

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00090065		2 Total pages filed: 22	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR Mr.		FIRST Timothy F.		OFFICE USE ONLY Date Received ELECTRONICALLY FILED 01/15/2026
	NICKNAME		LAST McDonough		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; 4212 Santa Barbara Dr.		ZIP CODE		Date Hand-delivered or Date Postmarked
	Dallas, TX 75214				Receipt #
					Amount
					Date Processed
				Date Imaged	
5 CAMPAIGN TREASURER NAME	MS / MRS / MR Mr.		FIRST Thomas M.		MI
	NICKNAME		LAST Brouillard		
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); 4130 Santa Barbara Drive		APT / SUITE #;		CITY;
	Dallas, TX 75214				STATE; ZIP CODE
7 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION		
	(225)	933-3272			
8 REPORT TYPE	<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)				
	<input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded modified reporting limit <input type="checkbox"/> Final Report (Attach C/OH-FR)				
9 PERIOD COVERED	Month	Day	Year	THROUGH	Month Day Year
	10/01/2025				12/31/2025
10 ELECTION	ELECTION DATE		ELECTION TYPE		
	Month	Day	Year	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special	
11 OFFICE	OFFICE HELD (if any)			12 OFFICE SOUGHT (if known)	
				State Representative District 114	

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

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13 C / OH NAME	McDonough, Timothy F. (Mr.)	14 Filer ID	(Ethics Commission Filers)
		00090065	

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

16 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$	0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	7,204.20
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$	18,535.90
	4. TOTAL POLITICAL EXPENDITURES	\$	44,894.31
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	985.90
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	17,550.00

17 AFFIDAVIT

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

Mr. Timothy F. McDonough

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

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

Signature of officer administering Printed name of officer administering Title of officer administering oath

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

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18 FILER NAME McDonough, Timothy F. (Mr.)		19 Filer ID 00090065	(Ethics Commission Filers)
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT	
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$	7,204.20
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$	
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$	
4.	<input checked="" type="checkbox"/> SCHEDULE E: LOANS	\$	17,550.00
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	24,494.31
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$	
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$	
8.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$	
9.	<input checked="" type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$	20,400.00
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$	
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$	
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$	

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/5 Rpt: 4/22
2 FILER NAME McDonough, Timothy F. (Mr.)		3 Filer ID (Ethics Commission Filers) 00090065
4 Date 12/02/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Altman, Daniel <hr/> 6 Contributor address; City; State; Zip Code Midlothian, TX 76065	7 Amount of Contribution (\$) \$260.25
8 Principal occupation / Job title (See Instructions) Attorney		9 Employer (See Instructions) Oncor Electric Delivery
Date 10/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Angell, John <hr/> Contributor address; City; State; Zip Code Dallas, TX 75238	Amount of Contribution (\$) \$52.05
Principal occupation / Job title (See Instructions) Realtor		Employer (See Instructions) Paragon Realtors
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arvin, Patricia <hr/> Contributor address; City; State; Zip Code Dallas, TX 75218	Amount of Contribution (\$) \$208.20
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 12/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) B., Greg <hr/> Contributor address; City; State; Zip Code Dallas, TX 75214	Amount of Contribution (\$) \$520.51
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 11/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) B., Greg <hr/> Contributor address; City; State; Zip Code Dallas, TX 75214	Amount of Contribution (\$) \$26.03
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/5 Rpt: 5/22
2 FILER NAME McDonough, Timothy F. (Mr.)		3 Filer ID (Ethics Commission Filers) 00090065
4 Date 12/31/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Camacho, Vladimir <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75202	7 Amount of Contribution (\$) \$26.03
8 Principal occupation / Job title (See Instructions) Vice President		9 Employer (See Instructions) SmartKargo
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Camacho, Vladimir <hr/> Contributor address; City; State; Zip Code Dallas, TX 75202	Amount of Contribution (\$) \$26.03
Principal occupation / Job title (See Instructions) Vice President		Employer (See Instructions) SmartKargo
Date 11/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cohen, Michael <hr/> Contributor address; City; State; Zip Code Dallas, TX 75229	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Executive		Employer (See Instructions) Kelli's
Date 12/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Darrell, Day <hr/> Contributor address; City; State; Zip Code Richardson, TX 75080	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Candidate for U.S. Congress, CD 32		Employer (See Instructions) Self
Date 12/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dubner, Ronald A. <hr/> Contributor address; City; State; Zip Code PLANO, TX 75093	Amount of Contribution (\$) \$104.10
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/5 Rpt: 6/22
2 FILER NAME McDonough, Timothy F. (Mr.)		3 Filer ID (Ethics Commission Filers) 00090065
4 Date 12/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jackson, Michael <hr/> 6 Contributor address; City; State; Zip Code Lufkin, TX 75904	7 Amount of Contribution (\$) \$104.10
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 10/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McDonough, Chris <hr/> Contributor address; City; State; Zip Code Austin, TX 78731	Amount of Contribution (\$) \$26.03
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 10/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meza, Michael <hr/> Contributor address; City; State; Zip Code Denison, TX 75020	Amount of Contribution (\$) \$52.05
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 10/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Minnix, Mary <hr/> Contributor address; City; State; Zip Code Dallas, TX 75214	Amount of Contribution (\$) \$5.21
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 12/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moser, Dennis G. <hr/> Contributor address; City; State; Zip Code Dallas, TX 75230	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) Managing Director (energy midstream)		Employer (See Instructions) Texas Energy Midstream

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/5 Rpt: 7/22
2 FILER NAME McDonough, Timothy F. (Mr.)		3 Filer ID (Ethics Commission Filers) 00090065
4 Date 12/02/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) SchreierFleming, Maura <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75252	7 Amount of Contribution (\$) \$52.05
8 Principal occupation / Job title (See Instructions) retired		9 Employer (See Instructions) retired
Date 11/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Semple, John <hr/> Contributor address; City; State; Zip Code Dallas, TX 75206	Amount of Contribution (\$) \$104.10
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) SMU
Date 11/30/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sumner, T.E. <hr/> Contributor address; City; State; Zip Code Rowlett, TX 75088	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 12/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Anne <hr/> Contributor address; City; State; Zip Code Dallas, TX 75243	Amount of Contribution (\$) \$10.41
Principal occupation / Job title (See Instructions) retired		Employer (See Instructions) retired
Date 11/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wernick, Barry <hr/> Contributor address; City; State; Zip Code Dallas, TX 75380	Amount of Contribution (\$) \$52.05
Principal occupation / Job title (See Instructions) Attorney-Mediator		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/5 Rpt: 8/22
2 FILER NAME McDonough, Timothy F. (Mr.)		3 Filer ID (Ethics Commission Filers) 00090065
4 Date 12/02/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) West, Winnie <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75230	7 Amount of Contribution (\$) \$2,500.00
8 Principal occupation / Job title (See Instructions) Retired (former dive shop owner)		9 Employer (See Instructions) Retired

LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E: Sch: 1/3 Rpt: 9/22	
2 FILER NAME McDonough, Timothy F. (Mr.)		3 Filer ID (Ethics Commission Filers) 00090065	
4 TOTAL OF UNITEMIZED LOANS			\$
5 Date of loan 10/07/2025	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) Timothy, McDonough (Mr.)		9 Loan Amount (\$) \$10,000.00
6 Is lender a financial institution? No	8 Lender address; City; State; Zip Code DALLAS, TX 75214		10 Interest Rate
			11 Maturity Date
12 Principal occupation / Job title (See Instructions) Professor		13 Employer (See Instructions) SMU	
14 Description of Collateral <input checked="" type="checkbox"/> None		15 Check if personal funds were deposited into political account (See Instructions) <input checked="" type="checkbox"/>	
16 GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	17 Name of guarantor		19 Amount Guaranteed (\$)
	18 Guarantor address; City; State; Zip Code		
20 Principal occupation		21 Employer (See Instructions)	
Date of loan 11/12/2025	Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) Timothy, McDonough (Mr.)		Loan Amount (\$) \$2,500.00
Is lender a financial institution? No	Lender address; City; State; Zip Code DALLAS, TX 75214		Interest Rate
			Maturity Date
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) SMU	
Description of Collateral <input checked="" type="checkbox"/> None		Check if personal funds were deposited into political account (See Instructions) <input type="checkbox"/>	
GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	Name of guarantor		Amount Guaranteed (\$)
	Guarantor address; City; State; Zip Code		
Principal occupation		Employer (See Instructions)	

LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E: Sch: 2/3 Rpt: 10/22	
2 FILER NAME McDonough, Timothy F. (Mr.)		3 Filer ID (Ethics Commission Filers) 00090065	
4 TOTAL OF UNITEMIZED LOANS			\$
5 Date of loan 11/25/2025	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) Timothy, McDonough (Mr.)		9 Loan Amount (\$) \$2,500.00
6 Is lender a financial institution? No	8 Lender address; City; State; Zip Code DALLAS, TX 75214		10 Interest Rate
			11 Maturity Date
12 Principal occupation / Job title (See Instructions) Professor		13 Employer (See Instructions) SMU	
14 Description of Collateral <input checked="" type="checkbox"/> None		15 Check if personal funds were deposited into political account (See Instructions) <input type="checkbox"/>	
16 GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	17 Name of guarantor		19 Amount Guaranteed (\$)
	18 Guarantor address; City; State; Zip Code		
20 Principal occupation		21 Employer (See Instructions)	
Date of loan 11/28/2025	Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) Timothy, McDonough (Mr.)		Loan Amount (\$) \$2,500.00
Is lender a financial institution? No	Lender address; City; State; Zip Code DALLAS, TX 75214		Interest Rate
			Maturity Date
Principal occupation / Job title (See Instructions) Professor		Employer (See Instructions) SMU	
Description of Collateral <input checked="" type="checkbox"/> None		Check if personal funds were deposited into political account (See Instructions) <input type="checkbox"/>	
GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	Name of guarantor		Amount Guaranteed (\$)
	Guarantor address; City; State; Zip Code		
Principal occupation		Employer (See Instructions)	

LOANS

SCHEDULE E

The Instruction Guide explains how to complete this form.		1 Total pages Schedule E: Sch: 3/3 Rpt: 11/22
2 FILER NAME McDonough, Timothy F. (Mr.)		3 Filer ID (Ethics Commission Filers) 00090065
4 TOTAL OF UNITEMIZED LOANS		\$
5 Date of loan 10/01/2025	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____) Timothy, McDonough (Mr.)	9 Loan Amount (\$) \$50.00
6 Is lender a financial institution? No	8 Lender address; City; State; Zip Code DALLAS, TX 75214	10 Interest Rate
		11 Maturity Date
12 Principal occupation / Job title (See Instructions) Professor		13 Employer (See Instructions) SMU
14 Description of Collateral <input checked="" type="checkbox"/> None		15 Check if personal funds were deposited into political account (See Instructions) <input type="checkbox"/>
16 GUARANTOR INFORMATION <input checked="" type="checkbox"/> not applicable	17 Name of guarantor	19 Amount Guaranteed (\$)
	18 Guarantor address; City; State; Zip Code	
20 Principal occupation		21 Employer (See Instructions)

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/10 Rpt: 12/22	2 FILER NAME McDonough, Timothy F. (Mr.)	3 Filer ID (Ethics Commission Filers) 00090065
4 Date 10/15/2025	5 Payee name Armour	
6 Amount (\$) \$2,500.00	7 Payee address; City; State; Zip Code 2209 Gorman Ave #2 Waco, TX 76707	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign management services (see invoice).
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 10/16/2025	Candidate/Officeholder name Office sought Office held	
Payee name Armour		
Amount (\$) \$2,500.00	Payee address; City; State; Zip Code 2209 Gorman Ave #2 Waco, TX 76707	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign management services (see invoice).
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 11/07/2025	Candidate/Officeholder name Office sought Office held	
Payee name Armour		
Amount (\$) \$2,500.00	Payee address; City; State; Zip Code 2209 Gorman Ave #2 Waco, TX 76707	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign management services (see invoice).
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 2/10 Rpt: 13/22	2 FILER NAME McDonough, Timothy F. (Mr.)	3 Filer ID (Ethics Commission Filers) 00090065
4 Date 12/01/2025	5 Payee name Armour	
6 Amount (\$) \$2,500.00	7 Payee address; City; State; Zip Code 2209 Gorman Ave #2 Waco, TX 76707	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign management services (see invoice).
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 12/02/2025	Candidate/Officeholder name Office sought Office held	
Payee name Armour		
Amount (\$) \$2,500.00	Payee address; City; State; Zip Code 2209 Gorman Ave #2 Waco, TX 76707	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign management services (see invoice).
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 12/19/2025	Candidate/Officeholder name Office sought Office held	
Payee name Armour		
Amount (\$) \$2,500.00	Payee address; City; State; Zip Code 2209 Gorman Ave #2 Waco, TX 76707	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign management services (see invoice).
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 3/10 Rpt: 14/22	2 FILER NAME McDonough, Timothy F. (Mr.)	3 Filer ID (Ethics Commission Filers) 00090065
4 Date 12/31/2025	5 Payee name Armour	
6 Amount (\$) \$2,500.00	7 Payee address; City; State; Zip Code 2209 Gorman Ave #2 Waco, TX 76707	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign management services (see invoice).
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/10/2025	Payee name Asian Mint	
Amount (\$) \$50.06	Payee address; City; State; Zip Code 11617 N Central Expy Dallas, TX 75243	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Food/Beverage 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 Dinner meeting (campaign debit card).
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/08/2025	Payee name Dallas County Republican Party	
Amount (\$) \$750.00	Payee address; City; State; Zip Code 11617 N Central Expy Ste 240 Dallas, TX 75243	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Candidate filing fee (check #75).
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 4/10 Rpt: 15/22	2 FILER NAME McDonough, Timothy F. (Mr.)	3 Filer ID (Ethics Commission Filers) 00090065
4 Date 10/21/2025	5 Payee name Eagle Postal Center Lakewood	
6 Amount (\$) \$92.00	7 Payee address; City; State; Zip Code 6333 E Mockingbird Ln Ste 147 Dallas, TX 75214	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Mailbox rental / postage services (campaign debit card).
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/10/2025	Payee name FedEx Office	
Amount (\$) \$18.93	Payee address; City; State; Zip Code 5500 Greenville Ave Ste 1203 Dallas, TX 75206	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing 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 Business cards / printing (campaign debit card).
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/14/2025	Payee name FedEx Office	
Amount (\$) \$18.93	Payee address; City; State; Zip Code 5500 Greenville Ave Ste 1203 Dallas, TX 75206	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing 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 Business cards / printing (campaign debit card).
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 5/10 Rpt: 16/22	2 FILER NAME McDonough, Timothy F. (Mr.)	3 Filer ID (Ethics Commission Filers) 00090065
4 Date 10/14/2025	5 Payee name FedEx Office	
6 Amount (\$) \$13.53	7 Payee address; City; State; Zip Code 5500 Greenville Ave Ste 1203 Dallas, TX 75206	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing 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 Printing/shipping (campaign debit card).
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 10/20/2025	Candidate/Officeholder name Office sought Office held	
Payee name FedEx Office		
Amount (\$) \$33.83	Payee address; City; State; Zip Code 5500 Greenville Ave Ste 1203 Dallas, TX 75206	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing 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 Business cards / printing (campaign debit card).
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 10/20/2025	Candidate/Officeholder name Office sought Office held	
Payee name FedEx Office		
Amount (\$) \$8.12	Payee address; City; State; Zip Code 5500 Greenville Ave Ste 1203 Dallas, TX 75206	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing 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 Printing/shipping (campaign debit card).
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 6/10 Rpt: 17/22	2 FILER NAME McDonough, Timothy F. (Mr.)	3 Filer ID (Ethics Commission Filers) 00090065
4 Date 12/01/2025	5 Payee name FedEx Office	
6 Amount (\$) \$33.83	7 Payee address; City; State; Zip Code 5500 Greenville Ave Ste 1203 Dallas, TX 75206	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing 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 Business cards / printing (campaign debit card).
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/02/2025	Payee name FedEx Office	
Amount (\$) \$7.03	Payee address; City; State; Zip Code 5500 Greenville Ave Ste 1203 Dallas, TX 75206	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing 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 Printing/shipping (campaign debit card).
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/10/2025	Payee name Google LLC	
Amount (\$) \$13.86	Payee address; City; State; Zip Code 1600 Amphitheatre Pkwy Mountain View, CA 94043	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Google G Suite / email services.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 7/10 Rpt: 18/22	2 FILER NAME McDonough, Timothy F. (Mr.)	3 Filer ID (Ethics Commission Filers) 00090065
4 Date 12/01/2025	5 Payee name Google LLC	
6 Amount (\$) \$35.82	7 Payee address; City; State; Zip Code 1600 Amphitheatre Pkwy Mountain View, CA 94043	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 Google Workspace subscription.
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 12/03/2025	Candidate/Officeholder name Office sought Office held	
Payee name Mariano's Hacienda		
Amount (\$) \$2,350.67	Payee address; City; State; Zip Code 6300 Skillman St Dallas, TX 75231	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign event catering (campaign debit card).
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 10/31/2025	Candidate/Officeholder name Office sought Office held	
Payee name QR.io		
Amount (\$) \$35.00	Payee address; City; State; Zip Code 9450 SW Gemini Dr Beaverton, OR 97008	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 QR.io Generator subscription (recurring).
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 8/10 Rpt: 19/22	2 FILER NAME McDonough, Timothy F. (Mr.)	3 Filer ID (Ethics Commission Filers) 00090065
4 Date 12/01/2025	5 Payee name QR.io	
6 Amount (\$) \$35.00	7 Payee address; City; State; Zip Code 9450 SW Gemini Dr Beaverton, OR 97008	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 QR.io Generator subscription (recurring).
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/31/2025	Payee name QR.io	
Amount (\$) \$35.00	Payee address; City; State; Zip Code 9450 SW Gemini Dr Beaverton, OR 97008	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental 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 QR.io Generator subscription (recurring).
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/16/2025	Payee name RFT Media, LLC	
Amount (\$) \$260.00	Payee address; City; State; Zip Code PO Box 167 Nederland, TX 77627	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Graphic design - yard sign (invoice 12/15/2025).
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 9/10 Rpt: 20/22	2 FILER NAME McDonough, Timothy F. (Mr.)	3 Filer ID (Ethics Commission Filers) 00090065
4 Date 12/16/2025	5 Payee name RFT Media, LLC	
6 Amount (\$) \$150.00	7 Payee address; City; State; Zip Code PO Box 167 Nederland, TX 77627	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Project services (invoice 12/9/2025).
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/30/2025	Payee name RFT Media, LLC	
Amount (\$) \$450.00	Payee address; City; State; Zip Code PO Box 167 Nederland, TX 77627	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Web development services (invoice 12/23/2025).
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/14/2025	Payee name Success North Dallas	
Amount (\$) \$50.00	Payee address; City; State; Zip Code 15909 Preston Rd Dallas, TX 75248	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Event Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Political event admission (campaign debit card).
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 10/10 Rpt: 21/22	2 FILER NAME McDonough, Timothy F. (Mr.)	3 Filer ID (Ethics Commission Filers) 00090065
4 Date 11/26/2025	5 Payee name UZ Marketing	
6 Amount (\$) \$1,451.08	7 Payee address; City; State; Zip Code 5900 Bingle Rd Houston, TX 77092	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Yard signs / campaign advertising (debit card).
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/28/2025	Payee name UZ Marketing	
Amount (\$) \$57.86	Payee address; City; State; Zip Code 5900 Bingle Rd Houston, TX 77092	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Yard signs / campaign advertising (debit card).
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/28/2025	Payee name UZ Marketing	
Amount (\$) \$57.86	Payee address; City; State; Zip Code 5900 Bingle Rd Houston, TX 77092	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Yard signs / campaign advertising (debit card).
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM PERSONAL FUNDS

SCHEDULE G

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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

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

The Instruction Guide explains how to complete this form.

1 Total pages Schedule G: Sch: 1/1 Rpt: 22/22		2 FILER NAME McDonough, Timothy F. (Mr.)		3 Filer ID (Ethics Commission Filers) 00090065	
4 Date 10/14/2025		5 Payee name Timothy, McDonough			
6 Amount (\$) \$2,025.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		7 Payee address; City; State; Zip Code REDACTED PER 254.0401, ELEC. CODE DALLAS, TX 75214			
8 PURPOSE OF EXPENDITURE		(a) Category (See Categories listed at the top of this schedule) Consulting Expense		(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense RTF Media, LLC Website and IT consultant	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 10/31/2025		Payee name Timothy, McDonough			
Amount (\$) \$300.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		Payee address; City; State; Zip Code REDACTED PER 254.0401, ELEC. CODE DALLAS, TX 75214			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Consulting Expense		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense RTF Media, LLC Website and IT consultant	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	
Date 10/31/2025		Payee name Timothy, McDonough			
Amount (\$) \$525.00 <input checked="" type="checkbox"/> Reimbursement from political contributions intended		Payee address; City; State; Zip Code REDACTED PER 254.0401, ELEC. CODE DALLAS, TX 75214			
PURPOSE OF EXPENDITURE		Category (See Categories listed at the top of this schedule) Consulting Expense		Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense RTF Media, LLC Website and IT consultant	
Complete ONLY if direct expenditure to benefit C/OH		Candidate/Officeholder name		Office sought Office held	