#### 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) 00083910 3 COMMITTEE NAME **OFFICE USE ONLY** BearbackerPAC Date Received **ELECTRONICALLY FILED** 01/15/2025 4 COMMITTEE ADDRESS / PO BOX; APT / SUITE #; CITY; STATE: ZIP CODE **ADDRESS** 1300 Post Oak Blvd. Ste. 2000 Date Hand-delivered or Date Postmarked Change of Address Houston, TX 77056 Amount Receipt # Date Processed Date Imaged CAMPAIGN MS / MRS / MR FIRST MI **TREASURER** Mr. J. Cary NAME NICKNAME LAST **SUFFIX** Gray STREET ADDRESS (NO PO BOX PLEASE); ZIP CODE CAMPAIGN APT / SUITE #; CITY; STATE; **TREASURER** 1300 Post Oak Blvd., Ste. 2000 STREET **ADDRESS** (Residence or Business) Houston, TX 77056 **CAMPAIGN** STREET OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 1300 Post Oak Blvd., Ste. 2000 MAILING **ADDRESS** Houston, TX 77056 Change of Address **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER** (713) 986-7157 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 11/05/2024 χ General Special **GO TO PAGE 2**

## GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

# FORM GPAC COVER SHEET PG 2

L2 COMMITTEE NAME			<del></del>	13 Filer ID	(Ethics Commission Filers)
BearbackerPAC				00083910	0
4 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported Se	en. Kelly Hancock District A	ttorney (Mult	i-county)
(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.)				
5 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED PLEDGES, LOANS, CONTRIBUTIONS M check here if this report	OR GUARANTEES MADE ELECTRONIC	CALLY)	\$	0.00
	2. TOTAL POLITICA  (OTHER THAN PLE		NS R GUARANTEES OF LOANS)	\$	0.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	D POLITICAL EXPE	NDITURES	\$	55,000.00
	4. TOTAL POLITICA	AL EXPENDITURE	ES	\$	110,000.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL OF THE REPORTIN		MAINTAINED AS OF THE LAST	T DAY \$	110,000.00
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL ALAST DAY OF THE		OUTSTANDING LOANS AS OF DD	THE \$	0.00
6 AFFIDAVIT					
		true a	ar, or affirm, under penalty of p and correct and includes all info r Title 15, Election Code.		
			Mr. 1	Cany Cray	
			Signature of Ca	Cary Gray ampaign Treas	surer
AFFIX NOTAR	Y STAMP / SEAL ABOVE		J	1 3	
				Albir Albir	dess
	ed before me, by the said , 20, to certify \		and and seal of office	this the	day
UI		willers my ne	and and Sear of Office.		
Signature of officer a	administering oath	Printed name of offi	icer administering oath	Title of off	ficer administering oath

## GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE

## FORM GPAC ADDENDUM

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					rage 3 01 11
OMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
earbackerPAC				00083910	
OMMITTEE CTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)		Sen. Bryan Hughes District Atto	rney	
Attach lists on plain aper to complete this eport 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.)				
OMMITTEE CTIVITY	Candidates     (Identify by name or, if applicable, classify by party.)		Rep. Spiller David Criminal Dist	rict Attorney	
Attach lists on plain aper to complete this eport 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.)				
OMMITTEE CTIVITY	Candidates     (Identify by name or, if applicable, classify by party.)		Sen. Creighton Brandon District	Attorney	
Attach lists on plain aper to complete this eport 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.)				
At a	CTIVITY tach lists on plain per to complete this	Assisted (Identify by name or, if applicable, classify by party.)  DMMITTEE CTIVITY  1. Candidates (Identify by name or, if applicable, classify by party.)  ctach lists on plain per to complete this port if necessary.)  2. Measures (Describe by date and location of election and nature of issue.)  3. Officeholders Assisted (Identify by name or, if	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)  DMMITTEE CTIVITY  1. Candidates (Identify by name or, if applicable, classify by party.)  Etach lists on plain per to complete this port if necessary.)  2. Measures (Describe by date and location of election and nature of issue.)  B. Opposed  B. Opposed  B. Opposed  3. Officeholders Assisted	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)  DMMITTEE CTIVITY  1. Candidates (Identify by name or, if applicable, classify by party.)  B. Opposed  2. Measures (Describe by date and location of election and nature of issue.)  B. Opposed  3. Officeholders Assisted (Identify by name or, if dentify by name o	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)  DIMMITTEE CTIVITY  1. Candidates (Identify by name or, if applicable, classify by party.)  B. Opposed  2. Measures (Describe by date and location of election and nature of issue.)  A. Supported  B. Opposed  A. Supported  B. Opposed  3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)

## GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE

### FORM GPAC ADDENDUM

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						1 ago 1 01 11
12	COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
	BearbackerPAC				00083910	
	COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Rep. Bucy John District Attorne	У	
	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
		2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
			B. Opposed			
		3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
	COMMITTEE	1. Candidates	A. Supported	Rep. Sheryl Cole District Attorne	ev	
	ACTIVITY	(Identify by name or, if applicable, classify by party.)		Trop. Greety Cole Bistrict Autority	.,	
	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
		2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
			B. Opposed			
		3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
	COMMITTEE ACTIVITY	Candidates     (Identify by name or, if applicable, classify by party.)	A. Supported	Rep. Dennis Paul District Attorn	ey (Multi-county	y)
	(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.)				
		1				

## GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE

### FORM GPAC ADDENDUM

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					1 ago o o: 11
12	COMMITTEE NAME				13 Filer ID (Ethics Commission Filers)
	BearbackerPAC				00083910
	COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)		Rep. Mary Gonzalez District Att	orney
	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
		2. Measures (Describe by date and location of election and nature of issue.)	A. Supported		
			B. Opposed		
		3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)			
	COMMITTEE	1. Candidates	A. Supported	Rep. Tom Oliverson District Atto	orney Harris Co
	ACTIVITY	(Identify by name or, if applicable, classify by party.)		Trop. Form Gilverson District Aut.	micy, name co.
	(Attach lists on plain paper to complete this report if necessary.)		B. Opposed		
		2. Measures (Describe by date and location of election and nature of issue.)	A. Supported		
			B. Opposed		
		3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)			
	COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	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		<del></del>
		3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)		Ken Paxton Attorney General	

### GENERAL-PURPOSE COMMITTEE REPORT:

### FORM GPAC ADDENDUM

Page 6 of 11  COMMITTEE NAME Bearhacker/PAC  COMMITTEE ACTIVITY  [Attach lists on plain paper to complete this report if necessary.]  2. Measures Dossible by desi end bootston of nature of sizes.  3. Officeholders Assisted [B. Opposed]  B. Opposed  B. Opposed						ADDENDUM
BearbackerPAC  COMMITTEE ACTIVITY  (Attach lists on plain paper to complete this report if necessary.)  2. Measures (Describe by date and location of election and nature of issue.)  3. Officeholders Assisted  A. Supported Rep. Dustin Burrows Speaker of the House Rep. Dustin Burrows Rep. Dustin Burr						Page 6 of 11
BearbackerPAC  COMMITTEE ACTIVITY  (Attach lists on plain paper to complete this report if necessary.)  2. Measures (Describe by date and location of election and nature of issue.)  3. Officeholders Assisted  A. Supported Rep. Dustin Burrows Speaker of the House Rep. Dustin Burrows Rep. Dustin B					13 Filer ID	(Ethics Commission Filers)
COMMITTEE ACTIVITY  (Attach lists on plain paper to complete this report if necessary.)  2. Measures (Describe by date and location of election and nature of issue.)  B. Opposed  A. Supported Rep. Dustin Burrows Speaker of the House  B. Opposed  A. Supported  B. Opposed  B. Opposed  B. Opposed  B. Opposed					00083910	
ACTIVITY  (Attach lists on plain paper to complete this report if necessary.)  2. Measures (Describe by date and location of election and nature of issue.)  B. Opposed  A. Supported  B. Opposed  A. Supported  B. Opposed	1. Candidates	A. Supported	Ren Dustin Burro	ws Sneake	l r of the House	
report if necessary.)  2. Measures (Describe by date and location of election and nature of issue.)  B. Opposed  3. Officeholders Assisted			rep. Bustin Burro	ио ореако	Totale House	
(Describe by date and location of election and nature of issue.)  B. Opposed  3. Officeholders Assisted		B. Opposed				
(Describe by date and location of election and nature of issue.)  B. Opposed  3. Officeholders Assisted	2 Moosures	A Cupported				
B. Opposed  3. Officeholders Assisted		A. Supported				
Assisted	nature of issue.	B. Opposed				
Assisted						
quplicable, classify by party.)	Assisted					
	applicable, classify by party.)					
		(Identify by name or, if applicable, classify by party.)  2. Measures (Describe by date and location of election and nature of issue.)  3. Officeholders Assisted	(Identify by name or, if applicable, classify by party.)  B. Opposed  2. Measures (Describe by date and location of election and nature of issue.)  B. Opposed  B. Opposed	(Identify by name or, if applicable, classify by party.)  B. Opposed  2. Measures (Describe by date and location of election and nature of issue.)  B. Opposed  B. Opposed  3. Officeholders Assisted	(Identify by name or, if applicable, classify by party.)  B. Opposed  2. Measures (Describe by date and location of election and nature of issue.)  B. Opposed  B. Opposed  3. Officeholders Assisted	1. Candidates (Identify by name or, if applicable, classify by party.)  B. Opposed  2. Measures (Describe by date and location of election and nature of issue.)  B. Opposed  A. Supported  A. Supported  B. Opposed  A. Supported  A. Supported

### **SUBTOTALS - GPAC**

# FORM **GPAC**COVER SHEET PG 3

			7 of 11
17 COMMITTEE NAME BearbackerPAC		<b>18</b> Filer ID 00083910	(Ethics Commission Filers)
19 SCHEDULE SUBTOTALS  NAME OF SCHEDULE			SUBTOTAL AMOUNT
1. SCHEDULE A1: MONETARY POLITICAL	CONTRIBUTIONS		\$
2. SCHEDULE A2: NON-MONETARY (IN-KII	ND) POLITICAL CONTRIBUTIONS		\$
3. SCHEDULE B: PLEDGED CONTRIBUTIO	NS		\$
4. SCHEDULE C1: MONETARY CONTRIBUTED ORGANIZATION	TIONS FROM CORPORATION OR LABO	R	\$
5. SCHEDULE C2: NON-MONETARY (IN-KII LABOR ORGANIZATION	ND) CONTRIBUTIONS FROM CORPORA	TION OR	\$
6. SCHEDULE C3: MONETARY SUPPORT I	ROM CORPORATION OR LABOR ORG	ANIZATION	\$
7. SCHEDULE C4: NON-MONETARY SUPP ORGANIZATION	ORT FROM CORPORATION OR LABOR		\$
8. SCHEDULE D: PLEDGED CONTRIBUTIO	NS FROM CORPORATION OR LABOR C	ORGANIZATION	\$
9. SCHEDULE E: LOANS			\$
10. X SCHEDULE F1: POLITICAL EXPENDITUR	RES FROM POLITICAL CONTRIBUTIONS	6	\$ 110,000.00
11. SCHEDULE F2: UNPAID INCURRED OBL	IGATIONS		\$
12. SCHEDULE F3: PURCHASE OF INVESTI	MENTS FROM POLITICAL CONTRIBUTION	DNS	\$
13. SCHEDULE F4: EXPENDITURES MADE	BY CREDIT CARD		\$
14. SCHEDULE I: NON-POLITICAL EXPENDI	URES FROM POLITICAL CONTRIBUTION	DNS	\$
15. SCHEDULE K: INTEREST, CREDITS, GAI	NS, REFUNDS, AND CONTRIBUTIONS F	RETURNED	\$

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

### SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense

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

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: 1/4 Rpt: 8/11	BearbackerPAC 00083910
•	Dealbacker AC 00003910
4 Date	5 Payee name
12/17/2024	Bucy, John (Rep.)
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$2,500.00	P.O. Box 536
Expenditure from	Aughin TV 70707
corporate funds	Austin , TX 78767
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/O	<del>1</del>
Date	Payee name
12/16/2024	Burrows, Dustin
	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Amount (\$)	Payee address; City; State; Zip Code
\$10,000.00	10507 Quaker Avenue, Suite 103
— Forest diture from	
Expenditure from corporate funds	Lubbock, TX 79424
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
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	Continuodions/Donations Made By  Candidate/Officeholder/Political Committee  Check if Austin, TX, officeholder living expense
	Campaign Contribution to the new Texas House
	Speaker
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Date	Payee name
12/30/2024	Cole, Sheryl (Rep.)
Amount (\$)	Payee address; City; State; Zip Code
\$2,500.00	P.O. Box 2910
Expenditure from	Aughin TV 70700
corporate funds	Austin, TX 78768
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	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	1

## POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

### SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)
tising Expense Event Expense Loan Repayment/Reimbu

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

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	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: 2/4 Rpt: 9/11	BearbackerPAC 00083910
4 Date	5 Payee name
12/16/2024	Creighton, Brandon (Sen.)
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$5,000.00	2829 Technology Forest, Suite 240
Expenditure from corporate funds	The Woodlands, TX 77381
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
	Candidate/Officeholder/Political Committee
	Campaign Contribution
9 Complete ONLY if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
Date	Payee name
12/11/2024	Gonzalez, Mary (Rep.)
Amount (\$)	Payee address; City; State; Zip Code
\$2,500.00	1498 Main St.
42,000.00	
Expenditure from corporate funds	San Elizario, TX 79849
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
11/13/2024	Hancock, Kelly (Sen.)
Amount (\$)	
\$5,000.00	306 W Seventh Street, Suite 508
Expenditure from corporate funds	Fort Worth, TX 76102
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	1

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

### SCHEDULE F1

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

Fees Food/Beverage Expense Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

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

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 3/4 Rpt: 10/11	BearbackerPAC 00083910
4 Date	5 Payee name
11/27/2024	Hughes, Bryan (Sen.)
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$5,000.00	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  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
	Campaigh 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
11/02/2024	Kolkhorst, Lois (Sen.)
Amount (¢)	
Amount (\$)	
\$5,000.00	PO Box 2546
Expenditure from	
corporate funds	Brenham, TX 77834
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	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	
Date	Payee name
12/09/2024	Oliverson, Tom (Rep.)
Amount (\$)	Payee address; City; State; Zip Code
\$2,500.00	11803 Grant Road Ste 201
•	
Expenditure from	Cuproco TV 77420
corporate funds	Cypress, TX 77429
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/O	1

## 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 Commit

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	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 4/4 Rpt: 11/11	BearbackerPAC 00083910
4 Date	5 Payee name
12/10/2024	Paul, Dennis (Rep.)
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$2,500.00	17225 El Camino Real Blvd. Suite 415
Expenditure from corporate funds	Houston, TX 77058
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/OI	Candidate/Officeholder name Office sought Office held
experientare to benefit 6/61	<u>'</u>
Date	Payee name
12/16/2024	Paxton, Ken
Amount (\$)	Payee address; City; State; Zip Code
\$10,000.00	5613 S Woodcreek Circle
Expenditure from	
corporate funds	McKinney, TX 75071
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 ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
Date	Power name
12/12/2024	Payee name Spiller, David (Rep.)
Amount (\$) \$2,500.00	Payee address; City; State; Zip Code  600 E Depot Street
\$2,500.00	000 E Depot Street
Expenditure from	Drawnward TV 70001
corporate funds	Brownwood, TX 76801
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
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	1