FORM MPAC MONTHLY FILING GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT **COVER SHEET PG 1** Filer ID 2 Total pages filed: The MPAC Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00087515 3 COMMITTEE NAME **OFFICE USE ONLY** Texas Insurance Professionals Political Action Committee Date Received **ELECTRONICALLY FILED** 06/05/2024 COMMITTEE ADDRESS / PO BOX: APT / SUITE #: CITY: STATE: ZIP **ADDRESS** 11102 Bammel N. Houston Rd. Change of Address Houston, TX 77066 Date Hand-delivered or Date Postmarked MS / MRS / MR **CAMPAIGN FIRST** MI **TREASURER** Receipt # Amount Mr. Kriston R. NAME Date Processed NICKNAME **SUFFIX** LAST Kris Date Imaged Crow CAMPAIGN STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 3908 Tanglewood Ln. STREET **ADDRESS** (Residence or Business) Odessa, TX 79762 **CAMPAIGN** STREET ADDRESS OR PO BOX: APT / SUITE #; CITY: STATE: ZIP CODE **TREASURER** 3908 Tanglewood Ln. MAILING **ADDRESS** Change of Address Odessa, TX 79762 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER PHONE** (432) 559-2343 REPORT TYPE 10th day after campaign X Monthly Dissolution (Attach PAC-DR) treasurer termination 10 MONTHLY January 5 April 5 July 5 October 5 REPORT FILING **DEADLINE** February 5 May 5 August 5 November 5 September 5 December 5 March 5 X June 5 11 PERIOD Month Day Year Month Day Year **THROUGH COVERED** 04/26/2024 05/25/2024

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MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

FORM MPAC COVER SHEET PG 2

12 COMMITTEE NAME			13 Filer ID	(Ethics Commission Filers)
			00087515	
14 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Russell D. Mitchell North Richl	and Hills City	Council PI 6
(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.)			
15 CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS M	D POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR MADE ELECTRONICALLY) qualifies for the higher itemization threshold	\$	0.00
	2. TOTAL POLITICA (OTHER THAN PLE	AL CONTRIBUTIONS DGES, LOANS, OR GUARANTEES OF LOANS)	\$	540.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZEI	D POLITICAL EXPENDITURES	\$	5.00
	4. TOTAL POLITICA	L EXPENDITURES	\$	14,373.16
CONTRIBUTION BALANCE	5. TOTAL POLITICAL (OF THE REPORTIN	CONTRIBUTIONS MAINTAINED AS OF THE LAST G PERIOD	DAY \$	618,431.39
OUTSTANDING LOAN TOTALS		AMOUNT OF ALL OUTSTANDING LOANS AS OF T REPORTING PERIOD	THE \$	0.00
16 AFFIDAVIT	<u> </u>		<u>'</u>	
		I swear, or affirm, under penalty of pe true and correct and includes all informunder Title 15, Election Code.	rjury, that the a nation required	accompanying report is If to be reported by me
		Mr. Kristo	n R. Crow	
		Signature of Car		rer
AFFIX NOTAF	RY STAMP / SEAL ABOVE	Ç		
Sworn to and subscribe	ed before me, by the said	, th	nis the	day
of	, 20, to certify	which, witness my hand and seal of office.		
Signature of officer a	administering oath	Printed name of officer administering oath	Title of office	eer administering oath

SUBTOTALS - MPAC

FORM MPAC COVER SHEET PG 3

					3 of 7	
17 COMM	IITTE	E NAME	18 Filer ID	(Ethics Com	mission Filers)	
l	Texas Insurance Professionals Political Action Committee 00087515			(=	,	
		SUBTOTALS	00001010	1		
l		SUBTO	TAL AMOUNT			
NAME OF SCHEDULE						
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	540.00	
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$		
3.	3. SCHEDULE B: PLEDGED CONTRIBUTIONS			\$		
4.	4. SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION			\$		
5.	5. SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION			\$		
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	\$	13,315.66	
11.	X	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	1,057.50	
12.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$		
13.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$		
14.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$		
15.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$		

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDUL	E A1
	The Instru	The Instruction Guide explains how to complete this form.			Total pages Schedule A1: Sch: 1/1 Rpt: 4/7	
2	FILER NAME Texas Insura	ER NAME las Insurance Professionals Political Action Committee			Filer ID (Ethics Commission 00087515	n Filers)
4	Date 05/01/2024	 Full name of contributor)	7	Amount of Contribution (\$)	\$30.00
_		FORT WORTH, TX 76177-7054				
8	Principal occu Insurance	pation / Job title (See Instructions)	9 Employer (See Instructions	5)		
	Date 05/07/2024	Full name of contributor out-of-state PAC (ID#:_ Hurst, David Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$100.00
	Principal occu	HOUSTON, TX 77066 pation / Job title (See Instructions)	Employer (See Instructions	:)		
	Insurance	,		,		
	Date 05/15/2024	Full name of contributor out-of-state PAC (ID#: Mims, David Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$100.00
		WINNIE, TX 77665				
	Principal occu Insurance	pation / Job title (See Instructions)	Employer (See Instructions	i)		
	Date 05/01/2024	Full name of contributor out-of-state PAC (ID#:_Raeke, Rebecca Contributor address; City; State; Zip Code COLLEYVILLE, TX 76034-4116			Amount of Contribution (\$)	\$10.00
	Principal occu Insurance	pation / Job title (See Instructions)	Employer (See Instructions)		
	Date 05/02/2024	Full name of contributor out-of-state PAC (ID#: Verity, Heather Contributor address; City; State; Zip Code CONROE, TX 77304-3413			Amount of Contribution (\$)	\$300.00
	Principal occu Insurance	pation / Job title (See Instructions)	Employer (See Instructions	5)		

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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
OTHER (onter a category pet listed above)

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: 1/2 Rpt: 5/7	Texas Insurance Professionals Political Action Committee 00087515
4 Date	5 Payee name
05/03/2024	Atchley & Associates LLP
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,482.50	1005 La Posada Dr
- "	
Expenditure from corporate funds	Austin, TX 78752
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Accounting/Banking Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	PAC accounting and reporting services
	The accounting and reporting convices
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	-
Date	Payee name
05/06/2024	Cates Legal Group PLLC
Amount (\$)	Payee address; City; State; Zip Code
\$750.00	5910 Clementine Ln
Expenditure from corporate funds	Austin, TX 78744
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Legal Services Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	PAC legal services
	Time logal solvious
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
05/03/2024	Galitski, Frank V.
Amount (\$)	Payee address; City; State; Zip Code
\$10,000.00	11700 Red Oak Valley Ln
+=5,555100	
Expenditure from corporate funds	Austin, TX 78732
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Consulting Expense Check if travel outside of Texas. Complete Schedule T.
Di Libilone	Check if Austin, TX, officeholder living expense
	PAC government affairs consulting
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1: Sch: 2/2 Rpt: 6/7	2 FILER NAME Texas Insurance Professionals Political Action Committee 3 Filer ID (Ethics Commission Filers) 00087515
4 Date	5 Payee name
04/26/2024	GrowthZone
6 Amount (\$)	7 Payee address; City; State; Zip Code
	23973 Hazelwood Dr S Ste 100
\$78.16	23973 Hazeiwood Di S Sie 100
Expenditure from corporate funds	Nisswa, MN 56468
'	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Fees Check if travel outside of Texas. Complete Schedule T.
EXI ENDITORE	Check if Austin, TX, officeholder living expense
	Processing fees for processing multiple credit card
	contributions 4/26/24-5/7/24
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	1
Date	Payee name
05/03/2024	Russ Mitchell Campaign
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	3917 Diamond Loch West
Expenditure from	
corporate funds	North Richland Hills, TX 76180
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 contribution
Complete ONII V if direct	Candidate/Officeholder name Office sought Office held
Complete <u>ONLY</u> if direct expenditure to benefit C/O	
experialitate to belieff 6/6	

UNPAID INCURRED OBLIGATIONS SCHEDULE F2 **EXPENDITURE CATEGORIES FOR BOX 10(a)** Advertising Expense Accounting/Banking Event Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Solicitation/Fundraising Expense Transportation Equipment & Related Expense Fees Consulting Expense Food/Beverage Expense Polling Expense Travel in District Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Gift/Awards/Memorials Expense Legal Services Printing Expense Salaries/Wages/Contract Labor Travel Out of District OTHER (enter a category not listed above) The Instruction Guide explains how to complete this form. Total pages Schedule F2: 2 FILER NAME Filer ID (Ethics Commission Filers) Sch: 1/1 Rpt: 7/7 Texas Insurance Professionals Political Action Committee 00087515 TOTAL OF UNITEMIZED UNPAID INCURRED OBLIGATIONS \$ Date 5 Payee name 05/15/2024 Atchley & Associates LLP Amount (\$) Payee address; State; Zip Code City; \$307.50 1005 La Posada Dr Expenditure from Austin, TX 78752 corporate funds **TYPE OF** Non-Political Х Political **EXPENDITURE PURPOSE** 10 (a) Category (See Categories listed at the top of this schedule) (b) Description OF Accounting/Banking Check if travel outside of Texas. Complete Schedule T. **EXPENDITURE** Check if Austin, TX, officeholder living expense PAC accounting and reporting services 11 Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH Date Payee name Cates Legal Group PLLC 05/23/2024 Amount (\$) Payee address; State; Zip Code \$750.00 5910 Clementine Ln Expenditure from Austin, TX 78744 corporate funds **TYPE OF** Non-Political Χ Political **EXPENDITURE PURPOSE** (a) Category (See Categories listed at the top of this schedule) (b) Description Check if travel outside of Texas. Complete Schedule T. **Legal Services EXPENDITURE** Check if Austin, TX, officeholder living expense PAC legal services Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH