#### FORM MPAC MONTHLY FILING GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT **COVER SHEET PG 1** Filer ID 2 Total pages filed: The MPAC Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00069829 3 COMMITTEE NAME **OFFICE USE ONLY** RVOS Farm Mutual Insurance Group Political Action Committee Date Received **ELECTRONICALLY FILED** 07/02/2025 COMMITTEE ADDRESS / PO BOX: APT / SUITE #: CITY: STATE: ZIP **ADDRESS** P.O. Box 6106 Temple, TX 76503-6106 Date Hand-delivered or Date Postmarked CAMPAIGN MS / MRS / MR **FIRST** MI **TREASURER** Receipt # Amount Ms. Barbara Renee NAME Date Processed NICKNAME **SUFFIX** LAST Renee Date Imaged Quinn CAMPAIGN STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 2301 S. 37th St. STREET **ADDRESS** (Residence or Business) Temple, TX 76504 **CAMPAIGN** STREET ADDRESS OR PO BOX: APT / SUITE #; CITY: STATE: ZIP CODE **TREASURER** 2301 S. 37th St. MAILING **ADDRESS** Temple, TX 76504 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER PHONE** (254) 773-2181 x225 REPORT TYPE 10th day after campaign X Monthly Dissolution (Attach PAC-DR) treasurer termination 10 MONTHLY January 5 April 5 X July 5 October 5 REPORT FILING **DEADLINE** February 5 May 5 August 5 November 5 September 5 December 5 March 5 June 5 11 PERIOD Month Day Year Month Day Year **THROUGH COVERED** 05/26/2025 06/25/2025

**GO TO PAGE 2** 

### MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

# FORM MPAC COVER SHEET PG 2

				_		
L2 COMMITTEE NAME				13 Filer I	ID	(Ethics Commission Filers)
RVOS Farm Mutual Ins	urance Group Political	Action Committee	е	00069	9829	
4 COMMITTEE	1. Candidates	A. Supported				
ACTIVITY	(Identify by name or, if applicable, classify by party.)					
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed				
	2 Managuras	A. Supported				
	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.)					
F. CONTRIBUTION		D DOLUTION CONT	FDIDLITIONS (OTLIED THAN			
.5 CONTRIBUTION TOTALS	PLEDGES, LOANS, CONTRIBUTIONS M check here if this report	OR GUARANTEES  MADE ELECTRONIC	CALLY)	,	\$	0.00
	2. TOTAL POLITICA				\$	202.24
	(OTHER THAN PLEI	DGES, LOANS, OR	GUARANTEES OF LOANS)	[	Ψ	202.24
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	D POLITICAL EXPE	NDITURES	:	\$	0.00
	4. TOTAL POLITICA	L EXPENDITUR	ES	!	\$	0.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL ( OF THE REPORTIN		MAINTAINED AS OF THE LAS	ST DAY	\$	7,105.47
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL A LAST DAY OF THE		DUTSTANDING LOANS AS OF OD	FTHE	\$	0.00
.6 AFFIDAVIT	I					
		true	ear, or affirm, under penalty of pand correct and includes all informant to the ser Title 15, Election Code.	perjury, that ormation re	t the ac quired t	companying report is to be reported by me
			Ms. Barba	ra Renee (	Quinn	
			Signature of C	Campaign T	reasure	er
AFFIX NOTARY	STAMP / SEAL ABOVE					
Sworn to and subscribed	hefore me, by the said			this the		day
	_, 20, to certify \			, 1115 1116		uuy
	-	,				
Signature of officer ad	ministering oath	Printed name of off	ficer administering oath	Title	of office	r administering oath

#### **SUBTOTALS - MPAC**

## FORM MPAC COVER SHEET PG 3

				3 of 10
17 COMMITTE		18 Filer ID	(Ethics Comm	nission Filers)
	rm Mutual Insurance Group Political Action Committee	00069829		
	E SUBTOTALS SCHEDULE		SUBTOT	TAL AMOUNT
1. X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$	202.24
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 CORPORAL LABOR ORGANIZATION	ATION OR	\$	
6.	SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	SANIZATION	\$	
7.	SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	ł	\$	
8.	SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR (	ORGANIZATION	\$	
9.	\$			
10.	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION:	S	\$	
11.	SCHEDULE F2: UNPAID INCURRED OBLIGATIONS		\$	
12.	SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION	ONS	\$	
13.	SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD		\$	
14. X	SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$	62.84
15.	SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS TO FILER	RETURNED	\$	

	MONET	ARY POLITICAL CONTRIBUTIO	NS		SCHEDULE	A1
	The Instru	ction Guide explains how to complete this fo	orm.	1	Total pages Schedule A1: Sch: 1/6 Rpt: 4/10	
2	FILER NAME RVOS Farm	Mutual Insurance Group Political Action Committee		3	Filer ID (Ethics Commission 00069829	Filers)
4	Date 06/03/2025	5 Full name of contributor out-of-state PAC (ID#: BURNETT, GREGORY  6 Contributor address; City; State; Zip Code		7	Amount of Contribution (\$)	\$5.00
		TEMPLE, TX 76502				
8	Principal occu IT MANAGE	`	9 Employer (See Instructions RVOS FARM MUTUAL	,	SURANCE COMPANY	
	Date 06/13/2025	Full name of contributor out-of-state PAC (ID#:_BURNETT, GREGORY  Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$5.00
	Principal occu	TEMPLE, TX 76502 pation / Job title (See Instructions)	Employer (See Instructions	s)		
	IT MANAGE		RVOS FARM MUTUAL		SURANCE COMPANY	
	Date 06/03/2025	Full name of contributor out-of-state PAC (ID#: CARLSON, STACY Contributor address; City; State; Zip Code	)		Amount of Contribution (\$)	\$2.50
		HOLLAND, TX 76534				
	Principal occu UNDERWRI	pation / Job title (See Instructions) TER	Employer (See Instructions RVOS FARM MUTUAL	•	SURANCE COMPANY	
	Date 06/13/2025	Full name of contributor out-of-state PAC (ID#:_CARLSON, STACY  Contributor address; City; State; Zip Code  HOLLAND, TX 76534			Amount of Contribution (\$)	\$2.50
	Principal occu UNDERWRI	pation / Job title (See Instructions)	Employer (See Instructions		SURANCE COMPANY	
	Date 06/03/2025	Full name of contributor out-of-state PAC (ID#:_GREENMAN, CHERIME  Contributor address; City; State; Zip Code  EDDY, TX 76524			Amount of Contribution (\$)	\$5.00
	•	pation / Job title (See Instructions)  NS MANAGER	Employer (See Instructions		SLIDANICE COMPANY	
	OI LIVATION	TO THE STATE OF TH	TWOOT ANNI MOTOAL	- 11 N	SOLVINGE COMI AINT	

	MONEI	ARY POLITICAL C	ONTRIBUTION	NS		SCHEDULE	<b>A1</b>
	The Instru	ction Guide explains how	to complete this for	m.	1	Total pages Schedule A1: Sch: 2/6 Rpt: 5/10	
2	FILER NAME	FILER NAME  RVOS Farm Mutual Insurance Group Political Action Committee		3	Filer ID (Ethics Commission 00069829	Filers)	
4	Date 06/13/2025	5 Full name of contributor  GREENMAN, CHERIME	out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	\$5.00
		6 Contributor address; City; Sta EDDY, TX 76524	ite, zip Code				
8	Principal occu	nation / Job title (See Instructions)	9	Employer (See Instructions	<u> </u>		
ľ		NS MANAGER	ľ	RVOS FARM MUTUAL		SURANCE COMPANY	
_				11100171111111111010112			
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	06/03/2025	HUTKA, AMBER					\$5.00
		Contributor address; City; Sta	ate; Zip Code				
		ROGERS, TX 76569					
	·	pation / Job title (See Instructions)		Employer (See Instructions			
	STAFF CLA	IMS ADJUSTER		RVOS FARM MUTUAL	IN:	SURANCE COMPANY	
	Date	Full name of contributor	out-of-state PAC (ID#:			Amount of Contribution (\$)	
	06/13/2025	HUTKA, AMBER					\$5.00
		Contributor address; City; Sta	ate; Zip Code				
		ROGERS, TX 76569					
	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	5)		
	STAFF CLA	IMS ADJUSTER		RVOS FARM MUTUAL	IN:	SURANCE COMPANY	
	Date	Full name of contributor	out-of-state PAC (ID#:	)	Π	Amount of Contribution (\$)	
	06/03/2025	HYKEL, RICHARD (Mr.)		/		(4)	\$10.00
	00,00,2020	Contributor address; City; Sta	nto: Zin Codo				+20.00
		Contributor address, City, Sta	ite, zip Code				
		TROY, TX 76579-9026					
-	Principal occu	pation / Job title (See Instructions)		Employer (See Instructions	:) [		
	DIRECTOR	patient, con the (eco mendenene)		RVOS FARM MUTUAL		SURANCE CO	
_							
	Date	Full name of contributor	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	
	06/03/2025	JACKSON, WESLEY					\$9.62
		Contributor address; City; Sta	ate; Zip Code				
		TEMPLE, TX 76502	•				
		pation / Job title (See Instructions)		Employer (See Instructions			
L	VICE PRESI	DENT		RVOS FARM MUTUAL	IN:	SURANCE COMPANY	

	MONEI	ARY POLITICAL CONTRI	BUTION	15		SCHEDULE	<b>A1</b>
	The Instru	ction Guide explains how to comple	ete this for	m.	1	Total pages Schedule A1: Sch: 3/6 Rpt: 6/10	
2	FILER NAME RVOS Farm	Mutual Insurance Group Political Action C	ommittee		3	Filer ID (Ethics Commission 00069829	Filers)
4	Date 06/13/2025	<ul> <li>Full name of contributor</li></ul>	PAC (ID#:		7	Amount of Contribution (\$)	\$9.62
		TEMPLE, TX 76502					
8	Principal occu VICE PRESI	pation / Job title (See Instructions) DENT	9	Employer (See Instructions RVOS FARM MUTUAL		SURANCE COMPANY	
	Date 06/03/2025	Full name of contributor out-of-state JIMENEZ, ESTEBAN  Contributor address; City; State; Zip Code	PAC (ID#:			Amount of Contribution (\$)	\$2.00
		TEMPLE, TX 76502			<u></u>		
	•	pation / Job title (See Instructions) R RELATIONS SPECIALIST		Employer (See Instructions RVOS FARM MUTUAL		SURANCE COMPANY	
	Date 06/13/2025	Full name of contributor out-of-state  JIMENEZ, ESTEBAN  Contributor address; City; State; Zip Code	PAC (ID#:	)		Amount of Contribution (\$)	\$2.00
	Dein sin al a a su	TEMPLE, TX 76502		Fundament (Constructions	<u></u>		
		pation / Job title (See Instructions) R RELATIONS SPECIALIST		Employer (See Instructions RVOS FARM MUTUAL		SURANCE COMPANY	
	Date 06/03/2025	Full name of contributor out-of-state MCANAW, GREGORY  Contributor address; City; State; Zip Code  Temple, TX 76502	PAC (ID#:			Amount of Contribution (\$)	\$5.00
	Principal occu CLAIMS MA	pation / Job title (See Instructions)		Employer (See Instructions		SURANCE COMPANY	
	Date 06/13/2025	MCANAW, GREGORY				Amount of Contribution (\$)	\$5.00
	Principal occu CLAIMS MA	pation / Job title (See Instructions) NAGER		Employer (See Instructions RVOS FARM MUTUAL		SURANCE COMPANY	
			<b>,</b>				

	MONEI	ARY POLITICAL (	CONTRIBUTIO	NS	SCHEDULE	<b>A1</b>
	The Instruc	ction Guide explains how	to complete this fo	rm.	1 Total pages Schedule A1: Sch: 4/6 Rpt: 7/10	
2	FILER NAME	Mutual Insurance Group Polit	ical Action Committee		<b>3</b> Filer ID (Ethics Commission F 00069829	ilers)
_	Date	5 Full name of contributor		,	7 Amount of Contribution (\$)	
4	06/03/2025	QUINN, BARBARA  6 Contributor address; City; St	out-of-state PAC (ID#:		Amount of Contribution (\$)	\$10.00
		TEMPLE, TX 76502				
8		pation / Job title (See Instructions	)	9 Employer (See Instructions		
	CONTROLL	ER		RVOS FARM MUTUAL	INSURANCE COMPANY	
	Date 06/13/2025	Full name of contributor QUINN, BARBARA  Contributor address; City; St	out-of-state PAC (ID#: ate; Zip Code	)	Amount of Contribution (\$)	\$10.00
		TEMPLE, TX 76502				
	Principal occu	pation / Job title (See Instructions	)	Employer (See Instructions	5)	
	CONTROLL	ER		RVOS FARM MUTUAL	INSURANCE COMPANY	
	Date 06/03/2025	Full name of contributor SANDEFUR, AMBER Contributor address; City; St	out-of-state PAC (ID#: ate; Zip Code	)	Amount of Contribution (\$)	\$2.00
		TEMPLE, TX 76502				
	Principal occu	pation / Job title (See Instructions	)	Employer (See Instructions	s)	
	UNDERWRI	TER-AUTO		RVOS FARM MUTUAL	INSURANCE COMPANY	
	Date 06/13/2025	Full name of contributor SANDEFUR, AMBER Contributor address; City; St TEMPLE, TX 76502	out-of-state PAC (ID#:		Amount of Contribution (\$)	\$2.00
	Principal occu UNDERWRI	pation / Job title (See Instructions TER-AUTO	)	Employer (See Instructions RVOS FARM MUTUAL	s) INSURANCE COMPANY	
	Date 06/03/2025	Full name of contributor SHOCKLEY, WILEY  Contributor address; City; St  BELTON, TX 76513	out-of-state PAC (ID#:		Amount of Contribution (\$)	\$20.00
	Principal occu PRESIDENT	pation / Job title (See Instructions	)	Employer (See Instructions	I S) INSURANCE COMPANY	

M	ONET	ARY POLITICAL CONTRIBUTION	NC	IS		SCHEDULE	<b>■ A1</b>
Th	ne Instru	ction Guide explains how to complete this t	fori	m.	1	Total pages Schedule A1: Sch: 5/6 Rpt: 8/10	
	ER NAME	Mutual Insurance Group Political Action Committee	e		3	Filer ID (Ethics Commission 00069829	Filers)
4 Dat		5 Full name of contributor out-of-state PAC (ID#: SHOCKLEY, WILEY  6 Contributor address; City; State; Zip Code		)	7	Amount of Contribution (\$)	\$20.00
		BELTON, TX 76513	_				
	ncipal occu RESIDENT	pation / Job title (See Instructions)	9	Employer (See Instructions RVOS FARM MUTUAL	′	SURANCE COMPANY	
Dat 06/	te /03/2025	Full name of contributor out-of-state PAC (ID#:_SULAK, IRENE  Contributor address; City; State; Zip Code		)		Amount of Contribution (\$)	\$10.00
Deia		TEMPLE, TX 76501		Franks von (Coo Instructions	_		
		pation / Job title (See Instructions) IDENT OPERATIONS		Employer (See Instructions RVOS FARM MUTUAL		SURANCE COMPANY	
Dat 06/	te /13/2025	Full name of contributor out-of-state PAC (ID#:_SULAK, IRENE  Contributor address; City; State; Zip Code				Amount of Contribution (\$)	\$10.00
Drir	ncinal occu	TEMPLE, TX 76501  spation / Job title (See Instructions)	_	Employer (See Instructions	·/		
		IDENT OPERATIONS		RVOS FARM MUTUAL		SURANCE COMPANY	
Dat 06/	te /03/2025	Full name of contributor out-of-state PAC (ID#: TIRCUIT, SHEILA Contributor address; City; State; Zip Code		)		Amount of Contribution (\$)	\$3.00
	•	pation / Job title (See Instructions)  ATIVE ASSTMGA		Employer (See Instructions RVOS FARM MUTUAL		SURANCE COMPANY	
Dat		Full name of contributor out-of-state PAC (ID#: TIRCUIT, SHEILA Contributor address; City; State; Zip Code		)		Amount of Contribution (\$)	\$3.00
		ROGERS, TX 76569	_				
	•	pation / Job title (See Instructions) ATIVE ASSTMGA		Employer (See Instructions RVOS FARM MUTUAL		SURANCE COMPANY	
			•				

	MONEI	ARY POLITICAL (	CONTRIBUTION	15		SCHEDULE	A1
	The Instru	ction Guide explains how	to complete this for	m.	1	Total pages Schedule A1: Sch: 6/6 Rpt: 9/10	
2	FILER NAME RVOS Farm	Mutual Insurance Group Poli	tical Action Committee		3	Filer ID (Ethics Commission 00069829	Filers)
4	Date 06/03/2025	5 Full name of contributor Thoma, Ryan 6 Contributor address; City; S	out-of-state PAC (ID#:	)	7	Amount of Contribution (\$)	\$10.00
8	Principal occu	San Angelo, TX 76904 pation / Job title (See Instructions	s) 9	Employer (See Instructions	5)		
	Date 06/03/2025	Full name of contributor WON, BEN (Mr.) Contributor address; City; S	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$10.00
		BELTON, TX 76513  pation / Job title (See Instructions RT MANAGER	s)	Employer (See Instructions RVOS FARM MUTUAL		SURANCE COMPANY	
	Date 06/13/2025	Full name of contributor WON, BEN (Mr.)  Contributor address; City; S	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$10.00
		BELTON, TX 76513  Pation / Job title (See Instructions RT MANAGER	(5)	Employer (See Instructions RVOS FARM MUTUAL		SURANCE COMPANY	
	Date 06/03/2025	Full name of contributor WOOD, ANNEKA Contributor address; City; S	out-of-state PAC (ID#:		•	Amount of Contribution (\$)	\$2.00
	•	TEMPLE, TX 76502  pation / Job title (See Instructions ER UNDERWRITER	s)	Employer (See Instructions RVOS FARM MUTUAL		SURANCE COMPANY	
	Date 06/13/2025	Full name of contributor WOOD, ANNEKA Contributor address; City; S TEMPLE, TX 76502	out-of-state PAC (ID#:	)		Amount of Contribution (\$)	\$2.00
		pation / Job title (See Instructions ER UNDERWRITER	s)	Employer (See Instructions		SURANCE COMPANY	

	AL EXPENDITURES 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 RVOS Farm Mutual Insurance Group Political Ad	tion 3 Filer ID (Ethics Commission Filers) 00069829						
4 Date 06/11/2025	5 Payee name Wells Fargo Bank N.A.							
6 Amount (\$)  62.84  Expenditure from corporate funds	7 Payee Address; City; State; Zip 420 Montgomery Street San Francisco, CA 94104							
8 PURPOSE OF EXPENDITURE	(a) Category (See instructions for examples of acceptable categories) (I Accounting/Banking	Description (See instructions regarding type of information required.) Client Analysis Fee						