

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) 00042968	2 Total pages filed: 5
3 COMMITTEE NAME Texas Wheat Producers Association Political Action Comiittee			OFFICE USE ONLY	
4 COMMITTEE ADDRESS <input type="checkbox"/> Change of Address			Date Received ELECTRONICALLY FILED 02/27/2025 Date Hand-delivered or Date Postmarked	
5 CAMPAIGN TREASURER NAME MS / MRS / MR FIRST MI Mr. Rodney Owen NICKNAME LAST SUFFIX Mosier			Receipt # Amount Date Processed Date Imaged	
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)			STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 5405 Interstate 40 West Amarillo, TX 79106	
7 CAMPAIGN TREASURER MAILING ADDRESS <input type="checkbox"/> Change of Address			STREET ADDRESS OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 5405 Interstate 40 West Amarillo, TX 79106	
8 CAMPAIGN TREASURER PHONE			AREA CODE PHONE NUMBER EXTENSION (806) 352-2191	
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 type="checkbox"/> February 5 <input type="checkbox"/> May 5 <input type="checkbox"/> August 5 <input type="checkbox"/> November 5 <input checked="" 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 THROUGH Month Day Year 01/26/2025 THROUGH 02/25/2025	

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MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

FORM MPAC
COVER SHEET PG 2

12 COMMITTEE NAME Texas Wheat Producers Association Political Action Committee	13 Filer ID (Ethics Commission Filers) 00042968
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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.)	

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)	\$ 2,290.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 2,000.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 13,042.15
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. Rodney Owen Mosier

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

SUBTOTALS - MPAC

17 COMMITTEE NAME Texas Wheat Producers Association Political Action Comiittee		18 Filer ID (Ethics Commission Filers) 00042968
19 SCHEDULE SUBTOTALS		SUBTOTAL AMOUNT
	NAME OF SCHEDULE	
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 2,290.00
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION	\$
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 checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 2,000.00
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 type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
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: 1/1 Rpt: 4/5
2 FILER NAME Texas Wheat Producers Association Political Action Comiittee		3 Filer ID (Ethics Commission Filers) 00042968
4 Date 01/31/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Born, Scott <hr/> 6 Contributor address; City; State; Zip Code Ferris, TX 75125	7 Amount of Contribution (\$) \$600.00
8 Principal occupation / Job title (See Instructions) Farmer		9 Employer (See Instructions) Self
Date 01/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schickedanz, Jason <hr/> Contributor address; City; State; Zip Code Perryton, TX 79070	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) farmer		Employer (See Instructions) self
Date 02/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scholz, Ben (Mr.) <hr/> Contributor address; City; State; Zip Code Lavon, TX 75166	Amount of Contribution (\$) \$590.00
Principal occupation / Job title (See Instructions) Farmer		Employer (See Instructions) Self
Date 01/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Womack, Eddie <hr/> Contributor address; City; State; Zip Code Tulia, TX 79088	Amount of Contribution (\$) \$600.00
Principal occupation / Job title (See Instructions) Farmer		Employer (See Instructions) Self

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 Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/1 Rpt: 5/5	2 FILER NAME Texas Wheat Producers Association Political Action	3 Filer ID (Ethics Commission Filers) 00042968
4 Date 02/19/2025	5 Payee name Glenn Thompson for Congress	
6 Amount (\$) \$2,000.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 411 1st St SE Washington D.C., TX 20003	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense PAC Contribution
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought
		Office held