GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM GPAC COVER SHEET PG 1

| The GPAC Instruction Guide explains how to complete this form. 1 Filer ID (Ethics Commission Filers) 00016086 | | | 2 Total pages filed: 5 | |
|---------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------|-------------------------|-----------------------------------------------------|--|
| 3 COMMITTEE NAME | | • | OFFICE USE ONLY | |
| Texas Agricultura | I Industries Assn. Friends Of Agriculture Co | ommittee Of Texas | Date Received ELECTRONICALLY FILED 01/15/2025 | |
| 4 COMMITTEE | ADDRESS / PO BOX; APT / SUITE #; CIT | Y; STATE; ZIP CODE | | |
| ADDRESS | 395 FM 155 | | Data Hand delivered or Date Destmarked | |
| | | | Date Hand-delivered or Date Postmarked | |
| Change of Address | La Grange, TX 78945 | | Receipt # Amount | |
| | | | Receipt# Amount | |
| | | | Date Processed | |
| | | | Date Processed | |
| | | | Data Imaged | |
| | | | Date Imaged | |
| 5 CAMPAIGN | MS/MRS/MR FIRST | | MI | |
| TREASURER | Mr. Donnie | | | |
| NAME | | | | |
| | | | | |
| | NICKNAME LAST | | SUFFIX | |
| | Dippel | | | |
| | | | | |
| 6 CAMPAIGN | STREET ADDRESS (NO PO BOX PLEASE); | APT / SUITE #; CITY; | STATE; ZIP CODE | |
| TREASURER STREET | 395 FM 155 | | | |
| ADDRESS | | | | |
| (Residence or Business) | La Grange, TX 78945 | | | |
| 7 CAMPAIGN | STREET OR PO BOX; | APT / SUITE #; CITY | ; STATE; ZIP CODE | |
| TREASURER | 726 Camp Lone Star Rd. | | | |
| MAILING ADDRESS | | | | |
| | La Grange, TX 78945 | | | |
| Change of Address | | | | |
| 8 CAMPAIGN | AREA CODE PHONE NUMBER | EXTENSION | | |
| TREASURER PHONE | (979) 968-5602 | | | |
| | | | | |
| 9 REPORT | X January 15 30 | Oth day before election | Dissolution (Attach PAC-DR) | |
| TYPE | | h day before election | → | |
| | | | 10th day after campaign treasurer termination | |
| | | unoff | | |
| 10 PERIOD | Month Day Year | Month Day | Year | |
| COVERED | | HROUGH 12/31/202 | | |
| | | | | |
| 11 ELECTION | ELECTION DATE | ELECTION TYPE | | |
| | | Primary Runoff | Other | |
| | | | | |
| | | General Special | | |
| | | | | |
| | | | | |
| | | | | |
| GO TO PAGE 2 | | | | |
| Forms provided by Te | exas Ethics Commission www.et | thics.state.tx.us | Version V4.1.0.5dd2ace2 | |

GENERAL-PURPOSE COMMITTEE REPORT: PURPOSE AND TOTALS

FORM GPAC COVER SHEET PG 2

| 12 COMMITTEE NAME | | | 13 Filer ID | (Ethics Commission Filers) |
|---------------------------------------------------------------------------|---------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------|-----------------|----------------------------|
| Texas Agricultural Ind | lustries Assn. Friends Of | Agriculture Committee Of Texas | 00016086 | |
| 14 COMMITTEE ACTIVITY | 1. Candidates (Identify by name or, if applicable, classify by party.) | A. Supported | | |
| (Attach lists on plain paper to complete this report if necessary.) | | B. Opposed | | |
| | 2. Measures (Describe by date and location of election and nature of issue.) | A. Supported | | |
| | | B. Opposed | | |
| | 3. Officeholders Assisted (Identify by name or, if applicable, classify by party.) | | | |
| 15 CONTRIBUTION TOTALS | PLEDGES, LOANS, CONTRIBUTIONS M | POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR ADE ELECTRONICALLY) qualifies for the higher itemization threshold | \$ | 0.00 |
| | 2. TOTAL POLITICA (OTHER THAN PLE | L CONTRIBUTIONS DGES, LOANS, OR GUARANTEES OF LOANS) | \$ | 0.00 |
| EXPENDITURE TOTALS | 3. TOTAL UNITEMIZED | POLITICAL EXPENDITURES | \$ | 0.00 |
| | 4. TOTAL POLITICA | L EXPENDITURES | \$ | 0.00 |
| CONTRIBUTION BALANCE | 5. TOTAL POLITICAL C OF THE REPORTING | CONTRIBUTIONS MAINTAINED AS OF THE LAST G PERIOD | DAY \$ | 7,533.77 |
| OUTSTANDING LOAN TOTALS | | AMOUNT OF ALL OUTSTANDING LOANS AS OF T REPORTING PERIOD | THE \$ | 0.00 |
| 16 AFFIDAVIT | | I swear, or affirm, under penalty of pe true and correct and includes all inforr under Title 15, Election Code. | | |
| | | Mr. Donr | nie Dippel | |
| | | Signature of Car | npaign Treasur | er |
| AFFIX NOTAF | RY STAMP / SEAL ABOVE | | | |
| | | , tł | nis the | day |
| of | , 20, to certify v | which, witness my hand and seal of office. | | |
| Signature of officer a | administering oath | Printed name of officer administering oath | Title of office | er administering oath |
| Forms provided by Texas | Ethics Commission | www.ethics.state.tx.us | | Version V4.1.0.5dd2ace2 |

| SUBTOTALS - GPAC | C | FORM GPAC OVER SHEET PG 3 3 of 5 |
|----------------------------------------------------------------------------------------------------|-------------------------|----------------------------------------|
| 17 COMMITTEE NAME Texas Agricultural Industries Assn. Friends Of Agriculture Committee Of Texas | 18 Filer ID 00016086 | (Ethics Commission Filers) |
| 19 SCHEDULE SUBTOTALS NAME OF SCHEDULE | | SUBTOTAL AMOUNT |
| 1. SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS | | \$ |
| 2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS | \$ | |
| 3. SCHEDULE B: PLEDGED CONTRIBUTIONS | \$ | |
| 4. SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO ORGANIZATION | \$ | |
| 5. SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORA | \$ | |
| 6. SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG | GANIZATION | \$ |
| 7. SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION | 8 | \$ |
| 8. SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR | ORGANIZATION | \$ |
| 9. SCHEDULE E: LOANS | | \$ |
| 10. SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION | IS | \$ |
| 11. SCHEDULE F2: UNPAID INCURRED OBLIGATIONS | | \$ |
| 12. SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTI | ONS | \$ |
| 13. SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD | | \$ |
| 14. SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTI | ONS | \$ |
| 15. X SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER | RETURNED | \$ 0.36 |
| | | |

INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

SCHEDULE K

| The Instru | ction Guide explains how to complete this form. | 1 Total pages Schedule K: Sch: 1/2 Rpt: 4/5 |
|----------------------|----------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------|
| - | ultural Industries Assn. Friends Of Agriculture Committee Of Texas | 3 Filer ID (Ethics Commission Filers) 00016086 |
| 4 Date 07/31/2024 | 5 Name of person from whom amount is received Sunflower Bank | 8 Amount (\$) \$0.06 |
| | 6 Address of person from whom amount is received; City; State; Zip Code | |
| | Salina, KS 67401 | |
| | Purpose for which amount is received Interest | olitical contribution returned to filer |
| Date 08/31/2024 | Name of person from whom amount is received Sunflower Bank Address of person from whom amount is received; City; State; Zip Code | Amount (\$) \$0.06 |
| | Salina, KS 67401 | |
| | Purpose for which amount is received Check if p Interest | olitical contribution returned to filer |
| Date | Name of person from whom amount is received | Amount (\$) |
| 09/30/2024 | Sunflower Bank Address of person from whom amount is received; City; State; Zip Code | \$0.06 |
| | Salina, KS 67401 | |
| | Purpose for which amount is received Check if p Interest | olitical contribution returned to filer |
| Date | Name of person from whom amount is received | Amount (\$) |
| 10/31/2024 | Sunflower Bank Address of person from whom amount is received; City; State; Zip Code | \$0.06 |
| | Salina, KS 67401 | |
| | Purpose for which amount is received Check if p Interest | olitical contribution returned to filer |
| Date | Name of person from whom amount is received | Amount (\$) |
| 11/30/2024 | Sunflower Bank Address of person from whom amount is received; City; State; Zip Code | \$0.06 |
| | Salina, KS 67401 | |
| | Purpose for which amount is received Check if p Interest | olitical contribution returned to filer |
| | | |

INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

SCHEDULE K

| | The Instru | cti | on Guide explains how to complete this form. | | | al pages Schedule K: n: 2/2 Rpt: 5/5 |
|---|------------|----------|-----------------------------------------------------------------------|-------------|------------|-----------------------------------------|
| 2 | FILER NAME | | | | | ID (Ethics Commission Filers) |
| | | _ | ral Industries Assn. Friends Of Agriculture Committee Of Texas | | 000 | 16086 |
| 4 | Date | 5 | Name of person from whom amount is received | | | 8 Amount (\$) |
| | 12/31/2024 | | Sunflower Bank | | | \$0.06 |
| | | 6 | Address of person from whom amount is received; City; State; Zip Code | 9 | | |
| | | | | | | |
| | | | Salina, KS 67401 | | | |
| | | 7 | | Check if po | litical co | ntribution returned to filer |
| | | | Interest | | | |
| | | <u> </u> | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |