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) 00069829 3 COMMITTEE NAME **OFFICE USE ONLY** RVOS Farm Mutual Insurance Group Political Action Committee Date Received **ELECTRONICALLY FILED** 01/02/2024 COMMITTEE ADDRESS / PO BOX: APT / SUITE #: CITY: STATE: ZIP **ADDRESS** P.O. Box 6106 Change of Address Temple, TX 76503-6106 Date Hand-delivered or Date Postmarked MS / MRS / MR **CAMPAIGN FIRST** MI **TREASURER** Receipt # Amount Ms. Barbara Renee NAME Date Processed NICKNAME **SUFFIX** LAST Renee Date Imaged Quinn CAMPAIGN STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE TREASURER 2301 S. 37th St. STREET **ADDRESS** (Residence or Business) Temple, TX 76504 **CAMPAIGN** STREET ADDRESS OR PO BOX: APT / SUITE #; CITY: STATE: ZIP CODE **TREASURER** 2301 S. 37th St. MAILING **ADDRESS** Change of Address Temple, TX 76504 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER PHONE** (254) 773-2181 x225

10th day after campaign

July 5

August 5

September 5

Month

12/25/2023

Day

treasurer termination

Month

11/26/2023

REPORT TYPE

REPORT FILING DEADLINE

10 MONTHLY

11 PERIOD

COVERED

X Monthly

X January 5

February 5

Year

March 5

Day

April 5

May 5

June 5

THROUGH

Dissolution (Attach PAC-DR)

October 5

November 5

December 5

Year

MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

FORM MPAC COVER SHEET PG 2

L2 COMMITTEE NAME			13 Filer I	
RVOS Farm Mutual	Insurance Group Political	Action Committee	00069	9829
4 COMMITTEE ACTIVITY	1. Candidates	A. Supported		
ACTIVITY	(Identify by name or, if applicable, classify by party.)			
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
	2 Manauran	A. Supported		
	Measures (Describe by date and location)	A. Supported		
	of election and nature of issue.)			
		B. Opposed		
	3. Officeholders			
	Assisted			
	(Identify by name or, if applicable, classify by party.)			
5 CONTRIBUTION		D POLITICAL CONTRIBUTIONS (OTHER THA	AN	
TOTALS		OR GUARANTEES OF LOANS, OR MADE ELECTRONICALLY)	!	\$ 0.00
	check here if this report	qualifies for the higher itemization threshold		
	2. TOTAL POLITICA			\$ 0.00
-========	`	DGES, LOANS, OR GUARANTEES OF LOAN	15)	
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES		:	\$ 0.00
	4. TOTAL POLITICA	L EXPENDITURES	:	\$ 0.00
			1.407.54)/	
CONTRIBUTION BALANCE		5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD		\$ 4,636.94
OUTSTANDING LOAN TOTALS		6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD		\$ 0.00
.6 AFFIDAVIT				
O AFFIDAVII				
		I swear, or affirm, under penalty true and correct and includes al under Title 15, Election Code.	y of perjury, that Il information re	t the accompanying report is quired to be reported by me
			rbara Renee	
		Signature	of Campaign T	reasurer
AFFIX NOTA	RY STAMP / SEAL ABOVE			
Sworn to and subscrib	ped 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	litle (of officer administering oath

SUBTOTALS - MPAC

FORM MPAC COVER SHEET PG 3

			3 of 4
17 COMMITT	EE NAME	18 Filer ID	(Ethics Commission Filers)
RVOS Fa	`		
19 SCHEDUL NAME OF	SUBTOTAL AMOUNT		
1.	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$
3. SCHEDULE B: PLEDGED CONTRIBUTIONS			\$
4.	\$		
5.	\$		
6.	SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	SANIZATION	\$
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. X	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$ 21.05
15.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$

The Instruction Guide explains how to complete this form.					
Total pages Schedule I: Sch: 1/1 Rpt: 4/4	FILER NAME RVOS Farm Mutual Insurance Group Political Action	3 Filer ID (Ethics Commission Filers) 00069829			
Date 12/11/2023	5 Payee name Wells Fargo Bank N.A.				
Amount (\$) 21.05 Expenditure from corporate funds	7 Payee Address; City; State; Zip 420 Montgomery Street San Francisco, CA 94104				
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Accounting/Banking (b) Description Client Ana				