

FORM MPAC
COVER SHEET PG 1

GO TO PAGE 2

MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

FORM MPAC
COVER SHEET PG 2

12 COMMITTEE NAME Political Action Committee Of The Independent Insurance Agents Of Texas		13 Filer ID (Ethics Commission Filers) 00015593
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 Angelia orr State Representative
		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
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 91,735.04
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$ 0.00
	4. TOTAL POLITICAL EXPENDITURES	\$ 18,500.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$ 1,027,025.60
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. 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

MONTHLY FILING GPAC REPORT: PURPOSE

FORM **MPAC**
ADDENDUM

Page 3 of 63

12 COMMITTEE NAME Political Action Committee Of The Independent Insurance Agents Of Texas		13 Filer ID (Ethics Commission Filers) 00015593
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 Dennis Paul State Senator
		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.)	
	COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)
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.)		
COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)		1. Candidates (Identify by name or, if applicable, classify by party.)
	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.)	

MONTHLY FILING GPAC REPORT: PURPOSE

FORM **MPAC**
ADDENDUM

Page 4 of 63

12 COMMITTEE NAME Political Action Committee Of The Independent Insurance Agents Of Texas		13 Filer ID (Ethics Commission Filers) 00015593
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 Jared Patterson State Representative
		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.)	
	COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)
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.)		
COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)		1. Candidates (Identify by name or, if applicable, classify by party.)
	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.)	

MONTHLY FILING GPAC REPORT: PURPOSE

FORM **MPAC**
ADDENDUM

Page 5 of 63

12 COMMITTEE NAME Political Action Committee Of The Independent Insurance Agents Of Texas		13 Filer ID (Ethics Commission Filers) 00015593
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 Jeff Leach State Representative
		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.)	
	COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)	1. Candidates (Identify by name or, if applicable, classify by party.)
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.)		
COMMITTEE ACTIVITY (Attach lists on plain paper to complete this report if necessary.)		1. Candidates (Identify by name or, if applicable, classify by party.)
	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.)	

MONTHLY FILING GPAC REPORT: PURPOSE

FORM **MPAC**
ADDENDUM

Page 6 of 63

12 COMMITTEE NAME Political Action Committee Of The Independent Insurance Agents Of Texas		13 Filer ID (Ethics Commission Filers) 00015593
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 Matt Morgan State Representative
		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.)	
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 Ryan Guillen State Representative
		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.)	
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 Trey Wharton State Representative
		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.)	

SUBTOTALS - MPAC**FORM MPAC**
COVER SHEET PG 3
7 of 63

17 COMMITTEE NAME Political Action Committee Of The Independent Insurance Agents Of Texas		18 Filer ID (Ethics Commission Filers) 00015593
19 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 89,422.00
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	\$ 830.92
7.	<input checked="" type="checkbox"/> SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION	\$ 1,482.12
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	\$ 18,500.00
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: 1/49 Rpt: 8/63
2 FILER NAME Political Action Committee Of The Independent Insurance Agents Of Texas		3 Filer ID (Ethics Commission Filers) 00015593
4 Date 06/20/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Alsup, Heather <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75240-1381	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Insurance Agent		9 Employer (See Instructions) Swingle, Collins & Associates
Date 06/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Andrajack, Josh <hr/> Contributor address; City; State; Zip Code Wichita Falls, TX 76307-7513	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Arthur J. Gallagher & Co. - Wichita Falls
Date 06/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Arriaga, Marcella <hr/> Contributor address; City; State; Zip Code Houston, TX 77244-1587	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Pathfinder/LL&D Insurance Group, LLC
Date 06/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Atkins, Hannah <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79464-4790	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Heritage Risk Management, an Alera Group Agency
Date 06/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Austin, Wade <hr/> Contributor address; City; State; Zip Code Houston, TX 77057-5848	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Insurepointe of Texas, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/49 Rpt: 9/63
2 FILER NAME Political Action Committee Of The Independent Insurance Agents Of Texas		3 Filer ID (Ethics Commission Filers) 00015593
4 Date 06/06/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bailey, Chris 6 Contributor address; City; State; Zip Code Carrollton, TX 75007-1960	7 Amount of Contribution (\$) \$300.00
8 Principal occupation / Job title (See Instructions) Insurance Agent		9 Employer (See Instructions) Hotchkiss Insurance Agency, LLC
Date 06/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Baker, Lessie Contributor address; City; State; Zip Code Dallas, TX 75240-1381	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Swingle, Collins & Associates
Date 06/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barksdale, Jason Contributor address; City; State; Zip Code Carrollton, TX 75007-1960	Amount of Contribution (\$) \$125.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Hotchkiss Insurance Agency, LLC
Date 06/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bauer, Mark Contributor address; City; State; Zip Code Houston, TX 77040-3119	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Brady, Chapman, Holland & Associates, Inc.
Date 06/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bayless, William David Contributor address; City; State; Zip Code McKinney, TX 75070-8146	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) A. D. Alford Insurance Agency

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/49 Rpt: 10/63
2 FILER NAME Political Action Committee Of The Independent Insurance Agents Of Texas		3 Filer ID (Ethics Commission Filers) 00015593
4 Date 06/16/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Behney, Patricia 6 Contributor address; City; State; Zip Code Houston, TX 77040-3119	7 Amount of Contribution (\$) \$40.00
8 Principal occupation / Job title (See Instructions) Insurance Agent		9 Employer (See Instructions) Brady, Chapman, Holland & Associates, Inc.
Date 06/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bentley, Jeremiah Contributor address; City; State; Zip Code Austin, TX 78750-1944	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Texas Mutual Insurance Co.
Date 06/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bishop, Charles Contributor address; City; State; Zip Code Carrollton, TX 75007-1960	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Hotchkiss Insurance Agency, LLC
Date 06/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blackstock, Brian Contributor address; City; State; Zip Code Houston, TX 77040-6014	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Hotchkiss Insurance Agency, LLC
Date 06/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blair, Rocky Contributor address; City; State; Zip Code Houston, TX 77040-3119	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Brady, Chapman, Holland & Associates, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/49 Rpt: 11/63
2 FILER NAME Political Action Committee Of The Independent Insurance Agents Of Texas		3 Filer ID (Ethics Commission Filers) 00015593
4 Date 06/16/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Blank, Holly <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77040-3119	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Insurance Agent		9 Employer (See Instructions) Brady, Chapman, Holland & Associates, Inc.
Date 06/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bowler, Shirley <hr/> Contributor address; City; State; Zip Code Gretna, LA 70054-1089	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Texas Surplus Line Reporter
Date 06/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Boyett, Meghan <hr/> Contributor address; City; State; Zip Code Dallas, TX 75240-1381	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Swingle, Collins & Associates
Date 06/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bradford, Theresa <hr/> Contributor address; City; State; Zip Code Houston, TX 77040-6014	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Hotchkiss Insurance Agency, LLC
Date 06/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brady, Jeffrey <hr/> Contributor address; City; State; Zip Code Houston, TX 77040-3119	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Brady, Chapman, Holland & Associates, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/49 Rpt: 12/63
2 FILER NAME Political Action Committee Of The Independent Insurance Agents Of Texas		3 Filer ID (Ethics Commission Filers) 00015593
4 Date 06/16/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Brady, Tim 6 Contributor address; City; State; Zip Code Houston, TX 77040-3119	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) Insurance Agent		9 Employer (See Instructions) Brady, Chapman, Holland & Associates, Inc.
Date 06/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bridges, Mark Contributor address; City; State; Zip Code Amarillo, TX 79101-1406	Amount of Contribution (\$) \$2,501.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) INSURICA
Date 06/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Britt, Garry Contributor address; City; State; Zip Code Boerne, TX 78006-8926	Amount of Contribution (\$) \$30.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) CNA Insurance
Date 06/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Broz, Todd Contributor address; City; State; Zip Code Austin, TX 78768-4487	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Advantage Team		Employer (See Instructions) Independent Insurance Agents of Texas
Date 06/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bump, Patricia Contributor address; City; State; Zip Code Dallas, TX 75240-1381	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Swingle, Collins & Associates

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/49 Rpt: 13/63
2 FILER NAME Political Action Committee Of The Independent Insurance Agents Of Texas		3 Filer ID (Ethics Commission Filers) 00015593
4 Date 06/04/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Burton, Logan <hr/> 6 Contributor address; City; State; Zip Code Carrollton, TX 75007-1960	7 Amount of Contribution (\$) \$125.00
8 Principal occupation / Job title (See Instructions) Insurance Agent		9 Employer (See Instructions) Hotchkiss Insurance Agency, LLC
Date 06/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bush, Judy <hr/> Contributor address; City; State; Zip Code Houston, TX 77244-1587	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Pathfinder/LL&D Insurance Group, LLC
Date 06/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Bustillos, David <hr/> Contributor address; City; State; Zip Code Houston, TX 77040-6014	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Hotchkiss Insurance Agency, LLC
Date 06/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Buteyn, John <hr/> Contributor address; City; State; Zip Code Richardson, TX 75080	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Patterson & Associates Insurance Agency
Date 06/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) CHang, Derek <hr/> Contributor address; City; State; Zip Code Dallas, TX 75240-1381	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Swingle, Collins & Associates

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/49 Rpt: 14/63
2 FILER NAME Political Action Committee Of The Independent Insurance Agents Of Texas		3 Filer ID (Ethics Commission Filers) 00015593
4 Date 06/16/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Campbell, Cindy <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77040-3119	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Insurance Agent		9 Employer (See Instructions) Brady, Chapman, Holland & Associates, Inc.
Date 06/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cantavella, Alicia <hr/> Contributor address; City; State; Zip Code Houston, TX 77040-3119	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Brady, Chapman, Holland & Associates, Inc.
Date 06/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carey, Michelle <hr/> Contributor address; City; State; Zip Code Houston, TX 77040-6014	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Hotchkiss Insurance Agency, LLC
Date 06/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carlson, Crystal <hr/> Contributor address; City; State; Zip Code Dallas, TX 75240-1381	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Swingle, Collins & Associates
Date 06/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carlton, Farrah <hr/> Contributor address; City; State; Zip Code Carrollton, TX 75007-1960	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Hotchkiss Insurance Agency, LLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/49 Rpt: 15/63
2 FILER NAME Political Action Committee Of The Independent Insurance Agents Of Texas		3 Filer ID (Ethics Commission Filers) 00015593
4 Date 06/17/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carneal, Lisa <hr/> 6 Contributor address; City; State; Zip Code Carrollton, TX 75007-1960	7 Amount of Contribution (\$) \$75.00
8 Principal occupation / Job title (See Instructions) Insurance Agent		9 Employer (See Instructions) Hotchkiss Insurance Agency, LLC
Date 06/15/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carter, Brent <hr/> Contributor address; City; State; Zip Code Rockport, TX 78381-1478	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) GSM Insurors
Date 06/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Carter, Stuart <hr/> Contributor address; City; State; Zip Code Dallas, TX 75240-1381	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Swingle, Collins & Associates
Date 06/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Casey, Chantelle <hr/> Contributor address; City; State; Zip Code Houston, TX 77040-6014	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Hotchkiss Insurance Agency, LLC
Date 06/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Chapman, Samantha <hr/> Contributor address; City; State; Zip Code Houston, TX 77040-6014	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Hotchkiss Insurance Agency, LLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/49 Rpt: 16/63
2 FILER NAME Political Action Committee Of The Independent Insurance Agents Of Texas		3 Filer ID (Ethics Commission Filers) 00015593
4 Date 06/04/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Choate, Carl 6 Contributor address; City; State; Zip Code Carrollton, TX 75007-1960	7 Amount of Contribution (\$) \$300.00
8 Principal occupation / Job title (See Instructions) Insurance Agent		9 Employer (See Instructions) Hotchkiss Insurance Agency, LLC
Date 06/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clark, Daphne Contributor address; City; State; Zip Code Houston, TX 77040-6014	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Hotchkiss Insurance Agency, LLC
Date 06/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Comiskey, Charles Contributor address; City; State; Zip Code Houston, TX 77040-3119	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Brady, Chapman, Holland & Associates, Inc.
Date 06/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Comiskey, Kevin Contributor address; City; State; Zip Code Houston, TX 77040-3119	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Brady, Chapman, Holland & Associates, Inc.
Date 06/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cosio, Manuel Contributor address; City; State; Zip Code Carrollton, TX 75007-1960	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Hotchkiss Insurance Agency, LLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/49 Rpt: 17/63
2 FILER NAME Political Action Committee Of The Independent Insurance Agents Of Texas		3 Filer ID (Ethics Commission Filers) 00015593
4 Date 06/16/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cote, Steve 6 Contributor address; City; State; Zip Code Houston, TX 77040-3119	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) Insurance Agent		9 Employer (See Instructions) Brady, Chapman, Holland & Associates, Inc.
Date 06/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crain JR, Richard Contributor address; City; State; Zip Code Dallas, TX 75240-1381	Amount of Contribution (\$) \$400.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Swingle, Collins & Associates
Date 06/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Creel, Jay Contributor address; City; State; Zip Code Dallas, TX 75240-1381	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Swingle, Collins & Associates
Date 06/06/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crocker, William Contributor address; City; State; Zip Code Austin, TX 78746-3314	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Alliant Insurance Services
Date 06/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crombie, DeAnna Contributor address; City; State; Zip Code Dallas, TX 75240-1381	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Swingle, Collins & Associates

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 11/49 Rpt: 18/63
2 FILER NAME Political Action Committee Of The Independent Insurance Agents Of Texas		3 Filer ID (Ethics Commission Filers) 00015593
4 Date 06/04/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cruzan, Kenneth 6 Contributor address; City; State; Zip Code Rockport, TX 78381-1478	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Insurance Agent		9 Employer (See Instructions) GSM Insurors
Date 06/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Darnell, Robert Contributor address; City; State; Zip Code Houston, TX 77098-2039	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Dean & Draper Insurance Agency, LP
Date 06/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) DeCet, Lysie Contributor address; City; State; Zip Code Dallas, TX 75240-1381	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Swingle, Collins & Associates
Date 06/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dean, Kyle Contributor address; City; State; Zip Code Houston, TX 77098-2039	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Dean & Draper Insurance Agency, LP
Date 06/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dearing, Riley Contributor address; City; State; Zip Code Lubbock, TX 79424-2335	Amount of Contribution (\$) \$300.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Hotchkiss Insurance Agency, LLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 12/49 Rpt: 19/63
2 FILER NAME Political Action Committee Of The Independent Insurance Agents Of Texas		3 Filer ID (Ethics Commission Filers) 00015593
4 Date 06/16/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Depolis, Kathleen <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77040-3119	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Insurance Agent		9 Employer (See Instructions) Brady, Chapman, Holland & Associates, Inc.
Date 06/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Descant, Dennis <hr/> Contributor address; City; State; Zip Code Houston, TX 77040-3119	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Brady, Chapman, Holland & Associates, Inc.
Date 06/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dew, Stephanie <hr/> Contributor address; City; State; Zip Code Cedar Park, TX 78613-2681	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) WinStar Insurance Group LLC
Date 06/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dies, Tommy <hr/> Contributor address; City; State; Zip Code Graham, TX 76450-0839	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Bryan Insurance Agency, Ltd
Date 06/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Draeken, Mike <hr/> Contributor address; City; State; Zip Code Austin, TX 78759	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Lewis-Watkins-Farmer Agency, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 13/49 Rpt: 20/63
2 FILER NAME Political Action Committee Of The Independent Insurance Agents Of Texas		3 Filer ID (Ethics Commission Filers) 00015593
4 Date 06/19/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dreyer, Kirk <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75240-1381	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) Insurance Agent		9 Employer (See Instructions) Swingle, Collins & Associates
Date 06/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Elliott, Leslie <hr/> Contributor address; City; State; Zip Code Dallas, TX 75240-1381	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Swingle, Collins & Associates
Date 06/21/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Escamilla, Ruth <hr/> Contributor address; City; State; Zip Code Houston, TX 77027-9128	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Cadence Insurance
Date 06/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fendley, Clifton <hr/> Contributor address; City; State; Zip Code Paris, TX 75461-0459	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Pierson & Fendley Insurance Agency, LLC
Date 06/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fernau, Mari <hr/> Contributor address; City; State; Zip Code Houston, TX 77244-1587	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Pathfinder/LL&D Insurance Group, LLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 14/49 Rpt: 21/63
2 FILER NAME Political Action Committee Of The Independent Insurance Agents Of Texas		3 Filer ID (Ethics Commission Filers) 00015593
4 Date 06/04/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ferri, Hannah <hr/> 6 Contributor address; City; State; Zip Code Rockport, TX 78381-1478	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Insurance Agent		9 Employer (See Instructions) GSM Insurors
Date 06/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fields, Joshua <hr/> Contributor address; City; State; Zip Code Harlingen, TX 78551-1830	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) HUB International Insurance Services
Date 06/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fondren, Chase <hr/> Contributor address; City; State; Zip Code Houston, TX 77040-6014	Amount of Contribution (\$) \$300.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Hotchkiss Insurance Agency, LLC
Date 06/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Frasier, Amiel <hr/> Contributor address; City; State; Zip Code Round Mountain, TX 78663-0001	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Moursund Insurance Agency
Date 06/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fusilier, Virginia <hr/> Contributor address; City; State; Zip Code Houston, TX 77040-3119	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Brady, Chapman, Holland & Associates, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 15/49 Rpt: 22/63
2 FILER NAME Political Action Committee Of The Independent Insurance Agents Of Texas		3 Filer ID (Ethics Commission Filers) 00015593
4 Date 06/18/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gardner-Elkins, Jessica <hr/> 6 Contributor address; City; State; Zip Code Junction, TX 76849-0207	7 Amount of Contribution (\$) \$1,500.00
8 Principal occupation / Job title (See Instructions) Insurance Agent		9 Employer (See Instructions) R. D. Kothmann Insurance Agency
Date 06/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Garrett, Harlan <hr/> Contributor address; City; State; Zip Code McAllen, TX 78502-4288	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Relation Insurance Services Inc
Date 06/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Geary, Michele <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78205-3603	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Hotchkiss Insurance Agency, LLC
Date 06/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gerland, Kelly <hr/> Contributor address; City; State; Zip Code Houston, TX 77040-3119	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Brady, Chapman, Holland & Associates, Inc.
Date 06/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gillikin, Gill <hr/> Contributor address; City; State; Zip Code Houston, TX 77040-6014	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Hotchkiss Insurance Agency, LLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 16/49 Rpt: 23/63
2 FILER NAME Political Action Committee Of The Independent Insurance Agents Of Texas		3 Filer ID (Ethics Commission Filers) 00015593
4 Date 06/17/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gingrich, Zachary <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77244-1587	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Insurance Agent		9 Employer (See Instructions) Pathfinder/LL&D Insurance Group, LLC
Date 06/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Glanville, Daniel <hr/> Contributor address; City; State; Zip Code Sunnyvale, TX 75182-1002	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Hotchkiss Insurance Agency, LLC
Date 06/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gomez, Connie <hr/> Contributor address; City; State; Zip Code Austin, TX 78768-4487	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) E&O team		Employer (See Instructions) Independent Insurance Agents of Texas
Date 06/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Goss, Brenda <hr/> Contributor address; City; State; Zip Code Dallas, TX 75205-1140	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Swingle, Collins & Associates
Date 06/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Gray, Kristie <hr/> Contributor address; City; State; Zip Code Houston, TX 77040-3119	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Brady, Chapman, Holland & Associates, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 17/49 Rpt: 24/63
2 FILER NAME Political Action Committee Of The Independent Insurance Agents Of Texas		3 Filer ID (Ethics Commission Filers) 00015593
4 Date 06/13/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Griffin, Will <hr/> 6 Contributor address; City; State; Zip Code Rockport, TX 78381-1478	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Insurance Agent		9 Employer (See Instructions) GSM Insurors
Date 06/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Grogan, Raven <hr/> Contributor address; City; State; Zip Code Rockport, TX 78381-1478	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) GSM Insurors-Victoria
Date 06/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hall, Jason <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78257	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Pathfinder/LL&D Insurance Group, LLC
Date 06/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hamilton, Ben <hr/> Contributor address; City; State; Zip Code Carrollton, TX 75007-1960	Amount of Contribution (\$) \$125.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Hotchkiss Insurance Agency, LLC
Date 06/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hamilton, Christopher <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78231-1252	Amount of Contribution (\$) \$300.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Hotchkiss Insurance Agency, LLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 18/49 Rpt: 25/63
2 FILER NAME Political Action Committee Of The Independent Insurance Agents Of Texas		3 Filer ID (Ethics Commission Filers) 00015593
4 Date 06/16/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hamilton, Laurie <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77040-3119	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Insurance Agent		9 Employer (See Instructions) Brady, Chapman, Holland & Associates, Inc.
Date 06/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hanratty, Ryan <hr/> Contributor address; City; State; Zip Code Dallas, TX 75240-1381	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Swingle, Collins & Associates
Date 06/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hardy, Blake <hr/> Contributor address; City; State; Zip Code Dallas, TX 75240-1381	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Swingle, Collins & Associates
Date 06/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harper, Karla <hr/> Contributor address; City; State; Zip Code Carrollton, TX 75007-1960	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Hotchkiss Insurance Agency, LLC
Date 06/01/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harris, Houston <hr/> Contributor address; City; State; Zip Code Dallas, TX 75240-1381	Amount of Contribution (\$) \$850.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Swingle, Collins & Associates

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 19/49 Rpt: 26/63
2 FILER NAME Political Action Committee Of The Independent Insurance Agents Of Texas		3 Filer ID (Ethics Commission Filers) 00015593
4 Date 06/02/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harrison, Beverly <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75240-1381	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Insurance Agent		9 Employer (See Instructions) Swingle, Collins & Associates
Date 06/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hatfield, Reed <hr/> Contributor address; City; State; Zip Code Dallas, TX 75225-1745	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Patterson & Associates Insurance Agency
Date 06/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Henry, Ryan <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79410-1201	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Alan Henry Insurance Agency, Inc.
Date 06/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hernandez, Haleigh <hr/> Contributor address; City; State; Zip Code Rockport, TX 78381-1478	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) GSM Insurors
Date 06/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Higbee, Kevin <hr/> Contributor address; City; State; Zip Code Cherry Hill, NJ 08002-2783	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) American Collectors Insurance

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 20/49 Rpt: 27/63
2 FILER NAME Political Action Committee Of The Independent Insurance Agents Of Texas		3 Filer ID (Ethics Commission Filers) 00015593
4 Date 06/16/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hodge, Angela <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77040-3119	7 Amount of Contribution (\$) \$20.00
8 Principal occupation / Job title (See Instructions) Insurance Agent		9 Employer (See Instructions) Brady, Chapman, Holland & Associates, Inc.
Date 06/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hodges, Ashley <hr/> Contributor address; City; State; Zip Code Carrollton, TX 75007-1960	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Hotchkiss Insurance Agency, LLC
Date 06/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hoover, Christopher <hr/> Contributor address; City; State; Zip Code Dallas, TX 75220-5094	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Swingle, Collins & Associates
Date 06/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hotchkiss, Douglas <hr/> Contributor address; City; State; Zip Code Carrollton, TX 75007-1960	Amount of Contribution (\$) \$3,000.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Hotchkiss Insurance Agency, LLC
Date 06/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hotchkiss, Greg <hr/> Contributor address; City; State; Zip Code Carrollton, TX 75007-1960	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Hotchkiss Insurance Agency, LLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 21/49 Rpt: 28/63
2 FILER NAME Political Action Committee Of The Independent Insurance Agents Of Texas		3 Filer ID (Ethics Commission Filers) 00015593
4 Date 06/03/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hotchkiss, Greg <hr/> 6 Contributor address; City; State; Zip Code Carrollton, TX 75007-1960	7 Amount of Contribution (\$) \$1,500.00
8 Principal occupation / Job title (See Instructions) Insurance Agent		9 Employer (See Instructions) Hotchkiss Insurance Agency, LLC
Date 06/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hotchkiss, Ken <hr/> Contributor address; City; State; Zip Code Houston, TX 77040-6014	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Hotchkiss Insurance Agency, LLC
Date 06/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hotchkiss, Mike <hr/> Contributor address; City; State; Zip Code Houston, TX 77040-6014	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Hotchkiss Insurance Agency, LLC
Date 06/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Howell, Traci <hr/> Contributor address; City; State; Zip Code Houston, TX 77040-3119	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Brady, Chapman, Holland & Associates, Inc.
Date 06/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hunt, Sharin <hr/> Contributor address; City; State; Zip Code Houston, TX 77040-6014	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Hotchkiss Insurance Agency, LLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 22/49 Rpt: 29/63
2 FILER NAME Political Action Committee Of The Independent Insurance Agents Of Texas		3 Filer ID (Ethics Commission Filers) 00015593
4 Date 06/16/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Iguess, Leigh <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77040-3119	7 Amount of Contribution (\$) \$300.00
8 Principal occupation / Job title (See Instructions) Insurance Agent		9 Employer (See Instructions) Brady, Chapman, Holland & Associates, Inc.
Date 06/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Jackson, Stoney <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79424-2828	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Stoney Jackson Insurance Services Inc.
Date 06/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Debra <hr/> Contributor address; City; State; Zip Code Mathis, TX 78368-3404	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Keetch & Associates Insurance
Date 06/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Johnson, Debra <hr/> Contributor address; City; State; Zip Code Houston, TX 77018-5242	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Douglas B. Johnson Insurance Agency
Date 06/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Justice, Tye <hr/> Contributor address; City; State; Zip Code Houston, TX 77040-6014	Amount of Contribution (\$) \$300.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Hotchkiss Insurance Agency, LLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 23/49 Rpt: 30/63
2 FILER NAME Political Action Committee Of The Independent Insurance Agents Of Texas		3 Filer ID (Ethics Commission Filers) 00015593
4 Date 06/17/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kapelka, Neil <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78768-4487	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Insurance Agent		9 Employer (See Instructions) Independent Insurance Agents of Texas
Date 06/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Karkowsky, Frank <hr/> Contributor address; City; State; Zip Code Houston, TX 77007-8265	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Pasadena Insurance Agency, Inc
Date 06/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Keene, Amy <hr/> Contributor address; City; State; Zip Code Houston, TX 77040-3119	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Brady, Chapman, Holland & Associates, Inc.
Date 06/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kelley, Jennifer <hr/> Contributor address; City; State; Zip Code Carrollton, TX 75007-1960	Amount of Contribution (\$) \$125.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Hotchkiss Insurance Agency, LLC
Date 06/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kimmel, Kevin <hr/> Contributor address; City; State; Zip Code Houston, TX 77040-3119	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Brady, Chapman, Holland & Associates, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 24/49 Rpt: 31/63
2 FILER NAME Political Action Committee Of The Independent Insurance Agents Of Texas		3 Filer ID (Ethics Commission Filers) 00015593
4 Date 06/16/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kimmel, Stacey <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77040-3119	7 Amount of Contribution (\$) \$75.00
8 Principal occupation / Job title (See Instructions) Insurance Agent		9 Employer (See Instructions) Brady, Chapman, Holland & Associates, Inc.
Date 06/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kinard, Cynthia <hr/> Contributor address; City; State; Zip Code Houston, TX 77040-3119	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Brady, Chapman, Holland & Associates, Inc.
Date 06/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kincaid, Melissa <hr/> Contributor address; City; State; Zip Code Rockport, TX 78381-1478	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) GSM Insurors
Date 06/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Knecht, Jason <hr/> Contributor address; City; State; Zip Code Houston, TX 77040-4018	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Carroll Insurance Agency, Ltd.
Date 06/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kopp, Jennifer <hr/> Contributor address; City; State; Zip Code Rockport, TX 78381-1478	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) GSM Insurors

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 25/49 Rpt: 32/63
2 FILER NAME Political Action Committee Of The Independent Insurance Agents Of Texas		3 Filer ID (Ethics Commission Filers) 00015593
4 Date 05/29/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Korman, Lyn 6 Contributor address; City; State; Zip Code Richardson, TX 75080-2784	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Insurance Agent		9 Employer (See Instructions) Patterson & Associates Insurance Agency
Date 06/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Kurtz, Richard Contributor address; City; State; Zip Code Houston, TX 77244-1587	Amount of Contribution (\$) \$2,000.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Pathfinder/LL&D Insurance Group, LLC
Date 06/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Laing, Russell Contributor address; City; State; Zip Code Houston, TX 77244-1587	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Pathfinder/LL&D Insurance Group, LLC
Date 06/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Larson, Mark Contributor address; City; State; Zip Code Houston, TX 77040-3119	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Brady, Chapman, Holland & Associates, Inc.
Date 06/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lindsey, Gary Contributor address; City; State; Zip Code Carrollton, TX 75007-1960	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Hotchkiss Insurance Agency, LLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 26/49 Rpt: 33/63
2 FILER NAME Political Action Committee Of The Independent Insurance Agents Of Texas		3 Filer ID (Ethics Commission Filers) 00015593
4 Date 06/16/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) LoRizzo, Tony <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77040-3119	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Insurance Agent		9 Employer (See Instructions) Brady, Chapman, Holland & Associates, Inc.
Date 05/27/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Locke, Sherri <hr/> Contributor address; City; State; Zip Code Richardson, TX 75080-2784	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Patterson & Associates Insurance Agency
Date 06/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Loggins, Ivette <hr/> Contributor address; City; State; Zip Code Houston, TX 77040-3119	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Brady, Chapman, Holland & Associates, Inc.
Date 06/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Long, Mary Ann <hr/> Contributor address; City; State; Zip Code Rockport, TX 78381-1478	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) GSM Insurors
Date 06/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Longo, Griffin <hr/> Contributor address; City; State; Zip Code Carrollton, TX 75007-1960	Amount of Contribution (\$) \$125.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Hotchkiss Insurance Agency, LLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 27/49 Rpt: 34/63
2 FILER NAME Political Action Committee Of The Independent Insurance Agents Of Texas		3 Filer ID (Ethics Commission Filers) 00015593
4 Date 06/02/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lough, Sean <hr/> 6 Contributor address; City; State; Zip Code Carrollton, TX 75007-1960	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Insurance Agent		9 Employer (See Instructions) Hotchkiss Insurance Agency, LLC
Date 06/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Luke, Ryan <hr/> Contributor address; City; State; Zip Code Austin, TX 78768-4487	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Independent Insurance Agents of Texas
Date 06/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lynch, Meredith <hr/> Contributor address; City; State; Zip Code Houston, TX 77036-3392	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) VW Insurance Holdings, LLC
Date 06/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Maier, Sabriana <hr/> Contributor address; City; State; Zip Code Houston, TX 77040-6014	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Hotchkiss Insurance Agency, LLC
Date 06/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) March, Lauren <hr/> Contributor address; City; State; Zip Code Dallas, TX 75240-1381	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Swingle, Collins & Associates

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 28/49 Rpt: 35/63
2 FILER NAME Political Action Committee Of The Independent Insurance Agents Of Texas		3 Filer ID (Ethics Commission Filers) 00015593
4 Date 06/04/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Marquis, Kimberly <hr/> 6 Contributor address; City; State; Zip Code Rockport, TX 78381-1478	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Insurance Agent		9 Employer (See Instructions) GSM Insurors - Disc Advantage
Date 06/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martinez, Bianca <hr/> Contributor address; City; State; Zip Code Dallas, TX 75240-1381	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Swingle, Collins & Associates
Date 06/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Martnez, Carlos <hr/> Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) IIAT
Date 06/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McCaleb, John <hr/> Contributor address; City; State; Zip Code Mesquite, TX 75150-1497	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Ironpeak
Date 06/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McDavid, Blake <hr/> Contributor address; City; State; Zip Code Rockport, TX 78381-1478	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) GSM Insurors

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 29/49 Rpt: 36/63
2 FILER NAME Political Action Committee Of The Independent Insurance Agents Of Texas		3 Filer ID (Ethics Commission Filers) 00015593
4 Date 06/18/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McDavid, John <hr/> 6 Contributor address; City; State; Zip Code Rockport, TX 78381-1478	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) Insurance Agent		9 Employer (See Instructions) GSM Insurors
Date 06/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McDavid, Patrick <hr/> Contributor address; City; State; Zip Code Rockport, TX 78381-1478	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) GSM Insurors
Date 06/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McDavid, Patrick <hr/> Contributor address; City; State; Zip Code Rockport, TX 78381-1478	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) GSM Insurors
Date 06/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McDavid, Travis <hr/> Contributor address; City; State; Zip Code Rockport, TX 78381-1478	Amount of Contribution (\$) \$1,500.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) GSM Insurors
Date 06/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McDavid, Travis <hr/> Contributor address; City; State; Zip Code Rockport, TX 78381-1478	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) GSM Insurors

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 30/49 Rpt: 37/63
2 FILER NAME Political Action Committee Of The Independent Insurance Agents Of Texas		3 Filer ID (Ethics Commission Filers) 00015593
4 Date 06/16/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McEntire, Mason 6 Contributor address; City; State; Zip Code Houston, TX 77040-3119	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Insurance Agent		9 Employer (See Instructions) Brady, Chapman, Holland & Associates, Inc.
Date 06/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McKenzie, Gilbert Contributor address; City; State; Zip Code Houston, TX 77040-6014	Amount of Contribution (\$) \$75.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Hotchkiss Insurance Agency, LLC
Date 06/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McKenzie, Lauren Contributor address; City; State; Zip Code Dallas, TX 75240-1381	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Swingle, Collins & Associates
Date 06/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McPartland, Shannon Contributor address; City; State; Zip Code Houston, TX 77040-6014	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Hotchkiss Insurance Agency, LLC
Date 06/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) McQuarter III, Lonnie Contributor address; City; State; Zip Code Houston, TX 77040-3119	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Brady, Chapman, Holland & Associates, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 31/49 Rpt: 38/63
2 FILER NAME Political Action Committee Of The Independent Insurance Agents Of Texas		3 Filer ID (Ethics Commission Filers) 00015593
4 Date 06/16/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mechura, Julie <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77040-3119	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Insurance Agent		9 Employer (See Instructions) Brady, Chapman, Holland & Associates, Inc.
Date 06/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Millican, Christina <hr/> Contributor address; City; State; Zip Code Rockport, TX 78381-1478	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) GSM Insurors
Date 06/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Montgomery, Brandi <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79464-4790	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Heritage Risk Management, an Alera Group Agency
Date 06/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moore, Amy <hr/> Contributor address; City; State; Zip Code Dallas, TX 75240-1381	Amount of Contribution (\$) \$150.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Swingle, Collins & Associates
Date 06/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Mueller, Carrie <hr/> Contributor address; City; State; Zip Code Houston, TX 77040-6014	Amount of Contribution (\$) \$125.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Hotchkiss Insurance Agency, LLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 32/49 Rpt: 39/63
2 FILER NAME Political Action Committee Of The Independent Insurance Agents Of Texas		3 Filer ID (Ethics Commission Filers) 00015593
4 Date 06/24/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nelson, Casey 6 Contributor address; City; State; Zip Code Austin, TX 78701	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Insurance Agent		9 Employer (See Instructions) Catalyit
Date 06/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nelson, Linden Contributor address; City; State; Zip Code Dallas, TX 75240-1381	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Swingle, Collins & Associates
Date 06/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Niemeyer, Kathy Contributor address; City; State; Zip Code Houston, TX 77040-6014	Amount of Contribution (\$) \$125.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Hotchkiss Insurance Agency, LLC
Date 06/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nitsche, Robert Contributor address; City; State; Zip Code Giddings, TX 78942-3201	Amount of Contribution (\$) \$1,500.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) The Nitsche Group
Date 06/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Nunez, GG Contributor address; City; State; Zip Code Corpus Christi, TX 78411-4771	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) GN Insurance Consultants LLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 33/49 Rpt: 40/63
2 FILER NAME Political Action Committee Of The Independent Insurance Agents Of Texas		3 Filer ID (Ethics Commission Filers) 00015593
4 Date 06/16/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) O'Sullivan, John 6 Contributor address; City; State; Zip Code Houston, TX 77040-3119	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Insurance Agent		9 Employer (See Instructions) Brady, Chapman, Holland & Associates, Inc.
Date 06/05/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ormond, Ross Contributor address; City; State; Zip Code San Antonio, TX 78209-5330	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Offenhauser & Company
Date 06/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ormond, Ross Contributor address; City; State; Zip Code San Antonio, TX 78209-5330	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Offenhauser & Company
Date 06/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pacheco, Jamie Contributor address; City; State; Zip Code Rockport, TX 77902-2447	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) GSM Insurors-Victoria
Date 06/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parr, Clark Contributor address; City; State; Zip Code Dallas, TX 75240-1381	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Swingle, Collins & Associates

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 34/49 Rpt: 41/63
2 FILER NAME Political Action Committee Of The Independent Insurance Agents Of Texas		3 Filer ID (Ethics Commission Filers) 00015593
4 Date 06/05/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Parr, Greg <hr/> 6 Contributor address; City; State; Zip Code McKinney, TX 75072-7763	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Insurance Agent		9 Employer (See Instructions) The Hanover Insurance Group
Date 06/18/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pate, Samantha <hr/> Contributor address; City; State; Zip Code Dallas, TX 75240-1381	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Swingle, Collins & Associates
Date 05/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Patterson, Ben <hr/> Contributor address; City; State; Zip Code Richardson, TX 75080-2784	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Patterson & Associates Insurance Agency
Date 05/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Patterson, Ben <hr/> Contributor address; City; State; Zip Code Richardson, TX 75080-2784	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Patterson & Associates Insurance Agency
Date 06/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Patterson, Ronald <hr/> Contributor address; City; State; Zip Code Richardson, TX 75080	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Patterson & Associates Insurance Agency

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 35/49 Rpt: 42/63
2 FILER NAME Political Action Committee Of The Independent Insurance Agents Of Texas		3 Filer ID (Ethics Commission Filers) 00015593
4 Date 06/13/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pearson, Sandra <hr/> 6 Contributor address; City; State; Zip Code Rockport, TX 78381-1478	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Insurance Agent		9 Employer (See Instructions) GSM Insurors
Date 06/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Perot, Victor <hr/> Contributor address; City; State; Zip Code Jefferson, TX 75657-0625	Amount of Contribution (\$) \$350.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Brownrigg Insurance Agency, Inc.
Date 06/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peters, Marit <hr/> Contributor address; City; State; Zip Code Austin, TX 78768-4487	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Independent Insurance Agents of Texas
Date 06/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Peterson, Scott <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79464-4790	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Heritage Risk Management, an Alera Group Agency
Date 06/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pitts, Jared <hr/> Contributor address; City; State; Zip Code Galveston, TX 77552-6767	Amount of Contribution (\$) \$2,000.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Galveston Insurance Associates

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 36/49 Rpt: 43/63
2 FILER NAME Political Action Committee Of The Independent Insurance Agents Of Texas		3 Filer ID (Ethics Commission Filers) 00015593
4 Date 06/02/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Potts IV, John <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75240-1381	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Insurance Agent		9 Employer (See Instructions) Swingle, Collins & Associates
Date 06/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Puente, Angelica <hr/> Contributor address; City; State; Zip Code Richardson, TX 75080-2784	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Patterson & Associates Insurance Agency
Date 06/19/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Quintanilla, Phillip <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78258-4074	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Walthall, Sachse & Pipes, Inc.
Date 06/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ramey, Lauren <hr/> Contributor address; City; State; Zip Code Rockport, TX 78381-1478	Amount of Contribution (\$) \$5.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) GSM Insurors - Disc Advantage
Date 06/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ramsey, Ben <hr/> Contributor address; City; State; Zip Code Carrollton, TX 75007-1960	Amount of Contribution (\$) \$300.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Hotchkiss Insurance Agency, LLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 37/49 Rpt: 44/63
2 FILER NAME Political Action Committee Of The Independent Insurance Agents Of Texas		3 Filer ID (Ethics Commission Filers) 00015593
4 Date 06/11/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Raper, Scott <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78761-5427	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Insurance Agent		9 Employer (See Instructions) Central Insurance Agency, Inc.
Date 06/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ray, Mark <hr/> Contributor address; City; State; Zip Code Corpus Christi, TX 78401-0362	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Higginbotham Insurance Agency
Date 06/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ray, Mark <hr/> Contributor address; City; State; Zip Code Corpus Christi, TX 78401-0362	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Higginbotham Insurance Agency
Date 05/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ressman, Sheri <hr/> Contributor address; City; State; Zip Code Richardson, TX 75080-2784	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Patterson & Associates Insurance Agency
Date 06/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Revel, Cody <hr/> Contributor address; City; State; Zip Code Rockport, TX 78381-1478	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) GSM Insurors

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 38/49 Rpt: 45/63
2 FILER NAME Political Action Committee Of The Independent Insurance Agents Of Texas		3 Filer ID (Ethics Commission Filers) 00015593
4 Date 06/24/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Revel, Cody <hr/> 6 Contributor address; City; State; Zip Code Rockport, TX 78381-1478	7 Amount of Contribution (\$) \$200.00
8 Principal occupation / Job title (See Instructions) Insurance Agent		9 Employer (See Instructions) GSM Insurors
Date 06/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Reyes, Roxanna <hr/> Contributor address; City; State; Zip Code Goliad, TX 77963-0353	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) GSM Insurors
Date 06/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Richardson, Candice <hr/> Contributor address; City; State; Zip Code Houston, TX 77040-6014	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Hotchkiss Insurance Agency, LLC
Date 06/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rivera, Dustin <hr/> Contributor address; City; State; Zip Code Carrollton, TX 75007-1960	Amount of Contribution (\$) \$300.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Hotchkiss Insurance Agency, LLC
Date 06/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Robertson, Eric <hr/> Contributor address; City; State; Zip Code Denton, TX 76205-7869	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Agents Alliance Services, Ltd.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 39/49 Rpt: 46/63
2 FILER NAME Political Action Committee Of The Independent Insurance Agents Of Texas		3 Filer ID (Ethics Commission Filers) 00015593
4 Date 06/25/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rodriguez, Teresa 6 Contributor address; City; State; Zip Code Dallas, TX 75240-1381	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Insurance Agent		9 Employer (See Instructions) Swingle, Collins & Associates
Date 06/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rohr, Andrew Contributor address; City; State; Zip Code Houston, TX 77040-6014	Amount of Contribution (\$) \$131.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Hotchkiss Insurance Agency, LLC
Date 06/23/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Rollo, Jason Contributor address; City; State; Zip Code College Station, TX 77840-2677	Amount of Contribution (\$) \$3,000.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Rollo Insurance Group, Inc.
Date 06/09/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Ross, Christy Contributor address; City; State; Zip Code San Angelo, TX 76904-7710	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) C A Ross Insurance Agency, LLC
Date 06/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sanders, Cheryl Contributor address; City; State; Zip Code Houston, TX 77040-3119	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Brady, Chapman, Holland & Associates, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 40/49 Rpt: 47/63
2 FILER NAME Political Action Committee Of The Independent Insurance Agents Of Texas		3 Filer ID (Ethics Commission Filers) 00015593
4 Date 06/19/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sanders, Lindsey <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75240-1381	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Insurance Agent		9 Employer (See Instructions) Swingle, Collins & Associates
Date 06/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sandvig, Austin <hr/> Contributor address; City; State; Zip Code Wayzata, MN 55391-1599	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Trean Insurance Group
Date 06/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scarborough, Lauren <hr/> Contributor address; City; State; Zip Code Richardson, TX 75080-2784	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Patterson & Associates Insurance Agency
Date 06/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schmidt, Julie <hr/> Contributor address; City; State; Zip Code Carrollton, TX 75007-1007	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Patterson & Associates Insurance Agency
Date 06/10/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Schreiber, Edward <hr/> Contributor address; City; State; Zip Code Houston, TX 77027-9128	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Cadence Insurance

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 41/49 Rpt: 48/63
2 FILER NAME Political Action Committee Of The Independent Insurance Agents Of Texas		3 Filer ID (Ethics Commission Filers) 00015593
4 Date 05/30/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Scott, Chris <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78759-8977	7 Amount of Contribution (\$) \$250.00
8 Principal occupation / Job title (See Instructions) Insurance Agent		9 Employer (See Instructions) Lewis-Watkins-Farmer Agency, Inc.
Date 06/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Segundo, Andrea <hr/> Contributor address; City; State; Zip Code Houston, TX 77244-1587	Amount of Contribution (\$) \$60.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Pathfinder/LL&D Insurance Group, LLC
Date 06/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sekiguchi, Jeff <hr/> Contributor address; City; State; Zip Code Austin, TX 78723-3474	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Texas Mutual Insurance Co.
Date 05/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shealy, Quinn <hr/> Contributor address; City; State; Zip Code Houston, TX 77040-3119	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Brady, Chapman, Holland & Associates, Inc.
Date 06/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Shone, Laura <hr/> Contributor address; City; State; Zip Code Richardson, TX 75080-2784	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Patterson & Associates Insurance Agency

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 42/49 Rpt: 49/63
2 FILER NAME Political Action Committee Of The Independent Insurance Agents Of Texas		3 Filer ID (Ethics Commission Filers) 00015593
4 Date 06/24/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Silgero, Linda <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78768-4487	7 Amount of Contribution (\$) \$50.00
8 Principal occupation / Job title (See Instructions) Accounting		9 Employer (See Instructions) Independent Insurance Agents of Texas
Date 06/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Silva, Gina <hr/> Contributor address; City; State; Zip Code Houston, TX 77244-1587	Amount of Contribution (\$) \$40.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Pathfinder/LL&D Insurance Group, LLC
Date 06/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Slack, Kayla <hr/> Contributor address; City; State; Zip Code College Station, TX 77842-0587	Amount of Contribution (\$) \$200.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Insurors Group, LLC
Date 06/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Smith, Stephen <hr/> Contributor address; City; State; Zip Code Houston, TX 77098-2039	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Dean & Draper Insurance Agency, LP
Date 06/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sparks, Ashlee <hr/> Contributor address; City; State; Zip Code Houston, TX 77040-6014	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Hotchkiss Insurance Agency, LLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 43/49 Rpt: 50/63
2 FILER NAME Political Action Committee Of The Independent Insurance Agents Of Texas		3 Filer ID (Ethics Commission Filers) 00015593
4 Date 06/04/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Starkey, Spencer <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77040-6014	7 Amount of Contribution (\$) \$125.00
8 Principal occupation / Job title (See Instructions) Insurance Agent		9 Employer (See Instructions) Hotchkiss Insurance Agency, LLC
Date 06/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Starks, Wanda <hr/> Contributor address; City; State; Zip Code Carrollton, TX 75007-1960	Amount of Contribution (\$) \$125.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Hotchkiss Insurance Agency, LLC
Date 06/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Stuart, Bobby <hr/> Contributor address; City; State; Zip Code Lubbock, TX 79424-2335	Amount of Contribution (\$) \$125.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Hotchkiss Insurance Agency, LLC
Date 06/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Surber, Cristina <hr/> Contributor address; City; State; Zip Code Rockport, TX 78381-1478	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) GSM Insurors
Date 06/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Swonke, Adam <hr/> Contributor address; City; State; Zip Code Houston, TX 77040-3119	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Brady, Chapman, Holland & Associates, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 44/49 Rpt: 51/63
2 FILER NAME Political Action Committee Of The Independent Insurance Agents Of Texas		3 Filer ID (Ethics Commission Filers) 00015593
4 Date 06/04/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Thompson, Lezli 6 Contributor address; City; State; Zip Code Rockport, TX 78381-1478	7 Amount of Contribution (\$) \$5.00
8 Principal occupation / Job title (See Instructions) Insurance Agent		9 Employer (See Instructions) GSM Insurors
Date 06/11/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Trautmann, Stephen Contributor address; City; State; Zip Code Rockport, TX 78381-1478	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) GSM Insurors Services of South Texas, Inc.
Date 06/03/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vacek, Duane Contributor address; City; State; Zip Code Houston, TX 77040-6014	Amount of Contribution (\$) \$125.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Hotchkiss Insurance Agency, LLC
Date 06/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Van Horn, Jake Contributor address; City; State; Zip Code Carrollton, TX 75007-1960	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Hotchkiss Insurance Agency, LLC
Date 06/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vardeman, Debbie Contributor address; City; State; Zip Code Lorena, TX 76655-3237	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) UFG Insurance

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 45/49 Rpt: 52/63
2 FILER NAME Political Action Committee Of The Independent Insurance Agents Of Texas		3 Filer ID (Ethics Commission Filers) 00015593
4 Date 06/12/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Veach, Abigail 6 Contributor address; City; State; Zip Code Dallas, TX 75240-1381	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Insurance Agent		9 Employer (See Instructions) Swingle, Collins & Associates
Date 06/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Veale, Ed Contributor address; City; State; Zip Code Plano, TX 75025-5342	Amount of Contribution (\$) \$750.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Swingle, Collins & Associates
Date 06/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Villanueva, Adolfo Contributor address; City; State; Zip Code Edinburg, TX 78541-7162	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) US Insurance Services, Inc.
Date 06/02/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Villanueva, Ramona Contributor address; City; State; Zip Code Edinburg, TX 78541-7162	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) US Insurance Services, Inc.
Date 06/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vint, Robert Contributor address; City; State; Zip Code El Paso, TX 79949	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) HUB International Insurance Services

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 46/49 Rpt: 53/63
2 FILER NAME Political Action Committee Of The Independent Insurance Agents Of Texas		3 Filer ID (Ethics Commission Filers) 00015593
4 Date 06/16/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Vozniak, Renee <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77040-3119	7 Amount of Contribution (\$) \$25.00
8 Principal occupation / Job title (See Instructions) Insurance Agent		9 Employer (See Instructions) Brady, Chapman, Holland & Associates, Inc.
Date 06/16/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wade, Laura <hr/> Contributor address; City; State; Zip Code Houston, TX 77040-3119	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Brady, Chapman, Holland & Associates, Inc.
Date 05/28/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Watkins, Rodney <hr/> Contributor address; City; State; Zip Code Mineola, TX 75773	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) IAAT
Date 06/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weatherby, Kyle <hr/> Contributor address; City; State; Zip Code Dallas, TX 75240-7336	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Swingle, Collins & Associates
Date 06/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weems, Lacy <hr/> Contributor address; City; State; Zip Code Rockport, TX 78381-1478	Amount of Contribution (\$) \$10.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) GSM Insurors

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 47/49 Rpt: 54/63
2 FILER NAME Political Action Committee Of The Independent Insurance Agents Of Texas		3 Filer ID (Ethics Commission Filers) 00015593
4 Date 06/25/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wells Wiggins, Catherine <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75240-1381	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Insurance Agent		9 Employer (See Instructions) Swingle, Collins & Associates
Date 06/20/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wesson, Andrew <hr/> Contributor address; City; State; Zip Code Dallas, TX 75240-1381	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Swingle, Collins & Associates
Date 05/29/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) West, Scott <hr/> Contributor address; City; State; Zip Code Houston, TX 77244-1587	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Pathfinder/LL&D Insurance Group, LLC
Date 06/25/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whitsell, Amanda <hr/> Contributor address; City; State; Zip Code Dallas, TX 75240-1381	Amount of Contribution (\$) \$25.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Swingle, Collins & Associates
Date 06/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Whittlesey, Carrie <hr/> Contributor address; City; State; Zip Code Dallas, TX 75240-1381	Amount of Contribution (\$) \$15.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Swingle, Collins & Associates

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 48/49 Rpt: 55/63
2 FILER NAME Political Action Committee Of The Independent Insurance Agents Of Texas		3 Filer ID (Ethics Commission Filers) 00015593
4 Date 05/29/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wilkins, Trevor <hr/> 6 Contributor address; City; State; Zip Code Dallas, TX 75240-1381	7 Amount of Contribution (\$) \$100.00
8 Principal occupation / Job title (See Instructions) Insurance Agent		9 Employer (See Instructions) Swingle, Collins & Associates
Date 06/04/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Janet <hr/> Contributor address; City; State; Zip Code Rockport, TX 78381-1478	Amount of Contribution (\$) \$20.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) GSM Insurors
Date 06/13/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Williams, Mark <hr/> Contributor address; City; State; Zip Code Amarillo, TX 79105	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Heritage Risk Management, an Alera Group Agency
Date 06/24/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yantis, Gail <hr/> Contributor address; City; State; Zip Code Leander, TX 78641-2771	Amount of Contribution (\$) \$100.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Gail Brokerage
Date 06/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Yi, John <hr/> Contributor address; City; State; Zip Code Houston, TX 77040-6014	Amount of Contribution (\$) \$125.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Hotchkiss Insurance Agency, LLC

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 49/49 Rpt: 56/63
2 FILER NAME Political Action Committee Of The Independent Insurance Agents Of Texas		3 Filer ID (Ethics Commission Filers) 00015593
4 Date 06/13/2025	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zamudio, Chase <hr/> 6 Contributor address; City; State; Zip Code Rockport, TX 78381-1478	7 Amount of Contribution (\$) \$10.00
8 Principal occupation / Job title (See Instructions) Insurance Agent		9 Employer (See Instructions) GSM Insurors
Date 06/17/2025	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Zhuk, Maryana <hr/> Contributor address; City; State; Zip Code Houston, TX 77040-6014	Amount of Contribution (\$) \$50.00
Principal occupation / Job title (See Instructions) Insurance Agent		Employer (See Instructions) Hotchkiss Insurance Agency, LLC

MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION

SCHEDULE C3

The Instruction Guide explains how to complete this form.

1 Total pages Schedule C3:
Sch: 1/1 Rpt: 57/63

2 FILER NAME

Political Action Committee Of The Independent Insurance Agents Of Texas

3 Filer ID (Ethics Commission Filers)
00015593

4 Date

06/03/2025

5 Corporation / Labor Organization name

Independent Insurance Agents of Texas

6 Amount (\$)

830.92

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: 58/63

2 FILER NAME

Political Action Committee Of The Independent Insurance Agents Of Texas

3 Filer ID (Ethics Commission Filers)
00015593

4 Date

06/25/2025

5 Corporation / Labor Organization name

Independent Insurance Agents of Texas

6 Amount (\$)

1,482.12

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: 1/5 Rpt: 59/63	2 FILER NAME Political Action Committee Of The Independent Insurance	3 Filer ID (Ethics Commission Filers) 00015593
4 Date 06/16/2025	5 Payee name Angelia Orr Campaign	
6 Amount (\$) \$500.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO Box 113 Itasca, TX 76055	
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 POLITICAL CONTRIBUTION
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/16/2025	Payee name Dennis Paul Campaign	
Amount (\$) \$5,000.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 626 Barringer Lane Webster, TX 77598	
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 POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/16/2025	Payee name Elect Todd Hunter Campaign	
Amount (\$) \$500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 445 Cape Henry Drive Corpus Cristi, TX 78412	
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 POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

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: 2/5 Rpt: 60/63	2 FILER NAME Political Action Committee Of The Independent Insurance	3 Filer ID (Ethics Commission Filers) 00015593
4 Date 06/16/2025	5 Payee name Giovanni Capriglione Campaign	
6 Amount (\$) \$500.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code P.O. Box 92007 Southlake, TX 76092	
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 POLITICAL CONTRIBUTION
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/16/2025	Payee name Jared Patterson Campaign	
Amount (\$) \$500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. Box 5419 Frisco, TX 75035	
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 POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/16/2025	Payee name Jay Dean for Texas	
Amount (\$) \$500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 3822 Holly Ridge Drive Longview, TX 75605	
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 POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

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: 3/5 Rpt: 61/63	2 FILER NAME Political Action Committee Of The Independent Insurance	3 Filer ID (Ethics Commission Filers) 00015593
4 Date 06/16/2025	5 Payee name Jeff Barry Campaign	
6 Amount (\$) \$3,500.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO Box 21 Pearland, TX 77588	
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 POLITICAL CONTRIBUTION
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 06/16/2025	Candidate/Officeholder name Jeff Leach Campaign	
Amount (\$) \$500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 866186 Plano, TX 75086	
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 POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Date 06/16/2025	Candidate/Officeholder name John McQueeney Campaign	
Amount (\$) \$250.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code P.O. Box 100458 Fort Worth, TX 76185	
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 POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		

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: 4/5 Rpt: 62/63	2 FILER NAME Political Action Committee Of The Independent Insurance	3 Filer ID (Ethics Commission Filers) 00015593
4 Date 06/16/2025	5 Payee name Mary Ann Perez Campaign	
6 Amount (\$) \$2,500.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code 5223 Sleepy Creek Drive Houston, TX 77017	
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 POLITICAL CONTRIBUTION
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/16/2025	Payee name Matt Morgan Campaign	
Amount (\$) \$250.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code 503 FM 359 STE.130 Richmond, TX 77406	
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 POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 06/16/2025	Payee name Ryan Guillen Campaign	
Amount (\$) \$500.00 <input type="checkbox"/> Expenditure from corporate funds	Payee address; City; State; Zip Code PO Box 1024 Austin, TX 78767	
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 POLITICAL CONTRIBUTION
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

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: 5/5 Rpt: 63/63	2 FILER NAME Political Action Committee Of The Independent Insurance	3 Filer ID (Ethics Commission Filers) 00015593
4 Date 06/16/2025	5 Payee name Trey Wharton Campaign	
6 Amount (\$) \$3,500.00 <input type="checkbox"/> Expenditure from corporate funds	7 Payee address; City; State; Zip Code PO Box 1242 Huntsville, TX 77342	
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 POLITICAL CONTRIBUTION
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held