MONTHLY FILING GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

The MPAC Instruction Guide explains how to complete this form.	**1** Filer ID (Ethics Commission Filers) 00059417

2 Total pages filed: 5

3 COMMITTEE NAME

Texas Association of Mutual Insurance Companies PAC

OFFICE USE ONLY

Date Received

ELECTRONICALLY FILED

04/04/2024

4 COMMITTEE ADDRESS

ADDRESS / PO BOX;   APT / SUITE #;   CITY;   STATE;   ZIP

P.O. Box 389

☐ Change of Address

Yoakum, TX 77995-0389

Date Hand-delivered or Date Postmarked

5 CAMPAIGN TREASURER NAME

MS / MRS / MR   FIRST   MI

Mr.   Timothy L.

Receipt #   Amount

Date Processed

NICKNAME   LAST   SUFFIX

McCoy

Date Imaged

6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)

STREET ADDRESS (NO PO BOX PLEASE);   APT / SUITE #;   CITY;   STATE;   ZIP CODE

500 S. US Hwy 77A

Yoakum, TX 77995

7 CAMPAIGN TREASURER MAILING ADDRESS

STREET ADDRESS OR PO BOX;   APT / SUITE #;   CITY;   STATE;   ZIP CODE

P.O. Box 389

☐ Change of Address

Yoakum, TX 77995-0389

8 CAMPAIGN TREASURER PHONE

AREA CODE   PHONE NUMBER   EXTENSION

(361) 293-1070

9 REPORT TYPE

☒ Monthly   ☐ 10th day after campaign treasurer termination   ☐ Dissolution (Attach PAC-DR)

10 MONTHLY REPORT FILING DEADLINE

☐ January 5	☒ April 5	☐ July 5	☐ October 5
☐ February 5	☐ May 5	☐ August 5	☐ November 5
☐ March 5	☐ June 5	☐ September 5	☐ December 5

11 PERIOD COVERED

Month   Day   Year
02/26/2024

THROUGH

Month   Day   Year
03/25/2024

GO TO PAGE 2

MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

12 COMMITTEE NAME	**13** Filer ID	(Ethics Commission Filers)
Texas Association of Mutual Insurance Companies PAC	00059417	

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
	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.)	

15 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) ☐ check here if this report qualifies for the higher itemization threshold	$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	$ 0.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	$ 0.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	$ 18,929.12
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	$ 0.00

16 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 L. McCoy
Signature of Campaign Treasurer

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

SUBTOTALS - MPAC

17 COMMITTEE NAME

Texas Association of Mutual Insurance Companies PAC

18 Filer ID   (Ethics Commission Filers)

00059417

19 SCHEDULE SUBTOTALS

NAME OF SCHEDULE	SUBTOTAL AMOUNT
1. [X] SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	$ 0.00
2. [X] SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	$ 0.00
3. [X] SCHEDULE B: PLEDGED CONTRIBUTIONS	$ 0.00
4. [ ] SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	$
5. [ ] SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	$
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. [X] SCHEDULE E: LOANS	$ 0.00
10. [X] SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	$ 0.00
11. [X] SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	$ 0.00
12. [X] SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	$ 0.00
13. [X] SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	$ 0.00
14. [ ] SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	$
15. [ ] SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	$

PLEDGED CONTRIBUTIONS

SCHEDULE **B**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule B: Sch: 1/1 Rpt: 4/5	

2 FILER NAME

Texas Association of Mutual Insurance Companies PAC

3 Filer ID (Ethics Commission Filers)

00059417

4 TOTAL OF UNITEMIZED PLEDGES

$ 0.00

5 Date	**6** Full name of pledgor ☐ out-of-state PAC (ID#:_____) **7** Pledgor Address; City; State; Zip Code	**8** Amount of pledge ($)	**9** In-kind description (If applicable)
			☐ Check if travel outside of Texas. Complete Schedule T.

10 Principal occupation / Job title (See Instructions)

11 Employer (See Instructions)

LOANS

SCHEDULE **E**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule E: Sch: 1/1 Rpt: 5/5	

2 FILER NAME

Texas Association of Mutual Insurance Companies PAC

3 Filer ID (Ethics Commission Filers)

00059417

4 TOTAL OF UNITEMIZED LOANS

$ 0.00

5 Date of loan	**7** Name of lender ☐ out-of-state PAC (ID#:_____)	**9** Loan Amount ($)
6 Is lender a financial institution?	**8** Lender address; City; State; Zip Code	**10** Interest Rate
		11 Maturity Date

12 Principal occupation / Job title (See Instructions)	**13** Employer (See Instructions)

14 Description of Collateral ☐ None	**15** Check if personal funds were deposited into political account ☐ (See Instructions)

16 GUARANTOR INFORMATION ☐ not applicable	**17** Name of guarantor	**19** Amount Guaranteed ($)
	18 Guarantor address; City; State; Zip Code	

20 Principal occupation	**21** Employer (See Instructions)