FORM MPAC MONTHLY FILING GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT **COVER SHEET PG 1** Filer ID 2 Total pages filed: The MPAC Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00017356 3 COMMITTEE NAME **OFFICE USE ONLY** Government Personnel Mutual Life Insurance PAC Date Received **ELECTRONICALLY FILED** 12/29/2023 COMMITTEE ADDRESS / PO BOX: APT / SUITE #: CITY: STATE: ZIP **ADDRESS** P. O. Box 659567 Change of Address San Antonio, TX 78265-9567 Date Hand-delivered or Date Postmarked **CAMPAIGN** MS / MRS / MR **FIRST** MI **TREASURER** Receipt # Amount Mrs. Maria de Lourdes NAME Date Processed **NICKNAME** LAST **SUFFIX** CPA Date Imaged Mendoza CAMPAIGN STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** P.O. Box 659567 STREET **ADDRESS** (Residence or Business) San Antonio, TX 78265-9567 **CAMPAIGN** STREET ADDRESS OR PO BOX: APT / SUITE #; CITY: STATE: ZIP CODE **TREASURER** P.O. Box 659567 MAILING **ADDRESS** Change of Address San Antonio, TX 78265-9567 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER PHONE** (210) 357-2283 REPORT TYPE 10th day after campaign X Monthly Dissolution (Attach PAC-DR) treasurer termination 10 MONTHLY X January 5 April 5 October 5 REPORT FILING July 5 **DEADLINE** February 5 May 5 August 5 November 5 September 5 December 5 March 5 June 5 11 PERIOD Month Day Year Month Day Year **THROUGH COVERED** 11/26/2023 12/25/2023

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MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

FORM MPAC COVER SHEET PG 2

2 COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
Government Personnel M	utual Life Insurance	PAC		00017356	,
	. Candidates	A. Supported			
ACTIVITY (Id	dentify by name or, if oplicable, classify by party.)				
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
2	. Measures	A. Supported			
(D	Describe by date and location election and nature of issue.)				
		B. Opposed			
(Id	. Officeholders Assisted dentify by name or, if pplicable, classify by party.)				
5 CONTRIBUTION 1. TOTALS	PLEDGES, LOANS, CONTRIBUTIONS M	D POLITICAL CONTRIB OR GUARANTEES OF ADE ELECTRONICALL qualifies for the higher item	.Y)	\$	0.00
2.		L CONTRIBUTIONS DGES, LOANS, OR GUA	ARANTEES OF LOANS)	\$	192.00
EXPENDITURE 3.	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES		\$	0.00	
4.	· TOTAL POLITICA	L EXPENDITURES		\$	0.00
CONTRIBUTION 5. BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD		DAY \$	2,884.81	
OUTSTANDING 6.	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD		THE \$	0.00	
6 AFFIDAVIT					
		true and o	or affirm, under penalty of pe correct and includes all infor e 15, Election Code.		
			Mrs. Maria de Lou	ırdes Mendo:	za CPA
			Signature of Ca	mpaign Treas	urer
AFFIX NOTARY ST	ΓΑΜΡ / SEAL ABOVE				
Sworn to and subscribed be	efore me, by the said		, tl	his the	day
of, 2					
Signature of officer admir	nistering oath	Printed name of officer	administering oath	Title of off	icer administering oath

SUBTOTALS - MPAC

FORM MPAC COVER SHEET PG 3

				3 of 5
17 COMMITT	EE NAME	18 Filer ID	(Ethics Commi	ission Filers)
Governm	ent Personnel Mutual Life Insurance PAC	00017356		
19 SCHEDUL NAME OF	SUBTOTA	AL AMOUNT		
1. X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	192.00
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$		
4.	SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO ORGANIZATION)R	\$	
5.	SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORALABOR ORGANIZATION	\$		
6.	6. SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION			
7.	SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	}	\$	
8.	SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR	ORGANIZATION	\$	
9.	SCHEDULE E: LOANS		\$	
10.	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	\$	
11.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
12.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
13.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
14.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	
15.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$	

	MONEI	ARY POLITICAL CONTRIBUTIO	NIO S	SCHEDULE A1
	The Instru	ction Guide explains how to complete this fo	orm.	1 Total pages Schedule A1: Sch: 1/2 Rpt: 4/5
2	Price Pace Pace Pace Pace Pace Pace Pace Pa			3 Filer ID (Ethics Commission Filers) 00017356
4	Date 12/08/2023	 Full name of contributor out-of-state PAC (ID#:_Draper, Robert R.: 11823 Tarragon Cove San A Contributor address; City; State; Zip Code 	Intonio, Robert R. (Mr.)	7 Amount of Contribution (\$) \$24.00
		San Antonio, TX 78213		
8	Principal occu Life Insuranc	pation / Job title (See Instructions) ee	9 Employer (See Instructions	
	Date 12/22/2023	Contributor address; City; State; Zip Code	ntonio, Robert R. (Mr.)	Amount of Contribution (\$) \$24.00
	Principal occu	San Antonio, TX 78213 pation / Job title (See Instructions)	Employer (See Instructions)
	Life Insuranc	e		
	Date 12/08/2023	Full name of contributor out-of-state PAC (ID#:_ Hennessey III, Peter J. (Mr.) Contributor address; City; State; Zip Code)	Amount of Contribution (\$) \$24.00
		San Antonio, TX 78209		
	•	pation / Job title (See Instructions) se - Chairman, President & CEO	Employer (See Instructions Government Personnel) Mutual Life Insurance Company
	Date 12/22/2023	Full name of contributor out-of-state PAC (ID#:_ Hennessey III, Peter J. (Mr.) Contributor address; City; State; Zip Code San Antonio, TX 78209		Amount of Contribution (\$) \$24.00
	•	pation / Job title (See Instructions) ee - Chairman, President & CEO	Employer (See Instructions Government Personnel) Mutual Life Insurance Company
	Date 12/08/2023	Full name of contributor out-of-state PAC (ID#:_ Hennessey IV, Peter J. (Mr.) Contributor address; City; State; Zip Code San Antonio, TX 78209)	Amount of Contribution (\$) \$24.00
		pation / Job title (See Instructions) e Senior Vice President - Insurance Operations.	Employer (See Instructions Government Personnel) Mutual Llife Insurance Company
		·		

	MONET	ARY POLITICAL CONTRIBUTION	ONS	SCHEDULE A1
	The Instruction Guide explains how to complete this form.			1 Total pages Schedule A1: Sch: 2/2 Rpt: 5/5
2	FILER NAME Government Personnel Mutual Life Insurance PAC			3 Filer ID (Ethics Commission Filers) 00017356
4	Date 12/22/2023	5 Full name of contributor out-of-state PAC (ID#:_ Hennessey IV, Peter J. (Mr.) 6 Contributor address; City; State; Zip Code		7 Amount of Contribution (\$) \$24.00
8	Dringinal occu	San Antonio, TX 78209 upation / Job title (See Instructions)	9 Employer (See Instructions	5)
0	•	ce Senior Vice President - Insurance Operations.		Mutual Llife Insurance Company
	Date 12/08/2023	Full name of contributor out-of-state PAC (ID#:_ Hutchins, Pamela (Mrs.) Contributor address; City; State; Zip Code)	Amount of Contribution (\$) \$24.00
		San Antonio, TX 78258		
		upation / Job title (See Instructions) ce - Senior VP & Chief Actuary	Employer (See Instructions Government Personnel	s) Mutual Life Insurance Company
	Date 12/22/2023	Full name of contributor out-of-state PAC (ID#:_ Hutchins, Pamela (Mrs.) Contributor address; City; State; Zip Code San Antonio, TX 78258		Amount of Contribution (\$) \$24.00
		upation / Job title (See Instructions) ce - Senior VP & Chief Actuary	Employer (See Instructions Government Personnel	s) Mutual Life Insurance Company