

MONTHLY FILING GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

FORM MPAC
COVER SHEET PG 1

The MPAC Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00015644	2 Total pages filed: 29		
3 COMMITTEE NAME National Association of Insurance and Financial Advisors - Texas PAC			OFFICE USE ONLY Date Received ELECTRONICALLY FILED 02/05/2025 Date Hand-delivered or Date Postmarked Receipt # Amount Date Processed Date Imaged		
4 COMMITTEE ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP 3755 Attucks Drive Powell, OH 43065				
5 CAMPAIGN TREASURER NAME	MS / MRS / MR Mr.	FIRST Daniel			MI MI
	NICKNAME	LAST O'Connell			SUFFIX
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 3755 Attucks Drive Powell, OH 43065				
7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address	STREET ADDRESS OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 1250 S. Capitol of TX Hwy. Bldg. 3 Ste. 400 Austin, TX 78746				
8 CAMPAIGN TREASURER PHONE	AREA CODE	PHONE NUMBER	EXTENSION		
	(512)	716-8800			
9 REPORT TYPE	<input checked="" type="checkbox"/> Monthly <input type="checkbox"/> 10th day after campaign treasurer termination <input type="checkbox"/> Dissolution (Attach PAC-DR)				
10 MONTHLY REPORT FILING DEADLINE	<input type="checkbox"/> January 5 <input type="checkbox"/> April 5 <input type="checkbox"/> July 5 <input type="checkbox"/> October 5 <input checked="" type="checkbox"/> February 5 <input type="checkbox"/> May 5 <input type="checkbox"/> August 5 <input type="checkbox"/> November 5 <input type="checkbox"/> March 5 <input type="checkbox"/> June 5 <input type="checkbox"/> September 5 <input type="checkbox"/> December 5				
11 PERIOD COVERED	Month Day Year 12/26/2024		THROUGH	Month Day Year 01/25/2025	

GO TO PAGE 2

MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

FORM MPAC
COVER SHEET PG 2

12 COMMITTEE NAME National Association of Insurance and Financial Advisors - Texas PAC	13 Filer ID (Ethics Commission Filers) 00015644
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14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported
		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.)	Mr. Joe Moody State Representative

15 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY) <input type="checkbox"/> check here if this report qualifies for the higher itemization threshold	\$ 0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 6,099.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 0.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 82,242.79
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 0.00

16 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Mr. Daniel O'Connell

Signature of Campaign Treasurer

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office.

Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

MONTHLY FILING GPAC REPORT: PURPOSE

FORM **MPAC**
ADDENDUM

Page 3 of 29

12 COMMITTEE NAME National Association of Insurance and Financial Advisors - Texas PAC		13 Filer ID (Ethics Commission Filers) 00015644
14 COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported
		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.)	Ms. Donna Campbell State Senator

SUBTOTALS - MPAC

17 COMMITTEE NAME National Association of Insurance and Financial Advisors - Texas PAC		18 Filer ID (Ethics Commission Filers) 00015644
19 SCHEDULE SUBTOTALS		SUBTOTAL AMOUNT
	NAME OF SCHEDULE	
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 5,752.00
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input checked="" type="checkbox"/> SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$ 347.00
5.	<input type="checkbox"/> SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
6.	<input type="checkbox"/> SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
7.	<input type="checkbox"/> SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$
8.	<input type="checkbox"/> SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
9.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
10.	<input type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
11.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
12.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
13.	<input type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$
14.	<input checked="" type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 2,000.00
15.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/21 Rpt: 5/29
2 FILER NAME National Association of Insurance and Financial Advisors - Texas PAC		3 Filer ID (Ethics Commission Filers) 00015644
4 Date 01/10/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Aaron, Cappilla <hr/> 6 Contributor address; City; State; Zip Code Amarillo, TX 79121-1044	7 Amount of Contribution (\$) \$8.00
8 Principal occupation / Job title (See Instructions) Agent/Owner		9 Employer (See Instructions) Aaron Cappilla farmers insurance agency
Date 01/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alan, Holland <hr/> Contributor address; City; State; Zip Code Houston, TX 77055-4412	Amount of Contribution (\$) \$3.40
Principal occupation / Job title (See Instructions) Managing Director		Employer (See Instructions) Principal
Date 01/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alyson, Guest <hr/> Contributor address; City; State; Zip Code Houston, TX 77042-5118	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Agent Advisor		Employer (See Instructions) MetLife Premier Client Group
Date 01/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bailey, Baker <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78209-4115	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Agent Advisor		Employer (See Instructions) State Farm Insurance Companies
Date 01/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barry, Malone <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79424-1225	Amount of Contribution (\$) \$16.80
Principal occupation / Job title (See Instructions) Financial Professional		Employer (See Instructions) Level Four Group

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/21 Rpt: 6/29
2 FILER NAME National Association of Insurance and Financial Advisors - Texas PAC		3 Filer ID (Ethics Commission Filers) 00015644
4 Date 01/10/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Benjamin, Gerald	7 Amount of Contribution (\$) \$4.00
	6 Contributor address; City; State; Zip Code McKinney, TX 75069-4588	
8 Principal occupation / Job title (See Instructions) Agent Advisor		9 Employer (See Instructions) Audible Financial Group
Date 01/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brandon, Green	Amount of Contribution (\$) \$5.00
	Contributor address; City; State; Zip Code Katy, TX 77450-1004	
Principal occupation / Job title (See Instructions) Managing Partner		Employer (See Instructions) Third Rail Financial, LLC
Date 01/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brent, Hill	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Fort Worth, TX 76114-4336	
Principal occupation / Job title (See Instructions) ADVISOR		Employer (See Instructions) Professional Insurance Svcs
Date 01/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carol, Metteauer	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Palestine, TX 75803-6850	
Principal occupation / Job title (See Instructions) Agent Advisor		Employer (See Instructions) Carol Metteauer
Date 01/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Caroline, Welch	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Lakeway, TX 78738-1007	
Principal occupation / Job title (See Instructions) Agent Advisor		Employer (See Instructions) State Farm Insurance Companies

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/21 Rpt: 7/29
2 FILER NAME National Association of Insurance and Financial Advisors - Texas PAC		3 Filer ID (Ethics Commission Filers) 00015644
4 Date 01/10/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chane, Reagan	7 Amount of Contribution (\$) \$10.00
	6 Contributor address; City; State; Zip Code Montgomery, TX 77316-6882	
8 Principal occupation / Job title (See Instructions) Agent Advisor		9 Employer (See Instructions) AuguStar Financial Services
Date 01/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Charles, Matejowsky	Amount of Contribution (\$) \$33.60
	Contributor address; City; State; Zip Code Brenham, TX 77833-4605	
Principal occupation / Job title (See Instructions) Agent Advisor		Employer (See Instructions) Van Dyke, Rankin Fin. Services
Date 01/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cheri, Stanwix	Amount of Contribution (\$) \$16.80
	Contributor address; City; State; Zip Code Celina, TX 75009-4630	
Principal occupation / Job title (See Instructions) Agent Advisor		Employer (See Instructions) Stanwix Insurance & Benefits
Date 01/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crissman, Crombie	Amount of Contribution (\$) \$20.00
	Contributor address; City; State; Zip Code Benbrook, TX 76126-4525	
Principal occupation / Job title (See Instructions) Agent Advisor		Employer (See Instructions) Crombie Financial Group, llc
Date 01/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cynthia, Price	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Amarillo, TX 79106-5730	
Principal occupation / Job title (See Instructions) Agent Advisor		Employer (See Instructions) New York Life Insurance CO & NYLIFE Securities

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/21 Rpt: 8/29
2 FILER NAME National Association of Insurance and Financial Advisors - Texas PAC		3 Filer ID (Ethics Commission Filers) 00015644
4 Date 01/10/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Danny, O'Connell	7 Amount of Contribution (\$) \$84.00
6 Contributor address; City; State; Zip Code Dallas, TX 75225-2114		
8 Principal occupation / Job title (See Instructions) Agent/Owner		9 Employer (See Instructions) Next Level Insurance Agency, LLC
Date 01/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Danny, O'Connell	Amount of Contribution (\$) \$200.00
Contributor address; City; State; Zip Code Dallas, TX 75225-2114		
Principal occupation / Job title (See Instructions) Agent/Owner		Employer (See Instructions) Next Level Insurance Agency, LLC
Date 01/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) David, Bronstad	Amount of Contribution (\$) \$4.00
Contributor address; City; State; Zip Code Bryan, TX 77802-4301		
Principal occupation / Job title (See Instructions) Financial Representative		Employer (See Instructions) Thrivent Financial
Date 01/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) David, Farabee	Amount of Contribution (\$) \$6.80
Contributor address; City; State; Zip Code Wichita Falls, TX 76301-6824		
Principal occupation / Job title (See Instructions) Financial Advisor		Employer (See Instructions) Arthur J. Gallagher & Co
Date 01/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) David, Farabee	Amount of Contribution (\$) \$200.00
Contributor address; City; State; Zip Code Wichita Falls, TX 76301-6824		
Principal occupation / Job title (See Instructions) Financial Advisor		Employer (See Instructions) Arthur J. Gallagher & Co

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/21 Rpt: 9/29
2 FILER NAME National Association of Insurance and Financial Advisors - Texas PAC		3 Filer ID (Ethics Commission Filers) 00015644
4 Date 01/10/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) David, Webb 6 Contributor address; City; State; Zip Code Nacogdoches, TX 75964-1388	7 Amount of Contribution (\$) \$34.00
8 Principal occupation / Job title (See Instructions) Branch Manager		9 Employer (See Instructions) Pioneer Financial Group
Date 01/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Deborah, Gary Contributor address; City; State; Zip Code Karnack, TX 75661-0323	Amount of Contribution (\$) \$26.00
Principal occupation / Job title (See Instructions) AGENT		Employer (See Instructions) Texas Farm Bureau Insurance
Date 01/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dee, Carter Contributor address; City; State; Zip Code Midland, TX 79701-5515	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Carter Financial Group
Date 01/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dee, Carter Contributor address; City; State; Zip Code Midland, TX 79701-5515	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Carter Financial Group
Date 01/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Don, Hutto Contributor address; City; State; Zip Code Burleson, TX 76028-3264	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) Agent Advisor		Employer (See Instructions) Hutto Insurance Services

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/21 Rpt: 10/29
2 FILER NAME National Association of Insurance and Financial Advisors - Texas PAC		3 Filer ID (Ethics Commission Filers) 00015644
4 Date 01/10/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Donald, Friedeck <hr/> 6 Contributor address; City; State; Zip Code San Antonio, TX 78240-3304	7 Amount of Contribution (\$) \$4.80
8 Principal occupation / Job title (See Instructions) President		9 Employer (See Instructions) Friedeck & Associates Inc.
Date 01/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Douglas, Massey <hr/> Contributor address; City; State; Zip Code San Angelo, TX 76904-5772	Amount of Contribution (\$) \$70.00
Principal occupation / Job title (See Instructions) Agent/Owner		Employer (See Instructions) OFG Financial Services, Inc.
Date 01/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dudley, Vickers <hr/> Contributor address; City; State; Zip Code Bryan, TX 77808-8402	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) Financial_Advisor		Employer (See Instructions) Mutual of Omaha Companies
Date 01/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eduardo, Garcia <hr/> Contributor address; City; State; Zip Code Corpus Christi, TX 78413-3833	Amount of Contribution (\$) \$80.20
Principal occupation / Job title (See Instructions) Agent Advisor		Employer (See Instructions) E L Garcia Insurance Associates
Date 01/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edward, Marvin <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78248-1705	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) Agent Advisor		Employer (See Instructions) Ed Marvin Insurance Brokerage

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/21 Rpt: 11/29
2 FILER NAME National Association of Insurance and Financial Advisors - Texas PAC		3 Filer ID (Ethics Commission Filers) 00015644
4 Date 01/10/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Enrique, Cisneros	7 Amount of Contribution (\$) \$10.00
	6 Contributor address; City; State; Zip Code Socorro, TX 79927-3398	
8 Principal occupation / Job title (See Instructions) AGENT		9 Employer (See Instructions) Enrique Cisneros Insurance
Date 01/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eugene, Forsythe	Amount of Contribution (\$) \$4.00
	Contributor address; City; State; Zip Code Houston, TX 77057-4732	
Principal occupation / Job title (See Instructions) Agent Advisor		Employer (See Instructions) Northwestern Mutual
Date 01/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Filemon, Esquivel	Amount of Contribution (\$) \$3.40
	Contributor address; City; State; Zip Code Kingsville, TX 78363-5774	
Principal occupation / Job title (See Instructions) AGENT		Employer (See Instructions) New York Life
Date 01/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gary, Kneip	Amount of Contribution (\$) \$6.80
	Contributor address; City; State; Zip Code Victoria, TX 77905-3178	
Principal occupation / Job title (See Instructions) Owner/President		Employer (See Instructions) Crossroads Insurance Professionals Inc.
Date 01/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gary, Schmiedekamp	Amount of Contribution (\$) \$10.00
	Contributor address; City; State; Zip Code Temple, TX 76502-3673	
Principal occupation / Job title (See Instructions) MR		Employer (See Instructions) Southern Farm Bureau Life Insurance

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/21 Rpt: 12/29
2 FILER NAME National Association of Insurance and Financial Advisors - Texas PAC		3 Filer ID (Ethics Commission Filers) 00015644
4 Date 01/10/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gloria, Guzman <hr/> 6 Contributor address; City; State; Zip Code El Paso, TX 79936-6231	7 Amount of Contribution (\$) \$6.80
8 Principal occupation / Job title (See Instructions) Agent Advisor		9 Employer (See Instructions) Guardian
Date 01/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grover, Brillhart <hr/> Contributor address; City; State; Zip Code Wylie, TX 75098-4036	Amount of Contribution (\$) \$34.00
Principal occupation / Job title (See Instructions) Agent Advisor		Employer (See Instructions) Penn Mutual Wealth Strategies
Date 01/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hollie, Gandy Donohue <hr/> Contributor address; City; State; Zip Code Amarillo, TX 79106-4633	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) OwnerSenior Producer		Employer (See Instructions) Texas Retirement Solutions
Date 01/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ian, Escalante <hr/> Contributor address; City; State; Zip Code El Paso, TX 79928-7678	Amount of Contribution (\$) \$80.00
Principal occupation / Job title (See Instructions) Agent Advisor		Employer (See Instructions) Ian Escalante Insurance Agency Inc.
Date 01/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jack, Knight <hr/> Contributor address; City; State; Zip Code Amarillo, TX 79109-5908	Amount of Contribution (\$) \$18.00
Principal occupation / Job title (See Instructions) Agency Owner		Employer (See Instructions) Jack Knight Insurance Assoc

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/21 Rpt: 13/29
2 FILER NAME National Association of Insurance and Financial Advisors - Texas PAC		3 Filer ID (Ethics Commission Filers) 00015644
4 Date 01/10/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) James, Burghard	7 Amount of Contribution (\$) \$4.00
6 Contributor address; City; State; Zip Code San Antonio, TX 78217-4011		
8 Principal occupation / Job title (See Instructions) Agent Advisor		9 Employer (See Instructions) James O. Burghard Financial Services
Date 01/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) James, Thompson	Amount of Contribution (\$) \$265.60
Contributor address; City; State; Zip Code Amarillo, TX 79119-6250		
Principal occupation / Job title (See Instructions) Wealth Advisor		Employer (See Instructions) Thompson Financial Consulting Inc.
Date 01/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jason, Mickey	Amount of Contribution (\$) \$6.80
Contributor address; City; State; Zip Code Spring, TX 77388-5012		
Principal occupation / Job title (See Instructions) Financial Advisor, Managing Associate		Employer (See Instructions) Wealth Design Group
Date 01/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jay, Schroeder	Amount of Contribution (\$) \$4.80
Contributor address; City; State; Zip Code Brenham, TX 77833-5067		
Principal occupation / Job title (See Instructions) AGENT		Employer (See Instructions) Southern Farm Bureau Life Insurance
Date 01/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jim, Hutson	Amount of Contribution (\$) \$12.00
Contributor address; City; State; Zip Code Amarillo, TX 79109-5039		
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) The Jim Hutson Agency, LLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/21 Rpt: 14/29
2 FILER NAME National Association of Insurance and Financial Advisors - Texas PAC		3 Filer ID (Ethics Commission Filers) 00015644
4 Date 01/10/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joey, Ussery <hr/> 6 Contributor address; City; State; Zip Code Bellville, TX 77418-3822	7 Amount of Contribution (\$) \$40.00
8 Principal occupation / Job title (See Instructions) Regional V.P.		9 Employer (See Instructions) John Hancock Life Insurance
Date 01/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joey, Ussery <hr/> Contributor address; City; State; Zip Code Bellville, TX 77418-3822	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Regional V.P.		Employer (See Instructions) John Hancock Life Insurance
Date 01/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) John, Brieden <hr/> Contributor address; City; State; Zip Code Brenham, TX 77833-4916	Amount of Contribution (\$) \$6.80
Principal occupation / Job title (See Instructions) Agent Advisor		Employer (See Instructions) State Farm Insurance Companies
Date 01/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) John, Denton <hr/> Contributor address; City; State; Zip Code Amarillo, TX 79109-3534	Amount of Contribution (\$) \$3.40
Principal occupation / Job title (See Instructions) Field_Representative		Employer (See Instructions) Northwestern Mutual
Date 01/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) John, Rivard <hr/> Contributor address; City; State; Zip Code Dallas, TX 75214-2614	Amount of Contribution (\$) \$4.00
Principal occupation / Job title (See Instructions) Agent Advisor		Employer (See Instructions) Borden Hamman Agency

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 11/21 Rpt: 15/29
2 FILER NAME National Association of Insurance and Financial Advisors - Texas PAC		3 Filer ID (Ethics Commission Filers) 00015644
4 Date 01/10/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) John, Ruckel <hr/> 6 Contributor address; City; State; Zip Code Nacogdoches, TX 75965-1929	7 Amount of Contribution (\$) \$400.00
8 Principal occupation / Job title (See Instructions) Career Agent		9 Employer (See Instructions) Ruckel Insurance & Financial Group
Date 01/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) John, Still <hr/> Contributor address; City; State; Zip Code Nacogdoches, TX 75965-3586	Amount of Contribution (\$) \$6.80
Principal occupation / Job title (See Instructions) Agent/Owner		Employer (See Instructions) Still Financial Group
Date 01/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) John, Wheeler Jr. <hr/> Contributor address; City; State; Zip Code Montgomery, TX 77356-1798	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Executive Senior Partner		Employer (See Instructions) Totus Wealth Management LLC
Date 01/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) John, Wheeler Jr. <hr/> Contributor address; City; State; Zip Code Montgomery, TX 77356-1798	Amount of Contribution (\$) \$168.00
Principal occupation / Job title (See Instructions) Executive Senior Partner		Employer (See Instructions) Totus Wealth Management LLC
Date 01/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jon, Sharp <hr/> Contributor address; City; State; Zip Code Victoria, TX 77904-3392	Amount of Contribution (\$) \$3.40
Principal occupation / Job title (See Instructions) District Manager		Employer (See Instructions) National Life

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 12/21 Rpt: 16/29
2 FILER NAME National Association of Insurance and Financial Advisors - Texas PAC		3 Filer ID (Ethics Commission Filers) 00015644
4 Date 01/10/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joseph, Kerr	7 Amount of Contribution (\$) \$20.00
6 Contributor address; City; State; Zip Code Hutto, TX 78634-2143		
8 Principal occupation / Job title (See Instructions) Agent Advisor		9 Employer (See Instructions) Kerr Financial Services
Date 01/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joseph, Orr	Amount of Contribution (\$) \$40.00
Contributor address; City; State; Zip Code El Paso, TX 79904-2514		
Principal occupation / Job title (See Instructions) AGENT		Employer (See Instructions) Texas Hillside Financial
Date 01/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joseph, Orr	Amount of Contribution (\$) \$40.00
Contributor address; City; State; Zip Code El Paso, TX 79904-2514		
Principal occupation / Job title (See Instructions) AGENT		Employer (See Instructions) Texas Hillside Financial
Date 01/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joseph, Orr	Amount of Contribution (\$) \$40.00
Contributor address; City; State; Zip Code El Paso, TX 79904-2514		
Principal occupation / Job title (See Instructions) AGENT		Employer (See Instructions) Texas Hillside Financial
Date 01/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joseph, Orr	Amount of Contribution (\$) \$40.00
Contributor address; City; State; Zip Code El Paso, TX 79904-2514		
Principal occupation / Job title (See Instructions) AGENT		Employer (See Instructions) Texas Hillside Financial

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 13/21 Rpt: 17/29
2 FILER NAME National Association of Insurance and Financial Advisors - Texas PAC		3 Filer ID (Ethics Commission Filers) 00015644
4 Date 01/10/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joseph, Orr	7 Amount of Contribution (\$) \$40.00
	6 Contributor address; City; State; Zip Code El Paso, TX 79904-2514	
8 Principal occupation / Job title (See Instructions) AGENT		9 Employer (See Instructions) Texas Hillside Financial
Date 01/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joseph, Orr	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code El Paso, TX 79904-2514	
Principal occupation / Job title (See Instructions) AGENT		Employer (See Instructions) Texas Hillside Financial
Date 01/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joseph, Orr	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code El Paso, TX 79904-2514	
Principal occupation / Job title (See Instructions) AGENT		Employer (See Instructions) Texas Hillside Financial
Date 01/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joseph, Orr	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code El Paso, TX 79904-2514	
Principal occupation / Job title (See Instructions) AGENT		Employer (See Instructions) Texas Hillside Financial
Date 01/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joseph, Orr	Amount of Contribution (\$) \$40.00
	Contributor address; City; State; Zip Code El Paso, TX 79904-2514	
Principal occupation / Job title (See Instructions) AGENT		Employer (See Instructions) Texas Hillside Financial

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 14/21 Rpt: 18/29
2 FILER NAME National Association of Insurance and Financial Advisors - Texas PAC		3 Filer ID (Ethics Commission Filers) 00015644
4 Date 01/10/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joseph, Orr 6 Contributor address; City; State; Zip Code El Paso, TX 79904-2514	7 Amount of Contribution (\$) \$40.00
8 Principal occupation / Job title (See Instructions) AGENT		9 Employer (See Instructions) Texas Hillside Financial
Date 01/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joseph, Orr Contributor address; City; State; Zip Code El Paso, TX 79904-2514	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) AGENT		Employer (See Instructions) Texas Hillside Financial
Date 01/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joseph, Orr Contributor address; City; State; Zip Code El Paso, TX 79904-2514	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) AGENT		Employer (See Instructions) Texas Hillside Financial
Date 01/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joseph, Orr Contributor address; City; State; Zip Code El Paso, TX 79904-2514	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) AGENT		Employer (See Instructions) Texas Hillside Financial
Date 01/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joseph, Orr Contributor address; City; State; Zip Code El Paso, TX 79904-2514	Amount of Contribution (\$) \$80.00
Principal occupation / Job title (See Instructions) AGENT		Employer (See Instructions) Texas Hillside Financial

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 15/21 Rpt: 19/29
2 FILER NAME National Association of Insurance and Financial Advisors - Texas PAC		3 Filer ID (Ethics Commission Filers) 00015644
4 Date 01/10/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joseph, Orr	7 Amount of Contribution (\$) \$100.00
6 Contributor address; City; State; Zip Code El Paso, TX 79904-2514		
8 Principal occupation / Job title (See Instructions) AGENT		9 Employer (See Instructions) Texas Hillside Financial
Date 01/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Joseph, Orr	Amount of Contribution (\$) \$280.00
Contributor address; City; State; Zip Code El Paso, TX 79904-2514		
Principal occupation / Job title (See Instructions) AGENT		Employer (See Instructions) Texas Hillside Financial
Date 01/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Karen, TRUE	Amount of Contribution (\$) \$20.00
Contributor address; City; State; Zip Code Dallas, TX 75214-3188		
Principal occupation / Job title (See Instructions) Executive Vice President		Employer (See Instructions) NAIFA - Dallas
Date 01/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ken, Quach	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Fulshear, TX 77441-2505		
Principal occupation / Job title (See Instructions) Agent/Broker		Employer (See Instructions) Ken Quach Insurance Agency
Date 01/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kirk, Haworth	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Amarillo, TX 79159-0265		
Principal occupation / Job title (See Instructions) Agent Advisor		Employer (See Instructions) The Haworth Company

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 16/21 Rpt: 20/29
2 FILER NAME National Association of Insurance and Financial Advisors - Texas PAC		3 Filer ID (Ethics Commission Filers) 00015644
4 Date 01/10/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lane, Boozer	7 Amount of Contribution (\$) \$34.00
6 Contributor address; City; State; Zip Code Denton, TX 76205-8008		
8 Principal occupation / Job title (See Instructions) Vice President - Marketing		9 Employer (See Instructions) Don Boozer & Assoc.
Date 01/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lane, Boozer	Amount of Contribution (\$) \$40.00
Contributor address; City; State; Zip Code Denton, TX 76205-8008		
Principal occupation / Job title (See Instructions) Vice President - Marketing		Employer (See Instructions) Don Boozer & Assoc.
Date 01/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lannie, Jackson	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Coppell, TX 75019-4007		
Principal occupation / Job title (See Instructions) OWNER		Employer (See Instructions) Jackson Benefits Group
Date 01/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lesley, Pinckard	Amount of Contribution (\$) \$22.80
Contributor address; City; State; Zip Code Fort Worth, TX 76135-4424		
Principal occupation / Job title (See Instructions) Financial Advisor		Employer (See Instructions) LP Insurance and Financial Services
Date 01/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Linda, Goss	Amount of Contribution (\$) \$10.00
Contributor address; City; State; Zip Code Leander, TX 78641-3802		
Principal occupation / Job title (See Instructions) Agent Advisor		Employer (See Instructions) Linda Goss

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 17/21 Rpt: 21/29
2 FILER NAME National Association of Insurance and Financial Advisors - Texas PAC		3 Filer ID (Ethics Commission Filers) 00015644
4 Date 01/10/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mark, Warren <hr/> 6 Contributor address; City; State; Zip Code Plainview, TX 79073-0626	7 Amount of Contribution (\$) \$84.00
8 Principal occupation / Job title (See Instructions) Agent Advisor		9 Employer (See Instructions) Retired
Date 01/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marvin, Spreen <hr/> Contributor address; City; State; Zip Code Brenham, TX 77833-7708	Amount of Contribution (\$) \$20.80
Principal occupation / Job title (See Instructions) Financial Associate		Employer (See Instructions) Thrivent Financial
Date 01/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Michael, Evans <hr/> Contributor address; City; State; Zip Code Coppell, TX 75019-3404	Amount of Contribution (\$) \$18.00
Principal occupation / Job title (See Instructions) Brokerage Manager		Employer (See Instructions) The DI Center
Date 01/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Patrick, Wilder <hr/> Contributor address; City; State; Zip Code Plano, TX 75024-6324	Amount of Contribution (\$) \$3.40
Principal occupation / Job title (See Instructions) Agent Advisor		Employer (See Instructions) The Shamrock Group
Date 01/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Randy, Robertson <hr/> Contributor address; City; State; Zip Code McKinney, TX 75071-7649	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Randy T. Robertson

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 18/21 Rpt: 22/29
2 FILER NAME National Association of Insurance and Financial Advisors - Texas PAC		3 Filer ID (Ethics Commission Filers) 00015644
4 Date 01/10/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rick, Demko 6 Contributor address; City; State; Zip Code Cypress, TX 77429-7617	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) Founding Principal of the Guardian Group		9 Employer (See Instructions) Greater Lonestar Guardian Agency
Date 01/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robert, Hopper Contributor address; City; State; Zip Code Carrollton, TX 75007-2422	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Financial Planner		Employer (See Instructions) National Life
Date 01/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodney, Mogen Contributor address; City; State; Zip Code Austin, TX 78732-2453	Amount of Contribution (\$) \$80.00
Principal occupation / Job title (See Instructions) DI/Business Insurance Expert for Advisor's		Employer (See Instructions) Brokerage Director @ Mass Mutual & Solve Ur Puzzle
Date 01/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rolando, Barrera Contributor address; City; State; Zip Code Corpus Christi, TX 78413-2634	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Agency_Owner		Employer (See Instructions) Roland Barrera Insurance
Date 01/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ronny, Bryant Contributor address; City; State; Zip Code Abilene, TX 79602-6105	Amount of Contribution (\$) \$6.80
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Perry Hunter Hall

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 19/21 Rpt: 23/29
2 FILER NAME National Association of Insurance and Financial Advisors - Texas PAC		3 Filer ID (Ethics Commission Filers) 00015644
4 Date 01/10/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ruth, Shannon <hr/> 6 Contributor address; City; State; Zip Code Highland Village, TX 75077-1859	7 Amount of Contribution (\$) \$34.00
8 Principal occupation / Job title (See Instructions) Agent		9 Employer (See Instructions) RUTH SHANNON STATE FARM
Date 01/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scott, Ward <hr/> Contributor address; City; State; Zip Code Longview, TX 75605-7347	Amount of Contribution (\$) \$3.40
Principal occupation / Job title (See Instructions) Agent Advisor		Employer (See Instructions) The Ward Agency
Date 01/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) T., Littleton <hr/> Contributor address; City; State; Zip Code Nacogdoches, TX 75965-2964	Amount of Contribution (\$) \$34.00
Principal occupation / Job title (See Instructions) Agent		Employer (See Instructions) NAIFA-Pineywoods of East Texas
Date 01/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) T., Littleton <hr/> Contributor address; City; State; Zip Code Nacogdoches, TX 75965-2964	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Agent		Employer (See Instructions) NAIFA-Pineywoods of East Texas
Date 01/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thomas, Mahony <hr/> Contributor address; City; State; Zip Code Ft Worth, TX 76132-1518	Amount of Contribution (\$) \$6.80
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) TMA Financial

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 20/21 Rpt: 24/29
2 FILER NAME National Association of Insurance and Financial Advisors - Texas PAC		3 Filer ID (Ethics Commission Filers) 00015644
4 Date 01/10/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Timothy, Roels	7 Amount of Contribution (\$) \$10.00
6 Contributor address; City; State; Zip Code Fort Worth, TX 76116-5604		
8 Principal occupation / Job title (See Instructions) Agent Advisor		9 Employer (See Instructions) Marketing Group
Date 01/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Tracy, Miller	Amount of Contribution (\$) \$8.00
Contributor address; City; State; Zip Code Houston, TX 77056-6239		
Principal occupation / Job title (See Instructions) Agent Advisor		Employer (See Instructions) TMiller Financial
Date 01/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Victoria, Henly	Amount of Contribution (\$) \$8.00
Contributor address; City; State; Zip Code San Augustine, TX 75972-1324		
Principal occupation / Job title (See Instructions) OWNER		Employer (See Instructions) Henly Insurance
Date 01/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wes, Wessel	Amount of Contribution (\$) \$40.00
Contributor address; City; State; Zip Code Willis, TX 77318-6431		
Principal occupation / Job title (See Instructions) General Agent		Employer (See Instructions) National Life
Date 01/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) William, Montague	Amount of Contribution (\$) \$4.00
Contributor address; City; State; Zip Code Garland, TX 75044-3531		
Principal occupation / Job title (See Instructions) Director of Development		Employer (See Instructions) National Life

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE **A1**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 21/21 Rpt: 25/29
2 FILER NAME National Association of Insurance and Financial Advisors - Texas PAC		3 Filer ID (Ethics Commission Filers) 00015644
4 Date 01/10/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yuka, Nakahara-Goven <hr/> 6 Contributor address; City; State; Zip Code Carrollton, TX 75007-4852	7 Amount of Contribution (\$) \$36.00
8 Principal occupation / Job title (See Instructions) Agent Advisor		9 Employer (See Instructions) New York Life

MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION

SCHEDULE C1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule C1: Sch: 1/3 Rpt: 26/29
2 FILER NAME National Association of Insurance and Financial Advisors - Texas PAC		3 Filer ID (Ethics Commission Filers) 00015644
4 Date 01/10/2025	5 Corporation / Labor Organization name Annie 6 Corporation / Labor Organization address; City; State; Zip Code Corpus Christi, TX 78413-4825	7 Amount of contribution (\$) \$6.00
Date 01/10/2025	Corporation / Labor Organization name Brett Corporation / Labor Organization address; City; State; Zip Code Elkhart, TX 75839-5116	Amount of contribution (\$) \$6.80
Date 01/10/2025	Corporation / Labor Organization name Charles Corporation / Labor Organization address; City; State; Zip Code Decatur, TX 76234-1373	Amount of contribution (\$) \$16.80
Date 01/10/2025	Corporation / Labor Organization name Don Corporation / Labor Organization address; City; State; Zip Code Denton, TX 76205-8008	Amount of contribution (\$) \$6.80
Date 01/10/2025	Corporation / Labor Organization name Frank Corporation / Labor Organization address; City; State; Zip Code Plano, TX 75075-7729	Amount of contribution (\$) \$6.80
Date 01/10/2025	Corporation / Labor Organization name Frank Corporation / Labor Organization address; City; State; Zip Code Tomball, TX 77377-8649	Amount of contribution (\$) \$4.00
Date 01/10/2025	Corporation / Labor Organization name Jason Corporation / Labor Organization address; City; State; Zip Code Floresville, TX 78114-0576	Amount of contribution (\$) \$84.00

MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION

SCHEDULE C1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule C1: Sch: 2/3 Rpt: 27/29
2 FILER NAME National Association of Insurance and Financial Advisors - Texas PAC		3 Filer ID (Ethics Commission Filers) 00015644
4 Date 01/10/2025	5 Corporation / Labor Organization name Jim <hr/> 6 Corporation / Labor Organization address; City; State; Zip Code Eastland, TX 76448-0895	7 Amount of contribution (\$) \$6.80
Date 01/10/2025	Corporation / Labor Organization name Joe <hr/> Corporation / Labor Organization address; City; State; Zip Code Fort Worth, TX 76116-1620	Amount of contribution (\$) \$3.40
Date 01/10/2025	Corporation / Labor Organization name John <hr/> Corporation / Labor Organization address; City; State; Zip Code Nacogdoches, TX 75965-8716	Amount of contribution (\$) \$10.00
Date 01/10/2025	Corporation / Labor Organization name John <hr/> Corporation / Labor Organization address; City; State; Zip Code Nacogdoches, TX 75965-1929	Amount of contribution (\$) \$100.00
Date 01/10/2025	Corporation / Labor Organization name Keith <hr/> Corporation / Labor Organization address; City; State; Zip Code San Antonio, TX 78258-7540	Amount of contribution (\$) \$20.00
Date 01/10/2025	Corporation / Labor Organization name Kenny <hr/> Corporation / Labor Organization address; City; State; Zip Code Amarillo, TX 79119-6438	Amount of contribution (\$) \$4.00
Date 01/10/2025	Corporation / Labor Organization name Lilia <hr/> Corporation / Labor Organization address; City; State; Zip Code Corpus Christi, TX 78411-4917	Amount of contribution (\$) \$6.80

MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION

SCHEDULE C1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule C1: Sch: 3/3 Rpt: 28/29
2 FILER NAME National Association of Insurance and Financial Advisors - Texas PAC		3 Filer ID (Ethics Commission Filers) 00015644
4 Date 01/10/2025	5 Corporation / Labor Organization name Michael <hr/> 6 Corporation / Labor Organization address; City; State; Zip Code San Antonio, TX 78270-1307	7 Amount of contribution (\$) \$10.00
Date 01/10/2025	Corporation / Labor Organization name Michael <hr/> Corporation / Labor Organization address; City; State; Zip Code HEATH, TX 75032-5998	Amount of contribution (\$) \$6.80
Date 01/10/2025	Corporation / Labor Organization name Peter <hr/> Corporation / Labor Organization address; City; State; Zip Code Spring, TX 77379-2542	Amount of contribution (\$) \$10.00
Date 01/10/2025	Corporation / Labor Organization name Raymond <hr/> Corporation / Labor Organization address; City; State; Zip Code Pearland, TX 77581-5853	Amount of contribution (\$) \$8.00
Date 01/10/2025	Corporation / Labor Organization name Rodney <hr/> Corporation / Labor Organization address; City; State; Zip Code Austin, TX 78732-2453	Amount of contribution (\$) \$20.00
Date 01/10/2025	Corporation / Labor Organization name Vincente <hr/> Corporation / Labor Organization address; City; State; Zip Code Amarillo, TX 79118-9390	Amount of contribution (\$) \$10.00

NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

The Instruction Guide explains how to complete this form.

1 Total pages Schedule I: Sch: 1/1 Rpt:	2 FILER NAME National Association of Insurance and Financial	3 Filer ID (Ethics Commission Filers) 00015644
4 Date 01/03/2025	5 Payee name NAIFA-Texas	
6 Amount (\$) 2,000.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee Address; City; State; Zip 3755 Attucks Drive Powell, OH 43065	
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) Office Overhead/Rental Expense	(b) Description (See instructions regarding type of information required.) Monthly Admin Fee to manage PAC