#### FORM MPAC MONTHLY FILING GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT **COVER SHEET PG 1** 2 Total pages filed: The MPAC Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00015672 3 COMMITTEE NAME **OFFICE USE ONLY** Wholesale Beer Distributors Of Texas PAC Date Received **ELECTRONICALLY FILED** 12/05/2024 COMMITTEE ADDRESS / PO BOX: APT / SUITE #: CITY: STATE: ZIP **ADDRESS** 823 Congress Ave., Ste.1313 Change of Address Austin, TX 78701-2429 Date Hand-delivered or Date Postmarked MS / MRS / MR **CAMPAIGN FIRST** MI **TREASURER** Receipt # Amount Tom NAME Date Processed **NICKNAME SUFFIX** LAST Date Imaged Spilman CAMPAIGN STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE TREASURER 823 Congress Ave., Ste. 1313 STREET **ADDRESS** (Residence or Business) Austin, TX 78701-2429 **CAMPAIGN** STREET ADDRESS OR PO BOX; APT / SUITE #; CITY: STATE: ZIP CODE **TREASURER** 823 Congress Ave., Ste. 1313 MAILING **ADDRESS** Change of Address Austin, TX 78701-2429 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER PHONE** (512) 476-0697 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

**GO TO PAGE 2** 

# MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

# FORM MPAC COVER SHEET PG 2

12 COMMITTEE NAME			13 Filer ID	(Ethics Commission Filers)
Wholesale Beer Distributors Of Texas PAC 000				
14 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Pat Curry State Representative	Э	
(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.)			
15 CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS N	D POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR MADE ELECTRONICALLY)  qualifies for the higher itemization threshold	\$	0.00
		AL CONTRIBUTIONS DGES, LOANS, OR GUARANTEES OF LOANS)	\$	16,911.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZE	D POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICA	AL EXPENDITURES	\$	41,500.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL OF THE REPORTIN	CONTRIBUTIONS MAINTAINED AS OF THE LAST I	DAY \$	222,947.21
OUTSTANDING LOAN TOTALS	1	AMOUNT OF ALL OUTSTANDING LOANS AS OF T REPORTING PERIOD	HE \$	0.00
16 AFFIDAVIT	<u> </u>			
		I swear, or affirm, under penalty of per true and correct and includes all inforr under Title 15, Election Code.	rjury, that the a	accompanying report is d to be reported by me
		Mr. Tom	Spilman	
		Signature of Car		urer
AFFIX NOTAF	RY STAMP / SEAL ABOVE	•		
Sworn to and subscrib	ed before me, by the said	, th	nis the	day
of	, 20, to certify	which, witness my hand and seal of office.		
Signature of officer	administering oath	Printed name of officer administering oath	Title of office	cer administering oath

### MONTHLY FILING GPAC REPORT: PURPOSE

# FORM MPAC ADDENDUM

					Page 3 of 12
12 COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
Wholesale Beer Distributo	ors Of Texas PAC			00015672	
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			
	Measures     (Describe by date and location of election and approximately and the state of lection and approximately and approximately and and approximately approximately and approximately appr	A. Supported			
	nature of issue.)	B. Opposed			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)		Donna Campbell State Senator		
COMMITTEE					
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.)		Erin Gamez State Representativ	ve	
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			
	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.)		Bryan Hughes State Senator		

### MONTHLY FILING GPAC REPORT: PURPOSE

# FORM MPAC ADDENDUM

Of Texas PAC  Candidates  dentify by name or, if oplicable, classify by party.)	A. Supported		<b>13</b> Filer ID 00015672	(Ethics Commission Filers)
Candidates	A. Supported		00015672	
dentify by name or, if	A. Supported			
	B. Opposed			
. Measures	A. Supported			
escribe by date and cation of election and sture of issue.)				
	B. Opposed			
Officeholders Assisted dentify by name or, if		Cole Hefner State Representativ	<u></u>	
dentify by name or, if oplicable, classify by party.)				
	B. Opposed			
Measures escribe by date and cation of election and sture of issue.)	A. Supported			
	B. Opposed			
Officeholders Assisted dentify by name or, if oplicable, classify by party.)		Dan Patrick Lieutenant Governo	)r	
	A. Supported			
dentify by name or, if pplicable, classify by party.)				
	B. Opposed			
escribe by date and cation of election and	A. Supported			
ŕ	B. Opposed			
Officeholders Assisted		Richard Raymond State Repres	entative	
· dept	Officeholders Assisted entify by name or, if olicable, classify by party.)  Candidates entify by name or, if olicable, classify by party.)  Measures escribe by date and attion of election and ture of issue.)  Officeholders Assisted entify by name or, if olicable, classify by party.)  Candidates entify by name or, if olicable, classify by party.)  Candidates entify by name or, if olicable, classify by party.)  Measures entify by name or, if olicable, classify by party.)	Describe by date and ation of election and ure of issue.)  Difficeholders Assisted entify by name or, if olicable, classify by party.)  Candidates entify by name or, if olicable, classify by party.)  B. Opposed  Measures escribe by date and ation of election and ure of issue.)  Difficeholders Assisted entify by name or, if olicable, classify by party.)  Candidates entify by name or, if olicable, classify by party.)  Candidates entify by name or, if olicable, classify by party.)  Candidates entify by name or, if olicable, classify by party.)  B. Opposed  Measures escribe by date and ation of election and ure of issue.)  B. Opposed  B. Opposed  B. Opposed	B. Opposed  Officeholders Assisted entity by name or, if olicable, classify by party.)  B. Opposed  Candidates  A. Supported  B. Opposed  A. Supported  B. Opposed  A. Supported  Dan Patrick Lieutenant Governo and ure of issue.)  Dan Patrick Lieutenant Governo and ure of issue.  A. Supported  B. Opposed  A. Supported  A. Supported  B. Opposed  A. Supported  B. Opposed  A. Supported  B. Opposed  A. Supported  A. Supported  Dan Patrick Lieutenant Governo and ure of issue.)  A. Supported  Dan Patrick Lieutenant Governo and ure of issue.  B. Opposed  A. Supported  B. Opposed  Dan Patrick Lieutenant Governo and ure of issue.  B. Opposed	Difficeholders Assisted entify by name or, if olicable, classify by party.)  B. Opposed  Cole Hefner State Representative  Cole Hefner State Representative  Supported  A. Supported  B. Opposed  A. Supported  B. Opposed  A. Supported  B. Opposed  Dan Patrick Lieutenant Governor  Assisted  Cofficeholders Assisted  B. Opposed  A. Supported  A. Supported  B. Opposed  A. Supported  Candidates  Entify by name or, if olicable, classify by party.)  B. Opposed  B. Opposed

### MONTHLY FILING GPAC REPORT: PURPOSE

# FORM MPAC ADDENDUM

					Page 5 of 12
12 COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
Wholesale Beer Distributor	s Of Texas PAC			00015672	
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			
	Officeholders     Assisted     (Identify by name or, if applicable, classify by party.)		Nathan Johnson 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.)	)	Toni Rose State Representative	)	
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.)		Glenn Hegar Comptroller		

### FORM MPAC MONTHLY FILING GPAC REPORT: PURPOSE **ADDENDUM** Page 6 of 12 12 COMMITTEE NAME 13 Filer ID (Ethics Commission Filers) Wholesale Beer Distributors Of Texas PAC 00015672 14 COMMITTEE 1. Candidates A. Supported Lulu Flores State Representative **ACTIVITY** (Identify by name or, if applicable, classify by party.) (Attach lists on plain B. Opposed paper to complete this report if necessary.) A. Supported 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.

### **SUBTOTALS - MPAC**

# FORM MPAC COVER SHEET PG 3

				7 of 12
<b>17</b> CON	имітте	E NAME	18 Filer ID	(Ethics Commission Filers)
l	olesale	(Lance Commission Files)		
10 SCH	IEDI II I	E SUBTOTALS		I
	ME OF	SUBTOTAL AMOUNT		
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		<b>\$</b> 16,911.00
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$
4.		SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOURGANIZATION	DR	\$
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	<b>\$</b> 41,500.00
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	\$

MONET	FARY POLITICAL CONTRIBUTIONS	SCHEDULE A1
The Instru	uction Guide explains how to complete this form.	1 Total pages Schedule A1: Sch: 1/1 Rpt: 8/12
2 FILER NAME Wholesale I	E Beer Distributors Of Texas PAC	3 Filer ID (Ethics Commission Filers) 00015672
4 Date 11/04/2024	5 Full name of contributor out-of-state PAC (ID#: Brown, Laurie  6 Contributor address; City; State; Zip Code	7 Amount of Contribution (\$) \$8,361.00
9 Dringing age	Austin, TX 78703	Page Instructions)
Business O		see Instructions)
Date 11/18/2024	Full name of contributor out-of-state PAC (ID#:	Amount of Contribution (\$) \$8,550.00
Principal occi	upation / Job title (See Instructions) Employer (S	lee Instructions)

### POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

#### 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 Travel in District

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: 1/4 Rpt: 9/12	Wholesale Beer Distributors Of Texas PAC 00015672
4 Date	5 Payee name
11/19/2024	Campbell, Donna
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,500.00	1108 Lavaca Street
	Box 110-464
Expenditure from corporate funds	Austin, TX 78701
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
O Committee ONII V if allowed	Our didn't lotter had a grant of the country of the
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
·	
Date	Payee name
11/22/2024	Curry, Pat
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	204 Woodhew Drive
Expenditure from	
corporate funds	Waco, TX 76712
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	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	· ·
Data	
Date	Payee name
10/29/2024	Flores, Lulu
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	PO Box 40969
Expenditure from	
corporate funds	Austin, TX 78704
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
	Campaign continuation
Complete <u>ONLY</u> if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/Ol	

### POLITICAL EXPENDITURES FROM POLITICAL **CONTRIBUTIONS**

#### 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: 2/4 Rpt: 10/12	Wholesale Beer Distributors Of Texas PAC 00015672
4 Date	5 Payee name
11/19/2024	Gamez, Erin
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,000.00	777 E. Harrison St.
42,000.00	
Expenditure from corporate funds	Brownsville, TX 78520
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 expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
11/21/2024	Hefner, Cole
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	PO Box 167
Ψ1,000.00	1 O BOX 107
Expenditure from corporate funds	Mount Pleasant, TX 75456
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
Date	Payee name
11/12/2024	Hegar, Glenn
Amount (\$)	Payee address; City; State; Zip Code
\$5,000.00	815-A Brazos St. #389
Expenditure from 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  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

### POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

#### SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committe 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
OTHER (outpers extrapply not listed above)

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	
Sch: 3/4 Rpt: 11/12	Wholesale Beer Distributors Of Texas PAC 00015672
4 Date	5 Payee name
11/21/2024	Hughes, Bryan
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$2,500.00	PO Box 5161
Expenditure from corporate funds	Tyler, TX 75712
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
LA LABITORL	Candidate/Officeholder/Political Committee
	Campaign contribution
O Complete CNII V if direct	Candidate/Officeholder name Office sought
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
· .	
Date	Payee name
11/14/2024	Johnson, Nathan
Amount (\$)	Payee address; City; State; Zip Code
\$1,500.00	12770 Coit Rd.
	Ste 1100
Expenditure from corporate funds	Dallas, TX 75251
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	Payeo namo
11/21/2024	Payee name Patrick, Dan (Mr.)
Amount (\$)	Payee address; City; State; Zip Code
\$25,000.00	11629 Katy Freeway
Expenditure from	
corporate funds	Houston, TX 77079
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 <u>ONLY</u> if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	

### POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

#### SCHEDULE F1

#### **EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committee Event Expense
Fees
Food/Beverage Expense
Git/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 (enter a category not listed above)

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: 4/4 Rpt: 12/12	Wholesale Beer Distributors Of Texas PAC 00015672
4 Date 11/21/2024	5 Payee name Raymond, Richard
6 Amount (\$) \$1,000.00	7 Payee address; City; State; Zip Code 1110 Houston Street 3rd Floor
Expenditure from corporate funds	Laredo, TX 78040
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee  (b) Description  Check if travel outside of Texas. Complete Schedule T.  Check if Austin, TX, officeholder living expense  Campaign contribution
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
11/12/2024	Rose, Toni
Amount (\$) \$1,000.00	Payee address; City; State; Zip Code PO Box 41867
Expenditure from corporate funds	Dallas, TX 75241
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee  (b) Description  Check if travel outside of Texas. Complete Schedule T.  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