Code 400 S Zang Blvd Ste 620 Dallas, TX 75208	
<input type="checkbox"/> Expenditure from corporate funds	(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 ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/15/2025	Payee name Dan Jefferson Tax and Financial Consulting	
Amount (\$) \$150.00	Payee address; City; State; Zip Code 400 S Zang Blvd Ste 620 Dallas, TX 75208	
<input type="checkbox"/> Expenditure from corporate funds	(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 ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/15/2025	Payee name Dan Jefferson Tax and Financial Consulting	
Amount (\$) \$150.00	Payee address; City; State; Zip Code 400 S Zang Blvd Ste 620 Dallas, TX 75208	
<input type="checkbox"/> Expenditure from corporate funds	(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 ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 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	7 Payee address; City; State; Zip Code 400 S Zang Blvd Ste 620 Dallas, TX 75208	
<input type="checkbox"/> Expenditure from corporate funds	(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 ONLY 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	Payee address; City; State; Zip Code 400 S Zang Blvd Ste 620 Dallas, TX 75208	
<input type="checkbox"/> Expenditure from corporate funds	(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 ONLY 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	Payee address; City; State; Zip Code 400 S Zang Blvd Ste 620 Dallas, TX 75208	
<input type="checkbox"/> Expenditure from corporate funds	(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 ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 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	7 Payee address; City; State; Zip Code 2535 Garcia Lane Mountain View, CA 94043	
<input type="checkbox"/> Expenditure from corporate funds	(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 ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 08/09/2025	Payee name Intuit	
Amount (\$) \$130.18	Payee address; City; State; Zip Code 2535 Garcia Lane Mountain View, CA 94043	
<input type="checkbox"/> Expenditure from corporate funds	(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 ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 09/09/2025	Payee name Intuit	
Amount (\$) \$122.59	Payee address; City; State; Zip Code 2535 Garcia Lane Mountain View, CA 94043	
<input type="checkbox"/> Expenditure from corporate funds	(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 ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 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	7 Payee address; City; State; Zip Code 2535 Garcia Lane Mountain View, CA 94043	
<input type="checkbox"/> Expenditure from corporate funds	(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 ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 11/09/2025	Payee name Intuit	
Amount (\$) \$122.59	Payee address; City; State; Zip Code 2535 Garcia Lane Mountain View, CA 94043	
<input type="checkbox"/> Expenditure from corporate funds	(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 ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held
Date 12/09/2025	Payee name Intuit	
Amount (\$) \$122.59	Payee address; City; State; Zip Code 2535 Garcia Lane Mountain View, CA 94043	
<input type="checkbox"/> Expenditure from corporate funds	(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 ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 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	7 Payee address; City; State; Zip Code 6400 N Santa Fe Ave Ste A Oklahoma City, OK 73116	
<input type="checkbox"/> Expenditure from corporate funds	(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 ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Sue Elkins CPA	Office sought Office held
Date 08/15/2025	Payee name Sue Elkins CPA	
Amount (\$) \$175.00	Payee address; City; State; Zip Code 6400 N Santa Fe Ave Ste A Oklahoma City, OK 73116	
<input type="checkbox"/> Expenditure from corporate funds	(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 ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Sue Elkins CPA	Office sought Office held
Date 09/15/2025	Payee name Sue Elkins CPA	
Amount (\$) \$175.00	Payee address; City; State; Zip Code 6400 N Santa Fe Ave Ste A Oklahoma City, OK 73116	
<input type="checkbox"/> Expenditure from corporate funds	(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 ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Sue Elkins CPA	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 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	7 Payee address; City; State; Zip Code 6400 N Santa Fe Ave Ste A Oklahoma City, OK 73116	
<input type="checkbox"/> Expenditure from corporate funds	(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 ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Sue Elkins CPA	Office sought Office held
Date 11/15/2025	Payee name Sue Elkins CPA	
Amount (\$) \$175.00	Payee address; City; State; Zip Code 6400 N Santa Fe Ave Ste A Oklahoma City, OK 73116	
<input type="checkbox"/> Expenditure from corporate funds	(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 ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Sue Elkins CPA	Office sought Office held
Date 12/15/2025	Payee name Sue Elkins CPA	
Amount (\$) \$175.00	Payee address; City; State; Zip Code 6400 N Santa Fe Ave Ste A Oklahoma City, OK 73116	
<input type="checkbox"/> Expenditure from corporate funds	(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 ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Sue Elkins CPA	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 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	7 Payee address; City; State; Zip Code REDACTED PER 254.0401, ELEC. CODE Lewisville, TX 75067	
<input type="checkbox"/> Expenditure from corporate funds	(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 ONLY 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	Payee address; City; State; Zip Code REDACTED PER 254.0401, ELEC. CODE Lewisville, TX 75067	
<input type="checkbox"/> Expenditure from corporate funds	(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 ONLY 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	Payee address; City; State; Zip Code REDACTED PER 254.0401, ELEC. CODE Lewisville, TX 75067	
<input type="checkbox"/> Expenditure from corporate funds	(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 ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)			
Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel in District
Contributions/ Donations Made By - Candidate/Officeholder/Political Committee	Gift/Awards/Memorials Expense	Printing Expense	Travel Out of District
Credit Card Payment	Legal Services	Salaries/Wages/Contract Labor	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 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	7 Payee address; City; State; Zip Code REDACTED PER 254.0401, ELEC. CODE Lewisville, TX 75067	
<input type="checkbox"/> Expenditure from corporate funds	(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 ONLY 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	Payee address; City; State; Zip Code REDACTED PER 254.0401, ELEC. CODE Lewisville, TX 75067	
<input type="checkbox"/> Expenditure from corporate funds	(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 ONLY 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	Payee address; City; State; Zip Code REDACTED PER 254.0401, ELEC. CODE Lewisville, TX 75067	
<input type="checkbox"/> Expenditure from corporate funds	(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 ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought	Office held