#### 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) 00017307 3 COMMITTEE NAME **OFFICE USE ONLY** Independent Automobile Dealers PAC Date Received **ELECTRONICALLY FILED** 02/26/2024 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** 9951 Anderson Mill Rd., Ste. 101 Date Hand-delivered or Date Postmarked Change of Address Austin, TX 78750 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** John NAME NICKNAME LAST **SUFFIX** Frullo STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 9951 Anderson Mill Rd., Ste. 101 STREET **ADDRESS** (Residence or Business) Austin, TX 78750 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** MAILING **ADDRESS** TX Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (512) 244-6060 PHONE REPORT January 15 30th day before election Dissolution (Attach PAC-DR) **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 02/24/2024 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)
Independent Automo	bile Dealers PAC		00017307	
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.)	A. Supported  B. Opposed		
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)	Rep. Harold Dutton State Repr	resentative	
15 CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS M	POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR ADE ELECTRONICALLY) qualifies for the higher itemization threshold	\$	0.00
	2. TOTAL POLITICA  (OTHER THAN PLE	L CONTRIBUTIONS DGES, LOANS, OR GUARANTEES OF LOANS)	\$	5,280.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICA	L EXPENDITURES	\$	19,000.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL ( OF THE REPORTING	CONTRIBUTIONS MAINTAINED AS OF THE LAST I G PERIOD	DAY \$	121,112.66
OUTSTANDING LOAN TOTALS		AMOUNT OF ALL OUTSTANDING LOANS AS OF T REPORTING PERIOD	HE \$	0.00
16 AFFIDAVIT				
		I swear, or affirm, under penalty of per true and correct and includes all inforr under Title 15, Election Code.		
		John	Frullo	
		Signature of Car	npaign Treasur	er
AFFIX NOTA	RY STAMP / SEAL ABOVE			
Sworn to and subscrib	ped before me, by the said	, th	is the	day
		which, witness my hand and seal of office.		
Signature of officer	administering oath	Printed name of officer administering oath	Title of office	er administering oath

### FORM GPAC ADDENDUM

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						1 ago o o 20
12	COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
	Independent Automobile	e Dealers PAC			00017307	
	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. Gio Capriglione State Rep	resentative	
	COMMITTEE	Candidates	A. Supported			
	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. Stephanie Klick State Rep	resentative	
		(Identify by name or, if applicable, classify by party.)				
	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			
		2. Measures	A. Supported			
		(Describe by date and location of election and nature of issue.)				
			B. Opposed			
		Officeholders     Assisted		Rep. Mano DeAyala State Repr	esentative	
		(Identify by name or, if applicable, classify by party.)				

# FORM GPAC ADDENDUM

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12	COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
	Independent Automobile	e Dealers PAC			00017307	
	COMMITTEE ACTIVITY	1. 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			
		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.)		Rep. Lacey Hull State Represer	ntative	
	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			
		2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
			B. Opposed			
		Officeholders     Assisted     (Identify by name or, if applicable, classify by party.)		Rep. David Spiller State Repres	entative	
	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			
		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.)		Rep. Lynn Stucky State Represe	entative	

### FORM GPAC ADDENDUM

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12	COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
	Independent Automobile	e Dealers PAC			00017307	
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			
		2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
			B. Opposed			
		Officeholders     Assisted     (Identify by name or, if applicable, classify by party.)		Rep. Joe Moody State Represe	ntative	
	COMMITTEE	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 (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.)		Rep. Mary Gonzalez State Repr	resentative	
	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			
		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.)		Rep. Caroline Harris State Repr	resentative	

# FORM GPAC ADDENDUM

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12	COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
	Independent Automobile	e Dealers PAC			00017307	
	COMMITTEE ACTIVITY	1. 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			
		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.)		Rep. Travis Clardy State Repres	sentative	
	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			
		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.)		Rep. John Kuempel State Repre	esentative	
	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			
		2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
			B. Opposed			
		Officeholders     Assisted     (Identify by name or, if applicable, classify by party.)		Rep. DeWayne Burns State Rep	oresentative	

### FORM GPAC ADDENDUM

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12	COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
	Independent Automobile	e Dealers PAC			00017307	
	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. Glenn Rogers State Repre	sentative	
	OOMUTTEE		A C			
	COMMITTEE ACTIVITY	Candidates  (Identify by name or, if	A. Supported			
	(Attack lists on white	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. John Smithee State Repre	sentative	
		(Identify by name or, if applicable, classify by party.)				
	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			
		2. Measures	A. Supported			
		(Describe by date and location of election and nature of issue.)				
			B. Opposed			
		3. Officeholders Assisted		Rep. Ken King State Representa	ative	
		(Identify by name or, if applicable, classify by party.)				

# FORM GPAC ADDENDUM

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12 COMMITTEE NAME		13 Filer ID (Ethics Commission Filers)
Independent Automobile Dealers PAC		00017307
14 COMMITTEE ACTIVITY  1. 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.)	A. Supported	
	B. Opposed	
Officeholders     Assisted     (Identify by name or, if applicable, classify by party		and State Representative
COMMITTEE ACTIVITY  1. 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	
2. Measures (Describe by date and location of election and nature of issue.)	A. Supported	
	B. Opposed	
Officeholders     Assisted     (Identify by name or, if applicable, classify by party		ert State Representative
COMMITTEE ACTIVITY  1. 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	
2. Measures (Describe by date and location of election and nature of issue.)	A. Supported	
	B. Opposed	
Officeholders     Assisted     (Identify by name or, if applicable, classify by party		daz State Representative

### FORM GPAC **ADDENDUM**

12	COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
_	Independent Automobile	e Dealers PAC			00017307	
	COMMITTEE ACTIVITY	1. 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			
		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.)		Rep. Dustin Burrows State Repr	resentative	
	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			
		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.)		Rep. Carl Tepper State Represe	entative	
	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			
		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.)		Sen. Cesar Blanco State Senato	or	

### GENERAL-PURPOSE COMMITTEE REPORT:

## FORM GPAC ADDENDUM

PURPOSE					ADDENDON
					Page 10 of 25
12 COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
Independent Automobi	le Dealers PAC			00017307	
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			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	Officeholders     Assisted		Rep. Ben Bumgarner State Rep	resentative	
	(Identify by name or, if applicable, classify by party.)				

### **SUBTOTALS - GPAC**

### FORM GPAC **COVER SHEET PG 3**

				11 of 25
17 COMMITT Independ	EE NAME ent Automobile Dealers PAC	<b>18</b> Filer ID 00017307	(Ethics Com	mission Filers)
	E SUBTOTALS SCHEDULE		SUBTO	TAL AMOUNT
1. X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	5,280.00
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	ATION OR	\$	
6.	SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	ANIZATION	\$	
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	S	\$	19,000.00
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	\$	159.14
15.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$	

	MONET	ARY POLITICAL CO	ONTRIBUTION	S		SCHEDUL	E <b>A1</b>
	The Instru	ction Guide explains how to	complete this form	n.	1	Total pages Schedule A1: Sch: 1/5 Rpt: 12/25	
2	FILER NAME Independent	Automobile Dealers PAC			3	Filer ID (Ethics Commission 00017307	n Filers)
4	Date 02/21/2024	<ul><li>5 Full name of contributor</li><li>Donnelly, Chris</li><li>6 Contributor address; City; State</li></ul>	out-of-state PAC (ID#: ; Zip Code		7	Amount of Contribution (\$)	\$100.00
_	Daine in all access	Conroe, TX 77301		Farada a (Cara la decentia a			
8	Car dealer	pation / Job title (See Instructions)	9	Employer (See Instructions Your Car Store	5)		
	Date 01/15/2024	Full name of contributor  Goodman, Jason  Contributor address; City; State	out-of-state PAC (ID#: ;; Zip Code			Amount of Contribution (\$)	\$15.00
	Principal occu	Bellaire, TX 77401		Employer (See Instructions	_		
	Car dealer	pation / Job title (See Instructions)		500 Below Cars	')		
	Date 02/15/2024	Full name of contributor  Goodman, Jason  Contributor address; City; State	out-of-state PAC (ID#:e; Zip Code	)		Amount of Contribution (\$)	\$15.00
		Bellaire, CA 77401					
	Principal occu Car dealer	pation / Job title (See Instructions)		Employer (See Instructions 500 Below Cars	5)		
	Date 01/20/2024	Full name of contributor Gregory, Tommy Contributor address; City; State Abilene, TX 79606				Amount of Contribution (\$)	\$300.00
	Principal occu Car dealer	pation / Job title (See Instructions)		Employer (See Instructions Abilene Used Car Sales			
	Date 02/20/2024	Full name of contributor Gregory, Tommy Contributor address; City; State Abilene, TX 79606		)		Amount of Contribution (\$)	\$300.00
	Principal occu Car dealer	pation / Job title (See Instructions)		Employer (See Instructions Abilene Used Car Sales			
			I_				

	FARY POLITICAL CONTRIBUTION	NS		SCHEDUL	E <b>A1</b>
The Instru	action Guide explains how to complete this for	m.	1	Total pages Schedule A1: Sch: 2/5 Rpt: 13/25	
2 FILER NAME	t Automobile Dealers PAC		3	Filer ID (Ethics Commission 00017307	on Filers)
4 Date 01/17/2024	Full name of contributor	)	7	Amount of Contribution (\$)	\$100.00
	Taylor, TX 76574				
8 Principal occu Car dealer	upation / Job title (See Instructions)  9	Employer (See Instructions Taylor Auto Credit	5)		
Date 02/17/2024	Full name of contributor out-of-state PAC (ID#: Hagler, Keith Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$100.00
	Taylor, CA 76574		_		
Principal occu Car dealer	upation / Job title (See Instructions)	Employer (See Instructions Taylor Auto Credit	5)		
Date 02/21/2024	Full name of contributor out-of-state PAC (ID#: Hale, Eddie Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$3,100.00
	Alvord, TX 76225				
Principal occu Car dealer	upation / Job title (See Instructions)	Employer (See Instructions Neighborhood Autos	5)		
Date 01/17/2024	Full name of contributor out-of-state PAC (ID#:  Hanson, April  Contributor address; City; State; Zip Code  The Woodlands, TX 77382			Amount of Contribution (\$)	\$100.00
Principal occu	upation / Job title (See Instructions)	Employer (See Instructions Coast to Coast Motors	<u> </u> 5)		
	Full name of contributor out-of-state PAC (ID#: Hanson, April			Amount of Contribution (\$)	\$100.0
Date 02/17/2024	Contributor address; City; State; Zip Code  The Woodlands, FL 77382				

	MONETARY POLITICAL CONTRIBUTIONS			SCHEDULE A			
	The Instruc	ction Guide explains hov	to complete this fo	orm.	1	Total pages Schedule A1: Sch: 3/5 Rpt: 14/25	
2	FILER NAME		3	Filer ID (Ethics Commission	n Filers)		
	Independent	: Automobile Dealers PAC				00017307	
4	Date  5 Full name of contributor out-of-state PAC (ID#:)  101/12/2024 Jones, Mark  6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$100.00		
		Mansfield, TX 76063					
8	Principal occu Car dealer	pation / Job title (See Instructions	(5)	9 Employer (See Instructions MCMC	5)		
	Date Full name of contributor out-of-state PAC (ID#:)  02/12/2024 Jones, Mark  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00		
		Mansfield, AZ 76063	1				
Principal occupation / Job title (See Instructions)  Car dealer  Employer (See Instructions  MCMC		s) 					
	Date Full name of contributor out-of-state PAC (ID#:)  01/03/2024 Rodriguez, Edgar  Contributor address; City; State; Zip Code		•	Amount of Contribution (\$)	\$100.00		
		Tomball, TX 77375					
	Principal occu Car dealer	pation / Job title (See Instructions	6)	Employer (See Instructions Rodeo Autos	5)		
	Date Full name of contributor out-of-state PAC (ID#:)  Rodriguez, Edgar  Contributor address; City; State; Zip Code  Tomball, TX 77375		•	Amount of Contribution (\$)	\$100.00		
	Principal occu Car dealer	pation / Job title (See Instructions	5)	Employer (See Instructions Rodeo Autos	s)		
	Date Full name of contributor out-of-state PAC (ID#:)  01/20/2024 Rogers, Lowell  Contributor address; City; State; Zip Code  Beaumont, TX 77706		•	Amount of Contribution (\$)	\$50.00		
	Principal occu Car dealer	pation / Job title (See Instructions	5)	Employer (See Instructions 11th Street Motors	s)		

	MONET	ARY POLITICAL CONTR	RIBUTIONS			SCHEDUL	E <b>A1</b>
	The Instru	ction Guide explains how to comp	olete this form.		1	Total pages Schedule A1: Sch: 4/5 Rpt: 15/25	
2	FILER NAME Independent Automobile Dealers PAC		3	Filer ID (Ethics Commission 00017307	n Filers)		
4			7	Amount of Contribution (\$)	\$50.00		
_		Beaumont, TX 77706	1				
8	Principal occu Car dealer	pation / Job title (See Instructions)		nployer (See Instructions th Street Motors	)		
	Date Full name of contributor out-of-state PAC (ID#:) 01/07/2024 Simmons, Tyler Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$50.00		
		Abilene, TX 79606					
Principal occupation / Job title (See Instructions)  Car dealer  Abilene Used Car Sales		)					
	Date Full name of contributor out-of-state PAC (ID#:) 02/07/2024 Simmons, Tyler  Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$50.00		
		Abilene, TX 79606					
	Principal occu Car dealer	pation / Job title (See Instructions)		nployer (See Instructions bilene Used Car Sales	)		
	Date Full name of contributor out-of-state PAC (ID#:)  01/15/2024 Winkelmann, Ryan  Contributor address; City; State; Zip Code  Pearland, TX 77581			Amount of Contribution (\$)	\$100.00		
	Principal occu Car dealer	pation / Job title (See Instructions)		nployer (See Instructions Is Autohaus	)		
	Date O2/15/2024 Full name of contributor out-of-state PAC (ID#:) Winkelmann, Ryan Contributor address; City; State; Zip Code Pearland, TX 77581			Amount of Contribution (\$)	\$100.00		
	Principal occu Car dealer	pation / Job title (See Instructions)		nployer (See Instructions Is Autohaus	)		
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MONETARY POLITICAL CONTRIBUTIONS				SCHEDULE A1			
	The Instruction Guide explains how to complete this form.			1	Total pages Schedule A1: Sch: 5/5 Rpt: 16/25		
2	FILER NAME	FILER NAME Independent Automobile Dealers PAC		3	Filer ID (Ethics Commission Filers) 00017307	_	
4	Date 01/15/2024	5 Full name of contributor  out-of-state PAC (I Zak, Gregory  6 Contributor address; City; State; Zip Code		)	7	Amount of Contribution (\$) \$125.00	О
8		Sugar Land, TX 77478  Ipation / Job title (See Instructions)	9	Employer (See Instructions	j 5)		
	Date   Full name of contributor   out-of-state PAC (ID#:)  Zak, Gregory  Contributor address; City; State; Zip Code			Amount of Contribution (\$) \$125.00	<b>II</b> 0		
	Principal occu	Sugar Land, TX 77478  Ipation / Job title (See Instructions)		Employer (See Instructions Dixon Motors	<u> </u> 5)		

#### SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By - Event Expense Fees Food/Beverage Expense

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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

Gift/Awards/Memorials Expense Travel Out of District Legal Services Candidate/Officeholder/Political Committee OTHER (enter a category not listed above) Credit Card Payment The Instruction Guide explains how to complete this form. Total pages Schedule F1: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 1/8 Rpt: 17/25 Independent Automobile Dealers PAC 00017307 4 Date Payee name 02/15/2024 Blanco, Cesar (Sen.) 6 Amount (\$) Payee address; State; Zip Code \$1,500.00 PO BOX 27074 Expenditure from El Paso, TX 79926 corporate funds **PURPOSE** 8 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate/Officeholder/Political Committee Campaign donation Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 02/15/2024 Bumgarner, Ben (Rep.) Amount (\$) Payee address; City; State; Zip Code \$500.00 2201 Spinks Rd STE 250 Expenditure from Flower Mound, TX 75022 corporate funds **PURPOSE** (b) Description (a) Category (See Categories listed at the top of this schedule) OF Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate/Officeholder/Political Committee Campaign donation Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name 02/15/2024 Burns, DeWayne (Rep.) Amount (\$) Payee address: City: State; Zip Code \$1,000.00 703 Stonelake Dr. Expenditure from Cleburne, TX 76033 corporate funds **PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description OF Check if travel outside of Texas. Complete Schedule T. Contributions/Donations Made By **EXPENDITURE** Check if Austin, TX, officeholder living expense Candidate/Officeholder/Political Committee Campaign donation Complete ONLY if direct Candidate/Officeholder name Office held Office sought expenditure to benefit C/OH

#### 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)

	Credit Card Payment	The Instruction Guide explains how to com	ple	te this form.
1	Total pages Schedule F1:	2 FILER NAME		3 Filer ID (Ethics Commission Filers)
	Sch: 2/8 Rpt: 18/25	Independent Automobile Dealers PAC		00017307
4	Date	5 Payee name		<u> </u>
	02/15/2024	Burrows, Dustin (Rep.)		
6	Amount (\$)	7 Payee address; City; State; Zip Cod	le	
	\$1,500.00	10507 Quaker Ave STE 103		
	Expenditure from corporate funds	Lubbock, TX 79424		
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.
	LXI LINDITORE	Candidate/Officeholder/Political Committee		Check if Austin, TX, officeholder living expense
				Campaign donation
0	Complete ONLY if direct	Candidate/Officeholder name Office soug	ht	Office held
9	expenditure to benefit C/OI		H	Office field
	Data			
	Date 02/15/2024	Payee name		
		Capriglione, Gio (Rep.)		
	Amount (\$)	Payee address; City; State; Zip Cod	le	
	\$500.00	PO BOX 92007		
_	T Expenditure from			
L	corporate funds	Southlake, TX 76092		
	PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b)	Description
	EXPENDITURE	Contributions/Donations Made By		Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
		Candidate/Officeholder/Political Committee		Campaign donation
	Complete ONLY if direct	Candidate/Officeholder name Office soug	ht	Office held
	expenditure to benefit C/OI			
	Date	Payee name		
	02/15/2024	Clardy, Travis (Rep.)		
	Amount (\$)	Payee address; City; State; Zip Cod	او	
	\$1,000.00	209 E Main St		
	Ψ1,000.00	200 2 (Main Ot		
Г	Expenditure from corporate funds	Nacogdoches, TX 75961		
_	•	-	'L\	
	PURPOSE OF	,	(D)	Description  Check if travel outside of Texas. Complete Schedule T.
	EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee		Check if Austin, TX, officeholder living expense
				Campaign donation
	Complete ONLY if direct	Candidate/Officeholder name Office soug	ht	Office held
	expenditure to benefit C/OI	1		

#### SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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

Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 3/8 Rpt: 19/25	Independent Automobile Dealers PAC 00017307
4 Date	5 Payee name
02/15/2024	DeAyala, Mano (Rep.)
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$500.00	12335 Kingsride Lane #416
- Evnanditura from	
Expenditure from corporate funds	Houston, TX 77024
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Contributions/Donations Made By  Candidate/Officeholder/Political Committee  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	Candidate/Officeholder/Political Committee Campaign donation
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name Office sought Office held
Date	Payee name
02/14/2024	Dutton, Harold (Rep.)
Amount (\$)	Payee address; City; State; Zip Code
\$500.00	3801 Kirby Dr STE 411
Expenditure from	
corporate funds	Houston, TX 77098
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.
	Candidate/Officeholder/Political Committee Campaign donation
	Campaign donation
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1
Date	Payee name
02/15/2024	Gonzalez, Mary (Rep.)
Amount (\$)	Payee address; City; State; Zip Code
\$500.00	PO Box 450
Expenditure from corporate funds	Clint, TX 79836
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.
	Candidate/Officeholder/Political Committee Campaign donation
	Campaign donation
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	

#### SCHEDULE F1

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	I Committee 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 I	•		
1 Total pages Schedule F1:			3 Filer ID (Ethics Commission Filers)	
Sch: 4/8 Rpt: 20/25	Independent Automobile Dealers PAC		00017307	
4 Date	5 Payee name			
02/15/2024	Harris, Caroline (Rep.)			
6 Amount (\$) \$1,000.00	<b>7</b> Payee address; City; State; PO Box 700	Zip Code		
Expenditure from corporate funds	Round Rock, TX 78680			
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this sche Contributions/Donations Made By Candidate/Officeholder/Political Comm	Check if travel of	outside of Texas. Complete Schedule T. TX, officeholder living expense nation	
Complete <u>ONLY</u> if direct expenditure to benefit C/Oh		office sought	Office held	
Date	Payee name			
02/15/2024	Holland, Justin (Rep.)			
Amount (\$)	Payee address; City; State;	Zip Code		
\$1,000.00	3021 Ridge Road Suite A			
Expenditure from corporate funds	Box 79 Rockwall, TX 75032			
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this sche Contributions/Donations Made By Candidate/Officeholder/Political Comm	Check if travel of	outside of Texas. Complete Schedule T. TX, officeholder living expense Ination	
Complete ONLY if direct expenditure to benefit C/OF		office sought	Office held	
Date 02/15/2024	Payee name Hull, Lacey (Rep.)			
Amount (\$)		Zip Code		
\$500.00	PO Box 19231	Zip Godo		
Expenditure from corporate funds	Houston, TX 77224			
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this sche Contributions/Donations Made By Candidate/Officeholder/Political Comm	Check if travel of	outside of Texas. Complete Schedule T. TX, officeholder living expense ntribution	
Complete <u>ONLY</u> if direct expenditure to benefit C/Oh		Office sought	Office held	

#### SCHEDULE F1

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By Candidate/Officeholder/Political Committee

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

**EXPENDITURE CATEGORIES FOR BOX 8(a)** 

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
OTHER (enter a category not listed above)

Candidate/Officeholder/Politica Credit Card Payment	I Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)
orodit odra i dymoni	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 5/8 Rpt: 21/25	Independent Automobile Dealers PAC 00017307
4 Date	5 Payee name
02/15/2024	King, Ken (Rep.)
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,000.00	P.O. Box 517
Expenditure from corporate funds	Canadian, TX 79014
8 PURPOSE	· · · · · · · · · · · · · · · · · · ·
OF	(a) Category (See Categories listed at the top of this schedule)  Contributions/Donations Made By  (b) Description  Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense
	Campaign donation
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Parameter
	Payee name
02/15/2024	Klick, Stephanie (Rep.)
Amount (\$)	Payee address; City; State; Zip Code
\$500.00	PO Box 7592
Expenditure from corporate funds	Fort Worth, TX 76111
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	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 donation
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1
Date	Payee name
02/15/2024	Kuempel, John (Rep.)
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	523 E Donegan #102
Expenditure from	
corporate funds	Seguin, TX 78155
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
	Campaign donation
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1

#### 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)

Credit Card Layment	The Instruction Guide explains how to c	omplete this form.
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 6/8 Rpt: 22/25	Independent Automobile Dealers PAC	00017307
4 Date	5 Payee name	
02/15/2024	Lambert, Stan (Rep.)	
6 Amount (\$)	7 Payee address; City; State; Zip C	ode
\$1,000.00	PO Box 3752	
Expenditure from corporate funds	Abilene, TX 79604	
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule)	(b) Description
EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee	Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense
	Candidate/Onicenoider/Political Committee	Campaign donation
9 Complete ONLY if direct	Candidate/Officeholder name Office so	Luaht Office held
expenditure to benefit C/O		Cinco Hold
Data		
Date 02/15/2024	Payee name	
	Moody, Joe (Rep.)	
Amount (\$)	Payee address; City; State; Zip C	ode
\$500.00	PO Box 920827	
Expenditure from corporate funds	El Paso, TX 79902	
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.
LAI LABITORE	Candidate/Officeholder/Political Committee	Check if Austin, TX, officeholder living expense
		Campaign donation
Operation ONLY if allowed	Out distant Office leading a second	Office held
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office so	ught Office held
<u> </u>		
Date	Payee name	
02/15/2024	Ordaz, Claudia (Rep.)	
Amount (\$)	Payee address; City; State; Zip C	ode
\$1,000.00	PO Box 71738	
- Evnanditura from		
Expenditure from corporate funds	El Paso, TX 79917	
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 donation
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office so	ught Office held
experience to belieff C/O	•	

#### 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

Consultung Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	· · · · · · · · · · · · · · · · · · ·
Sch: 7/8 Rpt: 23/25	Independent Automobile Dealers PAC 00017307
4 Date	5 Payee name
02/15/2024	Rogers, Glenn (Rep.)
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,000.00	PO Box 11
·	
Expenditure from corporate funds	Graford, TX 76449
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Contributions/Donations Made By  Check if travel outside of Texas. Complete Schedule T.
	Candidate/Officeholder/Political Committee Campaign donation
	Campaigh donaidh
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
02/15/2024	Smithee, John (Rep.)
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	320 S Polk STE 920
Expenditure from corporate funds	Amarillo, TX 79101
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.
	Candidate/Officeholder/Political Committee Campaign donation
	Campaign donation
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	<b>o</b>
Date	Payee name
02/15/2024	Spiller, David (Rep.)
Amount (\$)	Payee address; City; State; Zip Code
\$500.00	PO Box 447
Expenditure from corporate funds	Jacksboro, TX 76458
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.
-	Candidate/Officeholder/Political Committee
	Campaign donation
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	

#### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

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

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

Candidate/Officeholder/Politica Credit Card Payment	I Committee 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:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 8/8 Rpt: 24/25	Independent Automobile Dealers PAC 00017307
4 Date	5 Payee name
02/15/2024	Stucky, Lynn (Rep.)
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$500.00	PO Box 464
Expenditure from corporate funds	Denton, TX 76202
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.
	Candidate/Officeholder/Political Committee Campaign donation
	Campaigh donation
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
02/15/2024	Tepper, Carl (Rep.)
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	Box 94534
Expenditure from corporate funds	Lubbock, TX 79493
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Contributions/Donations Made By  Candidate/Officeholder/Political Committee  Candidate/Officeholder   Check if Austin, TX, officeholder living expense
	Candidate/Officeholder/Political Committee Campaign donation
	Gampaign denaile.
Complete ONLY if direct expenditure to benefit C/O	L Candidate/Officeholder name Office sought Office held H

### NON-DOLITICAL EXPENDITURES

	MADE FROM F	SCHEDULE I				
	The Instruction Guide explains how to complete this form.					
1	Total pages Schedule I: Sch: 1/1 Rpt:	2 FILER NAME Independent Automobile Dealers PAC 3 Filer ID (Ethics Commission 00017307				
4	Date 02/21/2024	5 Payee name TSYS				
6	Amount (\$)  159.14  Expenditure from corporate funds	7 Payee Address; City; State; Zip One TSYS Way Columbus, GA 31901				
8	PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Accounting/Banking  (b) Description  credit card	(See instructions regarding type of information required.)  processing fees			