

# 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) 00015593		2 Total pages filed: 18	
3 COMMITTEE NAME Political Action Committee Of The Independent Insurance Agents Of Texas				OFFICE USE ONLY Date Received ELECTRONICALLY FILED 05/02/2025  Date Hand-delivered or Date Postmarked  Receipt # Amount  Date Processed  Date Imaged	
4 COMMITTEE ADDRESS	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP P.O. Box 684487  Austin, TX 78768				
5 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Mr. Regan M.  NICKNAME LAST SUFFIX Ellmer				
6 CAMPAIGN TREASURER STREET ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 1115 San Jacinto Blvd, Suite 100  Austin, TX 78701				
7 CAMPAIGN TREASURER MAILING ADDRESS	STREET ADDRESS OR PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 1115 San Jacinto Blvd, Suite 100  Austin, TX 78701				
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (512) 493-2454				
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 checked="" 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    THROUGH    Month Day Year 03/26/2025    04/25/2025				

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# MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

## FORM MPAC COVER SHEET PG 2

<b>12 COMMITTEE NAME</b> Political Action Committee Of The Independent Insurance Agents Of Texas	<b>13 Filer ID</b> (Ethics Commission Filers) 00015593
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<b>14 COMMITTEE ACTIVITY</b>  (Attach lists on plain paper to complete this report if necessary.)	<b>1. Candidates</b> (Identify by name or, if applicable, classify by party.)	A. Supported
		B. Opposed
	<b>2. Measures</b> (Describe by date and location of election and nature of issue.)	A. Supported
		B. Opposed
	<b>3. Officeholders Assisted</b> (Identify by name or, if applicable, classify by party.)	

<b>15 CONTRIBUTION TOTALS</b>	<b>1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)</b> <input type="checkbox"/> check here if this report qualifies for the higher itemization threshold	\$ 0.00
	<b>2. TOTAL POLITICAL CONTRIBUTIONS</b> (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 28,777.33
<b>EXPENDITURE TOTALS</b>	<b>3. TOTAL UNITEMIZED POLITICAL EXPENDITURES</b>	\$ 0.00
	<b>4. TOTAL POLITICAL EXPENDITURES</b>	\$ 0.00
<b>CONTRIBUTION BALANCE</b>	<b>5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD</b>	\$ 918,774.54
<b>OUTSTANDING LOAN TOTALS</b>	<b>6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD</b>	\$ 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. Regan M. Ellmer

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****FORM MPAC**  
**COVER SHEET PG 3**  
3 of 18

<b>17 COMMITTEE NAME</b> Political Action Committee Of The Independent Insurance Agents Of Texas		<b>18 Filer ID</b> (Ethics Commission Filers) 00015593
<b>19 SCHEDULE SUBTOTALS</b> NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 20,695.00
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 checked="" type="checkbox"/> SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$ 7,742.88
7.	<input checked="" type="checkbox"/> SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$ 339.45
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 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**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 1/13 Rpt: 4/18
<b>2</b> FILER NAME Political Action Committee Of The Independent Insurance Agents Of Texas		<b>3</b> Filer ID (Ethics Commission Filers) 00015593
<b>4</b> Date 04/12/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Almaguer, Jeannie <b>6</b> Contributor address; City; State; Zip Code  Fort Worth, TX 76102-4740	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>8</b> Principal occupation / Job title (See Instructions) Insurance Agent		<b>9</b> Employer (See Instructions) INSURICA
Date 04/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barclay, John Contributor address; City; State; Zip Code  Austin, TX 78757-6864	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) The John A. Barclay Agency, Inc
Date 03/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barr, Jim Contributor address; City; State; Zip Code  Fort Worth, TX 76102-4740	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) INSURICA
Date 03/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Becton, Jim Contributor address; City; State; Zip Code  Idalou, TX 79329-9100	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Becton Insurance Agency, Inc./SBMP Insurance Group
Date 03/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Beltran, Jennifer Contributor address; City; State; Zip Code  Austin, TX 78768-4487	Amount of Contribution (\$)  \$5.00
Principal occupation / Job title (See Instructions) Graphic Designer		Employer (See Instructions) Independent Insurance Agents of Texas

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 2/13 Rpt: 5/18
<b>2</b> FILER NAME Political Action Committee Of The Independent Insurance Agents Of Texas		<b>3</b> Filer ID (Ethics Commission Filers) 00015593
<b>4</b> Date 04/23/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bergfeld, Brad <hr/> <b>6</b> Contributor address; City; State; Zip Code  Tyler, TX 75701	<b>7</b> Amount of Contribution (\$)  \$250.00
<b>8</b> Principal occupation / Job title (See Instructions) Insurance Agent		<b>9</b> Employer (See Instructions) Bergfeld Agency LLC
Date 03/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blount, Garrett <hr/> Contributor address; City; State; Zip Code  Austin, TX 78759	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Lewis-Watkins-Farmer Agency, Inc.
Date 04/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boone, Beverly <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78217-6217	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Whitaker Insurance Associates, Inc.
Date 04/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bradford, Clint <hr/> Contributor address; City; State; Zip Code  Austin, TX 78759	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Lewis-Watkins-Farmer Agency, Inc.
Date 03/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cardenas, Marialma <hr/> Contributor address; City; State; Zip Code  Deer Park, TX 77536-4177	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Kicker Insurance Services Inc.

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 3/13 Rpt: 6/18
<b>2</b> FILER NAME Political Action Committee Of The Independent Insurance Agents Of Texas		<b>3</b> Filer ID (Ethics Commission Filers) 00015593
<b>4</b> Date 04/21/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Conner, Jonas <hr/> <b>6</b> Contributor address; City; State; Zip Code  Katy, TX 77492-0597	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) Insurance Agent		<b>9</b> Employer (See Instructions) Katy Insurance Agency, Inc.
Date 04/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dacy, Ian <hr/> Contributor address; City; State; Zip Code  Fort Worth, TX 76102-4740	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) INSURICA
Date 04/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Eastridge, Jennifer <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78217-6217	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Whitaker Insurance Associates, Inc.
Date 03/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ervin, Deborah <hr/> Contributor address; City; State; Zip Code  Midland, TX 79705-5359	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) The Ervin Agency
Date 04/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fischer, Rachel <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78217-6217	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Whitaker Insurance Associates, Inc.

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 4/13 Rpt: 7/18
<b>2</b> FILER NAME Political Action Committee Of The Independent Insurance Agents Of Texas		<b>3</b> Filer ID (Ethics Commission Filers) 00015593
<b>4</b> Date 04/07/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Foote, Tronda <b>6</b> Contributor address; City; State; Zip Code  Idalou, TX 79329-1365	<b>7</b> Amount of Contribution (\$)  \$50.00
<b>8</b> Principal occupation / Job title (See Instructions) Insurance Agent		<b>9</b> Employer (See Instructions) Isom - Foote Insurance Agency
Date 04/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frierson, Matt Contributor address; City; State; Zip Code  Greenville, TX 75403-0964	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) F 5 Insurance Solutions
Date 04/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Galati, Nicholas Contributor address; City; State; Zip Code  Fort Worth, TX 76107-8000	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Roach Howard Smith & Barton
Date 04/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gorman, Lori Contributor address; City; State; Zip Code  Winnsboro, TX 75494-0726	Amount of Contribution (\$)  \$150.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Mary Hunt Insurance
Date 03/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hacker, Murray Contributor address; City; State; Zip Code  Helotes, TX 78023-0226	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Village Insurance Agency, Inc.

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 5/13 Rpt: 8/18
<b>2</b> FILER NAME Political Action Committee Of The Independent Insurance Agents Of Texas		<b>3</b> Filer ID (Ethics Commission Filers) 00015593
<b>4</b> Date 04/14/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haga, Alyse <b>6</b> Contributor address; City; State; Zip Code  San Antonio, TX 78217-6217	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) Insurance Agent		<b>9</b> Employer (See Instructions) Whitaker Insurance Associates, Inc.
Date 03/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harrison, Charles Contributor address; City; State; Zip Code  Dallas, TX 75240-6694	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Harrison Insurance Agency
Date 04/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harrison, William Contributor address; City; State; Zip Code  San Antonio, TX 78216-5849	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) TASA Risk Solutions
Date 04/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hart, Ashley Contributor address; City; State; Zip Code  Houston, TX 77241-1328	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Cravens/Warren & Company
Date 03/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hempkins, Bradley Contributor address; City; State; Zip Code  Allen, TX 75002-2850	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Hempkins Insurance

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 6/13 Rpt: 9/18
<b>2</b> FILER NAME Political Action Committee Of The Independent Insurance Agents Of Texas		<b>3</b> Filer ID (Ethics Commission Filers) 00015593
<b>4</b> Date 03/31/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hempkins, Wilma <hr/> <b>6</b> Contributor address; City; State; Zip Code  Denison, TX 75020-4607	<b>7</b> Amount of Contribution (\$) \$1,000.00
<b>8</b> Principal occupation / Job title (See Instructions) Insurance Agent		<b>9</b> Employer (See Instructions) Hempkins Insurance Agency LLC
Date 04/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hernandez, Frances <hr/> Contributor address; City; State; Zip Code  Stanton, TX 79782-0310	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Eiland & Associates, Inc.
Date 03/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hertel, William <hr/> Contributor address; City; State; Zip Code  Austin, TX 78759-7812	Amount of Contribution (\$) \$2,000.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Hertel Insurors Group, LLP
Date 04/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hubbard, Deborah <hr/> Contributor address; City; State; Zip Code  Houston, TX 77242-0390	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Securance Corporation Agency
Date 04/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Huff, Tracy <hr/> Contributor address; City; State; Zip Code  Austin, TX 78768-4487	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) E&O Advocate		Employer (See Instructions) Independent Insurance Agents of Texas

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 7/13 Rpt: 10/18
<b>2</b> FILER NAME Political Action Committee Of The Independent Insurance Agents Of Texas		<b>3</b> Filer ID (Ethics Commission Filers) 00015593
<b>4</b> Date 03/31/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Douglas <b>6</b> Contributor address; City; State; Zip Code  Houston, TX 77018-8018	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) Insurance Agent		<b>9</b> Employer (See Instructions) Douglas B. Johnson Insurance Agency
Date 04/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jones, Doug Contributor address; City; State; Zip Code  Dallas, TX 75231-6458	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Roach Howard Smith & Barton
Date 04/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kakacek, Scott Contributor address; City; State; Zip Code  Richardson, TX 75083-0846	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Rising Star Insurance Group, Inc.
Date 04/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelley, Kurt Contributor address; City; State; Zip Code  The Woodlands, TX 77380-2076	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Mobile Insurance Agency of Texas, Inc.
Date 04/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelley, Travis Contributor address; City; State; Zip Code  Austin, TX 78759-8977	Amount of Contribution (\$)  \$125.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Lewis-Watkins-Farmer Agency, Inc.

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 8/13 Rpt: 11/18
<b>2</b> FILER NAME Political Action Committee Of The Independent Insurance Agents Of Texas		<b>3</b> Filer ID (Ethics Commission Filers) 00015593
<b>4</b> Date 04/01/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kizer, Terri <b>6</b> Contributor address; City; State; Zip Code  Corpus Christi, TX 78463-3280	<b>7</b> Amount of Contribution (\$)  \$250.00
<b>8</b> Principal occupation / Job title (See Instructions) Insurance Agent		<b>9</b> Employer (See Instructions) Keetch & Associates Insurance
Date 04/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lerma, Amber Contributor address; City; State; Zip Code  San Antonio, TX 78217-6217	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Whitaker Insurance Associates, Inc.
Date 04/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lewis, Kier Contributor address; City; State; Zip Code  Austin, TX 78768-4487	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Education Mgr		Employer (See Instructions) Independent Insurance Agents of Texas
Date 04/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McMullan, Kirk Contributor address; City; State; Zip Code  Bandera, TX 78003-0997	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Joe W. McMullan Insurance Agency, Inc.
Date 04/08/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McMullan, Patricia Contributor address; City; State; Zip Code  Bandera, TX 78003-0997	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Joe W. McMullan Insurance Agency, Inc.

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 9/13 Rpt: 12/18
<b>2</b> FILER NAME Political Action Committee Of The Independent Insurance Agents Of Texas		<b>3</b> Filer ID (Ethics Commission Filers) 00015593
<b>4</b> Date 04/01/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Meyer, Linda <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78738-1928	<b>7</b> Amount of Contribution (\$)  \$250.00
<b>8</b> Principal occupation / Job title (See Instructions) Insurance Agent		<b>9</b> Employer (See Instructions) Linda Meyer Insurance Brokerage LLC
Date 04/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Montalvo, Ramon <hr/> Contributor address; City; State; Zip Code  Weslaco, TX 78599-0002	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Montalvo Insurance Agency, Inc.
Date 04/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Montgomery, Karen <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78217-6217	Amount of Contribution (\$)  \$800.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Whitaker Insurance Associates, Inc.
Date 04/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Morales, Peggy <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78217-6217	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Whitaker Insurance Associates, Inc.
Date 04/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nunez, Felicia <hr/> Contributor address; City; State; Zip Code  Fort Worth, TX 76102-4740	Amount of Contribution (\$)  \$100.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) INSURICA

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 10/13 Rpt: 13/18
<b>2</b> FILER NAME Political Action Committee Of The Independent Insurance Agents Of Texas		<b>3</b> Filer ID (Ethics Commission Filers) 00015593
<b>4</b> Date 04/14/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pair, Karla <hr/> <b>6</b> Contributor address; City; State; Zip Code  San Antonio, TX 78217-6217	<b>7</b> Amount of Contribution (\$)  \$200.00
<b>8</b> Principal occupation / Job title (See Instructions) Insurance Agent		<b>9</b> Employer (See Instructions) Whitaker Insurance Associates, Inc.
Date 03/26/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peckham, Will <hr/> Contributor address; City; State; Zip Code  Round Rock, TX 78664-5143	Amount of Contribution (\$)  \$150.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Lewis-Watkins-Farmer Agency, Inc.
Date 03/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pennington-Noxon, Sheila <hr/> Contributor address; City; State; Zip Code  Austin, TX 78766-9369	Amount of Contribution (\$)  \$300.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Lewis-Watkins-Farmer Agency, Inc.
Date 03/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Poynor, Paulette <hr/> Contributor address; City; State; Zip Code  Fort Worth, TX 76102-4740	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) INSURICA
Date 04/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reynolds, Ryan <hr/> Contributor address; City; State; Zip Code  Lubbock, TX 79401-3120	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Grimes Insurance Agency, Inc.

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 11/13 Rpt: 14/18
<b>2</b> FILER NAME Political Action Committee Of The Independent Insurance Agents Of Texas		<b>3</b> Filer ID (Ethics Commission Filers) 00015593
<b>4</b> Date 04/04/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Roach, Carie <hr/> <b>6</b> Contributor address; City; State; Zip Code  Austin, TX 78768-4487	<b>7</b> Amount of Contribution (\$)  \$250.00
<b>8</b> Principal occupation / Job title (See Instructions) Consultant		<b>9</b> Employer (See Instructions) Independent Insurance Agents of Texas
Date 04/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ross, Chasity <hr/> Contributor address; City; State; Zip Code  San Angelo, TX 76904-7710	Amount of Contribution (\$)  \$50.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) C A Ross Insurance Agency, LLC
Date 04/22/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ross, Rebecca <hr/> Contributor address; City; State; Zip Code  San Angelo, TX 76904	Amount of Contribution (\$)  \$25.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) C A Ross Insurance Agency, LLC
Date 04/07/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shaw, Julia <hr/> Contributor address; City; State; Zip Code  Galveston, TX 77550-4953	Amount of Contribution (\$)  \$400.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) SMI Agency
Date 04/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Spracklen, Julia <hr/> Contributor address; City; State; Zip Code  Dallas, TX 75231-6458	Amount of Contribution (\$)  \$250.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Roach Howard Smith & Barton

# MONETARY POLITICAL CONTRIBUTIONS

**SCHEDULE A1**

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 12/13 Rpt: 15/18
<b>2</b> FILER NAME Political Action Committee Of The Independent Insurance Agents Of Texas		<b>3</b> Filer ID (Ethics Commission Filers) 00015593
<b>4</b> Date 04/14/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Starnes, Jennifer <hr/> <b>6</b> Contributor address; City; State; Zip Code  San Antonio, TX 78217-6217	<b>7</b> Amount of Contribution (\$)  \$100.00
<b>8</b> Principal occupation / Job title (See Instructions) Insurance Agent		<b>9</b> Employer (See Instructions) Whitaker Insurance Associates, Inc.
Date 04/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swann, Ben <hr/> Contributor address; City; State; Zip Code  Frisco, TX 75036-3987	Amount of Contribution (\$)  \$500.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) MarshBerry
Date 03/31/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Taylor-Murray, Tamsy <hr/> Contributor address; City; State; Zip Code  Fort Worth, TX 76102-4740	Amount of Contribution (\$)  \$20.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) INSURICA
Date 04/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whitaker, Don <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78217-6217	Amount of Contribution (\$)  \$3,000.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Whitaker Insurance Associates, Inc.
Date 04/14/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whitaker, Gary <hr/> Contributor address; City; State; Zip Code  San Antonio, TX 78217-6217	Amount of Contribution (\$)  \$1,000.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Whitaker Insurance Associates, Inc.

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule A1: Sch: 13/13 Rpt: 16/18
<b>2</b> FILER NAME Political Action Committee Of The Independent Insurance Agents Of Texas		<b>3</b> Filer ID (Ethics Commission Filers) 00015593
<b>4</b> Date 04/14/2025	<b>5</b> Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whitaker, Lana <hr/> <b>6</b> Contributor address; City; State; Zip Code  San Antonio, TX 78217-6217	<b>7</b> Amount of Contribution (\$)  \$1,000.00
<b>8</b> Principal occupation / Job title (See Instructions) Insurance Agent		<b>9</b> Employer (See Instructions) Whitaker Insurance Associates, Inc.

# MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION

SCHEDULE C3

<b>The Instruction Guide explains how to complete this form.</b>		<b>1</b> Total pages Schedule C3: Sch: 1/1 Rpt: 17/18
<b>2</b> FILER NAME Political Action Committee Of The Independent Insurance Agents Of Texas		<b>3</b> Filer ID (Ethics Commission Filers) 00015593
<b>4</b> Date 03/31/2025	<b>5</b> Corporation / Labor Organization name Independent Insurance Agents of Texas	<b>6</b> Amount (\$) 411.35
Date 03/31/2025	Corporation / Labor Organization name Independent Insurance Agents of Texas	Amount (\$) 6,648.18
Date 04/03/2025	Corporation / Labor Organization name Independent Insurance Agents of Texas	Amount (\$) 683.35

# NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION

SCHEDULE **C4**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule C4:  
Sch: 1/1 Rpt: 18/18

2 FILER NAME

Political Action Committee Of The Independent Insurance Agents Of Texas

3 Filer ID (Ethics Commission Filers)  
00015593

4 Date

04/25/2025

5 Corporation / Labor Organization name

Independent Insurance Agents of Texas

6 Amount (\$)

339.45