FORM GPAC GENERAL-PURPOSE COMMITTEE **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Filer ID 2 Total pages filed: The GPAC Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00015767 3 COMMITTEE NAME **OFFICE USE ONLY** The Beer Alliance of Texas Political Action Committee Date Received **ELECTRONICALLY FILED** 02/05/2024 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** 502 E. 11th Street Date Hand-delivered or Date Postmarked Suite 420 Change of Address Austin, TX 78701 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mr. Richard W. NAME NICKNAME LAST **SUFFIX** Rick Donley STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 502 East 11th Street STREET **ADDRESS** Suite 420 (Residence or Business) Austin, TX 78701-1643 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 502 E. 11th St., Ste. 420 MAILING **ADDRESS** Austin, TX 78701-2656 Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (512) 474-5378 PHONE REPORT January 15 30th day before election Dissolution (Attach PAC-DR) X **TYPE** 8th day before election 10th day after campaign treasurer July 15 Runoff 10 PERIOD Year Month Day Year Day Month **COVERED THROUGH** 01/01/2024 01/25/2024 11 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year χ Primary Runoff Other 03/05/2024 General Special

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM GPAC COVER SHEET PG 2

12 COMMITTEE NAME			13 Filer ID	(Ethics Commission Filers)				
The Beer Alliance of T	exas Political Action Co	mmittee	00015767					
14 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported						
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed						
	Measures (Describe by date and location of election and nature of issue.)	(Describe by date and location						
		B. Opposed						
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	Rep. Drew Darby State Repre	sentative					
15 CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS M check here if this report	D POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR IADE ELECTRONICALLY) qualifies for the higher itemization threshold	\$	0.00				
	2. TOTAL POLITICA (OTHER THAN PLE	L CONTRIBUTIONS DGES, LOANS, OR GUARANTEES OF LOANS)	\$	6,840.00				
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	POLITICAL EXPENDITURES	\$	0.00				
	4. TOTAL POLITICA	4. TOTAL POLITICAL EXPENDITURES						
CONTRIBUTION BALANCE		5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD						
OUTSTANDING LOAN TOTALS		AMOUNT OF ALL OUTSTANDING LOANS AS OF T REPORTING PERIOD	HE \$	0.00				
16 AFFIDAVIT			<u>'</u>					
		I swear, or affirm, under penalty of per true and correct and includes all inform under Title 15, Election Code.						
		Mr. Richard	l W. Donley					
		Signature of Can	npaign Treasui	rer				
AFFIX NOTAR	Y STAMP / SEAL ABOVE							
		, th	is the	day				
of	_, 20, to certify v	which, witness my hand and seal of office.						
Signature of officer a	dministering oath	Printed name of officer administering oath	Title of offic	er administering oath				

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE

FORM GPAC ADDENDUM

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12 COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
The Beer Alliance of Te	exas Political Action (Committee		00015767	
14 COMMITTEE	1. Candidates	A. Supported		l	
ACTIVITY	(Identify by name or, if applicable, classify by party.)				
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures	A. Supported			
	(Describe by date and location of election and nature of issue.)				
		B. Opposed			
	Officeholders Assisted (Identify by name or, if applicable, classify by party.)		Rep. Dustin Burrows State Rep	resentative	
COMMITTEE	1. Candidates				
ACTIVITY	(Identify by name or, if	A. Supported			
	applicable, classify by party.)				
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures	A. Supported			
	(Describe by date and location of election and nature of issue.)				
		B. Opposed			
	Officeholders Assisted		Rep. Hubert Vo State Represe	entative	
	(Identify by name or, if applicable, classify by party.)				
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		JR Ramirez State Representati	ive	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures	A. Supported			
	(Describe by date and location of election and nature of issue.)				
		B. Opposed			
	Officeholders Assisted				
	(Identify by name or, if applicable, classify by party.)				

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE

FORM GPAC ADDENDUM

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12 COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
The Beer Alliance of Te	exas Political Action (Committee		00015767	
14 COMMITTEE	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. Measures	A. Supported			
	(Describe by date and location of election and nature of issue.)				
		B. Opposed			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)		Rep. Frederick Frazier State Re	epresentative	
COMMITTEE	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. Measures	A. Supported			
	(Describe by date and location of election and nature of issue.)				
		B. Opposed			
	3. Officeholders Assisted		Rep. Sam Harless State Repres	sentative	
	(Identify by name or, if applicable, classify by party.)				
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Hatch Smith State Representati	ve	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures	A. Supported			
	(Describe by date and location of election and nature of issue.)				
		B. Opposed			
	Officeholders Assisted				
	ASSISTED (Identify by name or, if applicable, classify by party.)				

SUBTOTALS - GPAC

FORM GPAC COVER SHEET PG 3

			5 of 9
17 COMMIT	TEE NAME	18 Filer ID	(Ethics Commission Filers)
l	er Alliance of Texas Political Action Committee	00015767	(Ethios Commission Filoto)
		00013707	_
	JLE SUBTOTALS		SUBTOTAL AMOUNT
NAME C	FSCHEDULE		
1. X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 6,840.00
2.	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS	\$	
4.	SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO ORGANIZATION	OR	\$
5.	SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORALABOR ORGANIZATION	ATION OR	\$
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. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	IS	\$ 16,845.30
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	\$

	MONETARY POLITICAL CONTRIBUTIONS		SCHEDULE A1
	The Instruction Guide explains how to complete this form.	1	Total pages Schedule A1: Sch: 1/1 Rpt: 6/9
2	FILER NAME The Beer Alliance of Texas Political Action Committee	3	Filer ID (Ethics Commission Filers) 00015767
4	Date 01/10/2024 5 Full name of contributor out-of-state PAC (ID#:) Ferris , Jim (Mr.) 6 Contributor address; City; State; Zip Code	7	Amount of Contribution (\$) \$6,840.00
8	Mont Belvieu, TX 77523 Principal occupation / Job title (See Instructions) President/CEO Mont Belvieu, TX 77523 9 Employer (See Instruction Wismer Distributing Co		om/

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 Comm Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
4 Total marian Cabadida F1.	2 Files ID (Files Commission Files)
1 Total pages Schedule F1: Sch: 1/3 Rpt: 7/9	2 FILER NAME The Beer Alliance of Texas Political Action Committee 3 Filer ID (Ethics Commission Filers) 00015767
4 Date	5 Payee name
01/03/2024	Burrows, Dustin (Rep.)
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,000.00	PO Box 2569
Expenditure from corporate funds	Lubbock, TX 79408
8 PURPOSE	
OF	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Contributions/Donations Made By
EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Contributions/Donations Made By Candidate/Officeholder/Political Committee
	Campaign contribution
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
01/03/2024	Darby, Drew (Rep.)
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	Post Office Box 3284
Ψ1,000.00	1 05t 011100 B0X 0204
Expenditure from corporate funds	San Angelo, TX 76902
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
EXI ENDITORE	Candidate/Officeholder/Political Committee
	Campaign contribution
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
01/09/2024	Frazier, Frederick (Rep.)
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	4100 Eldorado Pkwy
Ψ1,000.00	
Expenditure from	Ste. 100, PMB 241
corporate funds	McKinney, TX 75070
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
EXI ENDITORE	Candidate/Officeholder/Political Committee
	Campaign contribution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1

POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Food/Beverage Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

Candidate/Officeholder/Politica Credit Card Payment	al Committee Legal Services Salaries/	Nages/Contract Labor OTHER (enter a category not listed above)							
	The Instruction Guide explains how to co	· .							
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)							
Sch: 2/3 Rpt: 8/9	The Beer Alliance of Texas Political Action Co	mmittee 00015767							
4 Date	5 Payee name								
01/16/2024	Harless, Sam (Rep.)								
6 Amount (\$)	Payee address; City; State; Zip Code								
\$5,000.00	15814 Champion Forest								
	PMB 312								
Expenditure from corporate funds	Spring , TX 77379								
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description							
OF EXPENDITURE	Contributions/Donations Made By	Check if travel outside of Texas. Complete Schedule T.							
EXPENDITURE	Candidate/Officeholder/Political Committee	Check if Austin, TX, officeholder living expense							
		Campaign contribution							
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	ight Office held							
experientare to benefit 6/61	•								
Date	Payee name								
01/09/2024	Ramirez, J.R. (Mr.)								
Amount (\$)	Payee address; City; State; Zip Co	ode							
\$1,000.00	PO Box 2134								
Expenditure from corporate funds	Uvalde, TX 78802								
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description							
OF EXPENDITURE	Contributions/Donations Made By	Check if travel outside of Texas. Complete Schedule T.							
EXPENDITORE	Candidate/Officeholder/Political Committee	Check if Austin, TX, officeholder living expense							
		Campaign contribution							
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	ight Office held							
Date	Payee name								
01/17/2024	Smith, Hatch (Mr.)								
Amount (\$)	Payee address; City; State; Zip Co	ode							
\$1,000.00	603 E. Ellis St.								
Evpanditura from									
Expenditure from corporate funds	Llano , TX 78643								
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description							
OF EXPENDITURE	Contributions/Donations Made By	Check if travel outside of Texas. Complete Schedule T.							
EXPENDITORE	Candidate/Officeholder/Political Committee	Check if Austin, TX, officeholder living expense							
		Campaign contribution							
Operation Children	Our distance (Office has believe to	Off.							
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sou	ight Office held							
,									

POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

	Consulting Expense Contributions' Donations Made By Candidate/Officeholder/Politica Credit Card Payment		mmittee	Gift/Awards Legal Servi		xpense		Expens Wages			Travel in Distric Travel Out of D OTHER (enter		
1	Total pages Schedule F1:	2	FILER NAME	E						3	Filer ID	(Ethics Commission Filers)	
	Sch: 3/3 Rpt: 9/9		The Beer A	Iliance o	f Texas F	Political A	ction Co	mmi	ttee		00015767		
4	Date	5	Payee name										
	01/10/2024		Spec's Liqu	ıor									
6	Amount (\$)	7	Payee addre	ess; C	city;	State	e; Zip C	ode					_
	\$845.30		2410 Smith	Street									
	Expenditure from corporate funds		Houston , T	X 77006	5								
8	PURPOSE	(a)	Category (S	ee Categorie	es listed at the	top of this sc	hedule)	(b)	Description				
	OF EXPENDITURE		Food/Beve	rage Exp	ense				=			mplete Schedule T.	
									_		officeholder livin	Gina Hinojosa 50th	
									Birthday Fun	•		•	
9	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Off	iceholder	name		Office sou	<u>l</u> ught			Office h	neld	
	Date		Payee name	<u> </u>									=
	01/16/2024		Texas Hous		blican Ca	ucus PA0	С						
	Amount (\$)	┢	Payee addre	ess: C	ity;	State	e; Zip C	ode					_
	\$5,000.00		PO Box 13		3,		, 1						
	, , , , , , , , , , , , , , , , , , , ,												
	Expenditure from corporate funds		Austin , TX	78701									
	PURPOSE OF	(a)	Category (S	ee Categorie	es listed at the	top of this sc	hedule)	(b)	Description				
	EXPENDITURE		Contribution				-:44				de of Texas. Cor officeholder livin	nplete Schedule T.	
			Candidate/	Oniceno	ider/Politi	cai Comi	nillee		Contribution	1, 17,	officeriolder livin	ig expense	
	Complete ONLY if direct expenditure to benefit C/OI		Candidate/Off	iceholder	name		Office sou	ught			Office h	neld	_
		_											_
	Date		Payee name										
	01/03/2024		Vo, Hubert	(Rep.)									
	Amount (\$)		Payee addre	ess; C	city;	State	e; Zip C	ode					
	\$1,000.00		PO Box 22	27									
_	T Expenditure from												
L	corporate funds		Alief, TX 77	7411									
	PURPOSE	(a)	Category (S	ee Categorie	es listed at the	top of this sc	hedule)	(b)	Description				
	OF EXPENDITURE		Contribution									mplete Schedule T.	
			Candidate/	Officeno	ider/Politi	cai Comr	nittee		Campaign co		officeholder livin	ig expense	
									Campaign)	ibation		
	Complete ONLY if direct	Ц,	Candidate/Off	iceholder	name		Office sou	uaht			Office h	neld	_
	expenditure to benefit C/OI		Janaluale/OII	iocrioiuel	name		JIIICE 301	agrit			Office I	iciu	
													_