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** 12/30/2024 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 X January 5 April 5 July 5 October 5 REPORT FILING **DEADLINE** February 5 May 5 August 5 November 5 March 5 September 5 December 5 June 5 11 PERIOD Month Day Year Month Day Year **THROUGH COVERED** 11/26/2024 12/25/2024

MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

FORM MPAC COVER SHEET PG 2

2 COMMITTEE NAME Texas Surplus Lines	Assn PAC			13 Filer	ID 15955	(Ethics Commission Filers)
Texas Surpius Lines	ASSII. FAC			0001	13933	
4 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Brian Birdwell State Senato	r		
(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.)					
5 CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS M	OR GUARAN [*] MADE ELECTR	CONTRIBUTIONS (OTHER THAN TEES OF LOANS, OR RONICALLY) higher itemization threshold		\$	0.00
	2. TOTAL POLITICA	•	•		\$	222.00
	(OTHER THAN PLE	DGES, LOANS	S, OR GUARANTEES OF LOANS)		Ψ	200.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZEI	D POLITICAL I	EXPENDITURES		\$	0.00
	4. TOTAL POLITICA	AL EXPENDI	TURES		\$	2,500.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL (OF THE REPORTIN		DNS MAINTAINED AS OF THE LA	ST DAY	\$	113,271.55
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL LAST DAY OF THE		ALL OUTSTANDING LOANS AS C PERIOD	F THE	\$	0.00
6 AFFIDAVIT						
			I swear, or affirm, under penalty of true and correct and includes all in under Title 15, Election Code.	perjury, tha formation r	at the ac equired	ecompanying report is to be reported by me
			lean -	T. Patters	on	
			Signature of			 er
AFFIX NOTAI	RY STAMP / SEAL ABOVE		- 3 1	13		
Sworn to and subscrib	ned hefore me, by the said			this the		day
	, 20, to certify			_, 1110 1110 _		aay
		ŕ	,			
Signature of officer	administering oath	Printed name	of officer administering oath	Title	of office	er administering oath

SUBTOTALS - MPAC

FORM MPAC COVER SHEET PG 3

3 of 8

				3 01 8		
17 COMMITTEE NAME 18 Filer ID (Ethics Commission Filers)						
Texas Sur	plus Lines Assn. PAC	00015955				
19 SCHEDULE NAME OF S	SUBTOTA	AL AMOUNT				
1. X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	200.00		
2. X	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	0.00		
3. X	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	0.00		
4.	SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO ORGANIZATION	OR	\$			
5.	SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORAL LABOR ORGANIZATION	ATION OR	\$			
6.	6. SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION					
7. SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION						
8. SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION						
9. X SCHEDULE E: LOANS \$				0.00		
10. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS			\$	2,500.00		
11. X SCHEDULE F2: UNPAID INCURRED OBLIGATIONS			\$	0.00		
12. X SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS			\$	0.00		
13. X SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD			\$	0.00		
14. X SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS \$			\$	754.73		
15. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER			\$			

	MONET	ARY POLITICAL CONTRIBUTION	SCHEDULE A1			
	The Instru	ction Guide explains how to complete this f	1	Total pages Schedule A1: Sch: 1/1 Rpt: 4/8		
2	FILER NAME Texas Surpl	us Lines Assn. PAC		3	Filer ID (Ethics Commission 00015955	n Filers)
4				7	Amount of Contribution (\$)	\$100.00
	Deinainal assu	Prosper, TX 75078	O Francisco (Coo Instructions			
8	insurance br	pation / Job title (See Instructions) roker	9 Employer (See Instructions	S)		
	Date Full name of contributor out-of-state PAC (ID#:) 12/11/2024 Torres, Suzette Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$100.00
	Principal occu	Sugar Land, TX 77478 Principal occupation / Job title (See Instructions) Employer (See Instructions)		<u> </u> s)		

PLEDGED CONTRIBUTIONS	SCHEDULE B			
The Instruction Guide explains how to complete this form.	1 Total pages Schedule B: Sch: 1/1 Rpt: 5/8			
2 FILER NAME	3 Filer ID (Ethics Commission Filers)			
Texas Surplus Lines Assn. PAC	00015955			
TOTAL OF UNITEMIZED PLEDGES	\$ 0.00			
5 Date 6 Full name of pledgor out-of-state PAC (ID#:)	8 Amount of 9 In-kind description pledge (\$) (If applicable)			
7 Pledgor Address; City; State; Zip Code	Check if travel outside of Texas. Complete Schedule T			
10 Principal occupation / Job title (See Instructions) 11 Employer (See Instru	l —			

L	DANS					SCHEDULE E
Th	e Instructio	n Guide explains ho	w to complete this f	orm.		ages Schedule E: /1 Rpt: 6/8
	ER NAME kas Surplus L	ines Assn. PAC			3 Filer ID 00015	(Ethics Commission Filers)
1		IITEMIZED LOANS				\$ 0.00
5 Dat	e of loan	7 Name of lender	out-of-state PA	C (ID#:		9 Loan Amount (\$)
fina	ender a Incial itution?	8 Lender address;	City; State;	Zip Code		10 Interest Rate
						11 Maturity Date
12 Prir	ncipal occupation	I on / Job title (See Instructio	ns)	13 Employer (See Instru	ictions)	
14 Des	scription of Coll	ateral		15 Check if personal fur	ds were deposite	d into political account (See Instructions)
	ARANTOR ORMATION	17 Name of guarantor				19 Amount Guaranteed (\$)
	not applicable	18 Guarantor address;	City; State;	Zip Code		
20 Prir	ncipal occupatio	on		21 Employer (See Instru	ctions)	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (other a cottographed listed above)

Contributions/ Donations Made B Candidate/Officeholder/Politic Credit Card Payment		
1 Total pages Schedule F1: Sch: 1/1 Rpt: 7/8	2 FILER NAME Texas Surplus Lines Assn. PAC 3 Filer ID (Ethics Commission Filers) 00015955	
4 Date 12/09/2024	5 Payee name Birdwell, Brian	
6 Amount (\$) \$2,500.00	7 Payee address; City; State; Zip Code P.O. Box 111	
Expenditure from corporate funds	Granbury, TX 76048	
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 contribution to campaign	
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held	

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE |

	MADE FROM FOLITICAL CONTRIBOTIONS				
		The Instruction Guide explains how to	complete this form.		
1	Total pages Schedule I: Sch: 1/1 Rpt: 8/8	FILER NAME Texas Surplus Lines Assn. PAC	3 Filer ID (Ethics Commission Filers) 00015955		
4	Date 12/12/2024	5 Payee name Square, Inc.	•		
6	Amount (\$) 6.40 Expenditure from corporate funds	7 Payee Address; City; State; Zip 1455 Market St. #600 San Francisco, TX 94103			
8	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 12/12/2024	Payee name Texas Surplus Lines Assn., Inc.			
	Amount (\$) 748.33 Expenditure from corporate funds	Payee Address; City; State; Zip P.O. Box 10288 Austin, TX 78766			
	PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Accounting/Banking	(b) Description (See instructions regarding type of information required.) Reimbursement for online quickbooks		