GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM GPAC COVER SHEET PG 1

The GPAC Instruction Guide explains how to complete this fo			1	Filer ID (Ethics Commission Filers) 00057861		2 Total pages filed: 5		
3	COMMITTEE NAME					OFFICE USE ONLY		
	AutoNation, Inc. Po	olitical Action Committee				Date Received		
						01/07/2025		
4	COMMITTEE ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CI	TY;	STATE; ZIP CC	DDE			
	ADDITESS	200 S.W. 1st Ave, 14th Fl.				Date Hand-delivered or Date Postmarked		
	Change of Address							
		Fort Lauderdale, FL 33301				Receipt # Amount		
						Date Processed		
						Date Imaged		
5	CAMPAIGN TREASURER	MS / MRS / MR FIRST				MI		
	NAME	Mr. C. Coleman G	i.					
		NICKNAME LAST				SUFFIX		
		Edmunds						
6	CAMPAIGN	STREET ADDRESS (NO PO BOX PLEASE);		APT / SUITE #;	CITY;	STATE; ZIP CODE		
	TREASURER STREET	200 S.W. 1st Ave., 14th Fl.						
	ADDRESS							
	(Residence or Business)	Fort Lauderdale, FL 33301						
7	CAMPAIGN	STREET OR PO BOX;		APT / SUITE #;	CITY;	STATE; ZIP CODE		
ľ	TREASURER			AFT/SOIL#,	CITT,	STATE, ZIP CODE		
	MAILING	200 S.W. 1st Ave., 14th Fl.						
	ADDRESS							
	Change of Address	Fort Lauderdale, FL 33301						
8	CAMPAIGN	AREA CODE PHONE NUMBER	EX	ENSION				
TREASURER (954) 769-2039								
	PHONE							
9	REPORT	X January 15 3)th c	ay before election		Dissolution (Attach PAC-DR)		
	TYPE			-				
			h da	y before election		10th day after campaign treasurer termination		
		July 15	unot	f		commutation		
10	PERIOD COVERED	Month Day Year		Month	Day	Year		
	OOVERED	07/01/2024 Т	HR	DUGH 12/3	1/2024			
					(DE			
11	ELECTION	ELECTION DATE		ELECTION TY	ΡE	Other		
		Month Day Year	Prim	ary Runoff		Other		
			Sene	eral Special				
		-						
		·						
	GO TO PAGE 2							
Foi	rms provided by Tex	kas Ethics Commission www.e	thic	s.state.tx.us		Version V4.1.0.5dd2ace2		

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM GPAC COVER SHEET PG 2

12 COMMITTEE NAME 13 Filer			13 Filer I) (Ethics Commission Filers)		
AutoNation, Inc. Political Action Committee 0005				/861		
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported				
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed				
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported				
		B. Opposed				
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)					
15 CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS M	POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR ADE ELECTRONICALLY) qualifies for the higher itemization threshold	\$.0.00		
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)			0.00		
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES			0.00		
	4. TOTAL POLITICAL EXPENDITURES			0.00		
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD			31,515.40		
OUTSTANDING LOAN TOTALS		AMOUNT OF ALL OUTSTANDING LOANS AS OF 1 REPORTING PERIOD	THE \$.00		
16 AFFIDAVIT			•			
		I swear, or affirm, under penalty of pe true and correct and includes all inform under Title 15, Election Code.				
		Mr. C. Colema	an C. Edu	munde		
		Signature of Ca				
			·9-1 11			
AFFIX NOTARY	AFFIX NOTARY STAMP / SEAL ABOVE					
Sworn to and subscribed before me, by the said, this the,				day		
of	, 20, to certify v	vhich, witness my hand and seal of office.				
Signature of officer ad	ninistering oath	Printed name of officer administering oath	Title o	f officer administering oath		
Forms provided by Texas E	thics Commission	www.ethics.state.tx.us		Version V4.1.0.5dd2ace2		

FORM GPAC COVER SHEET PG 3

17 COM	IMITTE	(Ethics Commission Filers)		
	Natio			
19 SCH NAM	IEDULE 1E OF \$	SUBTOTAL AMOUNT		
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 0.00
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$
3.	Х	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$ 0.00
4.		SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO ORGANIZATION	R	\$
5.		SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORA LABOR ORGANIZATION	TION OR	\$
6.		SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	ANIZATION	\$
7.		SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION		\$
8.		SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR C	ORGANIZATION	\$
9.	X	SCHEDULE E: LOANS		\$ 0.00
10.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	S	\$ 0.00
11.	Х	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$ 0.00
12.	Х	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIO	ONS	\$ 0.00
13.	Х	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$ 0.00
14.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIO	ONS	\$
15.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F TO FILER	RETURNED	\$

SUBTOTALS - GPAC

PLEDGED CONTRIBUTIONS SCHEDULE **B** 1 Total pages Schedule B: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 4/5 2 FILER NAME 3 Filer ID (Ethics Commission Filers) AutoNation, Inc. Political Action Committee 00057861 4 \$ 0.00 TOTAL OF UNITEMIZED PLEDGES In-kind description 5 Date 6 Full name of pledgor out-of-state PAC (ID#: 8 Amount of 9 1 (If applicable) pledge (\$) 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 Instructions)

LOANS		SCHEDU	LE E
The Instruction Guide explains how to complete this form.		ges Schedule E: 1 Rpt: 5/5	
2 FILER NAME AutoNation, Inc. Political Action Committee	3 Filer ID 000578	(Ethics Commission 361	Filers)
⁴ TOTAL OF UNITEMIZED LOANS		\$	0.00
5 Date of loan 7 Name of lender Out-of-state PAC (ID#:)	9 Loan Amount (\$)	
6 Is lender a financial institution? 8 Lender address; City; State; Zip Code		10 Interest Rate	
		11 Maturity Date	
12 Principal occupation / Job title (See Instructions) 13 Employer (See Instructions))		
14 Description of Collateral 15 Check if personal funds we None	re deposited	l into political account (See Instructions))
16 GUARANTOR INFORMATION 17 Name of guarantor		19 Amount Guarante	eed (\$)
not applicable 18 Guarantor address; City; State; Zip Code			
20 Principal occupation 21 Employer (See Instructions))	•	