FORM MPAC MONTHLY FILING GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT **COVER SHEET PG 1** Filer ID 2 Total pages filed: The MPAC Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00015955 3 COMMITTEE NAME **OFFICE USE ONLY** Texas Surplus Lines Assn. PAC Date Received **ELECTRONICALLY FILED** 12/03/2024 COMMITTEE ADDRESS / PO BOX: APT / SUITE #: CITY: STATE: ZIP **ADDRESS** P. O. Box 9053 Change of Address Austin, TX 78766 Date Hand-delivered or Date Postmarked MS / MRS / MR **FIRST CAMPAIGN** MI **TREASURER** Receipt # Amount Jean T. NAME Date Processed **NICKNAME SUFFIX** LAST Date Imaged Patterson CAMPAIGN STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 9020 Capital of Texas N. Ste. 370 STREET **ADDRESS** (Residence or Business) Austin, TX 78759 **CAMPAIGN** STREET ADDRESS OR PO BOX: APT / SUITE #; CITY: STATE: ZIP CODE **TREASURER** 9020 Capital of Texas N. Ste. 370 MAILING **ADDRESS** Change of Address Austin, TX 78759 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER PHONE** (512) 343-9058 REPORT TYPE 10th day after campaign X Monthly Dissolution (Attach PAC-DR) treasurer termination 10 MONTHLY January 5 April 5 July 5 October 5 REPORT FILING **DEADLINE** February 5 May 5 August 5 November 5 September 5 December 5 March 5 June 5 11 PERIOD Month Day Year Month Day Year **THROUGH COVERED** 10/26/2024 11/25/2024

MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

FORM MPAC COVER SHEET PG 2

12 COMMITTEE NAME	-		13 Filer ID) (Ethics Commission Filers)
Texas Surplus Lines Assn. PAG			00015	955
ACTIVITY (Identify b	A. Stop name or, if e, classify by party.)	upported Molly Cook State Senator		
(Attach lists on plain paper to complete this report if necessary.)	B. O	pposed		
	asures A. Su by date and location n and nature of issue.)	upported		
	B. O	pposed		
Ass (Identify b	ceholders isted by name or, if e, classify by party.)			
TOTALS PLE	EDGES, LOANS, OR GUNTRIBUTIONS MADE E	ITICAL CONTRIBUTIONS (OTHER THAN JARANTEES OF LOANS, OR ELECTRONICALLY) is for the higher itemization threshold	\$	0.00
	TAL POLITICAL CO HER THAN PLEDGES,	NTRIBUTIONS LOANS, OR GUARANTEES OF LOANS)	\$	15,960.00
EXPENDITURE 3. TOTALS	TAL UNITEMIZED POLI	ITICAL EXPENDITURES	\$	0.00
4. TO	TAL POLITICAL EXI	PENDITURES	\$	11,000.00
l l	TAL POLITICAL CONTE THE REPORTING PER	RIBUTIONS MAINTAINED AS OF THE LAST	DAY \$	126,084.41
	TAL PRINCIPAL AMOU ST DAY OF THE REPO	NT OF ALL OUTSTANDING LOANS AS OF TRING PERIOD	THE \$	0.00
.6 AFFIDAVIT			<u> </u>	
		I swear, or affirm, under penalty of pe true and correct and includes all infor under Title 15, Election Code.		
		Jean T.	Pattersor	n
		Signature of Ca	mpaign Tre	easurer
AFFIX NOTARY STAMP	/ SEAL ABOVE			
Sworn to and subscribed before n	ne, by the said	, tl	his the	day
of, 20	, to certify which,	witness my hand and seal of office.		
Signature of officer administeri	ng oath Printe	d name of officer administering oath	Title of	f officer administering oath

MONTHLY FILING GPAC REPORT: PURPOSE

FORM MPAC **ADDENDUM**

12 COMMITTEE NAME					13 Filer ID	(Ethics Commission Filers)
Texas Surplus Lines Assn.	. PAC				00015955	
14 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Todd Hunter	State Representati	ve	
(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.)		Ryan Guillen	State Representat	ive	
(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	Candidates (Identify by name or, if applicable, classify by party.)		David Cook S	State Representativ	re	
(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.)	,				

MONTHLY FILING GPAC REPORT: PURPOSE

FORM MPAC ADDENDUM

				13 Filer ID	(Ethics Commission Filers)
. PAC				00015955	
Candidates (Identify by name or, if applicable, classify by party.)		Trey Wharton S	tate Representa	tive	
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.)					
Candidates (Identify by name or, if applicable, classify by party.)		Adam Hinojosa	State Senator		
	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.)					
	1. Candidates (Identify by name or, if applicable, classify by party.) 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) 1. Candidates (Identify by name or, if applicable, classify by party.) 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (Identify by name or, if	1. Candidates (Identify by name or, if applicable, classify by party.) 2. Measures (Describe by date and location of election and nature of issue.) 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) 1. Candidates (Identify by name or, if applicable, classify by party.) B. Opposed 2. Measures (Describe by date and location of election and nature of issue.) B. Opposed A. Supported B. Opposed 3. Officeholders Assisted A. Supported B. Opposed	1. Candidates (Identify by name or, if applicable, classify by party.) B. Opposed 2. Measures (Describe by date and location of election and nature of issue.) B. Opposed A. Supported A. Supported B. Opposed A. Supported A. Supported A. Supported B. Opposed A. Supported A. Supported B. Opposed A. Supported A. Supported B. Opposed A. Supported A. Supported B. Opposed A. Supported A. Supported A. Supported B. Opposed	1. Candidates (Identify by name or, if applicable, classify by party.) B. Opposed 2. Measures (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.) 1. Candidates (Identify by name or, if applicable, classify by party.) B. Opposed A. Supported A. Supported A. Supported A. Supported Adam Hinojosa State Senator A. Supported A. Supported A. Supported A. Supported A. Supported B. Opposed 3. Officeholders Assisted (Identify by name of issue.) B. Opposed A. Supported A. Supported A. Supported Adam Hinojosa State Senator B. Opposed A. Supported A. Supported	A. Supported Trey Wharton State Representative Condition Condition

SUBTOTALS - MPAC

FORM MPAC COVER SHEET PG 3

5 of 18

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	С													00015	955				
																SU	JBTOT <i>F</i>	AL AMO	UNT
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со	GED C	CON	NTRI	≀IBUT	TION	۱S										\$			0.0
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ΛRY	NETAR	RY SI	SUPF	POR	RT FF	ROM	/ COR	RPOF	RATIO	ON OF	R LABO	OR OR	:GAN	IZATION	١	\$			
NET	N-MONE	NETA	ARY	Y SUF	JPPO)RT F	FROM	/I CO	RPO	RATIO	ON OR	LABO	R			\$			
со	OGED C	CON	NTRI	≀IBUT	TION	NS FF	ROM (COF	RPOR	ATIOI	N OR I	_ABOR	ROR	GANIZA [·]	TION	\$			
	NS															\$			0.0
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ITUF	PENDITU	ITURE	RES N	MAD	DE B,	Y CR	REDIT	ΓCAI	RD							\$			0.00
ICA	POLITICA	ICAL I	L EXF	(PEN	NDITU	URE	S FRO	OM F	POLIT	TICAL	CONT	RIBUT	ΓΙΟΝS	6		\$			473.90
, CR	REST, C	, CREI	EDIT	TS, G	GAIN	1S, R	REFUN	NDS,	, AND	CON	TRIBL	ITIONS	S RE	ΓURNEΩ)	\$			
, CR	REST, C	, CREI	EDIT	TS, G	GAIN	IS, R	₹EFUN	NDS,	, AND	CON	TRIBU	ITIONS	S RET	ΓURNEΩ)	\$			

	MONET	ARY POLITICAL CONTRIB	BUTION	IS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete	e this for	m.	1	Total pages Schedule A1: Sch: 1/8 Rpt: 6/18	
2	FILER NAME Texas Surplu	ıs Lines Assn. PAC			3	Filer ID (Ethics Commission 00015955	on Filers)
4	Date 10/30/2024	 Full name of contributor			7	Amount of Contribution (\$)	\$100.00
8	Principal occu	Dallas, TX 70123 pation / Job title (See Instructions)	ام	Employer (See Instructions	·/-		
0	insurance br		9	Employer (See Instructions)		
	Date 11/18/2024	Full name of contributor out-of-state F Austenfeld, Brenda Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$1,000.00
		Sunrise, FL 33323					
	Principal occu CEO	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 11/11/2024	Full name of contributor out-of-state F Azim, Sharif Contributor address; City; State; Zip Code	PAC (ID#:)		Amount of Contribution (\$)	\$150.00
		Flower Mound, TX 75028					
	Principal occu underwriter	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	Date 10/30/2024	Full name of contributor out-of-state F Baker, Travis Contributor address; City; State; Zip Code Atlanta, GA 30305				Amount of Contribution (\$)	\$100.00
	Principal occu insurance br	oation / Job title (See Instructions) oker		Employer (See Instructions	5)		
	Date 11/05/2024	Full name of contributor out-of-state F Beckendorf, Carissa Contributor address; City; State; Zip Code Dallas, TX 75214	PAC (ID#:			Amount of Contribution (\$)	\$20.00
	Principal occu insurance br	pation / Job title (See Instructions) Diker		Employer (See Instructions	5)		

	MONEI	ARY POLITICAL (CONTRIBUTIO	ONS		SCHEDUI	E A1
	The Instru	ction Guide explains how	to complete this f	orm.	1	Total pages Schedule A1: Sch: 2/8 Rpt: 7/18	
2	FILER NAME Texas Surplu	us Lines Assn. PAC			3	Filer ID (Ethics Commission 00015955	on Filers)
4	Date 11/10/2024	5 Full name of contributor Berry, Mike6 Contributor address; City; S	out-of-state PAC (ID#:_		7	Amount of Contribution (\$)	\$1,000.00
8	Principal occu	Cedar Park, TX 78613 pation / Job title (See Instructions oker	s)	9 Employer (See Instructions	<u> </u> ;)		
	Date 11/06/2024	Full name of contributor Binns, Sydney Contributor address; City; S Garland, TX 75043	out-of-state PAC (ID#:_			Amount of Contribution (\$)	\$100.00
	Principal occu insurance br	pation / Job title (See Instructions oker	s)	Employer (See Instructions	5)		
	Date 11/11/2024	Full name of contributor Bordelon, Lynn Contributor address; City; S	out-of-state PAC (ID#:_			Amount of Contribution (\$)	\$1,000.00
	•	Dallas, TX 75208 pation / Job title (See Instructions	s)	Employer (See Instructions) s)		
	Date 11/04/2024	Full name of contributor Brecht, Jennifer Contributor address; City; S Grapevine, TX 76051	out-of-state PAC (ID#:_			Amount of Contribution (\$)	\$100.00
	Principal occu insurance br	pation / Job title (See Instructions oker	s)	Employer (See Instructions	5)		
	Date 11/18/2024	Full name of contributor Chadwick, Bill Contributor address; City; S Dallas, TX 75230	out-of-state PAC (ID#:_			Amount of Contribution (\$)	\$100.00
	Principal occu insurance br	pation / Job title (See Instructions oker	5)	Employer (See Instructions	5)		

	MONET	ARY POLITICAL CONTRIBU	JTIOI	NS		SCHEDUL	E A1
	The Instru	ction Guide explains how to complete	this fo	rm.	1	Total pages Schedule A1: Sch: 3/8 Rpt: 8/18	
2	FILER NAME Texas Surplu	s Lines Assn. PAC			3	Filer ID (Ethics Commission 00015955	n Filers)
4	Date 11/11/2024	 Full name of contributor)	7	Amount of Contribution (\$)	\$250.00
_	Deinsinal assu	Weatherford, TX 76087	10	. Faralayar (Con Instructions			
8	insurance br	pation / Job title (See Instructions) oker	9	Employer (See Instructions	5)		
	Date 11/11/2024	Full name of contributor out-of-state PAG Culver, Jessica Contributor address; City; State; Zip Code Hutto, TX 78634)		Amount of Contribution (\$)	\$100.00
		pation / Job title (See Instructions)		Employer (See Instructions	<u> </u> 		
	insurance br	oker					
	Date 10/30/2024	Full name of contributor out-of-state PAG Dyer , Angela Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$40.00
		Mexia, TX 76667					
	Principal occu tax team sup	oation / Job title (See Instructions) ervisor		Employer (See Instructions	5)		
	Date 11/11/2024	Full name of contributor out-of-state PAGE Fieker, Andrew Contributor address; City; State; Zip Code Melisssa, TX 75454)	•	Amount of Contribution (\$)	\$250.00
	Principal occu insurance co	oation / Job title (See Instructions) mpany exec		Employer (See Instructions	5)		
	Date 10/30/2024	Full name of contributor out-of-state PAGE Fink, Bill Contributor address; City; State; Zip Code Houston, TX 77027				Amount of Contribution (\$)	\$250.00
	Principal occu insurance br	oation / Job title (See Instructions) oker		Employer (See Instructions	s)		

	MONET	ARY POLITICAL CONTRIBUTION	ONS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 4/8 Rpt: 9/18	
2	FILER NAME Texas Surplu	ıs Lines Assn. PAC		3	Filer ID (Ethics Commission 00015955	on Filers)
4	Date 11/11/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$50.00
8	Dringinal occu	Arlington, TX 76006 pation / Job title (See Instructions)	9 Employer (See Instructions	-, 		
0	insurance un		3 Employer (See instructions	·)		
	Date 11/06/2024	Full name of contributor out-of-state PAC (ID# Guzzetta, Sarah Contributor address; City; State; Zip Code Houston, TX 77040		•	Amount of Contribution (\$)	\$250.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instructions	<u> </u> 5)		
	insurance broker					
	Date 11/10/2024	Full name of contributor out-of-state PAC (ID# Hahn, Jessica Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$150.00
		Leander, TX 78641				
	Principal occu underwriter	pation / Job title (See Instructions)	Employer (See Instructions	5)		
	Date 11/10/2024	Full name of contributor out-of-state PAC (ID# Hart, Bruce Contributor address; City; State; Zip Code Heath, TX 75126		•	Amount of Contribution (\$)	\$1,000.00
	Principal occu agency presi	pation / Job title (See Instructions) dent	Employer (See Instructions	5)		
	Date 11/10/2024	Full name of contributor out-of-state PAC (ID# Herzog, Anita Contributor address; City; State; Zip Code Lampasas, TX 76650		•	Amount of Contribution (\$)	\$300.00
	Principal occu insurance br	oation / Job title (See Instructions) oker	Employer (See Instructions	s)		
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	MONET	ARY POLITICAL CO	NTRIBUTION	IS		SCHEDUI	E A1
	The Instru	ction Guide explains how to	complete this for	m.	1	Total pages Schedule A1: Sch: 5/8 Rpt: 10/18	
2	FILER NAME Texas Surplu	ıs Lines Assn. PAC			3	Filer ID (Ethics Commission 00015955	on Filers)
4	Date 11/11/2024	Hine, Gilbert	out-of-state PAC (ID#: Zip Code)	7	Amount of Contribution (\$)	\$500.00
8	Principal occu	San Antonio, TX 78260 pation / Job title (See Instructions)	ام	Employer (See Instructions			
0		ency president	j	Employer (See instructions	')		
	Date 11/01/2024	Full name of contributor Holt, David Contributor address; City; State;)		Amount of Contribution (\$)	\$100.00
	Dein sin al acces	Dallas, TX 75219		Faralana (Octobration)	_		
	insurance br	pation / Job title (See Instructions) oker		Employer (See Instructions	5)		
	Date 11/10/2024	Full name of contributor Kiernan, Meagan Contributor address; City; State;	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$300.00
		Plano, TX 75024					
	Principal occu insurance br	oation / Job title (See Instructions) bker		Employer (See Instructions	5)		
	Date 11/11/2024	Larimer, Rob				Amount of Contribution (\$)	\$100.00
	Principal occu insurance un	oation / Job title (See Instructions) derwriter		Employer (See Instructions	()		
	Date 11/11/2024	Le, Cam	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$1,000.00
	Principal occu insurance un	oation / Job title (See Instructions) derwriter		Employer (See Instructions)		
			<u> </u>				

	MONET	ARY POLITICAL CONTRIBUTI	ONS		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete this	form.	1	Total pages Schedule A1: Sch: 6/8 Rpt: 11/18	
2	FILER NAME Texas Surplu	ıs Lines Assn. PAC		3	Filer ID (Ethics Commission 00015955	n Filers)
4	Date 11/11/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$500.00
8	Principal occu	Houston, TX 77079 pation / Job title (See Instructions)	9 Employer (See Instructions	z)		
Ü	insurance br		5 Employer (See Instructions	۰)		
	Date 11/11/2024	Contributor address; City; State; Zip Code	<u>; </u>		Amount of Contribution (\$)	\$100.00
	Principal occu	Richmond, VA 23226 pation / Job title (See Instructions)	Employer (See Instructions	 s)		
	insurance un	derwriter				
	Date 11/12/2024	Full name of contributor out-of-state PAC (ID# Mock, Alyssa Contributor address; City; State; Zip Code	<u>; </u>		Amount of Contribution (\$)	\$100.00
		Richmond, VA 23226				
	Principal occu insurance un	oation / Job title (See Instructions) derwriter	Employer (See Instructions	5)		
	Date 11/11/2024	Full name of contributor out-of-state PAC (ID# Nix, Hardy Contributor address; City; State; Zip Code Carrollton, TX 75007	<u>*)</u>	•	Amount of Contribution (\$)	\$50.00
	Principal occu insurance br	oation / Job title (See Instructions) oker	Employer (See Instructions	5)		
	Date 10/31/2024	Full name of contributor out-of-state PAC (ID# O'Hara, Tom Contributor address; City; State; Zip Code Frisco, TX 75034	<u>; </u>	•	Amount of Contribution (\$)	\$50.00
	Principal occu insurance co	pation / Job title (See Instructions) mpany exec	Employer (See Instructions	5)		

	MONET	ARY POLITICAL CONTRIBUT	ΓΙΟΝ	S		SCHEDUL	E A1
	The Instruc	ction Guide explains how to complete th	is forr	n.	1	Total pages Schedule A1: Sch: 7/8 Rpt: 12/18	
2	FILER NAME Texas Surplu	ıs Lines Assn. PAC			3	Filer ID (Ethics Commission 00015955	n Filers)
4	Date 11/08/2024	 Full name of contributor out-of-state PAC (Reed, Zak Contributor address; City; State; Zip Code)	7	Amount of Contribution (\$)	\$150.00
0	Dringing Loggy	Austin, TX 78737-4632	lo.	Employer (Coa Instructions			
8	insurance br	pation / Job title (See Instructions) Diker	9	Employer (See Instructions)		
	Date 11/07/2024	Full name of contributor out-of-state PAC (Romano, Matthew Contributor address; City; State; Zip Code Houston, TX 77064)		Amount of Contribution (\$)	\$150.00
		pation / Job title (See Instructions)		Employer (See Instructions)		
	insurance br	oker					
	Date 10/31/2024	Full name of contributor out-of-state PAC (Rubel, Greg Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$250.00
		McKinney, TX 75070					
		oation / Job title (See Instructions) arketing representative		Employer (See Instructions)		
	Date 11/09/2024	Full name of contributor out-of-state PAC (Stolt, Doug Contributor address; City; State; Zip Code San Antonio, TX 78258)		Amount of Contribution (\$)	\$100.00
	Principal occu claims	oation / Job title (See Instructions)		Employer (See Instructions)		
	Date 11/18/2024	Full name of contributor out-of-state PAC (Stortzum, Scott Contributor address; City; State; Zip Code Houston, TX 77024				Amount of Contribution (\$)	\$100.00
	Principal occu insurance br	oation / Job title (See Instructions) oker		Employer (See Instructions)		
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	MONET	ARY POLITICAL CONTRIBU	JTIONS		SCHEDUI	LE A1
	The Instruc	ction Guide explains how to complete	this form.	1	Total pages Schedule A1: Sch: 8/8 Rpt: 13/18	
2	FILER NAME Texas Surplu	s Lines Assn. PAC		3	Filer ID (Ethics Commission 00015955	on Filers)
4	Date 11/11/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$500.00
_	Delicational	Arlington, TX 76002	le Frankrije (God koderski			
8	insurance br	pation / Job title (See Instructions) oker	9 Employer (See Instruction	ons)		
	Date 11/19/2024	Full name of contributor out-of-state PAG Turner, Timothy Contributor address; City; State; Zip Code Ojai, CA 93023	C (ID#:)		Amount of Contribution (\$)	\$5,000.00
	Principal occu	pation / Job title (See Instructions)	Employer (See Instruction	ons)		
	Insurance CEO					
	Date 11/20/2024	Full name of contributor out-of-state PAG VanAcker, Michael Contributor address; City; State; Zip Code	C (ID#:)		Amount of Contribution (\$)	\$250.00
	Delevie et e e e e	Naperville, IL 60563	Formion (Construction of			
	insurance br	pation / Job title (See Instructions) oker	Employer (See Instruction	ons)		
	Date 11/19/2024	Full name of contributor out-of-state PAG Verret, Brad Contributor address; City; State; Zip Code Dallas, TX 75206	C (ID#:)		Amount of Contribution (\$)	\$100.00
	Principal occu insurance bro	oation / Job title (See Instructions) oker	Employer (See Instruction	ons)		
	Date 11/23/2024	Full name of contributor out-of-state PAG West, Randall Contributor address; City; State; Zip Code Aledo, TX 76008	C (ID#:)		Amount of Contribution (\$)	\$250.00
	Principal occu claims rep	oation / Job title (See Instructions)	Employer (See Instruction	ons)		
			,			

PLE	DGED CONTRIBU	TIONS				SCHEDULE B	
The Instruction Guide explains how to complete this form. 2 FILER NAME Texas Surplus Lines Assn. PAC				1	1 Total pages Schedule B: Sch: 1/1 Rpt: 14/18 3 Filer ID (Ethics Commission Filers) 00015955		
				3			
1					\$	0.00	
5 Date	6 Full name of pledgor	out-of-state PAC (ID		_) 8	Amount of pledge (\$)	9 In-kind description (If applicable)	
	7 Pledgor Address;	City; State; Zip Coo	le				
10 Principal	occupation / Job title (See Instru	uctions)	11 Employer (See In	structi		tside of Texas. Complete Schedule T.	
·	, ,	,		0	J.1.5)		

L	OANS					SCHEDUI	E E
Th	e Instructio	n Guide explains h	ow to complete this f	orm.	1	ages Schedule E: /1 Rpt: 15/18	
	FILER NAME Texas Surplus Lines Assn. PAC		1	3 Filer ID (Ethics Commission Filers) 00015955			
4 TC	OTAL OF UN	IITEMIZED LOANS			'	\$	0.00
5 Dat	te of loan	7 Name of lender	out-of-state PA	C (ID#:		9 Loan Amount (\$)	
fina	ender a ancial titution?	8 Lender address;	City; State;	Zip Code		10 Interest Rate	
						11 Maturity Date	
12 Prir	ncipal occupatio	on / Job title (See Instructi	ons)	13 Employer (See Instruction	ons)		
14 Des	scription of Coll	ateral		15 Check if personal funds	were deposite	ed into political account (See Instructions)	
	JARANTOR FORMATION	17 Name of guarantor				19 Amount Guarante	ed (\$)
	not applicable	18 Guarantor address;	City; State;	Zip Code			
20 Prir	ncipal occupatio	on		21 Employer (See Instruction	ons)		

POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

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:	· · · · · · · · · · · · · · · · · · ·	ilers)				
Sch: 1/2 Rpt: 16/18	Texas Surplus Lines Assn. PAC 00015955	,				
4 Date	5 Payee name					
11/13/2024	Cook, David					
6 Amount (\$)	7 Payee address; City; State; Zip Code					
\$1,500.00	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					
_/	Candidate/Officeholder/Political Committee					
	campaign contribution					
O Complete CAU V & direct	Condidate/Officeholder name Office position					
9 Complete <u>ONLY</u> if direct expenditure to benefit C/Oł	Candidate/Officeholder name Office sought Office held Office held					
Date	Payee name					
11/13/2024	Cook, Molly					
Amount (\$)	Payee address; City; State; Zip Code					
\$2,500.00	P.O. Box 667238					
Expenditure from corporate funds	Houston, TX 77266					
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. Check if travel outside of Texas. Complete Schedule T.					
	Candidate/Officeholder/Political Committee Campaign contribution					
	Campaign continuation					
Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH						
Date	Payee name					
11/13/2024	Guillen, Ryan					
Amount (\$)	Payee address; City; State; Zip Code					
\$1,500.00	2504 Sable Palm Drive					
Expenditure from corporate funds	Rio Grande City, TX 78582					
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					
	campaign contribution					
0 1: 0:::::::::::::::::::::::::::::::::						
Complete ONLY if direct Candidate/Officeholder name Office sought Office held expenditure to benefit C/OH						
·						

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee 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 Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District Travel Out of District

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment				
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)			
Sch: 2/2 Rpt: 17/18	Texas Surplus Lines Assn. PAC 00015955			
4 Date	5 Payee name			
11/13/2024	Hinojosa, Adam			
6 Amount (\$)	7 Payee address; City; State; Zip Code			
\$2,500.00	P.O. Box 18301			
Expenditure from	O-11111 Obritati TV 70400			
corporate funds	Corpus Christi, TX 78480			
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
OF EVENDITUE	Contributions/Donations Made By			
EXPENDITURE	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			
11/13/2024	Hunter, Todd			
Amount (¢)	· · · · · · · · · · · · · · · · · · ·			
Amount (\$)				
\$1,500.00	445 Cape Henry Drive			
Expenditure from corporate funds	Corpus Christi, TX 78412			
PURPOSE	I			
OF	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Contributions/Donations Made By			
EXPENDITURE	Containations/Bondatons Made By			
	Candidate/Officeholder/Political Committee			
	campaign contribution			
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held			
expenditure to benefit C/O	1			
Date	Dayon nama			
	Payee name			
11/13/2024	Wharton, Trey			
Amount (\$)	Payee address; City; State; Zip Code			
\$1,500.00	1300 11th Street			
	Suite 630			
Expenditure from				
corporate funds	Huntsville, TX 77340			
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description			
OF EVEN DITUE	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/OH				

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

	MADE FROM POLITICAL CONTRIBUTIONS					
	The Instruction Guide explains how to complete this form.					
L	Total pages Schedule I: Sch: 1/1 Rpt:	2 FILER NAME Texas Surplus Lines Assn. PAC 3 Filer ID (Ethics Commission Filers) 00015955				
1	Date 11/24/2024	5 Payee name Square, Inc.				
3	Amount (\$) 460.89 Expenditure from corporate funds	7 Payee Address; City; State; Zip 1455 Market St. #600 San Francisco, TX 94103				
3	PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees (b) Description (See instructions regarding type of information required.) credit card fees				
	Date 11/24/2024	Payee name ePayPolicy				
	Amount (\$) 13.01 Expenditure from corporate funds	Payee Address; City; State; Zip 5000 Plaza on the Lake Suite 200 Austin, TX 78746				
	PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Fees (b) Description (See instructions regarding type of information required.) credit card fees				
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