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) 00017307 3 COMMITTEE NAME **OFFICE USE ONLY** Independent Automobile Dealers PAC Date Received **ELECTRONICALLY FILED** 01/15/2025 4 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** 9951 Anderson Mill Rd., Ste. 101 Date Hand-delivered or Date Postmarked Change of Address Austin, TX 78750 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** John NAME NICKNAME LAST **SUFFIX** Frullo STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 9951 Anderson Mill Rd., Ste. 101 STREET **ADDRESS** (Residence or Business) Austin, TX 78750 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** MAILING **ADDRESS** TX Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (512) 244-6060 PHONE REPORT January 15 30th day before election Dissolution (Attach PAC-DR) **TYPE** 8th day before election 10th day after campaign treasurer July 15 Runoff 10 PERIOD Year Month Day Year Day Month **COVERED THROUGH** 10/27/2024 12/31/2024 11 ELECTION **ELECTION DATE ELECTION TYPE** Month Day Year Primary Runoff Other General Special **GO TO PAGE 2**

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM GPAC COVER SHEET PG 2

12 COMMITTEE NAME			13 Filer ID	(Ethics Commission Filers)
Independent Automo	bile Dealers PAC		00017307	
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 nature of issue.)	A. Supported B. Opposed		
	Officeholders Assisted (Identify by name or, if applicable, classify by party.)	Sen. Carol Alvarado State Sen	ator	
15 CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS M	D POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR ADE ELECTRONICALLY) qualifies for the higher itemization threshold	\$	0.00
	2. TOTAL POLITICA (OTHER THAN PLE	L CONTRIBUTIONS DGES, LOANS, OR GUARANTEES OF LOANS)	\$	4,430.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	POLITICAL EXPENDITURES	\$	0.00
	4. TOTAL POLITICA	L EXPENDITURES	\$	47,500.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL (OF THE REPORTIN	CONTRIBUTIONS MAINTAINED AS OF THE LAST I G PERIOD	DAY \$	119,078.05
OUTSTANDING LOAN TOTALS		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 inforn under Title 15, Election Code.		
		John	Frullo	
		Signature of Can	npaign Treasur	er
AFFIX NOTA	RY STAMP / SEAL ABOVE			
Sworn to and subscrib	oed before me, by the said	, th	is the	day
		which, witness my hand and seal of office.		
Signature of officer	administering oath	Printed name of officer administering oath	Title of office	er administering oath

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12	COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
	Independent Automobile	e Dealers PAC			00017307	
	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. Rafael Anchia State Repre	esentative	
	COMMITTEE	Candidates	A. Supported			
	ACTIVITY	(Identify by name or, if	A. Supported			
	/A	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. Trent Ashby 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.)	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		Rep. Jeff Barry State Represent	ative	
		(Identify by name or, if applicable, classify by party.)				

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12	COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
	Independent Automobile	e Dealers PAC			00017307	
	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. Keith Bell State Represent	tative	
	COMMITTEE	Candidates				
	ACTIVITY	(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			
		2. Measures	A. Supported			
		(Describe by date and location of election and nature of issue.)				
			B. Opposed			
		Officeholders Assisted		Sen. Brian Birdwell State Senat	or	
		(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. Brad Buckley State Repres	sentative	
		(Identify by name or, if applicable, classify by party.)				

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12	COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
	Independent Automobile	e Dealers PAC			00017307	
	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. Dustin Burrows State Repr	resentative	
	COMMITTEE	1. 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. Terry Canales State Repre	esentative	
		(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		Rep. Drew Darby State Represe	entative	
		(Identify by name or, if applicable, classify by party.)				

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						1 ago o or 10
12	COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
	Independent Automobile	e Dealers PAC			00017307	
	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. Yvonne Davis State Repre	sentative	
	OOM WITTEE	<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			
		2. Measures (Describe by date and	A. Supported			
		location of election and nature of issue.)				
			B. Opposed			
		Officeholders Assisted		Rep. Paul Dyson State Represe	ntative	
		(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 (Identify by name or, if		Rep. Caroline Fairly State Repre	esentative	
		applicable, classify by party.)				

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12 COMMITTEE NAME		13 Filer ID (Ethics Commission Filers)
Independent Automobile Dealers PAC		00017307
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	
Officeholders Assisted (Identify by name or, if applicable, classify by party	·	ank State Representative
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	
Officeholders Assisted (Identify by name or, if applicable, classify by party		ez State Representative
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	
Officeholders Assisted (Identify by name or, if applicable, classify by party		es State Representative

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						Page 8 01 46
12	COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
	Independent Automobile	e Dealers PAC			00017307	
	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.)		Rep. Charlie Geren State Repre	esentative	
	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. Bobby Guerra State Repre	esentative	
		(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 (Describe by date and location of election and nature of issue.)	A. Supported			
			B. Opposed			
		3. Officeholders Assisted (Identify by name or, if		Sen. Kelly Hancock State Senat	tor	
		applicable, classify by party.)				

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COMMITTEE NAME				42 Eller ID	
				13 Filer ID	(Ethics Commission Filers)
Independent Automobile	e Dealers PAC			00017307	
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			
	Officeholders Assisted (Identify by name or, if applicable, classify by party.)		Rep. Sam Harless 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			
	Officeholders Assisted (Identify by name or, if applicable, classify by party.)		Sen. Chuy Hinojosa State Sena	tor	
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. Donna Howard State Repr	esentative	

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12	COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
	Independent Automobile	e Dealers PAC			00017307	
	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.)		Sen. Bryan Hughes State Senat	or	
	COMMITTEE	Candidates				
	ACTIVITY	(Identify by name or, if	A. Supported			
	(Attach lists on plain	applicable, classify by party.)				
	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
		2. Measures (Describe by date and	A. Supported			
		location of election and nature of issue.)	D. Ownsond			
			B. Opposed			
		Officeholders Assisted		Rep. Todd Hunter State Repres	entative	
		(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. Ann Johnson State Repres	sentative	
		(Identify by name or, if applicable, classify by party.)				

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						1 ago 11 01 10
12	COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
	Independent Automobile	e Dealers PAC			00017307	
	<u> </u>		A Cupported			
	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 Assisted (Identify by name or, if applicable, classify by party.)		Sen. Phil King State Senator		
	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			
		2. Measures	A. Supported			
		(Describe by date and location of election and nature of issue.)				
			B. Opposed			
		Officeholders Assisted		Rep. Stan Kitzman State Repres	sentative	
		(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			
		Officeholders Assisted		Sen. Louis Kolkhorst 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)
	Independent Automobile	e Dealers PAC			00017307	
	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. Brooks Landgraf 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			
		3. Officeholders Assisted		Rep. Jeff Leach State Represen	itative	
		(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 Assisted		Rep. Oscar Longoria State Rep	resentative	
		(Identify by name or, if applicable, classify by party.)				

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12	COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
	Independent Automobile	e Dealers PAC			00017307	
14	COMMITTEE ACTIVITY	Candidates (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			
		3. Officeholders Assisted (Identify by name or, if		Rep. Janie Lopez State Represe	entative	
		applicable, classify by party.)				
	COMMITTEE ACTIVITY	Candidates (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 (Describe by date and	A. Supported			
		location of election and nature of issue.)	B. Opposed			
			B. Opposed			
		Officeholders Assisted		Rep. J.M. Lozano 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.)	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		Rep. Armando Martinez State R	epresentative	
		(Identify by name or, if applicable, classify by party.)				

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12	COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
	Independent Automobile	e Dealers PAC			00017307	
			A Cupported			
	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 Assisted (Identify by name or, if applicable, classify by party.)		Rep. Will Metcalf State Represe	entative	
	0014147777	<u> </u>	<u> </u>			
	COMMITTEE ACTIVITY	Candidates (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	A. Supported			
		location of election and nature of issue.)	D. Ourrand			
			B. Opposed			
		Officeholders Assisted		Rep. Morgan Meyer State Repre	esentative	
		(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		Sen. Borris Miles State Senator		
		(Identify by name or, if applicable, classify by party.)				

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						1 ago 10 01 10
12	COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
	Independent Automobile	e Dealers PAC			00017307	
	COMMITTEE	1. Candidates	A Supported			
	ACTIVITY	(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.)		Sen. Robert Nichols State Sena	tor	
	COMMITTEE	Candidates	A. Supported			
	ACTIVITY	(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			
		2. Measures	A. Supported			
		(Describe by date and location of election and nature of issue.)				
			B. Opposed			
		Officeholders Assisted		Rep. Angelia Orr State Represe	ntative	
		(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		Sen. Tan Parker State Senator		
		(Identify by name or, if applicable, classify by party.)				

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12	COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
	Independent Automobile	e Dealers PAC			00017307	
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 nature of issue.)	A. Supported			
			B. Opposed			
		Officeholders Assisted (Identify by name or, if applicable, classify by party.)		Rep. Dennis Paul State Represe	entative	
	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. Mary Ann Perez State Rep	oresentative	
	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. Charles Perry State Senat	or	

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12	COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
	Independent Automobile	e Dealers PAC			00017307	
	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.)		Rep. Richard Raymond State R	epresentative	
	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. Ramon Romero State Rep	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.)		Rep. Mike Schofield State Repr	esentative	_

FORM GPAC ADDENDUM

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						1 ago 10 01 10
12	COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
	Independent Automobile	e Dealers PAC			00017307	
	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		Rep. James Talarico State Repr	resentative	
	COMMITTEE	applicable, classify by party.)	A Cupranta-			
	ACTIVITY	Candidates (Identify by name or, if	A. Supported			
	(Attach lists on plain	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. Carl Tepper 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.)	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		Rep. Chris Turner State Repres	entative	
		(Identify by name or, if applicable, classify by party.)				

FORM GPAC ADDENDUM

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						1 age 10 of 10
12	COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
	Independent Automobile	e Dealers PAC			00017307	
	COMMITTEE	1. Candidates	A Supported			
	ACTIVITY	(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. Gary VanDeaver State Re	presentative	
	COMMITTEE	<u> </u>	<u> </u>			
	COMMITTEE ACTIVITY	Candidates (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 (Describe by date and location of election and	A. Supported			
		nature of issue.)	B. Opposed			
		Officeholders Assisted		Rep. Terry Wilson State Repres	entative	
		(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			
		Officeholders Assisted (Identify by name or, if		Rep. Erin Zwiener State Repres	entative	
		applicable, classify by party.)				

FORM GPAC ADDENDUM

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						1 age 20 01 10
12	COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
	Independent Automobile	e Dealers PAC			00017307	
	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. John Bucy State Represer	ntative	
	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. Matt Shaheen State Repre	esentative	
		(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 Assisted		Sen. Brandon Creighton State F	Representative	
		(Identify by name or, if applicable, classify by party.)				

SUBTOTALS - GPAC

FORM **GPAC**COVER SHEET PG 3

				_	21 of 46
		EE NAME	18 Filer ID	(Ethics Commission	on Filers)
	•	ent Automobile Dealers PAC	00017307		
		E SUBTOTALS SCHEDULE		SUBTOTAL .	AMOUNT
1.	Х	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	4,430.00
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$	
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.		\$			
5.		\$			
6.		\$			
7.		SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	1	\$	
8.		SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR (ORGANIZATION	\$	
9.		SCHEDULE E: LOANS		\$	
10.	Х	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	\$	47,500.00
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.	X	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	424.30
15.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$	

	MONET	ARY POLITICAL C	CONTRIBUTION	IS		SCHEDUI	E A1
	The Instru	ction Guide explains how	to complete this for	m.	1	Total pages Schedule A1: Sch: 1/5 Rpt: 22/46	
2	FILER NAME Independent	: Automobile Dealers PAC			3	Filer ID (Ethics Commission 00017307	on Filers)
4	Date 11/10/2024	5 Full name of contributor Barrett, Stephen6 Contributor address; City; St	out-of-state PAC (ID#:		7	Amount of Contribution (\$)	\$100.00
_	Dringing! goog	Lone Oak, TX 75453	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Employer (Con Instructions	_		
8	Car dealer	pation / Job title (See Instructions	9	Employer (See Instructions Barrett Motors	5)		
	Date 12/10/2024	L2/10/2024 Barrett, Stephen Contributor address; City; State; Zip Code Lone Oak, TX 75453			Amount of Contribution (\$)	\$100.00	
	Principal occu	Lone Oak, TX 75453 pation / Job title (See Instructions) I	Employer (See Instructions	;) 		
	Car dealer	pation / Job title (See Instructions		Barrett Motors	')		
	Date Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$1,000.00	
		Porter, TX 77365					
	Principal occu Car dealer	pation / Job title (See Instructions)	Employer (See Instructions) A OK Auto Sales			
	Date Full name of contributor out-of-state PAC (ID#: 12/27/2024 Davis, Vicki					Amount of Contribution (\$)	\$1,000.00
	Principal occu Car dealer	pation / Job title (See Instructions)	Employer (See Instructions A OK Auto Sales	5)		
	Date Full name of contributor out-of-state PAC (ID#:) 11/10/2024 Donnelly, Chris Contributor address; City; State; Zip Code Conroe, TX 77301			Amount of Contribution (\$)	\$100.00		
	Principal occu Car dealer	pation / Job title (See Instructions		Employer (See Instructions Your Car Store	5)		
			1				

	MONET	ARY POLITICAL CO	NTRIBUTION	S		SCHEDUL	E A1
	The Instruc	ction Guide explains how to	complete this forn	n.	1	Total pages Schedule A1: Sch: 2/5 Rpt: 23/46	
2	FILER NAME Independent	Automobile Dealers PAC			3	Filer ID (Ethics Commission 00017307	n Filers)
4	Date 12/10/2024	Donnelly, Chris	out-of-state PAC (ID#:		7	Amount of Contribution (\$)	\$100.00
_		Conroe, TX 77301					
8	Principal occu Car dealer	pation / Job title (See Instructions)		Employer (See Instructions Your Car Store)		
	Date 11/10/2024	Full name of contributor Goodman, Jason Contributor address; City; State;	out-of-state PAC (ID#:			Amount of Contribution (\$)	\$15.00
	Deire sin al access	Bellaire, TX 77401		English (On Instruction			
	Principal occupation / Job title (See Instructions) Car dealer			Employer (See Instructions 500 Below Cars)		
	Date Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$15.00	
		Bellaire, TX 77401					
	Principal occu Car dealer	pation / Job title (See Instructions)		Employer (See Instructions) 500 Below Cars			
	Date Full name of contributor out-of-state PAC (ID#:_ 11/10/2024 Gregory, Tommy					Amount of Contribution (\$)	\$300.00
	Principal occu Car dealer	pation / Job title (See Instructions)		Employer (See Instructions Abilene Used Car Sales			
	Date Full name of contributor out-of-state PAC (ID#:) 12/10/2024 Gregory, Tommy Contributor address; City; State; Zip Code Abilene, TX 79606			Amount of Contribution (\$)	\$300.00		
	Principal occu Car dealer	pation / Job title (See Instructions)		Employer (See Instructions Abilene Used Car Sales			
			l				

	MONEI	ARY POLITICAL CO	NIRIBUTION	S		SCHEDUL	E A1
	The Instruc	ction Guide explains how to	complete this forr	n.	1	Total pages Schedule A1: Sch: 3/5 Rpt: 24/46	
2	FILER NAME	: Automobile Dealers PAC			3	Filer ID (Ethics Commission 00017307	n Filers)
_		_			_		
4	Date 11/17/2024	5 Full name of contributor Hagler, Keith6 Contributor address; City; State;	out-of-state PAC (ID#: Zip Code)	7	Amount of Contribution (\$)	\$100.00
		Taylor, TX 76574					
8	Principal occu Car dealer	pation / Job title (See Instructions)	9	Employer (See Instructions Taylor Auto Credit)		
	Date 12/17/2024	Full name of contributor Hagler, Keith Contributor address; City; State;	out-of-state PAC (ID#: Zip Code			Amount of Contribution (\$)	\$100.00
		Taylor, TX 76574					
	Principal occu Car dealer	pation / Job title (See Instructions)		Employer (See Instructions Taylor Auto Credit)		
				Taylor Auto Credit	_		
	Date Full name of contributor out-of-state PAC (ID#: 11/10/2024 Hanson, April Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$100.00	
		The Woodlands, TX 77382					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions)		
	Car dealer			Coast to Coast Motors			
	Date Full name of contributor out-of-state PAC (ID#:)		Amount of Contribution (\$)	\$100.00	
	Principal occu Car dealer	pation / Job title (See Instructions)		Employer (See Instructions Coast to Coast Motors)		
	Date Full name of contributor out-of-state PAC (ID#:) Petersen, Shaun Contributor address; City; State; Zip Code Mansfield, TX 76063			Amount of Contribution (\$)	\$250.00		
	Principal occu Insurance	pation / Job title (See Instructions)		Employer (See Instructions Buckeye Consulting)		

	MONET	ARY POLITICAL CO	ONTRIBUTION	S		SCHEDUL	E A1
	The Instruc	ction Guide explains how to	complete this forn	n.	1	Total pages Schedule A1: Sch: 4/5 Rpt: 25/46	
2	FILER NAME Independent	Automobile Dealers PAC			3	Filer ID (Ethics Commission 00017307	n Filers)
4	Date 11/10/2024	5 Full name of contributor Rodriguez, Edgar6 Contributor address; City; State	out-of-state PAC (ID#:; Zip Code)	7	Amount of Contribution (\$)	\$100.00
_		Tomball, TX 77375					
8	Principal occu Car dealer	pation / Job title (See Instructions)		Employer (See Instructions Rodeo Autos)		
	Date 12/10/2024	Full name of contributor Rodriguez, Edgar Contributor address; City; State)		Amount of Contribution (\$)	\$100.00
	Deinsinal assu	Tomball, TX 77375		Franks voy (Coo Instructions			
	Car dealer	pation / Job title (See Instructions)		Employer (See Instructions Rodeo Autos)		
	Date Full name of contributor out-of-state PAC (ID#: 11/10/2024 Simmons, Tyler Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$50.00	
		Abilene, TX 79606					
	Principal occu Car dealer	pation / Job title (See Instructions)		Employer (See Instructions Abilene Used Car Sales			
	Date Full name of contributor out-of-state PAC (ID#: 12/10/2024 Simmons, Tyler					Amount of Contribution (\$)	\$50.00
	Principal occu Car dealer	pation / Job title (See Instructions)		Employer (See Instructions Abilene Used Car Sales			
	Date Full name of contributor out-of-state PAC (ID#:) 11/10/2024 Winkelmann, Ryan Contributor address; City; State; Zip Code Pearland, TX 77581			Amount of Contribution (\$)	\$100.00		
	Principal occu Car dealer	pation / Job title (See Instructions)		Employer (See Instructions BJs Autohaus)		
			1				

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDUL	.E A1
	The Instruction Guide explains how to complete this form.		1	Total pages Schedule A1: Sch: 5/5 Rpt: 26/46		
2	FILER NAME	FILER NAME Independent Automobile Dealers PAC		3	Filer ID (Ethics Commission 00017307	n Filers)
4	Date 12/10/2024	 Full name of contributor		7	Amount of Contribution (\$)	\$100.00
_		Pearland, TX 77581				
8	Car dealer	pation / Job title (See Instructions)	9 Employer (See Instructions BJs Autohaus	5)		
	Date 11/15/2024	Full name of contributor out-of-state PAC (ID#: Zak, Gregory Contributor address; City; State; Zip Code)		Amount of Contribution (\$)	\$125.00
		Sugar Land, TX 77478	5 1 (0 1 1 1			
	Car dealer	pation / Job title (See Instructions)	Employer (See Instructions Dixon Motors	5)		
	Date 12/15/2024	Full name of contributor out-of-state PAC (ID#: Zak, Gregory Contributor address; City; State; Zip Code			Amount of Contribution (\$)	\$125.00
		Sugar Land, TX 77478				
	Principal occu Car dealer	pation / Job title (See Instructions)	Employer (See Instructions Dixon Motors	5)		

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 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: 1/19 Rpt: 27/46	Independent Automobile Dealers PAC 00017307
4 Date	5 Payee name
12/09/2024	Alvarado, Carol (Sen.)
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,000.00	PO Box 230842
Expenditure from	
corporate funds	Houston, TX 77223
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
experientare to benefit 6/01	
Date	Payee name
12/09/2024	Anchia, Rafael (Rep.)
Amount (\$)	Payee address; City; State; Zip Code
\$500.00	PO Box 4468
Expenditure from corporate funds	Dallas, TX 75208
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
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Date	Payee name
12/09/2024	Ashby, Trent (Rep.)
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	PO Box 412
Expenditure from corporate funds	Lufkin, TX 75902
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
	Campaign contribution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	1
<u> </u>	

SCHEDULE F1

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

Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

Candidate/Officeholder/Politica Credit Card Payment	al Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not liste	ed above)
	The Instruction Guide explains how to complete this form.	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Com	mission Filers)
Sch: 2/19 Rpt: 28/46	Independent Automobile Dealers PAC 00017307	
4 Date	5 Payee name	
12/09/2024	Barry, Jeff (Rep.)	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$500.00	4418 Broadway St	
Expenditure from corporate funds	Pearland, TX 77581	
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 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	DH	
Date	Payee name	
12/09/2024	Bell, Keith (Rep.)	
Amount (\$)	Payee address; City; State; Zip Code	
\$500.00	PO Box 1178	
Expenditure from	Forney, TX 75126	
corporate funds		
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	
	Campaign contribution	
	Campaign continuation	
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/OI		
Date	Payee name	
12/09/2024	Birdwell, Brian (Sen.)	
Amount (\$)	Payee address; City; State; Zip Code	
\$1,000.00	PO Box 1111	
Expenditure from corporate funds	Granbury, TX 76048	
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 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	DH Control of the con	

SCHEDULE F1

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

Event Expense
Fees
Food/Beverage Expense
Git/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
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: 3/19 Rpt: 29/46	Independent Automobile Dealers PAC 00017307
4 Date	5 Payee name
12/09/2024	Buckley, Brad (Rep.)
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$500.00	1321 Pershing Dr
Expenditure from corporate funds	Killeen, TX 76549
8 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 ONLY if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
Date	Payee name
12/09/2024	Bucy III, John (Rep.)
Amount (\$)	Payee address; City; State; Zip Code
\$500.00	PO Box 536
, , , , , ,	
Expenditure from corporate funds	Austin, TX 78767
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
	Campaigh contribution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	-
Date	Payee name
12/09/2024	Burrows, Dustin (Rep.)
Amount (\$)	Payee address; City; State; Zip Code
\$500.00	PO Box 2569
Expenditure from corporate funds	Lubbock, TX 79408
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 CNII V if alia	Condidate/Officeholder name Office cought
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
,	

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Committ 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	
4 Total marca Cabadula F1.	2 Files ID (Files Commission Files)
1 Total pages Schedule F1: Sch: 4/19 Rpt: 30/46	2 FILER NAME Independent Automobile Dealers PAC 3 Filer ID (Ethics Commission Filers) 00017307
4 Date	5 Payee name
12/09/2024	Canales, Terry (Rep.)
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$2,500.00	310 S Closner Blvd
Expenditure from corporate funds	Edinburg, TX 78539
8 PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
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
12/09/2024	Creighton, Brandon (Sen.)
	· · · · · · · · · · · · · · · · · · ·
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	2257 N. Loop 336, Suite 140-366
Expenditure from corporate funds	Conroe, TX 77304
•	I
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 contribution
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
12/09/2024	Darby, Drew (Rep.)
Amount (\$)	Payee address; City; State; Zip Code
\$500.00	PO Box 3284
\$300.00	FO BOX 3204
Expenditure from	
corporate funds	San Angelo, TX 76902
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 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	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense

Advertising Expense Accounting/Banking Consulting 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	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: 5/19 Rpt: 31/46	Independent Automobile Dealers PAC 00017307
4 Date	5 Payee name
12/09/2024	Davis, Yvonne (Rep.)
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,000.00	PO Box 763368
- Formanditure Cons	
Expenditure from corporate funds	Dallas, TX 75376
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
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Data	
Date	Payee name
12/09/2024	Dyson, Paul (Rep.)
Amount (\$)	Payee address; City; State; Zip Code
\$500.00	4040 Hwy 6 STE 200
Expenditure from	
corporate funds	College Station, TX 77845
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	
Data	Pausa sama
Date	Payee name Fairly Carolina (Pan)
12/09/2024	Fairly, Caroline (Rep.)
Amount (\$)	Payee address; City; State; Zip Code
\$500.00	1000 S Tyler St #10
Expenditure from	
corporate funds	Amarillo, TX 79101
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
expenditure to benefit 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

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District 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: 6/19 Rpt: 32/46	Independent Automobile Dealers PAC 00017307
4 Date	5 Payee name
12/09/2024	Frank, James (Rep.)
6 Amount (\$) \$500.00	7 Payee address; City; State; Zip Code 1206 Hatton Rd
Expenditure from corporate funds	Wichita Falls, TX 76302
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
12/09/2024	Gamez, Erin (Rep.)
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	5700 N. Expressway 77/83
Expenditure from corporate funds	Brownsville, TX 78523
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
Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
12/09/2024	Gates, Gary (Rep.)
Amount (\$)	Payee address; City; State; Zip Code
\$500.00	2205 Avenue I
Expenditure from corporate funds	Rosenberg, TX 77471
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	

SCHEDULE F1

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

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 (enter a category not listed above)

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: 7/19 Rpt: 33/46	Independent Automobile Dealers PAC 00017307
4 Date	5 Payee name
12/09/2024	Geren, Charlie (Rep.)
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,000.00	PO 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. Check if travel outside of Texas. Complete Schedule T.
	Candidate/Officeholder/Political Committee
	Campaign continuation
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Power name
12/09/2024	Payee name Cuerra, Pahby (Pan.)
	Guerra, Bobby (Rep.)
Amount (\$)	Payee address; City; State; Zip Code
\$500.00	4512 N 4th St
Expenditure from	
corporate funds	McAllen, TX 78504
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
12/09/2024	Hancock, Kelly (Sen.)
Amount (\$)	Payee address; City; State; Zip Code
\$1,500.00	4908 Dory Court
Expenditure from corporate funds	North Richland Hills, TX 76180
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
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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:	<u>_</u>
Sch: 8/19 Rpt: 34/46	Independent Automobile Dealers PAC 00017307
	·
4 Date	5 Payee name
12/09/2024	Harless, Sam (Rep.)
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,500.00	15814 Champion Forest
Evpanditura from	PMB 312
Expenditure from corporate funds	Spring, TX 77379
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
9 Complete <u>ONLY</u> if direct expenditure to benefit C/Oł	Candidate/Officeholder name Office sought Office held
Date	Payee name
12/09/2024	Hinojosa, Chuy (Sen.)
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	612 W Nolana STE 410
Expenditure from corporate funds	McAllen, TX 78504
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
	Campaign contribution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
12/09/2024	Howard, Donna (Rep.)
Amount (\$)	Payee address; City; State; Zip Code
\$500.00	PO Box 5375
Expenditure from corporate funds	Austin, TX 78763
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
experience to belief 6/01	•

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

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

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: 9/19 Rpt: 35/46	Independent Automobile Dealers PAC 00017307
4 Date	5 Payee name
12/09/2024	Hughes, Bryan (Sen.)
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,000.00	PO Box 450
Expenditure from corporate funds	Mineola, TX 75773
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. Check if travel outside of Texas. Complete Schedule T.
	Candidate/Officeholder/Political Committee
	Campaign continuation
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Data	
Date	Payee name
12/09/2024	Hunter, Todd (Rep.)
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	445 Cape Henry
Expenditure from	
corporate funds	Corpus Christi, TX 78412
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
2 1 2 2 1 1 2 1 1	
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
12/09/2024	Johnson, Ann (Rep.)
Amount (\$)	Payee address; City; State; Zip Code
\$500.00	PO Box 56386
Expenditure from corporate funds	Houston, TX 77256
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.
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

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: 10/19 Rpt: 36/46	Independent Automobile Dealers PAC (Editor Continuosion Filers)
4 Date	5 Payee name
12/09/2024	King, Phil (Sen.)
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	(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
9 Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
Date	Payee name
12/09/2024	Kitzman, Stan (Rep.)
Amount (\$)	Payee address; City; State; Zip Code
\$500.00	PO Box 553
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Expenditure from corporate funds Pattison, TX 77466	
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
	Campaign contribution
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
Date	Payee name
12/09/2024	Kolkhorst, Louis (Sen.)
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	P O Box 2546
Expenditure from corporate funds	Brenham, TX 77834
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
experialitie to beliefft C/O	

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 By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	
Sch: 11/19 Rpt: 37/46	Independent Automobile Dealers PAC 00017307
4 Date	5 Payee name
12/09/2024	Landgraf, Brooks (Rep.)
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,000.00	PO Box 13146
Expenditure from corporate funds	Odessa, TX 79768
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. Check if travel outside of Texas. Complete Schedule T.
	Candidate/Officeholder/Political Committee
	Campaigh contribution
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Date	Payee name
12/09/2024	Leach, Jeff (Rep.)
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	PO Box 866186
Expenditure from corporate funds	Plano, TX 75086
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 commodern
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	· ·
Date	Payee name
12/09/2024	Longoria, Oscar (Rep.)
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	P.O. Box 4224
Expenditure from corporate funds	Mission, TX 78572
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/Ol	

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 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: 12/19 Rpt: 38/46	Independent Automobile Dealers PAC 00017307
4 Date	5 Payee name
12/09/2024	Lopez, Janie (Rep.)
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$500.00	PO Box 2073
Expenditure from	
corporate funds	San Benito, TX 78586
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
experialture to benefit C/Oi	
Date	Payee name
12/09/2024	Lozano, J.M. (Rep.)
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	727 Arroyo Dr
Expenditure from corporate funds	Kingsville, TX 78363
•	
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 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	· ·
D-1-	
Date	Payee name
12/09/2024	Martinez, Armando (Rep.)
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	PO Box 1651
— Constantitude forms	
Expenditure from corporate funds	Weslaco, TX 78596
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/OI	

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
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: 13/19 Rpt: 39/46	Independent Automobile Dealers PAC 00017307
4 Date	5 Payee name
12/09/2024	Metcalf, Will (Rep.)
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$500.00	P.O. Box 454
Expenditure from	
corporate funds	Conroe, TX 77305
8 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
9 Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
Date	Payee name
12/09/2024	Meyer, Morgan (Rep.)
Amount (\$)	Payee address; City; State; Zip Code
\$500.00	3838 Oak Lawn Avenue
φ500.00	
Expenditure from	ste 400
corporate funds	Dallas, TX 75219
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
Operation ONE Wife discont	Our did to 10 ff as had done as many
Complete <u>ONLY</u> if direct expenditure to benefit C/Ol	Candidate/Officeholder name Office sought Office held
Date	Payee name
12/09/2024	Miles, Borris (Sen.)
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	1406 Ruth Street
Expenditure from corporate funds	Houston, TX 77004
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
expenditure to benefit C/O	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -Candidate/Officeholder/Political Comm Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense Legal Services 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)

Candidate/Officeholder/Politica Credit Card Payment	d 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: 14/19 Rpt: 40/46	Independent Automobile Dealers PAC 00017307	
4 Date	5 Payee name	
12/09/2024	Nichols, Robert (Sen.)	
6 Amount (\$)	7 Payee address; City; State; Zip Code	
\$2,500.00	P.O. Box 2347	
Expenditure from corporate funds	Jacksonville, TX 75766	
		_
8 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 Check if travel outside of Texas. Complete Schedule T. 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		
Dete		=
Date	Payee name	
12/09/2024	Orr, Angelia (Rep.)	
Amount (\$)	Payee address; City; State; Zip Code	
\$500.00	PO Box 113	
Expenditure from corporate funds	Itasca, TX 76055	
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 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	H	
Date	Payee name	=
12/09/2024	Parker, Tan (Sen.)	
		_
Amount (\$)	Payee address; City; State; Zip Code	
\$1,500.00	PO Box 271741	
Expenditure from		
corporate funds	Flower Mound, TX 75027	
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.	
EXPENDITORE	Candidate/Officeholder/Political Committee	
	Campaign contribution	
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/OI	Ħ	ſ

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 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: 15/19 Rpt: 41/46	Independent Automobile Dealers PAC 00017307
4 Date	5 Payee name
12/09/2024	Paul, Dennis (Rep.)
	· · ·
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,000.00	626 1/2 Barringer Ln STE E
Expenditure from	
corporate funds	Webster, TX 77598
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 ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Payee name
12/09/2024	Perez, Mary Ann (Rep.)
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	6200 Gulf Fwy #125
Expenditure from corporate funds	Houston, TX 77023
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/O	1
Date	Payee name
12/09/2024	Perry, Charles (Sen.)
Amount (\$)	Payee address; City; State; Zip Code
\$2,500.00	P.O. Box 94806
Ψ2,300.00	F.O. BOX 94000
Expenditure from	
corporate funds	Lubbock, TX 79493
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Contributions/Donations Made By
	Candidate/Officeholder/Political Committee
	Campaign continuution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	
· ·	
Sch: 16/19 Rpt: 42/46	·
4 Date	5 Payee name
12/09/2024	Raymond, Richard (Rep.)
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$500.00	PO Box 450349
Expenditure from	Lorodo TV 79045
corporate funds	Laredo, TX 78045
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
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experiulture to beliefit C/O	
Date	Payee name
12/09/2024	Romero, Ramon (Rep.)
Amount (\$)	Payee address; City; State; Zip Code
` ′	PO Box 181
\$1,000.00	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
EXPENDITORE	Candidate/Officeholder/Political Committee
	Campaign contribution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	H
Date	Payee name
12/09/2024	Schofield, Mike (Rep.)
	· · · ·
Amount (\$)	Payee address; City; State; Zip Code
\$500.00	934 Hidden Canyon Rd
Expenditure from	
corporate funds	Katy, TX 77450
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	

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 (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: 17/19 Rpt: 43/46	Independent Automobile Dealers PAC 00017307
4 Date	5 Payee name
12/09/2024	Shaheen, Matt (Rep.)
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$500.00	PO Box 160
Expenditure from corporate funds	Proper, TX 75078
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/Ol	Candidate/Officeholder name Office sought Office held
Date	Payee name
12/09/2024	Talarico, James (Rep.)
Amount (\$)	Payee address; City; State; Zip Code
\$500.00	PO Box 15207
4000.00	
Expenditure from corporate funds	Austin, TX 78761
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
	Campaigh contribution
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
<u> </u>	
Date	Payee name
12/09/2024	Tepper, Carl (Rep.)
Amount (\$)	Payee address; City; State; Zip Code
\$500.00	Box 94534
Expenditure from corporate funds	Lubbock, TX 79493
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
Operation Children	Our Middle (Office health a grants
Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
5	

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 (enter a category not listed above)

Candidate/Officeholder/Politica Credit Card Payment	d 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: 18/19 Rpt: 44/46	Independent Automobile Dealers PAC 00017307	
4 Date	5 Payee name	
12/09/2024	Turner, Chris (Rep.)	
6 Amount (\$)	7 Payee address; City; State; Zip Code	_
\$500.00	PO Box 182093	
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
Expenditure from corporate funds	Arlington, TX 76096	
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 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		
		=
Date	Payee name	
12/09/2024	VanDeaver, Gary (Rep.)	
Amount (\$)	Payee address; City; State; Zip Code	
\$500.00	PO Box 866	
Expenditure from	Now Poston, TV 75570	
corporate funds	New Boston, TX 75570	_
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 Austin, TX, officeholder living expense	
	Campaign contribution	
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held	
expenditure to benefit C/O	1	
Date	Payee name	=
12/09/2024	Wilson, Terry (Rep.)	
		_
Amount (\$)	Payee address; City; State; Zip Code	
\$500.00	PO Box 2302	
Expenditure from		
corporate funds	Georgetown, TX 78627	
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description	_
OF	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	٦
expenditure to benefit C/O		
		4

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

Contributions/ Donations Made B Candidate/Officeholder/Politic Credit Card Payment	By - Gift/Awards/Memorials Expense Printing Expense Travel Out of District 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: 19/19 Rpt: 45/46	<u> </u>
4 Date	5 Payee name
12/09/2024	Zwiener, Erin (Rep.)
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$500.00	PO Box 184
Expenditure from	
corporate funds	Driftwood, TX 78619
8 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
	Campaign contribution
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	

SCHEDULE I

	The Instruction Guide explains how to complete this form.
1 Total pages Schedule I:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 1/1 Rpt:	Independent Automobile Dealers PAC 00017307
4 Date	5 Payee name
12/18/2024	First Citizens Bank
6 Amount (\$)	7 Payee Address; City; State; Zip
46.00	P.O. Box 1580
Expenditure from corporate funds	Roanoke, VA 24007-1580
8 PURPOSE	(a) Category (See instructions for examples of acceptable categories) (b) Description (See instructions regarding type of information required.)
OF EXPENDITURE	Accounting/Banking bank fee
LA LABITORE	
Date	Payee name
11/20/2024	TSYS
Amount (\$)	Payee Address; City; State; Zip
274.72	One TSYS Way
Expenditure from corporate funds	Columbus, GA 31901
PURPOSE	(a) Category (See instructions for examples of acceptable categories) (b) Description (See instructions regarding type of information required.)
OF	Accounting/Banking bank fee
EXPENDITURE	
Date	Payee name
12/20/2024	TSYS
Amount (\$)	Payee Address; City; State; Zip
103.58	One TSYS Way
Expenditure from	
corporate funds	Columbus, GA 31901
PURPOSE	(a) Category (See instructions for examples of acceptable categories) (b) Description (See instructions regarding type of information required.)
OF EXPENDITURE	Accounting/Banking bank fee