FORM MPAC MONTHLY FILING GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT **COVER SHEET PG 1** Filer ID 2 Total pages filed: The MPAC Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00059417 3 COMMITTEE NAME **OFFICE USE ONLY** Texas Association of Mutual Insurance Companies PAC Date Received **ELECTRONICALLY FILED** 01/27/2025 COMMITTEE ADDRESS / PO BOX: APT / SUITE #: CITY: STATE: ZIP **ADDRESS** P.O. Box 389 Change of Address Yoakum, TX 77995-0389 Date Hand-delivered or Date Postmarked MS / MRS / MR **CAMPAIGN FIRST** MI **TREASURER** Receipt # Amount Mr. Timothy L. NAME Date Processed **NICKNAME SUFFIX** LAST Date Imaged McCoy CAMPAIGN APT / SUITE #; STREET ADDRESS (NO PO BOX PLEASE); CITY; STATE; ZIP CODE **TREASURER** 500 S. US Hwy 77A STREET **ADDRESS** (Residence or Business) Yoakum, TX 77995 **CAMPAIGN** STREET ADDRESS OR PO BOX: APT / SUITE #; CITY: STATE: ZIP CODE **TREASURER** P.O. Box 389 MAILING **ADDRESS** Change of Address Yoakum, TX 77995-0389 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER PHONE** (361) 293-1070 REPORT TYPE 10th day after campaign X Monthly Dissolution (Attach PAC-DR) treasurer termination 10 MONTHLY January 5 April 5 July 5 October 5 REPORT FILING **DEADLINE** February 5 May 5 August 5 November 5 March 5 September 5 December 5 June 5 11 PERIOD Month Day Year Month Day Year **THROUGH COVERED** 12/26/2024 01/25/2025

MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

FORM MPAC COVER SHEET PG 2

2 COMMITTEE NAME			13 Filer ID	(Ethics Commission Filers)
Texas Association of	f Mutual Insurance Compa		00059417	
4 COMMITTEE ACTIVITY	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 Manauran	A. Supported		
	Measures (Describe by date and location)	A. Supported		
	of election and nature of issue.)			
		B. Opposed		
	0.00			
	3. Officeholders Assisted			
	(Identify by name or, if applicable, classify by party.)			
5 CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS N	D POLITICAL CONTRIBUTIONS (OTHER THAN OR GUARANTEES OF LOANS, OR MADE ELECTRONICALLY) c qualifies for the higher itemization threshold	\$	0.00
		AL CONTRIBUTIONS	\$	
	(OTHER THAN PLE	(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)		
EXPENDITURE TOTALS	3. TOTAL UNITEMIZE	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES		
	4. TOTAL POLITICA	AL EXPENDITURES	\$	0.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD			11,060.41
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD			0.00
6 AFFIDAVIT			<u> </u>	
		I swear, or affirm, under penalty of p true and correct and includes all info under Title 15, Election Code.	erjury, that the a	accompanying report is d to be reported by me
		Mr. Timot	thy L. McCoy	
			ampaign Treasu	ırer
AFFIX NOTA	RY STAMP / SEAL ABOVE	-		
Sworn to and subscrib	ned hefore me, by the said	,	this the	day
		which, witness my hand and seal of office.		aay
Signature of officer	administering oath	Printed name of officer administering oath	Title of office	cer administering oath

SUBTOTALS - MPAC

FORM MPAC COVER SHEET PG 3

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				3 of 5
17 COMMI	(Ethics Commission	ı Filers)		
Texas /	Association of Mutual Insurance Companies PAC			
	DULE SUBTOTALS OF SCHEDULE	SUBTOTAL AN	MOUNT	
1. X	X SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS			0.00
2. X	SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS			0.00
3. X	3. X SCHEDULE B: PLEDGED CONTRIBUTIONS			0.00
4.	SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO ORGANIZATION	\$		
5.	SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORAL LABOR ORGANIZATION	\$		
6.	6. SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION			
7.	7. SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION			
8.	8. SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION			
9. X	9. X SCHEDULE E: LOANS			0.00
10. X	10. X SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS			0.00
11. X	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	0.00
12. X	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	0.00
13. X	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	0.00
14.	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	
15.	15. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER			
			_1	

PLEI	DGED CONTRIBU	TIONS			SCHEDULE B	
The Instruction Guide explains how to complete this form.				1 Total pages Schedule B: Sch: 1/1 Rpt: 4/5		
2 FILER N	AME				s Commission Filers)	
Texas A	Association of Mutual Insuran	ce Companies PAC		00059417		
4 TOTAL	TOTAL OF UNITEMIZED PLEDGES			\$	0.00	
5 Date	Date 6 Full name of pledgor out-of-state PAC (ID#:_		(ID#:		9 In-kind description	
		<u> </u>		pledge (\$)	(If applicable)	
	7 Pledgor Address;	City; State; Zip C	ode			
40 Dringing	Lacouration / Joh title (Coa lactu	.ational	144 - 1 10 1	1—	de of Texas. Complete Schedule T.	
10 Principal	l occupation / Job title (See Instru	ictions)	11 Employer (See In	ructions)		

	LOANS					SCHEDULE E	
	The Instruction Guide explains how to complete this form.				1 Total pages Schedule E: Sch: 1/1 Rpt: 5/5		
2	FILER NAME Texas Association of	FILER NAME Texas Association of Mutual Insurance Companies PAC			3 Filer ID	3 Filer ID (Ethics Commission Filers) 00059417	
4	TOTAL OF UNITER	TOTAL OF UNITEMIZED LOANS			l	\$ 0.00	
5	Date of loan 7 N	lame of lender	out-of-state PA	C (ID#:		9 Loan Amount (\$)	
6	Is lender a 8 Le financial institution?	ender address; City;	State;	Zip Code		10 Interest Rate	
						11 Maturity Date	
12	Principal occupation / Jo	b title (See Instructions)		13 Employer (See Instr	uctions)	1	
14	Description of Collateral			15 Check if personal fu	nds were deposite	d into political account (See Instructions)	
16		lame of guarantor				19 Amount Guaranteed (\$)	
		Guarantor address; City;	State;	Zip Code			
	Principal occupation			21 Employer (See Instr	uctions)		