FORM GPAC GENERAL-PURPOSE COMMITTEE **CAMPAIGN FINANCE REPORT COVER SHEET PG 1** Filer ID 2 Total pages filed: The GPAC Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00015767 3 COMMITTEE NAME **OFFICE USE ONLY** The Beer Alliance of Texas Political Action Committee Date Received **ELECTRONICALLY FILED** 09/26/2024 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** 502 E. 11th Street Date Hand-delivered or Date Postmarked Suite 420 Change of Address Austin, TX 78701 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mr. Richard W. NAME NICKNAME LAST **SUFFIX** Rick Donley STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 502 East 11th Street STREET **ADDRESS** Suite 420 (Residence or Business) Austin, TX 78701-1643 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 502 E. 11th St., Ste. 420 MAILING **ADDRESS** Austin, TX 78701-2656 Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (512) 474-5378 PHONE REPORT January 15 30th day before election Dissolution (Attach PAC-DR) X **TYPE** 8th day before election 10th day after campaign treasurer July 15 Runoff 10 PERIOD Year Month Day Year Day Month **COVERED THROUGH** 07/01/2024 09/26/2024 11 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year Primary Runoff Other 11/05/2024 χ General Special

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM GPAC COVER SHEET PG 2

12 COMMITTEE NAME			13 Filer ID	(Ethics Commission Filers)
The Beer Alliance of 1	00015767			
14 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Mr. John McQueeney State	Representative	е
(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
		AL CONTRIBUTIONS EDGES, LOANS, OR GUARANTEES OF LOANS)	\$	49,285.22
EXPENDITURE TOTALS	3. TOTAL UNITEMIZEI	D POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICA	L EXPENDITURES	\$	121,145.43
CONTRIBUTION BALANCE	5. TOTAL POLITICAL (CONTRIBUTIONS MAINTAINED AS OF THE LAST G PERIOD	DAY \$	494,776.47
OUTSTANDING LOAN TOTALS		AMOUNT OF ALL OUTSTANDING LOANS AS OF TREPORTING PERIOD	THE \$	0.00
16 AFFIDAVIT			I	
		I swear, or affirm, under penalty of pe true and correct and includes all infor under Title 15, Election Code.		
		Mr. Richar	d W. Donley	
		Signature of Ca	mpaign Treasur	rer
AFFIX NOTAR	RY STAMP / SEAL ABOVE			
Sworn to and subscribe	ed before me, by the said _	, t	his 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 offic	er administering oath

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12 COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
The Beer Alliance of Texa	as Political Action C	Committee		00015767	
ACTIVITY	1. Candidates Identify by name or, if applicable, classify by party.)		Mr. Andy Hopper State Represe	I entative	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
(2. Measures Describe by date and ocation of election and nature of issue.)	A. Supported			
		B. Opposed			
	3. Officeholders Assisted Identify by name or, if applicable, classify by party.)				
COMMITTEE 1	1. Candidates	A. Supported	Mr. Morgan Matt State Represe	entative	
ACTIVITY	Identify by name or, if applicable, classify by party.)		Wil. Worgan Mate State Represe	manve	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
(2. Measures Describe by date and ocation of election and nature of issue.)	A. Supported			
		B. Opposed			
	3. Officeholders Assisted Identify by name or, if applicable, classify by party.)				
COMMITTEE 2 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 ocation of election and nature of issue.)	A. Supported			
		B. Opposed			
	3. Officeholders Assisted Identify by name or, if applicable, classify by party.)		Rep. Ken King State Represent	ative	

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12 COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
The Beer Alliance of Te	xas Political Action (Committee		00015767	
14 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported		<u> </u>	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)		Rep. Will Metcalf State Represe	entative	
COMMITTEE	Candidates	A. Supported			
ACTIVITY	(Identify by name or, if applicable, classify by party.)				
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)		Sen. Joan Huffman State Senat	or	
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported			
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)		Sen. Roland Gutierrez State S	enator	
	Assisted (Identify by name or, if		Sen. Roland Gutierrez State S	enator	

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12	COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
_	The Beer Alliance of Te	xas Political Action C	Committee		00015767	
	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.)		Sen. Phil King State Senator		
	COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported			
	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
		2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
			B. Opposed			
		3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)		Rep. Dustin Burrows State Repr	resentative	
	COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported			
	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
		2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
			B. Opposed			
		3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)		The Honorable Dade Phelan Sta	ate Representa	tive

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12 COM	IMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
The	Beer Alliance of Te	xas Political Action (Committee		00015767	
14 COM ACTI	MITTEE VITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported			
pape	ch lists on plain r to complete this t if necessary.)		B. Opposed			
		2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
			B. Opposed			
		3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)		Rep. Ramon Romero State Rep	resentative	
COM ACTI	MITTEE VITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported			
pape	ch lists on plain r to complete this t if necessary.)		B. Opposed			
		2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
			B. Opposed			
		3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)		Sen. Juan Hinojosa State Sena	tor	
COM ACTI	MITTEE VITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported			
pape	ch lists on plain r to complete this rt if necessary.)		B. Opposed			
		2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
			B. Opposed			
		3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)		Rep. Angie Chen Button State F	Representative	
		(Identify by name or, if				

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12 COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
The Beer Alliance of Te	xas Political Action C	Committee		00015767	
14 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported			
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)		Mark Dorazio State Representa	ative	
COMMITTEE	1. Candidates	A. Supported			
ACTIVITY	(Identify by name or, if applicable, classify by party.)				
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures (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. Stan Gerdes State Repres	sentative	
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported			
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)		Rep. Ana Johnson State Repre	sentative	

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12	COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
	The Beer Alliance of Te	xas Political Action C	Committee		00015767	
	COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supporte	d	I	
	(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. Supporte	d		
			B. Opposed			
		Officeholders Assisted (Identify by name or, if applicable, classify by party.)		Rep. John Bryant State Repre	sentative	
	COMMITTEE	Candidates	A. Supporte	d Mr. Curry Pat State Represent	tative	
	ACTIVITY	(Identify by name or, if applicable, classify by party.)		Will Guily Fut State Represent	idiive	
	(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. Supporte	d		
			B. Opposed			
		3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
	COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supporte	d		
	(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. Supporte	d		
			B. Opposed			
		3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)		Dr. Greg Bonnen State Represe	entative	

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12	COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
	The Beer Alliance of Te	xas Political Action (Committee		00015767	
	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	A. Supported			
		(Describe by date and location of election and nature of issue.)				
			B. Opposed			
		3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)		Rep. Ken King State Representa	ative	
	COMMITTEE	1. Candidates	A. Supported			
	ACTIVITY	(Identify by name or, if applicable, classify by party.)				
	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
		2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
			B. Opposed			
		3. Officeholders Assisted		Rep. Liz Campos State Represe	entative	
		(Identify by name or, if applicable, classify by party.)				
	COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Ms. Caroline Fairly State Repres	sentative	
	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
		2. Measures	A. Supported			
		(Describe by date and location of election and nature of issue.)				
			B. Opposed			
		3. Officeholders Assisted				
		(Identify by name or, if applicable, classify by party.)				

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12	COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
	The Beer Alliance of Te	xas Political Action (Committee		00015767	
	COMMITTEE	1. Candidates	A. Supported			
	ACTIVITY	(Identify by name or, if applicable, classify by party.)				
	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
		2. Measures	A. Supported			
		(Describe by date and location of election and nature of issue.)				
			B. Opposed			
		3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)		Rep. Josey Garcia State Repre	esentative	
	COMMITTEE	<u> </u>				
	COMMITTEE ACTIVITY	Candidates (Identify by name or, if	A. Supported			
	(Attack lists on plain	applicable, classify by party.)				
	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
		Measures (Describe by date and	A. Supported			
		location of election and nature of issue.)				
			B. Opposed			
		Officeholders Assisted		Rep. Donna Howard State Repr	resentative	
		(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	A. Supported			
		(Describe by date and location of election and nature of issue.)				
			B. Opposed			
		3. Officeholders Assisted		Rep. Charlie Geren State Repre	esentative	
		(Identify by name or, if applicable, classify by party.)				

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12	COMMITTEE NAME					13 Filer ID	(Ethics Commission Filers)
	The Beer Alliance of Te	xas Political Action C	Committee			00015767	
	COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Support	ed			
	(Attach lists on plain paper to complete this report if necessary.)		B. Oppose	d			
		2. Measures (Describe by date and location of election and nature of issue.)	A. Support	ed			
			B. Oppose	d			
		Officeholders Assisted (Identify by name or, if applicable, classify by party.)			Rep. Sam Harless State Repres	sentative	
	COMMITTEE	1. Candidates	A. Support	ed			
	ACTIVITY	(Identify by name or, if applicable, classify by party.)		cu			
	(Attach lists on plain paper to complete this report if necessary.)		B. Oppose	d			
		2. Measures (Describe by date and location of election and nature of issue.)	A. Support	ed			
			B. Oppose	d			
		3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)			Rep. Hubert Vo State Represen	tative	
	COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Support	ed			
	(Attach lists on plain paper to complete this report if necessary.)		B. Oppose	d			
		2. Measures (Describe by date and location of election and nature of issue.)	A. Support	ed			
			B. Oppose	d			
		Officeholders Assisted (Identify by name or, if applicable, classify by party.)			Rep. Ron Reynolds State Repre	esentative	

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12 COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
The Beer Alliance of To	exas Political Action (Committee		00015767	
14 COMMITTEE	1. Candidates	A. Supported		ı	
ACTIVITY	(Identify by name or, if applicable, classify by party.)				
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures	A. Supported			
	(Describe by date and location of election and nature of issue.)				
		B. Opposed			
	Officeholders Assisted (Identify by name or, if applicable, classify by party.)		Rep. Stan Kitzman State Repre	sentative	
COMMITTEE	1. Candidates	A. Supported			
ACTIVITY	(Identify by name or, if				
	applicable, classify by party.)				
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures	A. Supported			
	(Describe by date and location of election and nature of issue.)				
		B. Opposed			
	Officeholders Assisted		Rep. Cody Harris State Represe	entative	
	(Identify by name or, if applicable, classify by party.)				
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Mr. Brent Money State Represe	entative	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures	A. Supported			
	(Describe by date and location of election and nature of issue.)				
		B. Opposed			
	3. Officeholders				
	Assisted (Identify by name or, if applicable, classify by party.)				

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12 COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
The Beer Alliance of Tex	as Political Action (Committee		00015767	
ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Mr. Jeff Barry State Representa	tive	
(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	1. Candidates	A. Supported			
ACTIVITY	(Identify by name or, if applicable, classify by party.)				
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures (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. Angelia Orr State Represe	entative	
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported			
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)		The Honorable Greg Abbott Gov	vernor	

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12 COMMITTEE NAME				13 Filer ID (Ethics Commission Filers)			
The Beer Alliance of T	exas Political Action (Committee		00015767			
14 COMMITTEE	1. Candidates	A. Supported		<u> </u>			
ACTIVITY	(Identify by name or, if applicable, classify by party.)						
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed					
	2. Measures	A. Supported					
	(Describe by date and location of election and nature of issue.)						
		B. Opposed					
	Officeholders Assisted (Identify by name or, if applicable, classify by party.)		Rep. Tom Craddick State Repr	esentative			
COMMITTEE	1. Candidates		The Honorable A11 ouderbook	State Denresentative			
ACTIVITY	(Identify by name or, if applicable, classify by party.)	A. Supported The Honorable AJ Louderback State Representative					
(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.)						
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Ms. Lauren Simmons State Re	presentative			
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed					
	2. Measures	A. Supported					
	(Describe by date and location of election and nature of issue.)						
		B. Opposed					
	Officeholders Assisted (Identify by name or, if						
	applicable, classify by party.)						

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12 COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)		
The Beer Alliance of Te	exas Political Action (Committee		00015767			
14 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Mr. David Lowe State Representative					
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed					
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported					
		B. Opposed					
	Officeholders Assisted (Identify by name or, if applicable, classify by party.)						
COMMITTEE	1. Candidates	A. Supported					
ACTIVITY	(Identify by name or, if applicable, classify by party.)						
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed					
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported					
		B. Opposed					
	Officeholders Assisted (Identify by name or, if applicable, classify by party.)		Rep. David Cook State Represe	entative			
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported					
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed					
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported					
		B. Opposed					
	Officeholders Assisted (Identify by name or, if applicable, classify by party.)		David Spiller State Representa	ative			

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12 COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
The Beer Alliance of Tex	xas Political Action (Committee		00015767	
14 COMMITTEE	1. Candidates	A. Supported			
ACTIVITY	(Identify by name or, if applicable, classify by party.)				
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures	A. Supported			
	(Describe by date and location of election and nature of issue.)				
		B. Opposed			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)		Rep. Mary Ann Perez State Rep	oresentative	
COMMITTEE	Candidates	A. Supported			
ACTIVITY	(Identify by name or, if	A. Supported			
	applicable, classify by party.)				
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures	A. Supported			
	(Describe by date and location of election and nature of issue.)				
		B. Opposed			
	Officeholders Assisted		Rep. Gene Wu State Represent	tative	
	(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	A. Supported			
	(Describe by date and location of election and nature of issue.)	, ,			
		B. Opposed			
	Officeholders Assisted		Sen. Carol Alvarado State Sena	ator	
	(Identify by name or, if applicable, classify by party.)				

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12 COMMITTEE NAME					13 Filer ID (Ethics Commission Filers)
	The Beer Alliance of Te	xas Political Action (Committee		00015767
	COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported		
	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
		2. Measures (Describe by date and location of election and nature of issue.)	A. Supported		
			B. Opposed		
		3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)		Rep. Trey Martinez Fischer Sta	te Representative
	COMMITTEE	1. Candidates	A. Supported		
	ACTIVITY	(Identify by name or, if applicable, classify by party.)			
	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
		2. Measures (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.)		Commissioner Christi Craddick	Railroad Commissioner
	COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Mr. Daniel Alders State Repres	entative
	(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.)			
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				1 age 10 01 11
12 COMMITTEE NAME				13 Filer ID (Ethics Commission Filers)
The Beer Alliance of T	exas Political Action (Committee		00015767
14 COMMITTEE	1. Candidates	A. Supported		
ACTIVITY	(Identify by name or, if applicable, classify by party.)			
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
	2. Measures	A. Supported		
	(Describe by date and location of election and nature of issue.)			
		B. Opposed		
	Officeholders Assisted (Identify by name or, if applicable, classify by party.)		Rep. Drew Darby State Represe	entative
COMMITTEE	Candidates			
ACTIVITY	(Identify by name or, if	A. Supported		
	applicable, classify by party.)			
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
	Measures (Describe by date and location of election and nature of issue.)	A. Supported		
		B. Opposed		
	Officeholders Assisted (Identify by name or, if		The Honorable Don McLaughlin	State Representative
	applicable, classify by party.)			
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Mr. Paul Dyson State Represen	tative
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
	2. Measures	A. Supported		
	(Describe by date and location of election and nature of issue.)			
		B. Opposed		
	3. Officeholders Assisted			
	(Identify by name or, if applicable, classify by party.)			

FORM GPAC ADDENDUM

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						1 age 20 01 11
12	COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
	The Beer Alliance of Te	xas Political Action (Committee		00015767	
	COMMITTEE	1. Candidates	A. Supported			
	ACTIVITY	(Identify by name or, if applicable, classify by party.)				
	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
		2. Measures	A. Supported			
		(Describe by date and location of election and nature of issue.)				
			B. Opposed			
		3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)		Rep. Stan Lambert State Repre	sentative	
	COMMITTEE	Candidates		Mrs. Shelley Luther State Repre	acontative	
	ACTIVITY	(Identify by name or, if		wis. Shelley Lutilet State Repre	esentative	
		applicable, classify by party.)				
	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
		2. Measures	A. Supported			
		(Describe by date and location of election and nature of issue.)				
			B. Opposed			
		Officeholders Assisted				
		(Identify by name or, if applicable, classify by party.)				
	COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported			
	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
		2. Measures	A. Supported			
		(Describe by date and location of election and nature of issue.)				
			B. Opposed			
		3. Officeholders		Rep. Jay Dean State Represen	ntative	
		Assisted (Identify by name or, if applicable, classify by party.)				
		•				

GENERAL-PURPOSE COMMITTEE REPORT:

FORM GPAC ADDENDUM

PURPUSE					Page 20 of 44
2 COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
The Beer Alliance of T	exas Political Action (Committee		00015767	
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Brent Hagenbuch	State Representative	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	3. Officeholders Assisted				
	(Identify by name or, if applicable, classify by party.)				

SUBTOTALS - GPAC

FORM GPAC COVER SHEET PG 3

				21 of 44		
17 COMMITTI	EE NAME	18 Filer ID	(Ethics Comm	ission Filers)		
	The Beer Alliance of Texas Political Action Committee 00015767					
19 SCHEDUL	E SUBTOTALS		T			
	SCHEDULE		SUBTOT	AL AMOUNT		
1. X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	49,285.22		
2.		\$				
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 CORPORAL LABOR ORGANIZATION	ATION OR	\$			
6.	SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	ANIZATION	\$			
7.	SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION		\$			
8.	SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR (ORGANIZATION	\$			
9.	SCHEDULE E: LOANS		\$			
10. X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION:	S	\$	121,145.43		
11.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$			
12.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$			
13.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$			
14.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$			
15.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$			

	MONETARY POLITICAL CONTRIBUTIONS					SCHEDULE A1			
	The Instru	ction Guide explains how	to complete this for	rm	1.	1	Total pages Schedule A1: Sch: 1/3 Rpt: 22/44		
2	FILER NAME The Beer All	iance of Texas Political Action	Committee			3	Filer ID (Ethics Commission 00015767	on Filers)	
4	Date 09/20/2024	5 Full name of contributorFisher, Dan (Mr.)6 Contributor address; City; St	out-of-state PAC (ID#:)	7	Amount of Contribution (\$)	\$1,515.00	
_	Dringing Lagge	Gainesville , TX 76240	\		Frankrigg (Cook body objects				
8	Member at L	pation / Job title (See Instructions arge) 9		Employer (See Instructions Fisher59				
	Date 09/21/2024	Full name of contributor Fisher , Jessica (Mrs.) Contributor address; City; St	out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$1,515.00	
	Principal occu	Muenster , TX 76252 ipal occupation / Job title (See Instructions) Employer (See Instruction				 			
	Member at Large Fisher59								
	Date 09/20/2024	Full name of contributor out-of-state PAC (ID#:) Fisher , Jody (Mrs.) Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$150.00			
		Lindsay, TX 76250							
	Principal occu Government	pation / Job title (See Instructions Affairs)		Employer (See Instructions Fisher59	5)			
	Date 09/20/2024					Amount of Contribution (\$)	\$155.00		
	Principal occu VP Operatio	pation / Job title (See Instructions ns)		Employer (See Instructions Fisher59	5)			
	Date 09/20/2024				Amount of Contribution (\$)	\$1,515.00			
	Principal occu Member at L	pation / Job title (See Instructions arge			Employer (See Instructions Fisher59	;)			

	MONETARY POLITICAL CONTRIBUTIONS					SCHEDULE A1		
	The Instruc	ction Guide explains how to	o complete this form	1.	1	Total pages Schedule A1: Sch: 2/3 Rpt: 23/44		
2	FILER NAME The Beer All	iance of Texas Political Action C	Committee		3	Filer ID (Ethics Commission 00015767	on Filers)	
4	Date 09/20/2024			7	Amount of Contribution (\$)	\$1,515.00		
8	Principal occu	Wichita Falls, TX 76310 pation / Job title (See Instructions)	9	Employer (See Instructions)			
	Member at L	arger		Fisher59				
	Date 09/20/2024	Full name of contributor Herr, Kathie M. (Mrs.) Contributor address; City; State	out-of-state PAC (ID#:e; Zip Code)		Amount of Contribution (\$)	\$1,515.00	
		Denton, TX 76210						
	Principal occupation / Job title (See Instructions) Employer (See Instructions)				
		lember at Large Fisher59						
	Date 09/20/2024					Amount of Contribution (\$)	\$1,515.00	
		Copper Canyon , TX 76226-						
	Principal occu Member at L	pation / Job title (See Instructions) arge		Employer (See Instructions Fisher59)			
	Date Full name of contributor out-of-state PAC (ID#:) 09/20/2024 Lawrence, Laurie (Mrs.) Contributor address; City; State; Zip Code Krum, TX 76249				Amount of Contribution (\$)	\$1,515.00		
	Principal occu Member at L	pation / Job title (See Instructions) arge		Employer (See Instructions Fisher59)			
	Date Full name of contributor out-of-state PAC (ID#:) Lippe, Nancie (Mrs.) Contributor address; City; State; Zip Code Muenster, TX 76252			Amount of Contribution (\$)	\$1,515.00			
	Principal occu Member at L	pation / Job title (See Instructions) arge		Employer (See Instructions Fisher59)			
		<u> </u>						

	MONET	ARY POLITICAL CONTRIBUTION	SCHEDULE A1		
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 3/3 Rpt: 24/44
2	FILER NAME The Beer All	iance of Texas Political Action Committee		3	Filer ID (Ethics Commission Filers) 00015767
4	Date 09/09/2024			7	Amount of Contribution (\$) \$21,165.22
		Houston, TX 77219-0130			
8	Principal occu Owner	pation / Job title (See Instructions)	9 Employer (See Instructions Office of John L. Nau, II		
	Date 09/20/2024	Full name of contributor out-of-state PAC (ID#:_ Southern , James Scott (Mr.) Contributor address; City; State; Zip Code)		Amount of Contribution (\$) \$500.00
		Burleson , TX 76028			
	Principal occu President	pation / Job title (See Instructions)	Employer (See Instructions Fisher59)	
	Date 07/15/2024	Full name of contributor out-of-state PAC (ID#: Stein, Sheldon (Mr.) Contributor address; City; State; Zip Code)		Amount of Contribution (\$) \$13,680.00
		Dallas, TX 75254			
	Principal occu President	pation / Job title (See Instructions)	Employer (See Instructions Glazer's)	
	Date 09/20/2024	Full name of contributor out-of-state PAC (ID#:_Walford, Julie (Mrs.) Contributor address; City; State; Zip Code Argyle, TX 76226			Amount of Contribution (\$) \$1,515.00
	Principal occu Member at L	pation / Job title (See Instructions) arge	Employer (See Instructions Fisher59)	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Cor Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	l 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:	
Sch: 1/20 Rpt: 25/44	The Beer Alliance of Texas Political Action Committee 00015767
4 Date	5 Payee name
09/16/2024	Abbott, Greg (The Honorable)
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$25,000.00	P.O. Box 308
Expenditure from corporate funds	Austin , TX 78767
8 PURPOSE	
OF	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By (b) Description Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Continuouions/Donations Made By Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense
	Campaign contribution.
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
09/23/2024	Alders , Daniel (Mr.)
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	P.O. Box 8907
\$1,000.00	
Expenditure from	Suite 420
corporate funds	Tyler , TX 75718
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
EXI ENDITORE	Candidate/Officeholder/Political Committee
	Campaign contribution.
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
'	
Date	Payee name
09/23/2024	Alvarado , Carol (Sen.)
Amount (\$)	Payee address; City; State; Zip Code
\$2,500.00	PO Box 230842
Expenditure from corporate funds	Houston , TX 77223
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 ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Ivertising Expense Event Expense Loan Repayment/Reimbu

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

Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	
Sch: 2/20 Rpt: 26/44	The Beer Alliance of Texas Political Action Committee 00015767
4 Date	5 Payee name
09/16/2024	Barry, Jeff (Mr.)
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,000.00	4418 Broadway St.,
Expenditure from corporate funds	Pearland, TX 77581
8 PURPOSE	
OF	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By (b) Description Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Continuouions/Donations Made By Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense
	Campaign contribution.
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	-i
Date	Payee name
09/12/2024	Bonnen, Greg (Dr.)
Amount (\$)	Payee address; City; State; Zip Code
\$2,500.00	1005 Congress Avenue
Expenditure from	Suite 910
corporate funds	Austin, TX 78701
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
EXPENDITORE	Candidate/Officeholder/Political Committee
	Campaign contribution.
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experialitie to belieff C/O	
Date	Payee name
09/09/2024	Bryant, John (Rep.)
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	PO Box 140977
Expenditure from corporate funds	Dallas, TX 75214
PURPOSE	
OF	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By (b) Description Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Continuouions/Donations Made By Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense
	Campaign contribution.
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	1

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Co Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
4 Total marian Cabadida F1.	2 Files ID (Files Commission Files)
1 Total pages Schedule F1: Sch: 3/20 Rpt: 27/44	2 FILER NAME The Beer Alliance of Texas Political Action Committee 3 Filer ID (Ethics Commission Filers) 00015767
4 Date	5 Payee name
08/21/2024	Burrows, Dustin (Rep.)
6 Amount (\$) \$1,500.00	7 Payee address; City; State; Zip Code PO Box 2569
+2,000.00	. 6 26/. 2000
Expenditure from corporate funds	Lubbock, TX 79408
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
EXI ENDITORE	Candidate/Officeholder/Political Committee
	Campaign contribution.
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
09/09/2024	Button, Angie Chen (Rep.)
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	P.O. Box 832748
, , , , , , , , , , , , , , , , , , , ,	
Expenditure from corporate funds	Richardson, TX 75083
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
EXI ENDITORE	Candidate/Officeholder/Political Committee
	Campaign contribution.
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
09/16/2024	Campos, Liz (Rep.)
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	1028 Rigsby
Ψ1,000.00	1020 Mg3by
Expenditure from corporate funds	San Antonio, TX 78210
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
LAFLINDITORL	Candidate/Officeholder/Political Committee
	Campaign contribution.
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees
Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

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: 4/20 Rpt: 28/44	The Beer Alliance of Texas Political Action Committee 00015767
4 Date	5 Payee name
09/16/2024	Cook, David (Rep.)
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,000.00	309 E Broad Street
Expenditure from corporate funds	Mansfield, TX 76063
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
EXI ENDITORE	Candidate/Officeholder/Political Committee
	Campaign contribution.
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held H
Date	Payee name
09/19/2024	Craddick, Christi (Ms.)
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	3112 Windsor
	Suite A PMB
Expenditure from corporate funds	Austin, TX 78703
PURPOSE	
OF	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By (b) Description Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense
	Campaign contribution.
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
experience to serious eye	
Date	Payee name
09/16/2024	Craddick, Tom (Rep.)
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	2 Lakes Drive
Expenditure from corporate funds	Midland, TX 79705
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 ONLY if direct	Candidate/Officeholder name Office sought Office held
Complete <u>ONLY</u> if direct expenditure to benefit C/O	

SCHEDULE F1

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

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

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Candidat Credit Card	e/Officeholder/Politica Payment	al Committee	Legal Services The Instruction Gu			s/Contract Labor ete this form.		OTHER (enter a	a category not listed	d above)
1 Total page	s Schedule F1:	2 FILER NAM					3	Filer ID	(Ethics Comm	ission Filers)
	0 Rpt: 29/44		Alliance of Texas	Political Action	Comm	ittee		00015767		
4 Date		5 Payee name	е							
09/12/202	24	Curry , Pat	Curry , Pat (Mr.)							
6 Amount (\$))	7 Payee addr	ess; City;	State; Zi	p Code					
	\$1,000.00	204 Wood	hew Dr.,							
Expenditure corporate		Waco, TX	76712							
8 PURPO		(a) Category (See Categories listed at t	he top of this schedule	(b)	Description				
OF EXPEND			ns/Donations Ma						nplete Schedule T.	
	-	Candidate	Officeholder/Poli	itical Committee	Э	_		, officeholder living	g expense	
						Campaign c	JUITU	ibulion.		
	ONLY if direct		ficeholder name	Office	e sought			Office h	eld	
expenditur	e to benefit C/O	H								
Date		Payee name	е							
09/23/202	24	Darby, Dre	ew (Rep.)							
Amount (\$))	Payee addr	ess; City;	State; Zi	p Code					
	\$1,000.00	Post Office	e Box 3284							
- Evnanditu	ra fram									
Expenditure corporate		San Angel	o, TX 76902							
PURPO		(a) Category	See Categories listed at t	he top of this schedule	(b)	Description				
OF EXPEND			ns/Donations Ma						nplete Schedule T.	
		Candidate.	Officeholder/Poli	tical Committee	Э	_		, officeholder living	g expense	
						Campaign c	JOHU	ibulion		
	ONLY if direct e to benefit C/O		ficeholder name	Office	e sought			Office h	eld	
Схрепация	c to benefit 6/6									
Date		Payee name	е							
09/24/202	24	Dean, Jay	(Rep.)							
Amount (\$))	Payee addr	ess; City;	State; Zi	p Code					
	\$500.00	3822 Holly	Ridge							
Expenditure corporate		Longview,	TX 75605							
PURPO		(a) Category (See Categories listed at t	he top of this schedule	(b)	Description				
OF EXPEND			ns/Donations Ma						nplete Schedule T.	
		Candidate	/Officeholder/Poli	tical Committee	9	_		, officeholder living	g expense	
						Campaign c	JUITU	ibulion		
Complete	ONLY if direct	Candidate/Of	ficeholder name	Office	e sought			Office h	eld	
	e to benefit C/O		nocholder Hairie	Office	o ougill			Office II	ciu	
l										

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Com Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	
Sch: 6/20 Rpt: 30/44	The Beer Alliance of Texas Political Action Committee 00015767
4 Date	5 Payee name
09/09/2024	Dorazio, Mark (Rep.)
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$500.00	PO Box 461341
Ψ000.00	1 0 50% 401041
Expenditure from	
corporate funds	San Antonio, TX 78246
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/OI	Candidate/Officeholder name Office sought Office held
experialitate to belieff of of	
Date	Payee name
09/23/2024	Dyson, Paul (Mr.)
Amount (\$)	Payee address; City; State; Zip Code
\$500.00	4040 Highway 6
, , , , , ,	Ste. 200
Expenditure from	
corporate funds	College Station, TX 77845
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Contributions/Donations Made By Contributions/Donations Made By Contributions/Contributions/Donations Made By Contributions/C
	Candidate/Officeholder/Political Committee
	Campaign contribution.
Compulate ONLY if divest	Constitute / Office helder mores Office accords
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
-	
Date	Payee name
09/16/2024	Fairly, Caroline (Mrs.)
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	PO Box 20445
Expenditure from corporate funds	Amarillo, TX 79144
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Contributions/Donations Made By
EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Contributions/Donations Made By Candidate/Officeholder/Political Committee Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Campaign contribution.
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense

Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	
Sch: 7/20 Rpt: 31/44	The Beer Alliance of Texas Political Action Committee 00015767
4 Date 09/23/2024	5 Payee name Fischer, Trey Martinez (Rep.)
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,000.00	104 Babcock Road
Expenditure from	Ste. # 107
corporate funds	San Antonio , TX 78201
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 Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Candidate/Officeholder/Political Committee
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
09/16/2024	Garcia, Josey (Rep.)
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	702 Richland Hills Dr.
- Evpanditura from	Box # 760578
Expenditure from corporate funds	San Antonio, TX 78245
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
	Candidate/Officeholder/Political Committee
	Campaign continuation.
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
09/09/2024	Gerdes , Stan (Rep.)
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	606 Gresham Street
Expenditure from corporate funds	Smithville , TX 78957
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
- -	Candidate/Officeholder/Political Committee
	Sampaigh sommuni
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political (Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Candidate/Officeholder/Politica	
Credit Card Payment	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 8/20 Rpt: 32/44	The Beer Alliance of Texas Political Action Committee 00015767
4 Date	5 Payee name
09/16/2024	Geren, Charlie (Rep.)
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,500.00	Post Office Box 1440
Expenditure from corporate funds	Ft. Worth, TX 76101
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
	Candidate/Officeholder/Political Committee
	Campaign contribution.
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	
Date	Payee name
09/01/2024	Gutierrez , Roland (Sen.)
Amount (\$)	Payee address; City; State; Zip Code
\$2,500.00	PO Box 15232
Expenditure from	
corporate funds	San Antonio, TX 78212
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Candidate/Officeholder/Political Committee
	, , , , , , , , , , , , , , , , , , ,
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1
Date	Payee name
09/26/2024	Hagenbuch, Brent (Mr.)
Amount (\$)	Payee address; City; State; Zip Code
\$500.00	2800 Shoreline Dr.,
+000.00	# 310
Expenditure from corporate funds	Denton, TX 76210
•	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By (b) Description Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense
	Campaign contribution.
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

Contributions/ Donations Made B Candidate/Officeholder/Politica Credit Card Payment	
Stour Gara Fayincill	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 9/20 Rpt: 33/44	The Beer Alliance of Texas Political Action Committee 00015767
4 Date	5 Payee name
09/16/2024	Hall, Bob (Sen.)
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,000.00	PO Box 513
Expenditure from corporate funds	Canton, TX 75103
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.
O Complete ONE V. C.	Constitute (Office helder nome
9 Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
09/16/2024	Harless, Sam (Rep.)
Amount (\$)	Payee address; City; State; Zip Code
\$5,000.00	15814 Champion Forest
- Formanditure Const	PMB 312
Expenditure from corporate funds	Spring , TX 77379
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 ONLY if direct	Candidate/Officeholder name Office sought Office held
Complete <u>ONLY</u> if direct expenditure to benefit C/O	
Date	Payee name
09/16/2024	Payee name Harris, Cody (Rep.)
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	1007 N. Mallard Street
Expenditure from	
corporate funds	Palestine , TX 75801
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 continuution.
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
Complete <u>ONLY</u> if direct expenditure to benefit C/O	
•	
- '1 11	11. 0 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Expense Event Expense Loan Repayment/Reimbu

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

Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1: Sch: 10/20 Rpt: 34/44	2 FILER NAME3 Filer ID(Ethics Commission Filers)The Beer Alliance of Texas Political Action Committee00015767
4 Date	5 Payee name
09/03/2024	Hinojosa, Juan 'Chuy' (Sen.)
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,500.00	612 W. Nolana
Expenditure from	Suite 410
corporate funds	McAllen, TX 78504
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Candidate/Officeholder/Political Committee
	Campaign contribution.
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
09/09/2024	Holt, Janis (Mrs.)
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	PO Box 1311
Expenditure from corporate funds	Sisbeer, TX 77656
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. Check if travel outside of Texas. Complete Schedule T.
	Candidate/Officeholder/Political Committee
	Campaigh continuution.
Commission ONII V if dispose	Candidate/Officeholder name Office sought Office held
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	
Date	Payee name
08/13/2024	Hopper, Andy (Mr.)
Amount (\$)	Payee address; City; State; Zip Code
\$500.00	PO Box 1052
Expenditure from corporate funds	Decatur, TX 76234
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 continuution.
Complete CNU V if all	Condidate/Officeholder name
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
p = 1 = 2 = 2 = 2 = 2 = 2 = 2 = 2 = 2 = 2	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Advertising Expense Accounting/Banking Consulting Expense Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense Food/Beverage Expense Polling Expense

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	
Sch: 11/20 Rpt: 35/44	The Beer Alliance of Texas Political Action Committee 00015767
4 Date	5 Payee name
09/24/2024	Hopper, Andy (Mr.)
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$500.00	PO Box 1052
Expenditure from corporate funds	Decatur, TX 76234
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
EXI ENDITORE	Candidate/Officeholder/Political Committee
	Campaign contribution.
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
oxperiantare to serient ere.	
Date	Payee name
09/16/2024	Howard, Donna (Rep.)
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	PO Box 5375
Expenditure from corporate funds	Austin , TX 78763
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Candidate/Officeholder/Political Committee
	Campaign continuation
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	H
Date	Payee name
08/05/2024	Huffman, Joan (Sen.)
Amount (\$)	Payee address; City; State; Zip Code
\$2,500.00	3375 Westpark Drive
	Ste 135
Expenditure from corporate funds	Houston, TX 77005
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Candidate/Officeholder/Political Committee
	Campaign contribution.
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experialities to beliefft C/OI	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	l 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: 12/20 Rpt: 36/44	The Beer Alliance of Texas Political Action Committee 00015767
4 Date	5 Payee name
09/09/2024	Johnson, Ann (Rep.)
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,000.00	PO Box 56386
Expenditure from corporate funds	Houston, TX 77256
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.
Complete ONLY if direct	Candidate/Officeholder name Office cought Office hold
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
·	
Date	Payee name
07/26/2024	King, Ken (Rep.)
Amount (\$)	Payee address; City; State; Zip Code
\$5,000.00	PO Box
	517
Expenditure from corporate funds	Canadian, TX 79014
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 <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experialitate to better civot	'
Date	Payee name
09/16/2024	King, Ken (Rep.)
Amount (\$)	Payee address; City; State; Zip Code
\$2,500.00	PO Box
	517
Expenditure from corporate funds	Canadian, TX 79014
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Candidate/Officeholder/Political Committee
	Campaign contribution.
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
CAPCITALITIE TO DETICITE C/OI	•

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Fees Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
4 7	
1 Total pages Schedule F1: Sch: 13/20 Rpt: 37/44	2 FILER NAME3 Filer ID(Ethics Commission Filers)The Beer Alliance of Texas Political Action Committee00015767
4 Date	5 Payee name
08/20/2024	King , Phil (Rep.)
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,500.00	P.O. Box 1913
Expenditure from corporate funds	Weatherford, TX 76086
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
	Candidate/Officeholder/Political Committee
	Campaign contribution.
Complete ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
Date	Payee name
09/16/2024	Kitzman , Stan (Rep.)
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	PO Box 553
\$1,000.00	FO BOX 333
Expenditure from	
corporate funds	Pattison, TX 77466
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Candidate/Officeholder/Political Committee
	Campaign contribution.
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	1
Date	Payee name
	Payee name
09/23/2024	Lambert, Stan (Rep.)
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	Post Office Box 3752
Expenditure from	Abilene, TX 79604
corporate funds	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
	Candidate/Officeholder/Political Committee
	Campaign contribution.
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	1

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense

	Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Food/Beverage Expense Gift/Awards/Memorials Exp Legal Services The Instruction Guide	pense Pri Sa		ense ges/Contract Labor		Travel in District Travel Out of Distri OTHER (enter a ca	ict ategory not listed above)
1	Total pages Schedule F1:	2 FILER NAM					3	Filer ID	(Ethics Commission Filers)
L	Sch: 14/20 Rpt: 38/44	The Beer A	Alliance of Texas Po	olitical Actior	n Com	mittee	\perp	00015767	
4	Date	5 Payee name							
	09/16/2024	Louderbac	k, AJ (The Honorab	ole)					
6		7 Payee addre		State; Z	ip Cod	е			
	\$1,000.00	PO Box 17	92						
	Expenditure from corporate funds	Victoria, T>	(77902						
8	PURPOSE	(a) Category (S	See Categories listed at the to	op of this schedule	e) (b) Description			
	OF EXPENDITURE		ns/Donations Made					ide of Texas. Comple	
		Candidate/	Officeholder/Politic	aı Committe	e	Campaign o		, officeholder living e ibution	zpense
						Campaign	,oi ill	เมนแบบ	
9	Complete ONLY if direct	Candidate/Off	iceholder name	Offic	e soug	ht		Office held	d
	expenditure to benefit C/Oh			2.110					-
	Date	Payee name	!						
	09/16/2024	Lowe, Davi	d (Mr.)						
	Amount (\$)	Payee addre	ess; City;	State; Z	ip Cod	e			
	\$500.00	9017 Ceda	r Breaks Dr.,						
_	T Evnanditura from								
	Expenditure from corporate funds	North Rich	ands Hills, TX 7618	82					
	PURPOSE	(a) Category (S	See Categories listed at the to	op of this schedule	e) (b) Description			
	OF EXPENDITURE	Contributio	ns/Donations Made	е Ву		<u> </u>		ide of Texas. Comple	
		Candidate/	Officeholder/Politic	al Committe	e	Campaign o		, officeholder living e	expense
						Campaign	ווווטי	เมนแบบ.	
	Complete ONLY if direct		iceholder name	Offic	e soug	ht		Office held	d
	expenditure to benefit C/O								
	Date	Payee name							
L	09/24/2024	Luther, She	elley (Mrs.)						
	Amount (\$)	Payee addre	ess; City;	State; Z	ip Cod	e			
	\$1,000.00	105 S. Britt	on St.						
_	- Formandit or Const	#302							
	Expenditure from corporate funds	Tom Bean,	TX 75489						
	PURPOSE	(a) Category (S	See Categories listed at the to	op of this schedule	e) (b) Description			
	OF EXPENDITURE		ns/Donations Made					ide of Texas. Comple	
		Candidate/	Officeholder/Politic	aı Committe	e	Campaign o		, officeholder living e	expense
						Campaign	JUI IU	ibution.	
	Complete ONLY if direct	Candidate/Off	iceholder name	Offic	e soug	ht		Office held	d
	expenditure to benefit C/O				9				

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

	Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		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	3 Filer ID (Ethics Commission Filers)				
	Sch: 15/20 Rpt: 39/44	The Beer Alliance of Texas Political Action Committee	00015767				
4	Date	5 Payee name					
	09/23/2024	McLaughlin, Don (The Honorable)					
6	Amount (\$)	7 Payee address; City; State; Zip Code					
	\$500.00	1005 Congress Ave.					
		Suite 400					
	Expenditure from corporate funds	Austin, TX 78701					
8	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
	OF EXPENDITURE		outside of Texas. Complete Schedule T.				
	EXPENDITORE	Cartaractor Ciniconstactor Cinical Committee	TX, officeholder living expense				
		Campaign co	ntribution.				
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought	Office held				
	Date	Payee name					
	07/08/2024	McQueeney, John (Mr.)					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$1,000.00	PO Box 100458					
	Expenditure from corporate funds	Fort Worth, TX 76185					
	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 co	ntribution.				
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held				
	expenditure to benefit C/O						
	Date	Payee name					
	09/23/2024	McQueeney, John (Mr.)					
	Amount (\$)	Payee address; City; State; Zip Code					
	\$500.00	PO Box 100458					
	Expenditure from corporate funds	Fort Worth, TX 76185					
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description					
	OF EXPENDITURE	Contributions/Donations wade by	outside of Texas. Complete Schedule T.				
		Candidate/Officeholder/Political Committee Campaign co	TX, officeholder living expense				
		Campaign co	nanodion.				
	Complete ONLY if direct	Candidate/Officeholder name Office sought	Office held				
	expenditure to benefit C/O		Cilios Holu				

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made B Candidate/Officeholder/Politic Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment				
4 Tatal manua Cabadula E4.				
1 Total pages Schedule F1: Sch: 16/20 Rpt: 40/44	2 FILER NAME The Beer Alliance of Texas Political Action Committee 3 Filer ID (Ethics Commission Filers) 00015767			
4 Date	5 Payee name			
08/05/2024	Metcalf, Will (Rep.)			
6 Amount (\$)	7 Payee address; City; State; Zip Code			
\$1,000.00	Post Office Box 454			
Expenditure from corporate funds	Conroe, TX 77301			
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description			
EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.			
	Candidate/Officeholder/Political Committee			
	Campaign contribution.			
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held			
Date	Payee name			
09/16/2024	Money, Brent (Mr.)			
Amount (\$)	Payee address; City; State; Zip Code			
` '	2606 Lee Street			
\$1,000.00	2000 Lee Street			
Expenditure from				
corporate funds	Greenville, TX 75401			
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
OF	Contributions/Donations Made By Contributions/Donations Made By Contributions/Donations Made By			
EXPENDITURE	Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense			
	Campaign contribution.			
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held			
expenditure to benefit C/OI				
Date	Payee name			
07/22/2024	Morgan, Matt (Mr.)			
Amount (\$)	Payee address; City; State; Zip Code			
\$1,000.00	503 FM 359			
, -,				
Expenditure from	Ste. 130			
corporate funds	Richmond, TX 77406			
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
OF EVEN DITUE	Contributions/Donations Made By			
EXPENDITURE	Candidate/Officeholder/Political Committee			
	Campaign contribution			
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held			
expenditure to benefit C/OI				

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Event Expense Loan Repayment/Reimbursement
Fees Office Overhead/Rental Expense
Food/Beverage Expense Polling Expense
Gift/Awards/Memorials Expense Printing Expense
Leaal Services Salaries/Waces/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (expense a category not listed above)

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment				
4 Tatal manua Cabadala E4.				
1 Total pages Schedule F1: Sch: 17/20 Rpt: 41/44	2 FILER NAME The Beer Alliance of Texas Political Action Committee 3 Filer ID (Ethics Commission Filers) 00015767			
4 Date	5 Payee name			
09/16/2024	Orr , Angelia (Rep.)			
6 Amount (\$)	7 Payee address; City; State; Zip Code			
\$1,000.00	PO Box 113			
Expenditure from	Itasca, TX 76055			
corporate funds	1(asca, 1 × 70055			
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.			
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held			
Date	Payee name			
09/17/2024	Perez, Mary Ann (Rep.)			
Amount (\$)	Payee address; City; State; Zip Code			
` '				
\$1,500.00	6200 Gulf Freeway			
Expenditure from	Suite 125			
corporate funds	Houston, TX 77023			
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
OF	Contributions/Donations Made By Contributions/Donations Made By Contributions/Donations Made By			
EXPENDITURE	Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense			
	Campaign contribution.			
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held			
expenditure to benefit C/O				
Date	Payee name			
08/26/2024	Phelan, Dade (The Honorable)			
Amount (\$)	Payee address; City; State; Zip Code			
\$25,000.00	PO Box 5990			
Expenditure from corporate funds	Austin, TX 78763			
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
OF	Contributions/Donations Made By Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.			
EXPENDITURE	Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense			
	Campaign contribution.			
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held			
expenditure to benefit C/O				
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SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
tising Expense Event Expense Loan Repayment/Reimbu

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

Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense

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: 18/20 Rpt: 42/44	The Beer Alliance of Texas Political Action Committee 00015767			
4 Date	5 Payee name			
09/16/2024	Reynolds, Ron (Rep.)			
6 Amount (\$)	7 Payee address; City; State; Zip Code			
\$1,000.00	6140 Hwy 6 South			
Funanditura from	Ste 233			
Expenditure from corporate funds	Missouri City, TX 77459			
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.			
O Complete ONLY if direct	Condidate/Officeholder name Office sought Office hold			
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held			
Date	Payee name			
09/09/2024	Richardson, Keresa (Mrs.)			
Amount (\$)	Payee address; City; State; Zip Code			
\$1,000.00	200 Falling Water Drive			
Expenditure from corporate funds	McKinney, TX 75072			
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 ONLY if direct	Candidate/Officeholder name Office sought Office held			
expenditure to benefit C/OI				
Date	Payee name			
08/29/2024	Romero , Ramon (Rep.)			
Amount (\$)	Payee address; City; State; Zip Code			
\$2,500.00	PO Box 181			
- "				
Expenditure from corporate funds	Fort Worth, TX 76101			
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
OF EXPENDITURE	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.			
	Candidate/Officeholder/Political Committee			
	Campaign contribution.			
Complete <u>ONLY</u> if direct	Candidate/Officeholder name Office sought Office held			
expenditure to benefit C/OI	•			

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	l 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: 19/20 Rpt: 43/44	The Beer Alliance of Texas Political Action Committee 00015767			
4 Date	5 Payee name			
09/16/2024	Simmons, Lauren (Mrs.)			
6 Amount (\$)	7 Payee address; City; State; Zip Code			
\$1,000.00	PO Box 56386			
Expenditure from corporate funds	Houston, TX 77256			
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 ONLY if direct	Candidate/Officeholder name Office sought Office held			
expenditure to benefit C/OI				
Date	Payee name			
09/17/2024	Spiller, David (Rep.)			
Amount (\$)	Payee address; City; State; Zip Code			
\$1,000.00	PO Box 447			
Evponditure from				
Expenditure from corporate funds	Jacksboro, TX 76458			
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
OF EXPENDITURE	Contributions/Donations Made By			
_/	Candidate/Officeholder/Political Committee			
	Campaign contribution.			
Commission ONII V if dispose	Condidate/Office helds name Office accepts			
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held			
Date	Payee name			
07/02/2024	The Austin Club			
Amount (\$)	Payee address; City; State; Zip Code			
\$145.43	110 East 9th Street			
Expenditure from				
corporate funds	Austin, TX 78701			
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
OF EXPENDITURE	Food/Beverage Expense			
D. LIBITORE	Check if Austin, TX, officeholder living expense			
	Food and beverages expenses for the Rep. Philip Cortez reception.			
Complete CNII V if direct				
Complete <u>ONLY</u> if direct expenditure to benefit C/OI				

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense Printing Expense Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (onter a category pet listed above)

Candidate/Officenoider/Politica Credit Card Payment	The Instruction Guide explains how to complete this form.		
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)		
Sch: 20/20 Rpt: 44/44	The Beer Alliance of Texas Political Action Committee 00015767		
4 Date	5 Payee name		
09/16/2024	Vo, Hubert (Rep.)		
6 Amount (\$)	7 Payee address; City; State; Zip Code		
\$1,000.00	PO Box 2227		
Expenditure from corporate funds	Alief, TX 77411		
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 Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense		
	Candidate/Officeholder/Political Committee Campaign contribution.		
	Sampaigh contribution.		
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
expenditure to benefit C/O			
Date	Payee name		
09/23/2024	Wu, Gene (Rep.)		
Amount (\$)	Payee address; City; State; Zip Code		
\$1,000.00	Post Office Box 742442		
Ψ <u>1</u> ,000.00	T GOL GIIIGG BOX T IZ T IZ		
Expenditure from corporate funds	Houston, TX 77274		
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.		
	Campaigh contribution.		
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held		
Complete <u>ONLY</u> if direct expenditure to benefit C/O			
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