

MONTHLY FILING GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM MPAC
COVER SHEET PG 1

The MPAC Instruction Guide explains how to complete this form.			1 Filer ID (Ethics Commission Filers) 00015644	2 Total pages filed: 32
3 COMMITTEE NAME National Association of Insurance and Financial Advisors - Texas PAC			OFFICE USE ONLY	
4 COMMITTEE ADDRESS <input type="checkbox"/> Change of Address			ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP 3755 Attucks Drive Powell, OH 43065	
			Date Received ELECTRONICALLY FILED 06/04/2024	
5 CAMPAIGN TREASURER NAME			Date Hand-delivered or Date Postmarked	
MS / MRS / MR FIRST MI Mr. Daniel			Receipt # Amount	
NICKNAME LAST SUFFIX O'Connell			Date Processed	
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)			Date Imaged	
STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 3755 Attucks Drive Powell, OH 43065				
7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address			STREET ADDRESS OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 1250 S. Capitol of TX Hwy. Bldg. 3 Ste. 400 Austin, TX 78746	
8 CAMPAIGN TREASURER PHONE			AREA CODE PHONE NUMBER EXTENSION (512) 716-8800	
9 REPORT TYPE			<input checked="" type="checkbox"/> Monthly <input type="checkbox"/> 10th day after campaign treasurer termination <input type="checkbox"/> Dissolution (Attach PAC-DR)	
10 MONTHLY REPORT FILING DEADLINE			<input type="checkbox"/> January 5 <input type="checkbox"/> April 5 <input type="checkbox"/> July 5 <input type="checkbox"/> October 5 <input type="checkbox"/> February 5 <input type="checkbox"/> May 5 <input type="checkbox"/> August 5 <input type="checkbox"/> November 5 <input type="checkbox"/> March 5 <input checked="" type="checkbox"/> June 5 <input type="checkbox"/> September 5 <input type="checkbox"/> December 5	
11 PERIOD COVERED			Month Day Year THROUGH Month Day Year 04/26/2024 THROUGH 05/25/2024	

GO TO PAGE 2

MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

FORM MPAC
COVER SHEET PG 2

12 COMMITTEE NAME National Association of Insurance and Financial Advisors - Texas PAC	13 Filer ID (Ethics Commission Filers) 00015644
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14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported
		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 Representative

15 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) <input type="checkbox"/> 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)	\$ 6,111.20
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	\$ 119,279.84
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. Daniel O'Connell

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

MONTHLY FILING GPAC REPORT: PURPOSE

FORM **MPAC**
ADDENDUM

Page 3 of 32

12 COMMITTEE NAME National Association of Insurance and Financial Advisors - Texas PAC		13 Filer ID (Ethics Commission Filers) 00015644
14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported
		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. Angela Paxton State Senator

SUBTOTALS - MPAC

17 COMMITTEE NAME National Association of Insurance and Financial Advisors - Texas PAC		18 Filer ID (Ethics Commission Filers) 00015644
19 SCHEDULE SUBTOTALS		SUBTOTAL AMOUNT
	NAME OF SCHEDULE	
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 5,544.20
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input checked="" type="checkbox"/> SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$ 567.00
5.	<input type="checkbox"/> SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
6.	<input type="checkbox"/> SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
7.	<input type="checkbox"/> SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
8.	<input type="checkbox"/> SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
9.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
10.	<input type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
11.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
12.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
13.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
14.	<input checked="" type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 3,461.75
15.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/22 Rpt: 5/32
2 FILER NAME National Association of Insurance and Financial Advisors - Texas PAC		3 Filer ID (Ethics Commission Filers) 00015644
4 Date 05/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aaron, Cappilla <hr/> 6 Contributor address; City; State; Zip Code Amarillo, TX 79121-1044	7 Amount of Contribution (\$) \$8.00
8 Principal occupation / Job title (See Instructions) Agent/Owner		9 Employer (See Instructions) Aaron Cappilla farmers insurance agency
Date 05/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alan, Holland <hr/> Contributor address; City; State; Zip Code Houston, TX 77055-4412	Amount of Contribution (\$) \$3.40
Principal occupation / Job title (See Instructions) Managing Director		Employer (See Instructions) Principal
Date 05/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alyson, Guest <hr/> Contributor address; City; State; Zip Code Houston, TX 77042-5118	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Agent Advisor		Employer (See Instructions) MetLife Premier Client Group
Date 05/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Andrea, Ames <hr/> Contributor address; City; State; Zip Code Austin, TX 78704-2947	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Director - Life Insurance		Employer (See Instructions) EMG Insurance Brokerage
Date 05/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) B., Erck <hr/> Contributor address; City; State; Zip Code Houston, TX 77042-2906	Amount of Contribution (\$) \$80.00
Principal occupation / Job title (See Instructions) Associate		Employer (See Instructions) ExamOne

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/22 Rpt: 6/32
2 FILER NAME National Association of Insurance and Financial Advisors - Texas PAC		3 Filer ID (Ethics Commission Filers) 00015644
4 Date 05/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bailey, Baker <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78209-4115	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Agent Advisor		9 Employer (See Instructions) State Farm Insurance Companies
Date 05/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barry, Malone <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79424-1225	Amount of Contribution (\$) \$16.80
Principal occupation / Job title (See Instructions) Financial Professional		Employer (See Instructions) Level Four Group
Date 05/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brandon, Green <hr/> Contributor address; City; State; Zip Code Katy, TX 77450-1004	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Managing Partner		Employer (See Instructions) Third Rail Financial, LLC
Date 05/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brent, Hill <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76114-4336	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) ADVISOR		Employer (See Instructions) Professional Insurance Svcs
Date 05/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carol, Metteauer <hr/> Contributor address; City; State; Zip Code Palestine, TX 75803-6850	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Agent Advisor		Employer (See Instructions) Carol Metteauer

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/22 Rpt: 7/32
2 FILER NAME National Association of Insurance and Financial Advisors - Texas PAC		3 Filer ID (Ethics Commission Filers) 00015644
4 Date 05/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Caroline, Welch <hr/> 6 Contributor address; City; State; Zip Code Lakeway, TX 78738-1007	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Agent Advisor		9 Employer (See Instructions) State Farm Insurance Companies
Date 05/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chane, Reagan <hr/> Contributor address; City; State; Zip Code Montgomery, TX 77316-6882	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Agent Advisor		Employer (See Instructions) Ohio National
Date 05/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Charles, Matejowsky <hr/> Contributor address; City; State; Zip Code Brenham, TX 77833-4605	Amount of Contribution (\$) \$33.60
Principal occupation / Job title (See Instructions) Agent Advisor		Employer (See Instructions) Van Dyke, Rankin Fin. Services
Date 05/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cheri, Stanwix <hr/> Contributor address; City; State; Zip Code Celina, TX 75009-4630	Amount of Contribution (\$) \$16.80
Principal occupation / Job title (See Instructions) Agent Advisor		Employer (See Instructions) Stanwix Insurance & Benefits
Date 05/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crissman, Crombie <hr/> Contributor address; City; State; Zip Code Benbrook, TX 76126-4525	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Agent Advisor		Employer (See Instructions) Crombie Financial Group, llc

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/22 Rpt: 8/32
2 FILER NAME National Association of Insurance and Financial Advisors - Texas PAC		3 Filer ID (Ethics Commission Filers) 00015644
4 Date 05/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cynthia, Price <hr/> 6 Contributor address; City; State; Zip Code Amarillo, TX 79106-5730	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Agent Advisor		9 Employer (See Instructions) New York Life Insurance CO & NYLIFE Securities
Date 05/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Danny, O'Connell <hr/> Contributor address; City; State; Zip Code Dallas, TX 75225-2114	Amount of Contribution (\$) \$84.00
Principal occupation / Job title (See Instructions) Agent/Owner		Employer (See Instructions) Next Level Insurance Agency, LLC
Date 05/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Danny, O'Connell <hr/> Contributor address; City; State; Zip Code Dallas, TX 75225-2114	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Agent/Owner		Employer (See Instructions) Next Level Insurance Agency, LLC
Date 05/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) David, Bronstad <hr/> Contributor address; City; State; Zip Code Bryan, TX 77802-4301	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) Financial Representative		Employer (See Instructions) Thrivent Financial
Date 05/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) David, Farabee <hr/> Contributor address; City; State; Zip Code Wichita Falls, TX 76301-6824	Amount of Contribution (\$) \$6.80
Principal occupation / Job title (See Instructions) Financial Advisor		Employer (See Instructions) Arthur J. Gallagher & Co

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/22 Rpt: 9/32
2 FILER NAME National Association of Insurance and Financial Advisors - Texas PAC		3 Filer ID (Ethics Commission Filers) 00015644
4 Date 05/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) David, Webb <hr/> 6 Contributor address; City; State; Zip Code Nacogdoches, TX 75964-1388	7 Amount of Contribution (\$) \$34.00
8 Principal occupation / Job title (See Instructions) Branch Manager		9 Employer (See Instructions) Pioneer Financial Group
Date 05/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Deborah, Gary <hr/> Contributor address; City; State; Zip Code Karnack, TX 75661-0323	Amount of Contribution (\$) \$26.00
Principal occupation / Job title (See Instructions) AGENT		Employer (See Instructions) Texas Farm Bureau Insurance
Date 05/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Deborah, Gary <hr/> Contributor address; City; State; Zip Code Karnack, TX 75661-0323	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) AGENT		Employer (See Instructions) Texas Farm Bureau Insurance
Date 05/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dee, Carter <hr/> Contributor address; City; State; Zip Code Midland, TX 79701-5515	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Carter Financial Group
Date 05/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dee, Carter <hr/> Contributor address; City; State; Zip Code Midland, TX 79701-5515	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Carter Financial Group

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/22 Rpt: 10/32
2 FILER NAME National Association of Insurance and Financial Advisors - Texas PAC		3 Filer ID (Ethics Commission Filers) 00015644
4 Date 05/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Don, Boozer	7 Amount of Contribution (\$) \$6.80
6 Contributor address; City; State; Zip Code Denton, TX 76205-8008		
8 Principal occupation / Job title (See Instructions) President		9 Employer (See Instructions) Don Boozer & Assoc.
Date 05/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Don, Hutto	Amount of Contribution (\$) \$4.00
Contributor address; City; State; Zip Code Burleson, TX 76028-3264		
Principal occupation / Job title (See Instructions) Agent Advisor		Employer (See Instructions) Hutto Insurance Services
Date 05/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Donald, Friedeck	Amount of Contribution (\$) \$4.80
Contributor address; City; State; Zip Code San Antonio, TX 78240-3304		
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Friedeck & Associates Inc.
Date 05/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Donnie, Britt	Amount of Contribution (\$) \$40.00
Contributor address; City; State; Zip Code San Antonio, TX 78240-3332		
Principal occupation / Job title (See Instructions) Agent		Employer (See Instructions) State Farm Insurance Companies
Date 05/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Douglas, Massey	Amount of Contribution (\$) \$70.00
Contributor address; City; State; Zip Code San Angelo, TX 76906-0707		
Principal occupation / Job title (See Instructions) Agent/Owner		Employer (See Instructions) Doug Massey Financial Services

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/22 Rpt: 11/32
2 FILER NAME National Association of Insurance and Financial Advisors - Texas PAC		3 Filer ID (Ethics Commission Filers) 00015644
4 Date 05/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Douglas, Massey <hr/> 6 Contributor address; City; State; Zip Code San Angelo, TX 76906-0707	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Agent/Owner		9 Employer (See Instructions) Doug Massey Financial Services
Date 05/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dudley, Vickers <hr/> Contributor address; City; State; Zip Code Bryan, TX 77808-8402	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) Financial_Advisor		Employer (See Instructions) Mutual of Omaha Companies
Date 05/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edward, Marvin <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78232-1031	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) Agent Advisor		Employer (See Instructions) Ed Marvin Insurance Brokerage
Date 05/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Enrique, Cisneros <hr/> Contributor address; City; State; Zip Code Socorro, TX 79927-3398	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) AGENT		Employer (See Instructions) Enrique Cisneros Insurance
Date 05/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ernest, Stiba <hr/> Contributor address; City; State; Zip Code China Spring, TX 76633-3286	Amount of Contribution (\$) \$416.00
Principal occupation / Job title (See Instructions) AGENT		Employer (See Instructions) Stiba Wealth Management Group

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/22 Rpt: 12/32
2 FILER NAME National Association of Insurance and Financial Advisors - Texas PAC		3 Filer ID (Ethics Commission Filers) 00015644
4 Date 05/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eugene, Forsythe	7 Amount of Contribution (\$) \$4.00
	6 Contributor address; City; State; Zip Code Houston, TX 77057-4732	
8 Principal occupation / Job title (See Instructions) Agent Advisor		9 Employer (See Instructions) Northwestern Mutual
Date 05/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Filemon, Esquivel	Amount of Contribution (\$) \$3.40
	Contributor address; City; State; Zip Code Kingsville, TX 78363-5774	
Principal occupation / Job title (See Instructions) AGENT		Employer (See Instructions) New York Life
Date 05/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gary, Kneip	Amount of Contribution (\$) \$6.80
	Contributor address; City; State; Zip Code Victoria, TX 77905-3178	
Principal occupation / Job title (See Instructions) Owner/President		Employer (See Instructions) Crossroads Insurance Professionals Inc.
Date 05/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gary, Schmiedekamp	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Temple, TX 76502-3673	
Principal occupation / Job title (See Instructions) MR		Employer (See Instructions) Southern Farm Bureau Life Insurance
Date 05/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gloria, Guzman	Amount of Contribution (\$) \$6.80
	Contributor address; City; State; Zip Code El Paso, TX 79936-6231	
Principal occupation / Job title (See Instructions) Agent Advisor		Employer (See Instructions) Guardian

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/22 Rpt: 13/32
2 FILER NAME National Association of Insurance and Financial Advisors - Texas PAC		3 Filer ID (Ethics Commission Filers) 00015644
4 Date 05/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grover, Brillhart <hr/> 6 Contributor address; City; State; Zip Code Wylie, TX 75098-4036	7 Amount of Contribution (\$) \$34.00
8 Principal occupation / Job title (See Instructions) Agent Advisor		9 Employer (See Instructions) Penn Mutual Wealth Strategies
Date 05/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hollie, Gandy Donohue <hr/> Contributor address; City; State; Zip Code Amarillo, TX 79106-4633	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) OwnerSenior Producer		Employer (See Instructions) Texas Retirement Solutions
Date 05/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ian, Escalante <hr/> Contributor address; City; State; Zip Code El Paso, TX 79928-7678	Amount of Contribution (\$) \$80.00
Principal occupation / Job title (See Instructions) Agent Advisor		Employer (See Instructions) Ian Escalante Insurance Agency Inc.
Date 05/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jack, Knight <hr/> Contributor address; City; State; Zip Code Amarillo, TX 79109-5908	Amount of Contribution (\$) \$18.00
Principal occupation / Job title (See Instructions) Agency Owner		Employer (See Instructions) Jack Knight Insurance Assoc
Date 05/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) James, Burghard <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78217-4011	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) Agent Advisor		Employer (See Instructions) James O. Burghard Financial Services

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/22 Rpt: 14/32
2 FILER NAME National Association of Insurance and Financial Advisors - Texas PAC		3 Filer ID (Ethics Commission Filers) 00015644
4 Date 05/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) James, Thompson <hr/> 6 Contributor address; City; State; Zip Code Amarillo, TX 79106	7 Amount of Contribution (\$) \$33.60
8 Principal occupation / Job title (See Instructions) Wealth Advisor		9 Employer (See Instructions) Thompson Financial Consulting Inc.
Date 05/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) James, Thompson <hr/> Contributor address; City; State; Zip Code Amarillo, TX 79106	Amount of Contribution (\$) \$105.60
Principal occupation / Job title (See Instructions) Wealth Advisor		Employer (See Instructions) Thompson Financial Consulting Inc.
Date 05/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jason, Mickey <hr/> Contributor address; City; State; Zip Code Spring, TX 77388-5012	Amount of Contribution (\$) \$6.80
Principal occupation / Job title (See Instructions) Financial Advisor, Managing Associate		Employer (See Instructions) Wealth Design Group
Date 05/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jay, Schroeder <hr/> Contributor address; City; State; Zip Code Brenham, TX 77833-5067	Amount of Contribution (\$) \$4.80
Principal occupation / Job title (See Instructions) AGENT		Employer (See Instructions) Southern Farm Bureau Life Insurance
Date 05/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jim, Hutson <hr/> Contributor address; City; State; Zip Code Amarillo, TX 79109-5039	Amount of Contribution (\$) \$12.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) The Jim Hutson Agency, LLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 11/22 Rpt: 15/32
2 FILER NAME National Association of Insurance and Financial Advisors - Texas PAC		3 Filer ID (Ethics Commission Filers) 00015644
4 Date 05/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joey, Ussery	7 Amount of Contribution (\$) \$40.00
6 Contributor address; City; State; Zip Code Bellville, TX 77418-3822		
8 Principal occupation / Job title (See Instructions) Regional V.P.		9 Employer (See Instructions) John Hancock Life Insurance
Date 05/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joey, Ussery	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Bellville, TX 77418-3822		
Principal occupation / Job title (See Instructions) Regional V.P.		Employer (See Instructions) John Hancock Life Insurance
Date 05/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) John, Brieden	Amount of Contribution (\$) \$6.80
Contributor address; City; State; Zip Code Brenham, TX 77833-4916		
Principal occupation / Job title (See Instructions) Agent Advisor		Employer (See Instructions) State Farm Insurance Companies
Date 05/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) John, Denton	Amount of Contribution (\$) \$3.40
Contributor address; City; State; Zip Code Amarillo, TX 79109-3534		
Principal occupation / Job title (See Instructions) Field_Representative		Employer (See Instructions) Northwestern Mutual
Date 05/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) John, Rivard	Amount of Contribution (\$) \$4.00
Contributor address; City; State; Zip Code Dallas, TX 75214-2614		
Principal occupation / Job title (See Instructions) Agent Advisor		Employer (See Instructions) Borden Hamman Agency

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 12/22 Rpt: 16/32
2 FILER NAME National Association of Insurance and Financial Advisors - Texas PAC		3 Filer ID (Ethics Commission Filers) 00015644
4 Date 05/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) John, Ruckel <hr/> 6 Contributor address; City; State; Zip Code Nacogdoches, TX 75965-1929	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Career Agent		9 Employer (See Instructions) Ruckel Insurance & Financial Group
Date 05/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) John, Ruckel <hr/> Contributor address; City; State; Zip Code Nacogdoches, TX 75965-1929	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Career Agent		Employer (See Instructions) Ruckel Insurance & Financial Group
Date 05/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) John, Ruckel <hr/> Contributor address; City; State; Zip Code Nacogdoches, TX 75965-1929	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Career Agent		Employer (See Instructions) Ruckel Insurance & Financial Group
Date 05/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) John, Still <hr/> Contributor address; City; State; Zip Code Nacogdoches, TX 75965-3586	Amount of Contribution (\$) \$6.80
Principal occupation / Job title (See Instructions) Agent/Owner		Employer (See Instructions) Still Financial Group
Date 05/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) John, Wheeler Jr. <hr/> Contributor address; City; State; Zip Code Montgomery, TX 77356-1798	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Executive Senior Partner		Employer (See Instructions) Totus Wealth Management LLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 13/22 Rpt: 17/32
2 FILER NAME National Association of Insurance and Financial Advisors - Texas PAC		3 Filer ID (Ethics Commission Filers) 00015644
4 Date 05/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) John, Wheeler Jr.	7 Amount of Contribution (\$) \$168.00
6 Contributor address; City; State; Zip Code Montgomery, TX 77356-1798		
8 Principal occupation / Job title (See Instructions) Executive Senior Partner		9 Employer (See Instructions) Totus Wealth Management LLC
Date 05/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jon, Sharp	Amount of Contribution (\$) \$3.40
Contributor address; City; State; Zip Code Victoria, TX 77904-3392		
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) National Life
Date 05/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joseph, Kerr	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Hutto, TX 78634-2143		
Principal occupation / Job title (See Instructions) Agent Advisor		Employer (See Instructions) Kerr Financial Services
Date 05/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joseph, Orr	Amount of Contribution (\$) \$40.00
Contributor address; City; State; Zip Code El Paso, TX 79904-2514		
Principal occupation / Job title (See Instructions) AGENT		Employer (See Instructions) Texas Hillside Financial
Date 05/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joseph, Orr	Amount of Contribution (\$) \$60.00
Contributor address; City; State; Zip Code El Paso, TX 79904-2514		
Principal occupation / Job title (See Instructions) AGENT		Employer (See Instructions) Texas Hillside Financial

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 14/22 Rpt: 18/32
2 FILER NAME National Association of Insurance and Financial Advisors - Texas PAC		3 Filer ID (Ethics Commission Filers) 00015644
4 Date 05/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Karen, Easterling <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78759-8640	7 Amount of Contribution (\$) \$200.00
8 Principal occupation / Job title (See Instructions) Agent/Owner		9 Employer (See Instructions) State Farm Insurance Companies
Date 05/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Karen, True <hr/> Contributor address; City; State; Zip Code Dallas, TX 75214-3188	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Executive Vice President		Employer (See Instructions) NAIFA - Dallas
Date 05/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ken, Quach <hr/> Contributor address; City; State; Zip Code Fulshear, TX 77441-2505	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Agent/Broker		Employer (See Instructions) Ken Quach Insurance Agency
Date 05/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kirk, Haworth <hr/> Contributor address; City; State; Zip Code Amarillo, TX 79159-0265	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Agent Advisor		Employer (See Instructions) The Haworth Company
Date 05/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kirk, Haworth <hr/> Contributor address; City; State; Zip Code Amarillo, TX 79159-0265	Amount of Contribution (\$) \$140.00
Principal occupation / Job title (See Instructions) Agent Advisor		Employer (See Instructions) The Haworth Company

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 15/22 Rpt: 19/32
2 FILER NAME National Association of Insurance and Financial Advisors - Texas PAC		3 Filer ID (Ethics Commission Filers) 00015644
4 Date 05/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kyle, Lindner <hr/> 6 Contributor address; City; State; Zip Code Katy, TX 77494-1731	7 Amount of Contribution (\$) \$280.00
8 Principal occupation / Job title (See Instructions) Agent Advisor		9 Employer (See Instructions) State Farm
Date 05/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lane, Boozer <hr/> Contributor address; City; State; Zip Code Denton, TX 76205-8008	Amount of Contribution (\$) \$34.00
Principal occupation / Job title (See Instructions) Vice President - Marketing		Employer (See Instructions) Don Boozer & Assoc.
Date 05/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lane, Boozer <hr/> Contributor address; City; State; Zip Code Denton, TX 76205-8008	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Vice President - Marketing		Employer (See Instructions) Don Boozer & Assoc.
Date 05/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lannie, Jackson <hr/> Contributor address; City; State; Zip Code Coppell, TX 75019-4007	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) OWNER		Employer (See Instructions) Jackson Benefits Group
Date 05/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lesley, Pinckard <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76135-4424	Amount of Contribution (\$) \$22.80
Principal occupation / Job title (See Instructions) Financial Advisor		Employer (See Instructions) LP Insurance and Financial Services

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 16/22 Rpt: 20/32
2 FILER NAME National Association of Insurance and Financial Advisors - Texas PAC		3 Filer ID (Ethics Commission Filers) 00015644
4 Date 05/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Linda, Goss <hr/> 6 Contributor address; City; State; Zip Code Leander, TX 78641-3802	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Agent Advisor		9 Employer (See Instructions) Linda Goss
Date 05/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lindsey, James-West <hr/> Contributor address; City; State; Zip Code Houston, TX 77009-6008	Amount of Contribution (\$) \$120.00
Principal occupation / Job title (See Instructions) Agent Advisor		Employer (See Instructions) LKJ Financial
Date 05/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Manuel, Gonzalez <hr/> Contributor address; City; State; Zip Code El Paso, TX 79935-3507	Amount of Contribution (\$) \$8.00
Principal occupation / Job title (See Instructions) Agent Advisor		Employer (See Instructions) New York Life
Date 05/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mark, Jones <hr/> Contributor address; City; State; Zip Code Houston, TX 77277-1465	Amount of Contribution (\$) \$120.00
Principal occupation / Job title (See Instructions) Financial_Representative		Employer (See Instructions) Remington Insurance Group, Inc
Date 05/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mark, Warren <hr/> Contributor address; City; State; Zip Code Plainview, TX 79072-9568	Amount of Contribution (\$) \$84.00
Principal occupation / Job title (See Instructions) Agent Advisor		Employer (See Instructions) Higginbotham Agencies

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 17/22 Rpt: 21/32
2 FILER NAME National Association of Insurance and Financial Advisors - Texas PAC		3 Filer ID (Ethics Commission Filers) 00015644
4 Date 05/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mark, Warren <hr/> 6 Contributor address; City; State; Zip Code Plainview, TX 79072-9568	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Agent Advisor		9 Employer (See Instructions) Higginbotham Agencies
Date 05/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marvin, Spreen <hr/> Contributor address; City; State; Zip Code Brenham, TX 77833-7708	Amount of Contribution (\$) \$20.80
Principal occupation / Job title (See Instructions) Financial Associate		Employer (See Instructions) Thrivent Financial
Date 05/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Michael, Evans <hr/> Contributor address; City; State; Zip Code Coppell, TX 75019-3404	Amount of Contribution (\$) \$148.00
Principal occupation / Job title (See Instructions) Brokerage Sales Manager		Employer (See Instructions) The DI Center
Date 05/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Michael, Steadman <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78256-2384	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Vice President		Employer (See Instructions) GPM Life
Date 05/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Patrick, Wilder <hr/> Contributor address; City; State; Zip Code Plano, TX 75024-6324	Amount of Contribution (\$) \$3.40
Principal occupation / Job title (See Instructions) Agent Advisor		Employer (See Instructions) The Shamrock Group

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 18/22 Rpt: 22/32
2 FILER NAME National Association of Insurance and Financial Advisors - Texas PAC		3 Filer ID (Ethics Commission Filers) 00015644
4 Date 05/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Randy, Robertson	7 Amount of Contribution (\$) \$200.00
6 Contributor address; City; State; Zip Code McKinney, TX 75071-7649		
8 Principal occupation / Job title (See Instructions) President		9 Employer (See Instructions) Randy T. Robertson
Date 05/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Raymond, Vitek	Amount of Contribution (\$) \$120.00
Contributor address; City; State; Zip Code Sugar Land, TX 77478-3328		
Principal occupation / Job title (See Instructions) Agent Advisor		Employer (See Instructions) New York Life
Date 05/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rick, Demko	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Cypress, TX 77429-7617		
Principal occupation / Job title (See Instructions) Founding Principal of the Guardian Group		Employer (See Instructions) The Guardian Group
Date 05/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rick, Demko	Amount of Contribution (\$) \$100.00
Contributor address; City; State; Zip Code Cypress, TX 77429-7617		
Principal occupation / Job title (See Instructions) Founding Principal of the Guardian Group		Employer (See Instructions) The Guardian Group
Date 05/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodney, Mogen	Amount of Contribution (\$) \$60.00
Contributor address; City; State; Zip Code Austin, TX 78732-2453		
Principal occupation / Job title (See Instructions) DI/Business Insurance Expert for Advisor's		Employer (See Instructions) Brokerage Director @ Mass Mutual & Solve Ur Puzzle

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 19/22 Rpt: 23/32
2 FILER NAME National Association of Insurance and Financial Advisors - Texas PAC		3 Filer ID (Ethics Commission Filers) 00015644
4 Date 05/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rolando, Barrera <hr/> 6 Contributor address; City; State; Zip Code Corpus Christi, TX 78413-2634	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Agency_Owner		9 Employer (See Instructions) Roland Barrera Insurance
Date 05/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rolando, Barrera <hr/> Contributor address; City; State; Zip Code Corpus Christi, TX 78413-2634	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Agency_Owner		Employer (See Instructions) Roland Barrera Insurance
Date 05/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ronald, Botello <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78248-2102	Amount of Contribution (\$) \$16.00
Principal occupation / Job title (See Instructions) Investment Advisor Representative		Employer (See Instructions) Platinum Wealth Solutions of Texas
Date 05/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ronny, Bryant <hr/> Contributor address; City; State; Zip Code Abilene, TX 79602-6105	Amount of Contribution (\$) \$6.80
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Perry Hunter Hall
Date 05/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ruth, Shannon <hr/> Contributor address; City; State; Zip Code Highland Village, TX 75077-1859	Amount of Contribution (\$) \$34.00
Principal occupation / Job title (See Instructions) Agent		Employer (See Instructions) RUTH SHANNON STATE FARM

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 20/22 Rpt: 24/32
2 FILER NAME National Association of Insurance and Financial Advisors - Texas PAC		3 Filer ID (Ethics Commission Filers) 00015644
4 Date 05/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sammy, Salek <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77055-6701	7 Amount of Contribution (\$) \$40.00
8 Principal occupation / Job title (See Instructions) Director of Asset Management		9 Employer (See Instructions) Totus Wealth Management
Date 05/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scott, Ward <hr/> Contributor address; City; State; Zip Code Longview, TX 75605-7347	Amount of Contribution (\$) \$3.40
Principal occupation / Job title (See Instructions) Agent Advisor		Employer (See Instructions) The Ward Agency
Date 05/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stephen, Ehlers <hr/> Contributor address; City; State; Zip Code Brookshire, TX 77423-1507	Amount of Contribution (\$) \$8.00
Principal occupation / Job title (See Instructions) Agent/Broker		Employer (See Instructions) 3 Mark Financial
Date 05/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stephen, Harris <hr/> Contributor address; City; State; Zip Code Richardson, TX 75080-2923	Amount of Contribution (\$) \$18.00
Principal occupation / Job title (See Instructions) Agent Advisor		Employer (See Instructions) Stephen L. Harris, CLU & Associates
Date 05/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) T., Littleton <hr/> Contributor address; City; State; Zip Code Nacogdoches, TX 75965-2964	Amount of Contribution (\$) \$34.00
Principal occupation / Job title (See Instructions) Agent		Employer (See Instructions) NAIFA-Pineywoods of East Texas

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 21/22 Rpt: 25/32
2 FILER NAME National Association of Insurance and Financial Advisors - Texas PAC		3 Filer ID (Ethics Commission Filers) 00015644
4 Date 05/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) T., Littleton <hr/> 6 Contributor address; City; State; Zip Code Nacogdoches, TX 75965-2964	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Agent		9 Employer (See Instructions) NAIFA-Pineywoods of East Texas
Date 05/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) T., Littleton <hr/> Contributor address; City; State; Zip Code Nacogdoches, TX 75965-2964	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Agent		Employer (See Instructions) NAIFA-Pineywoods of East Texas
Date 05/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas, Mahony <hr/> Contributor address; City; State; Zip Code Ft Worth, TX 76132-1518	Amount of Contribution (\$) \$6.80
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) TMA Financial
Date 05/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Timothy, Roels <hr/> Contributor address; City; State; Zip Code Fort Worth, TX 76116-5604	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Agent Advisor		Employer (See Instructions) Marketing Group
Date 05/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tracy, Miller <hr/> Contributor address; City; State; Zip Code Houston, TX 77056-6239	Amount of Contribution (\$) \$8.00
Principal occupation / Job title (See Instructions) Agent Advisor		Employer (See Instructions) TMiller Financial

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 22/22 Rpt: 26/32
2 FILER NAME National Association of Insurance and Financial Advisors - Texas PAC		3 Filer ID (Ethics Commission Filers) 00015644
4 Date 05/10/2024	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Victoria, Henly	7 Amount of Contribution (\$) \$8.00
	6 Contributor address; City; State; Zip Code San Augustine, TX 75972-1324	
8 Principal occupation / Job title (See Instructions) OWNER		9 Employer (See Instructions) Henly Insurance
Date 05/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wes, Wessel	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code Willis, TX 77318-6431	
Principal occupation / Job title (See Instructions) General Agent		Employer (See Instructions) National Life
Date 05/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) William, Montague	Amount of Contribution (\$) \$4.00
	Contributor address; City; State; Zip Code Garland, TX 75044-3531	
Principal occupation / Job title (See Instructions) Director of Development		Employer (See Instructions) National Life
Date 05/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) William, Splawn	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Houston, TX 77077-5513	
Principal occupation / Job title (See Instructions) Agent Advisor		Employer (See Instructions) Splawn & Associates
Date 05/10/2024	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yuka, Nakahara-Goven	Amount of Contribution (\$) \$36.00
	Contributor address; City; State; Zip Code Carrollton, TX 75007-4852	
Principal occupation / Job title (See Instructions) Agent Advisor		Employer (See Instructions) New York Life

MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION

SCHEDULE C1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule C1: Sch: 1/4 Rpt: 27/32
2 FILER NAME National Association of Insurance and Financial Advisors - Texas PAC		3 Filer ID (Ethics Commission Filers) 00015644
4 Date 05/10/2024	5 Corporation / Labor Organization name Annie 6 Corporation / Labor Organization address; City; State; Zip Code Corpus Christi, TX 78413-4825	7 Amount of contribution (\$) \$6.00
Date 05/10/2024	Corporation / Labor Organization name Brett Corporation / Labor Organization address; City; State; Zip Code Elkhart, TX 75839-5116	Amount of contribution (\$) \$6.80
Date 05/10/2024	Corporation / Labor Organization name Charles Corporation / Labor Organization address; City; State; Zip Code Decatur, TX 76234-1373	Amount of contribution (\$) \$16.80
Date 05/10/2024	Corporation / Labor Organization name Frank Corporation / Labor Organization address; City; State; Zip Code Plano, TX 75075-7729	Amount of contribution (\$) \$6.80
Date 05/10/2024	Corporation / Labor Organization name Frank Corporation / Labor Organization address; City; State; Zip Code Tomball, TX 77377-8649	Amount of contribution (\$) \$4.00
Date 05/10/2024	Corporation / Labor Organization name Hollie Corporation / Labor Organization address; City; State; Zip Code Amarillo, TX 79106-4633	Amount of contribution (\$) \$80.00
Date 05/10/2024	Corporation / Labor Organization name James Corporation / Labor Organization address; City; State; Zip Code San Antonio, TX 78260-2182	Amount of contribution (\$) \$6.80

MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION

SCHEDULE C1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule C1: Sch: 2/4 Rpt: 28/32
2 FILER NAME National Association of Insurance and Financial Advisors - Texas PAC		3 Filer ID (Ethics Commission Filers) 00015644
4 Date 05/10/2024	5 Corporation / Labor Organization name Jan <hr/> 6 Corporation / Labor Organization address; City; State; Zip Code Harper, TX 78631-0497	7 Amount of contribution (\$) \$40.00
Date 05/10/2024	Corporation / Labor Organization name Jason <hr/> Corporation / Labor Organization address; City; State; Zip Code Floresville, TX 78114-0576	Amount of contribution (\$) \$84.00
Date 05/10/2024	Corporation / Labor Organization name Jim <hr/> Corporation / Labor Organization address; City; State; Zip Code Eastland, TX 76448-0895	Amount of contribution (\$) \$6.80
Date 05/10/2024	Corporation / Labor Organization name Joe <hr/> Corporation / Labor Organization address; City; State; Zip Code Fort Worth, TX 76116-1620	Amount of contribution (\$) \$3.40
Date 05/10/2024	Corporation / Labor Organization name John <hr/> Corporation / Labor Organization address; City; State; Zip Code Nacogdoches, TX 75965-8716	Amount of contribution (\$) \$10.00
Date 05/10/2024	Corporation / Labor Organization name John <hr/> Corporation / Labor Organization address; City; State; Zip Code Nacogdoches, TX 75965-1929	Amount of contribution (\$) \$100.00
Date 05/10/2024	Corporation / Labor Organization name Kenny <hr/> Corporation / Labor Organization address; City; State; Zip Code Amarillo, TX 79119-6438	Amount of contribution (\$) \$4.00

MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION

SCHEDULE C1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule C1: Sch: 3/4 Rpt: 29/32
2 FILER NAME National Association of Insurance and Financial Advisors - Texas PAC		3 Filer ID (Ethics Commission Filers) 00015644
4 Date 05/10/2024	5 Corporation / Labor Organization name Lilia <hr/> 6 Corporation / Labor Organization address; City; State; Zip Code Corpus Christi, TX 78411-4917	7 Amount of contribution (\$) \$6.80
Date 05/10/2024	Corporation / Labor Organization name Michael <hr/> Corporation / Labor Organization address; City; State; Zip Code San Antonio, TX 78270-1307	Amount of contribution (\$) \$10.00
Date 05/10/2024	Corporation / Labor Organization name Michael <hr/> Corporation / Labor Organization address; City; State; Zip Code HEATH, TX 75032-5998	Amount of contribution (\$) \$6.80
Date 05/10/2024	Corporation / Labor Organization name Paul <hr/> Corporation / Labor Organization address; City; State; Zip Code Mansfield, TX 76063-5320	Amount of contribution (\$) \$120.00
Date 05/10/2024	Corporation / Labor Organization name Peter <hr/> Corporation / Labor Organization address; City; State; Zip Code Spring, TX 77379-5078	Amount of contribution (\$) \$10.00
Date 05/10/2024	Corporation / Labor Organization name Raymond <hr/> Corporation / Labor Organization address; City; State; Zip Code Pearland, TX 77581-5853	Amount of contribution (\$) \$8.00
Date 05/10/2024	Corporation / Labor Organization name Rodney <hr/> Corporation / Labor Organization address; City; State; Zip Code Austin, TX 78732-2453	Amount of contribution (\$) \$20.00

MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION

SCHEDULE C1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule C1: Sch: 4/4 Rpt: 30/32
2 FILER NAME National Association of Insurance and Financial Advisors - Texas PAC		3 Filer ID (Ethics Commission Filers) 00015644
4 Date 05/10/2024	5 Corporation / Labor Organization name Vincente	7 Amount of contribution (\$) \$10.00
	6 Corporation / Labor Organization address; City; State; Zip Code Amarillo, TX 79118-9390	

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 1/2 Rpt:	2 FILER NAME National Association of Insurance and Financial	3 Filer ID (Ethics Commission Filers) 00015644
4 Date 04/26/2024	5 Payee name NAIFA-Texas	
6 Amount (\$) 472.73 <input type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip 3755 Attucks Drive Powell, OH 43065	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Event Expense	(b) Description (See instructions regarding type of information required.) IFAPAC Contributors Banners for 2024 NAIFA-Texas Annual Conference
Date 04/26/2024	Payee name NAIFA-Texas	
Amount (\$) 9.85 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 3755 Attucks Drive Powell, OH 43065	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Postage	(b) Description (See instructions regarding type of information required.) USPS Shipment of PAC Check
Date 05/01/2024	Payee name NAIFA-Texas	
Amount (\$) 2,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 3755 Attucks Drive Powell, OH 43065	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Office Overhead/Rental Expense	(b) Description (See instructions regarding type of information required.) Monthly Admin Fee to manage PAC
Date 05/03/2024	Payee name NAIFA-Texas	
Amount (\$) 10.00 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 3755 Attucks Drive Powell, OH 43065	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Postage	(b) Description (See instructions regarding type of information required.) USPS Shipment of PAC Check

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 2/2 Rpt:	2 FILER NAME National Association of Insurance and Financial	3 Filer ID (Ethics Commission Filers) 00015644
4 Date 05/17/2024	5 Payee name NAIFA-Texas	
6 Amount (\$) 950.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip 3755 Attucks Drive Powell, OH 43065	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Accounting/Banking	(b) Description (See instructions regarding type of information required.) 2023 Form 990 Preparation and Filing
Date 05/17/2024	Payee name NAIFA-Texas	
Amount (\$) 19.17 <input type="checkbox"/> Expenditure from corporate funds	Payee Address; City; State; Zip 3755 Attucks Drive Powell, OH 43065	
PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Postage	(b) Description (See instructions regarding type of information required.) USPS Shipment of PAC Check