## MONTHLY FILING GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

## FORM MPAC COVER SHEET PG 1

Τł	ne MPAC Instruction	2 Total pages filed: 7			
3	COMMITTEE NAME	OFFICE USE ONLY			
	RVOS Farm Mutua	al Insurance Group Political Action Commit	tee	Date Received	
				04/02/2025	
4	COMMITTEE	ADDRESS / PO BOX; APT / SUITE #;	CITY; STATE; ZIP		
	ADDRESS	P.O. Box 6106			
		Temple, TX 76503-6106		Date Hand-delivered or Date Postmarked	
5	CAMPAIGN	MS / MRS / MR FIRST	MI		
	TREASURER NAME	Ms. Barbara F	Renee	Receipt # Amount	
				Data Drassand	
		NICKNAME LAST	SUFFIX	Date Processed	
		Renee Quinn		Date Imaged	
6	CAMPAIGN	STREET ADDRESS (NO PO BOX PLEASE);	APT / SUITE #; CITY; STA	ATE; ZIP CODE	
	TREASURER STREET	2301 S. 37th St.			
	ADDRESS (Residence or Business)				
	(Residence of Business)	Temple, TX 76504			
7	CAMPAIGN	STREET ADDRESS OR PO BOX;	APT / SUITE #; CITY; ST	ATE; ZIP CODE	
	TREASURER MAILING	2301 S. 37th St.			
	ADDRESS				
		Temple, TX 76504			
8		AREA CODE PHONE NUMBER	EXTENSION		
	TREASURER PHONE	(254) 773-2181 x225			
ľ	REPORT TYPE	X Monthly	10th day after campaign treasurer termination	Dissolution (Attach PAC-DR)	
10	MONTHLY				
1	REPORT FILING	January 5 X April	5 July 5	October 5	
	DEADLINE	February 5 May	5 August 5	November 5	
		March 5 June	5 September 5	December 5	
11	. PERIOD	Month Day Year	THROUGH Month	Day Year	
	COVERED	02/26/2025	03/25/2	025	
		-			
		GO 1	TO PAGE 2		
L Fo	Forms provided by Texas Ethics Commission www.ethics.state.tx.us Version V4.1.0.e02d6221				

# MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

# FORM MPAC COVER SHEET PG 2

12 COMMITTEE NAME 13 Filer				(Ethics Commission Filers)		
RVOS Farm Mutual Inst	00069829					
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 PLEI	L CONTRIBUTIONS DGES, LOANS, OR GUARANTEES OF LOANS)	\$	80.74		
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 \$	6,470.48		
OUTSTANDING LOAN TOTALS		AMOUNT OF ALL OUTSTANDING LOANS AS OF T REPORTING PERIOD	THE \$	0.00		
16 AFFIDAVIT			<b>I</b>			
		I swear, or affirm, under penalty of pe true and correct and includes all inforr under Title 15, Election Code.	rjury, that the a mation required	accompanying report is d to be reported by me		
	Ms. Barbara Renee Quinn					
Signature of Campaign Treasurer						
AFFIX NOTARY STAMP / SEAL ABOVE						
Sworn to and subscribed	before me, by the said	, tł	nis the	day		
	of, 20, to certify which, witness my hand and seal of office.					
Signature of officer ad	ninistering oath	Printed name of officer administering oath	Title of offic	cer administering oath		
Forms provided by Texas E	thics Commission	www.ethics.state.tx.us		Version V4.1.0.e02d6221		

### FORM MPAC COVER SHEET PG 3

3 of 7

17 COM	(Ethics Commission Filers)					
RVOS	S Far					
19 SCHE	19 SCHEDULE SUBTOTALS					
NAME	EOFS	SUBTOTAL AMOUNT				
1. [	Х	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		<b>\$</b> 80.74		
2. [		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$		
3. [		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$		
4.		SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABO ORGANIZATION	R	\$		
5.		SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORA LABOR ORGANIZATION	TION OR	\$		
6.		SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	ANIZATION	\$		
7.		SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION		\$		
8.		SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR C	RGANIZATION	\$		
9. [		SCHEDULE E: LOANS		\$		
10.		SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	3	\$		
11.		SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$		
12.		SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIO	DNS	\$		
13.		SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$		
14.	Х	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIO	ONS	<b>\$</b> 70.17		
15.		SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS F TO FILER	RETURNED	\$		

**SUBTOTALS - MPAC** 

# MONETARY POLITICAL CONTRIBUTIONS

#### SCHEDULE A1

The Instruction Guide explains how to complete this form.				1 Total pages Schedule A1: Sch: 1/3 Rpt: 4/7
2 FILEF	FILER NAME			3 Filer ID (Ethics Commission Filers)
RVO	S Farm	Mutual Insurance Group Political Action Committee	)	00069829
4 Date		5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)
03/03	3/2025	BURNETT, GREGORY		\$5.00
		6 Contributor address; City; State; Zip Code		1
		TEMPLE, TX 76502		
8 Princi	ipal occu	pation / Job title (See Instructions)	9 Employer (See Instructions	s)
IT M	ANAGEI	R	RVOS FARM MUTUAL	INSURANCE COMPANY
Date		Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)
03/03	3/2025	CARLSON, STACY		\$2.50
		Contributor address; City; State; Zip Code		4
		HOLLAND, TX 76534		
Princi	ipal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)
	ERWRI			INSURANCE COMPANY
Date		Full name of contributor Out-of-state PAC (ID#:	)	Amount of Contribution (\$)
	3/2025	GREENMAN, CHERIME		\$5.00
• =	0,2022	Contributor address; City; State; Zip Code		
		Culturbulor address, City, State, Lip Code		
		EDDY, TX 76524		
Princi	ipal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)
		NS MANAGER		INSURANCE COMPANY
Date		Full name of contributor Out-of-state PAC (ID#:	<u> </u> )	Amount of Contribution (\$)
	3/2025			\$6.00
00,0	0,2020	Contributor address; City; State; Zip Code		• • • • • • • • • • • • • • • • • • • •
		Continuation address, City, State, Zip Code		
		ROGERS, TX 76569		
Princi	inal occu	pation / Job title (See Instructions)	Employer (See Instructions	s)
		MS ADJUSTER		INSURANCE COMPANY
Date				Amount of Contribution (\$)
	Full name of contributor out-of-state PAC (ID#: 3/2025 JACKSON, WESLEY		)	\$9.62
03/0	312023			
		Contributor address; City; State; Zip Code		
		TEMPLE, TX 76502		
Drinci	inal occur		Employor (Soc Instructions	~
		Employer (See Instructions	5) INSURANCE COMPANY	
	I PRESI			

# MONETARY POLITICAL CONTRIBUTIONS

#### SCHEDULE A1

The Ins	truction Guide explains how to complete this f	1 Total pages Schedule A1: Sch: 2/3 Rpt: 5/7			
2 FILER NA	ME		<b>3</b> Filer ID (Ethics Commission Filers)		
RVOS Fa	arm Mutual Insurance Group Political Action Committee	e	00069829		
4 Date	5 Full name of contributor out-of-state PAC (ID#:_	)	7 Amount of Contribution (\$)		
03/03/20	— — —		\$9.62		
	6 Contributor address; City; State; Zip Code				
	TEMPLE, TX 76502				
	occupation / Job title (See Instructions)	9 Employer (See Instructions			
VICE PR	ESIDENT	RVOS FARM MUTUAL	INSURANCE COMPANY		
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)		
03/03/20			\$6.00		
	Contributor address; City; State; Zip Code				
	TEMPLE, TX 76502				
Principal c	occupation / Job title (See Instructions)	Employer (See Instructions	s)		
CUSTON	IER RELATIONS SPECIALIST	RVOS FARM MUTUAL	INSURANCE COMPANY		
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)		
03/03/20	25 MCANAW, GREGORY		\$5.0		
	Contributor address; City; State; Zip Code				
	Temple, TX 76502				
-	occupation / Job title (See Instructions)	Employer (See Instructions			
CLAIMS	MANAGER	RVOS FARM MUTUAL	FUAL INSURANCE COMPANY		
Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)		
03/03/20	25 QUINN, BARBARA		\$5.00		
	Contributor address; City; State; Zip Code		1		
	TEMPLE, TX 76502				
	occupation / Job title (See Instructions)	Employer (See Instructions			
CONTRO	CONTROLLER RVOS FARM MUTU/		INSURANCE COMPANY		
Date	Full name of contributor out-of-state PAC (ID#:_	)	Amount of Contribution (\$)		
03/03/20	SANDEFUR, AMBER		\$2.00		
	Contributor address; City; State; Zip Code		1		
	TEMPLE, TX 76502	<u> </u>			
Principal o	Principal occupation / Job title (See Instructions) Employer (See Instruction		s)		
UNDERV	VRITER-AUTO	RVOS FARM MUTUAL	INSURANCE COMPANY		
		•			

# MONETARY POLITICAL CONTRIBUTIONS

#### SCHEDULE A1

RVOS Farm Mutual Insurance Group Political Action Committee 00069829						
PVOS Farm Mutual Insurance Group Political Action Committee       00069829         4 Date       5 Full name of contributor or aut-status PAC (Data and the set of the s	The Instruc	tion Guide explains how to complete this f	orm.			
PVOS Farm Mutual Insurance Group Political Action Committee       00069829         4 Date       5 Full name of contributor or aut-status PAC (Data and the set of the s	2 FILER NAME		<b>3</b> Filer ID (Ethics Commission Filers)			
03/03/2025       SHOCKLEY, WILEY       \$5.00         6       Contributor address; City; State; Zip Code       Principal occupation / Job title (See Instructions)       PEmployer (See Instructions)         RPESIDENT       Pall name of contributor       out of state PAC (ID#	RVOS Farm M	Mutual Insurance Group Political Action Committee				
03/03/2025       SHOCKLEY, WILEY       \$5.00         6       Contributor address; City; State; Zip Code       Principal occupation / Job title (See Instructions)       P         PRESIDENT       Pall name of contributor       out of-state PAC (DP;	4 Date !	5 Full name of contributor out-of-state PAC (ID#:	)	7 Amount of Contribution (\$)		
BELTON, TX 76513       BELTON, TX 76513         PRESIDENT       PRESIDENT         Date       Full name of contributor       out-of-state PAC (DI::       Amount of Contribution (S)         03/03/2025       Full name of contributor       out-of-state PAC (DI::       Amount of Contribution (S)         Principal occupation / Job title (See Instructions)       RVOS FARM MUTUAL INSURANCE COMPANY         Principal occupation / Job title (See Instructions)       RVOS FARM MUTUAL INSURANCE COMPANY         Date       Full name of contributor       out-of-state PAC (DI::       Amount of Contribution (S)         03/03/2025       Full name of contributor       out-of-state PAC (DI::       Amount of Contribution (S)         03/03/2025       Full name of contributor       out-of-state PAC (DI::       Amount of Contribution (S)         03/03/2025       Full name of contributor       out-of-state PAC (DI::       Amount of Contribution (S)         03/03/2025       Full name of contributor       out-of-state PAC (DI::       Amount of Contribution (S)         03/03/2025       Full name of contributor       out-of-state PAC (DI::       Amount of Contribution (S)         03/04/2025       Full name of contributor       out-of-state PAC (DI::       Amount of Contribution (S)         03/03/2025       Full name of contributor       out-of-state PAC (DI::       Amount of Cont	03/03/2025			\$5.00		
BELTON, TX 76513       BELTON, TX 76513         Principal occupation / Job title (See Instructions) PRESIDENT       Principal occupation / Job title (See Instructions) TEMPLE, TX 76501       Amount of Contribution (S) S10.00         Principal occupation / Job title (See Instructions) TEMPLE, TX 76501       Employer (See Instructions) RVOS FARM MUTUAL INSURANCE COMPANY         Principal occupation / Job title (See Instructions) VICE PRESIDENT OPERATIONS       Employer (See Instructions) RVOS FARM MUTUAL INSURANCE COMPANY         Date       Full name of contributor out-of-state PAC (De:	i i	6 Contributor address; City; State; Zip Code				
8       Principal occupation / Job title (See Instructions) PRESIDENT       9       Employer (See Instructions) RVOS FARM MUTUAL INSURANCE COMPANY         Date 03/03/2025       Full name of contributor       out-of-state PAC (DP:)       Amount of Contribution (\$) \$10.00         Date 03/03/2025       Full name of contributor       out-of-state PAC (DP:)       Amount of Contribution (\$) \$10.00         Principal occupation / Job title (See Instructions) VICE PRESIDENT OPERATIONS       Employer (See Instructions) RVOS FARM MUTUAL INSURANCE COMPANY         Date 03/03/2025       Full name of contributor       out-of-state PAC (DP:)       Amount of Contribution (\$) \$3.00         Date 03/03/2025       FUELX       State, Zip Code		•				
8       Principal occupation / Job title (See Instructions) PRESIDENT       9       Employer (See Instructions) RVOS FARM MUTUAL INSURANCE COMPANY         Date 03/03/2025       Full name of contributor       out-of-state PAC (Dor)       Amount of Contribution (\$) \$10.00         Date 03/03/2025       Full name of contributor       out-of-state PAC (Dor)       Amount of Contribution (\$) \$10.00         Principal occupation / Job title (See Instructions) VICE PRESIDENT OPERATIONS       Employer (See Instructions) RVOS FARM MUTUAL INSURANCE COMPANY         Date 03/03/2025       Full name of contributor       out-of-state PAC (Dor) Amount of Contribution (\$) 33.00         Date 03/03/2025       FUIL name of contributor       out-of-state PAC (Dor) Amount of Contribution (\$) 33.00         Date 03/03/2025       FUIL name of contributors ADMINISTRATIVE ASSTMGA       Employer (See Instructions) RVOS FARM MUTUAL INSURANCE COMPANY         Date 03/04/2025       Full name of contributor       out-of-state PAC (Dor) Amount of Contribution (\$) 35.00         Date 03/04/2025       Full name of contributor       out-of-state PAC (Dor) Amount of Contribution (\$) 35.00         Principal occupation / Job title (See Instructions) QA/SUPPORT MANAGER       Employer (See Instructions) RVOS FARM MUTUAL INSURANCE COMPANY         Date 03/03/2025       Full name of contributor       out-of-state PAC (Dor) Amount of Contribution (\$) 32.00         Date 03/03/2025						
PRESIDENT       RVOS FARM MUTUAL INSURANCE COMPANY         Date       Full name of contributor       out-of-state PAC (ID#       Amount of Contribution (\$)         03/03/2025       SULAK, IRENE       S10.00         Contributor address: City, State; Zip Code       Fincipal occupation / Job title (See Instructions)       RVOS FARM MUTUAL INSURANCE COMPANY         Principal occupation / Job title (See Instructions)       RVOS FARM MUTUAL INSURANCE COMPANY       \$3.00         Date       Full name of contributor       out-of-state PAC (ID#       Amount of Contribution (\$)         03/03/2025       TIRCUIT, SHEILA       S3.00       \$3.00         Contributor address; City, State; Zip Code       Amount of Contribution (\$)       \$3.00         Principal occupation / Job title (See Instructions)       RVOS FARM MUTUAL INSURANCE COMPANY         Date       Full name of contributor       out-of-state PAC (ID#       Amount of Contribution (\$)         03/04/2025       WON, BEN (Mr.)       Out-of-state PAC (ID#       Amount of Contribution (\$)       \$5.00         Oalde       Employer (See Instructions)       RVOS FARM MUTUAL INSURANCE COMPANY       \$5.00         O3/03/2025       Full name of contributor       out-of-state PAC (ID#       Amount of Contribution (\$)         03/03/2025       Full name of contributor       out-of-state PAC (ID#       Amount of Co				ļ		
Date       Full name of contributor       out-of-state PAC (D#)       Amount of Contribution (\$)         03/03/2025       SULAK, IRENE       \$10.00         Contributor address; City; State; Zip Code       File       Amount of Contribution (\$)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       RVOS FARM MUTUAL INSURANCE COMPANY         Date       Full name of contributor       out-of-state PAC (D#)       Amount of Contribution (\$)         03/03/2025       TIRCUIT, SHEILA       Amount of Contribution (\$)       \$3.00         03/03/2025       Full name of contributor       out-of-state PAC (D#)       Amount of Contribution (\$)         03/03/2025       TIRCUIT, SHEILA       Contributor address; City; State; Zip Code       Amount of Contribution (\$)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       Amount of Contribution (\$)         03/04/2025       Full name of contributor       out-of-state PAC (D#		ation / Job title (See Instructions)		·		
03/03/2025       SULAK, IRENE       \$\$10.00         O3/03/2025       Contributor address; City; State; Zip Code       \$\$10.00         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       RVOS FARM MUTUAL INSURANCE COMPANY         Date       Full name of contributor       out-of-state PAC (ID#:	-					
Contributor address; City; State; Zip Code         TEMPLE, TX 76501         Principal occupation / Job title (See Instructions)       Employer (See Instructions)         VICE PRESIDENT OPERATIONS       Amount of Contributor (S)         Date       Full name of contributor or out-of-state PAC (ID#:		—	)			
TEMPLE, TX 76501         Principal occupation / Job title (See Instructions) VICE PRESIDENT OPERATIONS       Employer (See Instructions) RVOS FARM MUTUAL INSURANCE COMPANY         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$) S3.00         03/03/2025       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$) S3.00         03/03/2025       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$) S3.00         Principal occupation / Job title (See Instructions) ADMINISTRATIVE ASSTMGA       Employer (See Instructions) RVOS FARM MUTUAL INSURANCE COMPANY         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$) S5.00         03/04/2025       Full name of contributors) QA/SUPPORT MANAGER       Employer (See Instructions) RVOS FARM MUTUAL INSURANCE COMPANY         Date       BELTON, TX 76513       Employer (See Instructions) RVOS FARM MUTUAL INSURANCE COMPANY         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$) S2.00         03/03/2025       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$) S2.00         03/03/2025       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$) S2.00         03/03/2025	03/03/2025			\$10.00		
Principal occupation / Job title (See Instructions) VICE PRESIDENT OPERATIONS       Employer (See Instructions) RVOS FARM MUTUAL INSURANCE COMPANY         Date       Full name of contributor       out-of-state PAC (ID#:       Amount of Contribution (\$)         03/03/2025       TIRCUIT, SHEILA       \$3.00         Contributor address; City; State; Zip Code       Amount of Contribution (\$)         Principal occupation / Job title (See Instructions) ADMINISTRATIVE ASSTMGA       Employer (See Instructions) RVOS FARM MUTUAL INSURANCE COMPANY         Date       Full name of contributor       out-of-state PAC (ID#:		Contributor address; City; State; Zip Code				
Principal occupation / Job title (See Instructions) VICE PRESIDENT OPERATIONS       Employer (See Instructions) RVOS FARM MUTUAL INSURANCE COMPANY         Date       Full name of contributor       out-of-state PAC (ID#:						
Principal occupation / Job title (See Instructions) VICE PRESIDENT OPERATIONS       Employer (See Instructions) RVOS FARM MUTUAL INSURANCE COMPANY         Date       Full name of contributor       out-of-state PAC (ID#:		TFMPLE. TX 76501				
VICE PRESIDENT OPERATIONS       RVOS FARM MUTUAL INSURANCE COMPANY         Date       Full name of contributor       out-of-state PAC (ID#:	Principal occup	· · · · · · · · · · · · · · · · · · ·	Employer (See Instructions	<u> </u> s)		
03/03/2025       TIRCUIT, SHEILA       \$3.00         Contributor address; City; State; Zip Code       ROGERS, TX 76569       Employer (See Instructions)         Principal occupation / Job title (See Instructions)       RVOS FARM MUTUAL INSURANCE COMPANY         Date       Full name of contributor       out-of-state PAC (ID#;						
03/03/2025       TIRCUIT, SHEILA       \$3.00         Contributor address; City; State; Zip Code       ROGERS, TX 76569         Principal occupation / Job title (See Instructions)       Employer (See Instructions)         ADMINISTRATIVE ASSTMGA       RVOS FARM MUTUAL INSURANCE COMPANY         Date       Full name of contributor       out-of-state PAC (ID#:	Date	Full name of contributor	<u> </u> )	Amount of Contribution (\$)		
Contributor address; City; State; Zip Code         ROGERS, TX 76569         Principal occupation / Job title (See Instructions)         ADMINISTRATIVE ASSTMGA         Date       Full name of contributor         03/04/2025       WON, BEN (Mr.)         Contributor address; City; State; Zip Code         BELTON, TX 76513         Principal occupation / Job title (See Instructions)         QA/SUPPORT MANAGER         Date         Full name of contributor         Out-of-state PAC (ID#:         RVOS FARM MUTUAL INSURANCE COMPANY         \$5.00         Contributor address; City; State; Zip Code         BELTON, TX 76513         Principal occupation / Job title (See Instructions)         QA/SUPPORT MANAGER         Date       Full name of contributor         Out-of-state PAC (ID#:         QA/SUPPORT MANAGER         Date       Full name of contributor         Out-of-state PAC (ID#:         Contributor address; City; State; Zip Code         Contributor address; City; State; Zip Code         TEMPLE, TX 76502         Principal occupation / Job title (See Instructions)         Principal occupation / Job title (See Instructions)         Employer (See Instructions)         Employer (See Instructions			/			
ROGERS, TX 76569       Employer (See Instructions)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)         ADMINISTRATIVE ASSTMGA       EMployer (See Instructions)         Date       Full name of contributor       out-of-state PAC (ID#:)         03/04/2025       WON, BEN (Mr.)       Amount of Contribution (\$)         Contributor address; City; State; Zip Code       Amount of Contribution (\$)         BELTON, TX 76513       Employer (See Instructions)         QA/SUPPORT MANAGER       Employer (See Instructions)         QA/SUPPORT MANAGER       Employer (See Instructions)         03/03/2025       Full name of contributor       out-of-state PAC (ID#:)         03/03/2025       WOOD, ANNEKA       \$2.00         Contributor address; City; State; Zip Code       Amount of Contribution (\$)         TEMPLE, TX 76502       Employer (See Instructions)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)				•		
Principal occupation / Job title (See Instructions) ADMINISTRATIVE ASSTMGA       Employer (See Instructions) RVOS FARM MUTUAL INSURANCE COMPANY         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         03/04/2025       WON, BEN (Mr.)       \$5.00         Contributor address; City; State; Zip Code       BELTON, TX 76513         Principal occupation / Job title (See Instructions) QA/SUPPORT MANAGER       Employer (See Instructions) RVOS FARM MUTUAL INSURANCE COMPANY         Date       Full name of contributor       out-of-state PAC (ID#:)         03/03/2025       Full name of contributor       out-of-state PAC (ID#:)         03/03/2025       Full name of contributor       out-of-state PAC (ID#:)         Amount of Contribution (\$)       \$2.00         Contributor address; City; State; Zip Code       Amount of Contribution (\$)         03/03/2025       Full name of contributor       s2.00         Contributor address; City; State; Zip Code       full name of contributor       \$2.00         TEMPLE, TX 76502       Employer (See Instructions)       \$20         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       \$2.00						
Principal occupation / Job title (See Instructions) ADMINISTRATIVE ASSTMGA       Employer (See Instructions) RVOS FARM MUTUAL INSURANCE COMPANY         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         03/04/2025       WON, BEN (Mr.)       \$5.00         Contributor address; City; State; Zip Code       BELTON, TX 76513         Principal occupation / Job title (See Instructions) QA/SUPPORT MANAGER       Employer (See Instructions) RVOS FARM MUTUAL INSURANCE COMPANY         Date       Full name of contributor       out-of-state PAC (ID#:) NOOD, ANNEKA       Amount of Contribution (\$)         03/03/2025       Full name of contributor       out-of-state PAC (ID#:) RTEMPLE, TX 76502       Amount of Contribution (\$)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       \$2.00         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       \$2.00         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       \$2.00						
ADMINISTRATIVE ASSTMGA       RVOS FARM MUTUAL INSURANCE COMPANY         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         03/04/2025       WON, BEN (Mr.)       \$5.00         Contributor address; City; State; Zip Code       Employer (See Instructions)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)         QA/SUPPORT MANAGER       Out-of-state PAC (ID#:)         Date       Full name of contributor       out-of-state PAC (ID#:)         03/03/2025       Full name of contributor       out-of-state PAC (ID#:)         03/03/2025       Full name of contributor       out-of-state PAC (ID#:)         Amount of Contributor address; City; State; Zip Code       Amount of Contribution (\$)         TEMPLE, TX 76502       Employer (See Instructions)       \$2.00         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       \$2.00         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       \$2.00		ROGERS, TX 76569				
Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         03/04/2025       WON, BEN (Mr.)       \$5.00         Contributor address; City; State; Zip Code       BELTON, TX 76513         Principal occupation / Job title (See Instructions)       Employer (See Instructions)         QA/SUPPORT MANAGER       Full name of contributor       out-of-state PAC (ID#:)         Date       Full name of contributor       out-of-state PAC (ID#:)         03/03/2025       WOOD, ANNEKA       Amount of Contribution (\$)         03/03/2025       Contributor address; City; State; Zip Code       Amount of Contribution (\$)         TEMPLE, TX 76502       TEMPLE, TX 76502       Employer (See Instructions)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)	Principal occup	pation / Job title (See Instructions)				
03/04/2025       WON, BEN (Mr.)       \$5.00         Contributor address; City; State; Zip Code       BELTON, TX 76513         Principal occupation / Job title (See Instructions)       Employer (See Instructions)         QA/SUPPORT MANAGER       Employer (See Instructions)         Date       Full name of contributor       out-of-state PAC (ID#:)         MOOD, ANNEKA       Amount of Contribution (\$)         VOOD, ANNEKA       \$2.00         TEMPLE, TX 76502       Employer (See Instructions)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)	ADMINISTRA	ATIVE ASSTMGA	RVOS FARM MUTUAL	RVOS FARM MUTUAL INSURANCE COMPANY		
Contributor address; City; State; Zip Code         BELTON, TX 76513         Principal occupation / Job title (See Instructions)         QA/SUPPORT MANAGER         Date         Full name of contributor         out-of-state PAC (ID#:)         Amount of Contribution (\$)         WOOD, ANNEKA         Contributor address; City; State; Zip Code         TEMPLE, TX 76502         Principal occupation / Job title (See Instructions)         Employer (See Instructions)         RVOS FARM MUTUAL INSURANCE COMPANY	Date	Full name of contributor out-of-state PAC (ID#:	)	Amount of Contribution (\$)		
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Principal occupation / Job title (See Instructions)       Employer (See Instructions)         QA/SUPPORT MANAGER       Employer (See Instructions)         Date       Full name of contributor       out-of-state PAC (ID#:)         03/03/2025       WOOD, ANNEKA       Amount of Contribution (\$)         Contributor address; City; State; Zip Code       TEMPLE, TX 76502         Principal occupation / Job title (See Instructions)       Employer (See Instructions)	ľ	Contributor address; City; State; Zip Code		1		
Principal occupation / Job title (See Instructions)       Employer (See Instructions)         QA/SUPPORT MANAGER       Employer (See Instructions)         Date       Full name of contributor       out-of-state PAC (ID#:)         03/03/2025       WOOD, ANNEKA       Amount of Contribution (\$)         Contributor address; City; State; Zip Code       TEMPLE, TX 76502         Principal occupation / Job title (See Instructions)       Employer (See Instructions)						
Principal occupation / Job title (See Instructions)       Employer (See Instructions)         QA/SUPPORT MANAGER       Employer (See Instructions)         Date       Full name of contributor       out-of-state PAC (ID#:)         03/03/2025       WOOD, ANNEKA       Amount of Contribution (\$)         Contributor address; City; State; Zip Code       TEMPLE, TX 76502         Principal occupation / Job title (See Instructions)       Employer (See Instructions)						
QA/SUPPORT MANAGER       RVOS FARM MUTUAL INSURANCE COMPANY         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         03/03/2025       WOOD, ANNEKA       \$2.00         Contributor address; City; State; Zip Code       TEMPLE, TX 76502         Principal occupation / Job title (See Instructions)       Employer (See Instructions)						
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03/03/2025 WOOD, ANNEKA \$2.00 Contributor address; City; State; Zip Code TEMPLE, TX 76502 Principal occupation / Job title (See Instructions) Employer (See Instructions)	·					
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TEMPLE, TX 76502       Principal occupation / Job title (See Instructions)       Employer (See Instructions)	03/03/2025			\$2.00		
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# NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

The Instruction Guide explains how to complete this form. 2 FILER NAME Filer ID (Ethics Commission Filers) 1 Total pages Schedule I: 3 **RVOS Farm Mutual Insurance Group Political Action** 00069829 Sch: 1/1 Rpt: 7/7 4 Date 5 Payee name 03/11/2025 Wells Fargo Bank N.A. Amount (\$) Payee Address; City; State; Zip 6 7 420 Montgomery Street 70.17 Expenditure from San Francisco, CA 94104 corporate funds (a) Category (See instructions for examples of acceptable categories) 8 PURPOSE (b) Description (See instructions regarding type of information required.) OF EXPENDITURE Accounting/Banking **Client Analysis Fee** 

SCHEDULE I