### MONTHLY FILING GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

### FORM MPAC COVER SHEET PG 1

_							
Th	ne MPAC Instruction (	2 Total pages filed: 9					
3	COMMITTEE NAME	İr	OFFICE USE ONLY				
	Wholesale Beer Di	L					
				E	Date Received ELECTRONICALLY FILED 08/05/2024		
4	COMMITTEE	ADDRESS / PO BOX; APT / SUITE #;	CITY; STATE; ZIP				
	ADDRESS	823 Congress Ave., Ste.1313					
	Change of Address	Austin, TX 78701-2429			Date Hand-delivered or Date Postmarked		
5	CAMPAIGN	MS / MRS / MR FIRST		MI			
	TREASURER	Mr. Tom		F	Receipt # Amount		
	NAME						
					Date Processed		
		NICKNAME LAST		SUFFIX			
		Spilma	เท	ſ	Date Imaged		
6	CAMPAIGN	STREET ADDRESS (NO PO BOX PLEAS	E); APT / SUITE #; CITY;	STAT	TE; ZIP CODE		
ľ	TREASURER	823 Congress Ave., Ste. 1313	_,,, cone,, on,,	0.70	_,		
	STREET ADDRESS						
	(Residence or Business)	Austin, TX 78701-2429					
-	CAMPAICN			CTAT			
ľ	CAMPAIGN TREASURER	STREET ADDRESS OR PO BOX;	APT / SUITE #; CITY;	STA	TE; ZIP CODE		
	MAILING	823 Congress Ave., Ste. 1313					
	ADDRESS Change of Address	Austin, TX 78701-2429					
8	CAMPAIGN	AREA CODE PHONE NUMBER	EXTENSION				
	TREASURER PHONE	(512) 476-0697					
	THOME	(312) 470-0037					
9	REPORT TYPE	X Monthly	10th day after campaign treasurer termination		Dissolution (Attach PAC-DR)		
10	MONTHLY REPORT FILING	January 5	pril 5 July 5		October 5		
	DEADLINE						
		February 5	ay 5 X August 5	5	November 5		
		March 5 J	une 5 Septemi	per 5	December 5		
11		Month Day Year	THROUGH	Month	Day Year		
	COVERED	06/26/2024		07/25/20	)24		
	GO TO PAGE 2						
Fo	orms provided by Texas Ethics Commission www.ethics.state.tx.us Version V4.1.0.48da51f7						

### MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

### FORM MPAC COVER SHEET PG 2

12 COMMITTEE NAME				13 File	er ID	(Ethics Commission Filers)
Wholesale Beer Distribu	itors Of Texas PAC			000	15672	
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Tro	ey Wharton State R	epresentative		
(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 PLEDGES, LOANS, CONTRIBUTIONS M ☐ check here if this report	OR GUARANTEES ADE ELECTRONIC qualifies for the higher	OF LOANS, OR ALLY) itemization threshold	THAN	\$	0.00
	2. TOTAL POLITICA (OTHER THAN PLEI		<b>NS</b> GUARANTEES OF LO	ANS)	\$	0.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	POLITICAL EXPE	NDITURES		\$	0.00
	4. TOTAL POLITICA	L EXPENDITURE	S		\$	8,500.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL C OF THE REPORTING		AINTAINED AS OF TH	HE LAST DAY	\$	247,304.11
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL / LAST DAY OF THE F			S AS OF THE	\$	0.00
16 AFFIDAVIT	1					
		true a	ar, or affirm, under pen nd correct and include: Title 15, Election Code	s all information	nat the ac required	companying report is to be reported by me
				Mr. Tom Spilm	nan	
			Signati	ure of Campaign	Treasure	er
AFFIX NOTARY	STAMP / SEAL ABOVE					
Sworn to and subscribed	before me, by the said			, this the		day
of						
Signature of officer ad	ministering oath	Printed name of offi	cer administering oath	Title	e of office	er administering oath
Forms provided by Texas E	thics Commission	www.ethic	s.state.tx.us			Version V4.1.0.48da51f7

### MONTHLY FILING GPAC REPORT: PURPOSE

## FORM MPAC

Page 3 of 9

12 COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
Wholesale Beer Distributo	ors Of Texas PAC			00015672	
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		Briscoe Cain State Representat	ive	
	applicable, classify by party.)				
COMMITTEE ACTIVITY					
(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.)				
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			
	<ol> <li>Officeholders Assisted</li> <li>(Identify by name or, if applicable, classify by party.)</li> </ol>		Brad Buckley State Representat	tive	
	(Identify by name or, if applicable, classify by party.)				

### MONTHLY FILING GPAC REPORT: PURPOSE

## FORM MPAC

Page 4 of 9

						Faye 4 01 9
12 COMMITTEE NAME					13 Filer ID	(Ethics Commission Filers)
Wholesale Beer Distributor					0001567	2
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Supported	Brent Hagenbuch State Repr	esentative	
(Attach lists on plain paper to complete this report if necessary.)		В.	Opposed			
	2. Measures	А.	Supported			
	(Describe by date and location of election and nature of issue.)					
		В.	Opposed			
	3. Officeholders Assisted (Identify by name or, if					
	applicable, classify by party.)					
COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Supported			
(Attach lists on plain paper to complete this report if necessary.)		В.	Opposed			
	2. Measures	А.	Supported			
	(Describe by date and location of election and nature of issue.)					
		В.	Opposed			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)			Ray Lopez State Representat	tive	
COMMITTEE	1. Candidates		Supported			
ACTIVITY	(Identify by name or, if applicable, classify by party.)		Supported			
(Attach lists on plain paper to complete this report if necessary.)		В.	Opposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A.	Supported			
		В.	Opposed			
	3. Officeholders Assisted (Identify by name or, if			Mihaela Plesa State Represe	ntative	
	applicable, classify by party.)					

### MONTHLY FILING GPAC REPORT: PURPOSE

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			ADDENDOW
			Page 5 of 9
12 COMMITTEE NAME			<b>13</b> Filer ID (Ethics Commission Filers)
Wholesale Beer Distributor	rs Of Texas PAC		00015672
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	Chris Turner State Represe	entative
	(Identify by name or, if applicable, classify by party.)		

### FORM MPAC COVER SHEET PG 3

6 of 9

17 COMMITTI	17 COMMITTEE NAME 18 Filer ID (E					
Wholesale	Wholesale Beer Distributors Of Texas PAC   00015672					
	19 SCHEDULE SUBTOTALS NAME OF SCHEDULE					
1.	1. SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS					
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 CORPORA LABOR ORGANIZATION	TION 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.	9. SCHEDULE E: LOANS					
10. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	5	<b>\$</b> 8,500.00			
11.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$			
12.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	DNS	\$			
13.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$			
14.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIO	DNS	\$			
15.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F TO FILER	RETURNED	\$			
	IUFILER					
	TO FILER					
	TO FILER					
	TO FILER					
	TO FILER					
	TO FILER					

**SUBTOTALS - MPAC** 

# 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/Politica Credit Card Payment						
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)					
Sch: 1/3 Rpt: 7/9	Wholesale Beer Distributors Of Texas PAC 00015672					
4 Date	5 Payee name					
06/27/2024	Buckley, Brad					
6 Amount (\$)	7 Payee address; City; State; Zip Code					
\$1,000.00	1321 Pershing Dr.					
Expenditure from corporate funds	Killeen, TX 76549					
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
OF EXPENDITURE	Contributions/Donations Made By					
-	Candidate/Officeholder/Political Committee					
	Campaign Contribution					
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held					
Date	Payee name					
07/17/2024	Cain, Briscoe					
Amount (\$)	Payee address; City; State; Zip Code					
\$1,000.00	PO Box 7					
Expenditure from corporate funds	Deer Park, TX 77536					
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
OF EXPENDITURE	Contributions/Donations Made By					
	Candidate/Officeholder/Political Committee					
	Campaign Contribution					
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held					
Date	Payee name					
06/27/2024	Hagenbuch, Brent					
Amount (\$)	Payee address; City; State; Zip Code					
\$1,500.00	2800 Shoreline Dr					
	#310					
Expenditure from corporate funds	Denton, TX 76210					
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
OF	Contributions/Donations Made By					
EXPENDITURE	Candidate/Officeholder/Political Committee					
	Campaign Contribution					
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held					

# 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/Politica Credit Card Payment	Event Expense     Loan Repayment/Reimbursement     Solicitation/Fundraising Expense       Fees     Office Overhead/Rental Expense     Transportation Equipment & Related Expense       Food/Beverage Expense     Polling Expense     Travel in District       Gift/Awards/Memorials Expense     Printing Expense     Travel out of District       Committee     Legal Services     Salaries/Wages/Contract Labor     OTHER (enter a category not listed above)					
<b>1</b> Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)					
Sch: 2/3 Rpt: 8/9	Wholesale Beer Distributors Of Texas PAC         00015672					
4 Date 06/26/2024	5 Payee name Lopez, Ray					
6 Amount (\$) \$1,000.00	7 Payee address; City; State; Zip Code 7015 Quiet Ridge Walk					
corporate funds	San Antonio, TX 78250					
8 PURPOSE OF EXPENDITURE	<ul> <li>(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee</li> <li>(b) Description         <ul> <li>Check if travel outside of Texas. Complete Schedule T.</li> <li>Check if Austin, TX, officeholder living expense Campaign Contribution</li> </ul> </li> </ul>					
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held					
Date	Payee name					
07/08/2024	McQueeney, John					
Amount (\$)	Payee address; City; State; Zip Code					
\$1,000.00	PO Box 100458					
Expenditure from corporate funds	Fort Worth, TX 76185					
PURPOSE OF EXPENDITURE	<ul> <li>(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee</li> <li>(b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign Contribution     </li> </ul>					
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held					
Date	Payee name					
06/26/2024	Plesa, Mihaela					
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code PO Box 796311					
Expenditure from corporate funds	Dallas, TX 75248					
PURPOSE OF EXPENDITURE	<ul> <li>(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee</li> <li>(b) Description         <ul> <li>Check if travel outside of Texas. Complete Schedule T.</li> <li>Check if Austin, TX, officeholder living expense Campaign Contribution</li> </ul> </li> </ul>					
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held					

# POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

### SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		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)
1 Total pages Schedule F1:	2 FILER NAME		<b>3</b> Filer ID (Ethics Commission Filers)
Sch: 3/3 Rpt: 9/9	Wholesale Beer Distributors Of Texas	PAC	00015672
4 Date	5 Payee name	1	
06/26/2024	Turner, Chris		
6 Amount (\$)	7 Payee address; City; State	; Zip Code	
\$1,000.00	P.O. Box 171138		
Expenditure from corporate funds	Arlington, TX 76003		
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this sc Contributions/Donations Made By Candidate/Officeholder/Political Comr	Check if travel o	outside of Texas. Complete Schedule T. TX, officeholder living expense ontribution
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Office sought	Office held
Date	Payee name		
07/23/2024	Wharton, Trey		
Amount (\$)	Payee address; City; State	e; Zip Code	
\$1,000.00	PO Box 1242		
Expenditure from corporate funds	Huntsville, TX 77342		
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this sc Contributions/Donations Made By Candidate/Officeholder/Political Comr	Check if travel o	outside of Texas. Complete Schedule T. TX, officeholder living expense ontribution
Complete <u>ONLY</u> if direct expenditure to benefit C/OI		Office sought	Office held