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) 00015593 3 COMMITTEE NAME **OFFICE USE ONLY** Political Action Committee Of The Independent Insurance Agents Of Texas Date Received **ELECTRONICALLY FILED** 02/04/2025 COMMITTEE ADDRESS / PO BOX: APT / SUITE #: CITY: STATE: ZIP **ADDRESS** P.O. Box 684487 Change of Address Austin, TX 78768 Date Hand-delivered or Date Postmarked MS / MRS / MR **FIRST CAMPAIGN** MI **TREASURER** Receipt # Amount Mr. Regan M. NAME Date Processed **NICKNAME SUFFIX** LAST Date Imaged Ellmer CAMPAIGN STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 1115 San Jacinto Blvd, Suite 100 STREET **ADDRESS** (Residence or Business) Austin, TX 78701 **CAMPAIGN** STREET ADDRESS OR PO BOX: APT / SUITE #; CITY: STATE: ZIP CODE **TREASURER** 1115 San Jacinto Blvd, Suite 100 MAILING **ADDRESS** Change of Address Austin, TX 78701 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER PHONE** (512) 493-2454 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 September 5 December 5 March 5 June 5 11 PERIOD Month Day Year Month Day Year **THROUGH COVERED** 12/26/2024 01/25/2025

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MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

FORM MPAC COVER SHEET PG 2

2 COMMITTEE NAME	oo Of The Indonesidan	at Ingurance Ago	nto Of Toyon	13 Filer		(Ethics Commission Filers)
Political Action Committe	ee Of The Independen	nt Insurance Agei	nts of Texas	0001	5593	
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				
-		1. 0				
	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.)					
5 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED PLEDGES, LOANS, CONTRIBUTIONS M check here if this report	OR GUARANTEE:	ICALLY)		\$	0.00
	2. TOTAL POLITICA (OTHER THAN PLEI		ONS R GUARANTEES OF LOANS)		\$	1,785.53
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	D POLITICAL EXP	ENDITURES		\$	0.00
	4. TOTAL POLITICA	AL EXPENDITUR	RES		\$	0.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL (OF THE REPORTING		MAINTAINED AS OF THE LAS	ST DAY	\$	843,222.84
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL A LAST DAY OF THE I		OUTSTANDING LOANS AS O	F THE	\$	0.00
6 AFFIDAVIT						
		true	vear, or affirm, under penalty of e and correct and includes all in er Title 15, Election Code.			
			Mr. Reç	gan M. Ell	mer	
			Signature of	Campaign 1	reasure	er
AFFIX NOTARY S	STAMP / SEAL ABOVE					
Sworn to and subscribed h	pefore me, by the said			, this the		day
of,						
Signature of officer adm	ninistering oath	Printed name of o	fficer administering oath	Title	of office	er administering oath

SUBTOTALS - MPAC

FORM MPAC COVER SHEET PG 3

				3 of 7
17 COMMITT	EE NAME	18 Filer ID	(Ethics Com	mission Filers)
	Action Committee Of The Independent Insurance Agents Of Texas	00015593		
19 SCHEDUL NAME OF	SUBTO	OTAL AMOUNT		
1. X	. X SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS			873.00
2.	2. SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS			
3.	SCHEDULE B: PLEDGED CONTRIBUTIONS		\$	
4.	SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO ORGANIZATION	DR	\$	
5.	SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPOR LABOR ORGANIZATION	ATION OR	\$	
6. X	SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	SANIZATION	\$	734.64
7. X	SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	₹	\$	177.89
8.	8. SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION			
9. SCHEDULE E: LOANS				
10. SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS				
11.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$		
12.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	IONS	\$	
13.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
14.	14. SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS			
15.	15. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER			

	MONEI	ARY POLITICAL C	ONTRIBUTION	IS		SCHEDUL	E A1
	The Instru	ction Guide explains how	to complete this for	n.	1	Total pages Schedule A1: Sch: 1/2 Rpt: 4/7	
2	FILER NAME			3	Filer ID (Ethics Commission Filers)		
	Political Action	al Action Committee Of The Independent Insurance Agents Of Texas			00015593		
4	Date 01/15/2025	5 Full name of contributorBarclay, John6 Contributor address; City; Sta	out-of-state PAC (ID#: tte; Zip Code)	7	Amount of Contribution (\$)	\$250.00
		Austin, TX 78757-6864					
8	Principal occu	pation / Job title (See Instructions)	9	Employer (See Instructions	<u> </u>		
	Insurance Aç			The John A. Barclay Ag		cy, Inc	
_	Date	Full name of contributor	out-of-state PAC (ID#:		Г	Amount of Contribution (\$)	
	01/07/2025	Ellmer, Regan	Uni-or-state FAC (ID#			Amount of Continuation (4)	\$500.00
	01/01/2023		to 7's Code				φ500.00
		Contributor address; City; Sta	ite; zip Code				
		Austin, TX 78768-4487					
	Princinal occu	pation / Job title (See Instructions)		Employer (See Instructions	:) 		
	Insurance As			Independent Insurance		ents of Texas	
_				- Independent injurance	, .g		
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	45.00
	01/08/2025	Mock, Raelyn					\$5.00
		Contributor address; City; Sta	te; Zip Code				
		A					
		Austin, TX 78768-4487			<u></u>		
		pation / Job title (See Instructions)		Employer (See Instructions			
	Insurance As	SSOCIATION		Independent Insurance	Ag	ents of Texas	
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	01/08/2025	Rodriguez, Felicia					\$18.00
		Contributor address; City; Sta	te; Zip Code		1		
		Austin, TX 78768-4487					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	s)		
	Insurance As	ssociation		Independent Insurance	Ag	ents of Texas	
	Date	Full name of contributor	out-of-state PAC (ID#:)		Amount of Contribution (\$)	
	01/08/2025	Silgero, Linda	_				\$50.00
		Contributor address; City; Sta	te: Zip Code		l		
			, <u>-</u>				
		Austin, TX 78768-4487					
	Principal occu	I pation / Job title (See Instructions)		Employer (See Instructions	<u>. </u>		
	Insurance As			Independent Insurance		ents of Texas	
_				,	9		

MON	IETARY POLITICAL CONTRIBUTION	SCHEDULE A1	
The In	struction Guide explains how to complete this for	rm.	1 Total pages Schedule A1: Sch: 2/2 Rpt: 5/7
2 FILER N	AME		3 Filer ID (Ethics Commission Filers)
	Action Committee Of The Independent Insurance Agents		00015593
4 Date 01/10/2	5 Full name of contributor out-of-state PAC (ID#: Sumners, MaryPeyton 6 Contributor address; City; State; Zip Code)	7 Amount of Contribution (\$) \$50.00
	Austin, TX 78768-4487		
8 Principa	occupation / Job title (See Instructions)	Employer (See Instructions)
Insuran	ce Association	Independent Insurance	Agents of Texas

MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION

SCHEDULE C3

	The Instruction Guide explains how to complete this form.			1 Total pages Schedule C3: Sch: 1/1 Rpt: 6/7			
2	Political Action Committee Of The Independent Insurance Agents Of Texas			Filer ID 00015593	(Ethics Commission Filers)		
4	Date 01/03/2025	5 Corporation / Labor Organization name Independent Insurance Agents of TX	6	Amount (\$)	324.87		
	Date 12/31/2024	Corporation / Labor Organization name Independent Insurance Agents of TX		Amount (\$)	209.77		
	Date 01/22/2025	Corporation / Labor Organization name Independent Insurance Agents of TX		Amount (\$)	200.00		

NON-MONETARY SUPPORT FROM CORPORATION SCHEDULE C4 **OR LABOR ORGANIZATION** 1 Total pages Schedule C4: The Instruction Guide explains how to complete this form. Sch: 1/1 Rpt: 7/7 2 FILER NAME 3 Filer ID (Ethics Commission Filers) Political Action Committee Of The Independent Insurance Agents Of Texas 00015593 Date 5 Corporation / Labor Organization name 6 Amount (\$) 01/25/2025 177.89 Independent Insurance Agents of TX