## MONTHLY FILING GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT

## FORM MPAC COVER SHEET PG 1

| т      | he MPAC Instruction     | 2 Total pages filed:<br>21                  |  |   |
|--------|-------------------------|---|--|---|
| 3      | COMMITTEE NAME          |   | 00015644   | OFFICE USE ONLY                                     |
|        | National Associatio     | on of Insurance and Financial Advisors - Te | exas PAC   | Date Received<br>ELECTRONICALLY FILED<br>07/07/2025 |
| 4      | COMMITTEE               | ADDRESS / PO BOX; APT / SUITE #;            | CITY; STATE; ZIP                                 |   |
|        | ADDRESS                 | 3755 Attucks Drive                          |  |   |
|        |                         |   |  |   |
|        |                         | Powell, OH 43065                            |  | Date Hand-delivered or Date Postmarked              |
| 5      | CAMPAIGN                | MS / MRS / MR FIRST                         | MI   |   |
|        | TREASURER               | Mr. Daniel                                  |  | Receipt # Amount                                    |
|        | NAME                    |   |  |   |
|        |                         |   | 01550  | Date Processed                                      |
|        |                         | NICKNAME LAST                               | . SUFFIX   |   |
|        |                         | O'Connel                                    | I  | Date Imaged   |
| 6      | CAMPAIGN                | STREET ADDRESS (NO PO BOX PLEASE);          | APT / SUITE #; CITY; ST                          | ATE; ZIP CODE                                       |
| ľ      | TREASURER               | 3755 Attucks Drive                          | /, con, con, con                                 | ,   |
|        | STREET<br>ADDRESS       |   |  |   |
|        | (Residence or Business) | Powell, OH 43065                            |  |   |
| Ļ      | CAMPAICN                |   |  |   |
| 7      | CAMPAIGN<br>TREASURER   | STREET ADDRESS OR PO BOX;                   | APT / SUITE #; CITY; ST                          | ATE; ZIP CODE                                       |
|        | MAILING<br>ADDRESS      |   |  |   |
|        | ADDRE33                 |   |  |   |
|        |                         |   |  |   |
| 8      | CAMPAIGN<br>TREASURER   | AREA CODE PHONE NUMBER                      | EXTENSION  |   |
|        | PHONE                   | (512) 716-8800                              |  |   |
| -<br>- | REPORT TYPE             |   |  |   |
| ľ      |                         | X Monthly                                   | 10th day after campaign<br>treasurer termination | Dissolution (Attach PAC-DR)                         |
| 10     | ) MONTHLY               |   |  |   |
| [      | REPORT FILING           | January 5 April                             | 5 X July 5                                       | October 5   |
|        | DEADLINE                | February 5 May                              | 5 August 5                                       | November 5  |
|        |                         |   |  |   |
|        |                         | March 5 June                                | 5 September 5                                    | December 5  |
| 11     |                         | Month Day Year                              | Month  | Day Year  |
|        | COVERED                 | 05/26/2025                                  | THROUGH 06/25/2                                  | 2025  |
|        |                         |   |  |   |
|        |                         |   |  |   |
|        |                         |   |  |   |
|        |                         |   |  |   |
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|        |                         |   |  |   |
| 1      |                         |   |  |   |
| 1      |                         |   |  |   |
| 1      |                         |   |  |   |
| 1      |                         | GO 1  | TO PAGE 2  |   |
| Fo     | rms provided by Tex     | xas Ethics Commission www.et                | hics.state.tx.us                                 | Version V4.1.0.f10d0fd8                             |

## MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

# FORM MPAC COVER SHEET PG 2

| 12 COMMITTEE NAME   |   |  | 13 Filer ID   | (Ethics Commission Filers) |
|---|---|--|---------------|----------------------------|
| National Association of   | Insurance and Financia  | al Advisors - Texas PAC  | 00015644      |                            |
| 14 COMMITTEE<br>ACTIVITY  | 1. Candidates<br>(Identify by name or, if<br>applicable, classify by party.)                | A. Supported   |               |                            |
| (Attach lists on plain<br>paper to complete this<br>report if necessary.) |   | B. Opposed   |               |                            |
|   | 2. Measures<br>(Describe by date and location<br>of election and nature of issue.)          | A. Supported   |               |                            |
|   |   | B. Opposed   |               |                            |
|   | 3. Officeholders<br>Assisted<br>(Identify by name or, if<br>applicable, classify by party.) |  |               |                            |
| 15 CONTRIBUTION<br>TOTALS   | PLEDGES, LOANS, CONTRIBUTIONS M   | D POLITICAL CONTRIBUTIONS (OTHER THAN<br>OR GUARANTEES OF LOANS, OR<br>ADE ELECTRONICALLY)<br>qualifies for the higher itemization threshold | \$            | 0.00                       |
|   | 2. TOTAL POLITICA<br>(OTHER THAN PLEI   | L CONTRIBUTIONS<br>DGES, LOANS, OR GUARANTEES OF LOANS)  | \$            | 1,860.40                   |
| EXPENDITURE<br>TOTALS   | 3. TOTAL UNITEMIZED   | POLITICAL EXPENDITURES   | \$            | 0.00                       |
|   | 4. TOTAL POLITICA   | L EXPENDITURES   | \$            | 0.00                       |
| CONTRIBUTION<br>BALANCE   | 5. TOTAL POLITICAL C<br>OF THE REPORTING  | CONTRIBUTIONS MAINTAINED AS OF THE LAST<br>G PERIOD  | DAY \$        | 97,213.09                  |
| OUTSTANDING<br>LOAN TOTALS  |   | AMOUNT OF ALL OUTSTANDING LOANS AS OF T<br>REPORTING PERIOD  | THE \$        | 0.00                       |
| 16 AFFIDAVIT  |   |  |               |                            |
|   |   | I swear, or affirm, under penalty of pe<br>true and correct and includes all infor<br>under Title 15, Election Code.                         |               |                            |
|   |   | Mr. Danie  | el O'Connell  |                            |
|   |   | Signature of Ca  |               | ırer                       |
|   |   | -  | -             |                            |
|   | STAMP / SEAL ABOVE  |  |               |                            |
|   |   | , tl   | his the       | day                        |
| of  | _, 20, to certity v   | vhich, witness my hand and seal of office.   |               |                            |
| Signature of officer ad   | lministering oath   | Printed name of officer administering oath   | Title of offi | cer administering oath     |
| Forms provided by Texas E   | Ethics Commission   | www.ethics.state.tx.us   |               | Version V4.1.0.f10d0fd8    |

## FORM MPAC COVER SHEET PG 3

3 of 21

| 17 COMMITT  | EE NAME  | 18 Filer ID  | (Ethics Commission Filers) |
|---|--|--------------|----------------------------|
|   | Association of Insurance and Financial Advisors - Texas PAC                    | 00015644     |                            |
|   | E SUBTOTALS<br>SCHEDULE  |              | SUBTOTAL AMOUNT            |
| 1. X  | SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS                                  |              | <b>\$</b> 1,384.20         |
| 2.  | SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS                    |              | \$                         |
| 3.  | SCHEDULE B: PLEDGED CONTRIBUTIONS  |              | \$                         |
| 4. X SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION             |  |              | <b>\$</b> 476.20           |
| 5. SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION |  |              | \$                         |
| 6.  | SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG                    | ANIZATION    | \$                         |
| 7.  | SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION       |              | \$                         |
| 8.  | SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR (                  | ORGANIZATION | \$                         |
| 9.  | SCHEDULE E: LOANS  |              | \$                         |
| 10.   | SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION                | 5            | \$                         |
| 11.   | SCHEDULE F2: UNPAID INCURRED OBLIGATIONS                                       |              | \$                         |
| 12.   | SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTION               | ONS          | \$                         |
| 13.   | SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD                                  |              | \$                         |
| 14. X   | SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION             | DNS          | <b>\$</b> 3,514.70         |
| 15.   | SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS I<br>TO FILER | RETURNED     | \$                         |
|   |  |              |                            |
|   |  |              |                            |
|   |  |              |                            |
|   |  |              |                            |
|   |  |              |                            |

**SUBTOTALS - MPAC** 

| The Instrue      | ction Guide explains how to complete this f          | form.  | 1 Total pages Schedule A1:<br>Sch: 1/14 Rpt: 4/21 |
|------------------|--|--|---|
| 2 FILER NAME     |  |  | <b>3</b> Filer ID (Ethics Commission Filers)      |
|                  | sociation of Insurance and Financial Advisors - Texa | as PAC                                       | 00015644  |
| 4 Date           | 5 Full name of contributor out-of-state PAC (ID#:    | )  | 7 Amount of Contribution (\$)                     |
| 06/10/2025       | Aaron, Cappilla                                      |  | \$8.00  |
|                  | 6 Contributor address; City; State; Zip Code         |  | 4   |
|                  |  |  |   |
|                  |  |  |   |
|                  | Amarillo, TX 79121-1044                              |  |   |
| 8 Principal occu | ipation / Job title (See Instructions)               | 9 Employer (See Instructions                 | s)  |
| Agent/Owne       | ۲  | Aaron Cappilla farmers                       | insurance agency                                  |
| Date             | Full name of contributor out-of-state PAC (ID#:_     | )  | Amount of Contribution (\$)                       |
| 06/10/2025       | Alan, Holland  |  | \$3.40  |
|                  | Contributor address; City; State; Zip Code           |  |   |
|                  |  |  |   |
|                  |  |  |   |
|                  | Houston, TX 77055-4412                               |  |   |
| Principal occu   | upation / Job title (See Instructions)               | Employer (See Instructions                   | s)  |
| Managing Di      | irector  | Principal                                    |   |
| Date             | Full name of contributor out-of-state PAC (ID#:_     | )  | Amount of Contribution (\$)                       |
| 06/10/2025       | Alyson, Guest  |  | \$40.00   |
|                  | Contributor address; City; State; Zip Code           |  | 4   |
|                  |  |  |   |
|                  |  |  |   |
|                  | Houston, TX 77042-5118                               |  |   |
| Principal occu   | ipation / Job title (See Instructions)               | Employer (See Instructions                   | s)  |
| Agent Adviso     | or   | MetLife Premier Client C                     | Group   |
| Date             | Full name of contributor out-of-state PAC (ID#:      | <u>.                                    </u> | Amount of Contribution (\$)                       |
| 06/10/2025       | Bailey, Baker  |  | \$10.00   |
|                  | Contributor address; City; State; Zip Code           |  |   |
|                  |  |  |   |
|                  |  |  |   |
|                  | San Antonio, TX 78209-4115                           |  |   |
|                  | upation / Job title (See Instructions)               | Employer (See Instructions                   | ,   |
| Agent Adviso     | or   | State Farm Insurance C                       | Companies   |
| Date             | Full name of contributor out-of-state PAC (ID#:      | )  | Amount of Contribution (\$)                       |
| 06/10/2025       | Barry, Malone  |  | \$16.80   |
|                  | Contributor address; City; State; Zip Code           |  | 1   |
|                  |  |  |   |
|                  |  |  |   |
|                  | Lubbock, TX 79424-1225                               |  |   |
| Principal occu   | ipation / Job title (See Instructions)               | Employer (See Instructions                   | 5)  |
| Financial Pro    | ofessional   | Level Four Group                             |   |
|                  |  |  |   |

|   |   | A   |
|---|---|---|
| tion Guide explains how to complete this f  | orm.  | 1 Total pages Schedule A1:<br>Sch: 2/14 Rpt: 5/21   |
|   |   | <b>3</b> Filer ID (Ethics Commission Filers)  |
| ciation of Insurance and Financial Advisors - Texa  |   | 00015644  |
| Full name of contributor out-of-state PAC (ID#:_  | )   | 7 Amount of Contribution (\$)   |
| Benjamin, Gerald  | _   | \$4.0   |
| -   |   |   |
|   |   |   |
|   |   |   |
| McKinney, TX 75071-5670   |   |   |
| ation / Job title (See Instructions)  | 9 Employer (See Instructions)   |   |
|   | Audible Financial Group   | p   |
| Full name of contributor out-of-state PAC (ID#:_  | )   | Amount of Contribution (\$)   |
| Brandon, Green  |   | \$5.0   |
| Contributor address; City; State; Zip Code  |   |   |
|   |   |   |
|   |   |   |
| -   |   |   |
|   | Employer (See Instructions)   |   |
| iner  | Third Rail Financial, LLC   | C   |
| —   | )   | Amount of Contribution (\$)   |
| Brett, Weisenburn   |   | \$6.8   |
| Contributor address; City; State; Zip Code  |   |   |
|   |   |   |
| Elkhart, TX 75839-5116  |   |   |
| ation / Job title (See Instructions)  | Employer (See Instructions)   |   |
| AGENT State Farm Insurance C  |   | Companies   |
| Full name of contributor out-of-state PAC (ID#:   | )   | Amount of Contribution (\$)   |
| Carol, Metteauer  |   | \$10.0  |
| Contributor address; City; State; Zip Code  |   |   |
|   |   |   |
|   |   |   |
|   |   |   |
| ation / Job title (See Instructions)  | Employer (See Instructions)   | s)  |
|   | Carol Metteauer   |   |
|   |   |   |
| Full name of contributor out-of-state PAC (ID#:   | )   | Amount of Contribution (\$)   |
|   | )   | Amount of Contribution (\$)<br>\$20.0   |
| Full name of contributor out-of-state PAC (ID#:   | )<br>)  |   |
| Full name of contributor out-of-state PAC (ID#:_<br>Caroline, Welch   | )<br>)  |   |
| Full name of contributor out-of-state PAC (ID#:_<br>Caroline, Welch<br>Contributor address; City; State; Zip Code                           | )<br>)  |   |
| Full name of contributor out-of-state PAC (ID#:_<br>Caroline, Welch<br>Contributor address; City; State; Zip Code<br>Lakeway, TX 78738-1007 |   | \$20.0  |
| Full name of contributor out-of-state PAC (ID#:_<br>Caroline, Welch<br>Contributor address; City; State; Zip Code                           | Employer (See Instructions)<br>State Farm Insurance Co  | \$20.0<br>\$20.0  |
|   | Full name of contributorout-of-state PAC (ID#:Benjamin, Gerald Contributor address; City; State; Zip Code McKinney, TX 75071-5670 ation / Job title (See Instructions) Full name of contributorout-of-state PAC (ID#:Brandon, Green Contributor address; City; State; Zip Code Katy, TX 77450-1004 ation / Job title (See Instructions) there Full name of contributorout-of-state PAC (ID#:Breat, Weisenburn Contributor address; City; State; Zip Code Elkhart, TX 75839-5116 ation / Job title (See Instructions) Full name of contributorout-of-state PAC (ID#:Breat, Weisenburn Contributor address; City; State; Zip Code Elkhart, TX 75839-5116 ation / Job title (See Instructions) Full name of contributorout-of-state PAC (ID#:Breat, Weisenburn Contributor address; City; State; Zip Code Elkhart, TX 75839-5116 ation / Job title (See Instructions) Full name of contributorout-of-state PAC (ID#:Carol, Metteauer Contributor address; City; State; Zip Code Palestine, TX 75803-6850 | Benjamin, Gerald         Contributor address; City; State; Zip Code         McKinney, TX 75071-5670         ation / Job title (See Instructions)         P Employer (See Instruction<br>Audible Financial Group         Full name of contributor         out-of-state PAC (ID#:)         Brandon, Green         Contributor address; City; State; Zip Code         Katy, TX 77450-1004         ation / Job title (See Instructions)         there         Full name of contributor         out-of-state PAC (ID#:)         Brent, Weisenburn         Contributor address; City; State; Zip Code         Elkhart, TX 75839-5116         ation / Job title (See Instructions)         Enployer (See Instructions)         State Farm Insurance C         Full name of contributor         out-of-state PAC (ID#:)         Contributor address; City; State; Zip Code         Elkhart, TX 75839-5116         ation / Job title (See Instructions)         Enployer (See Instruction         State Farm Insurance C         Full name of contributor         Out-of-state PAC (ID#:)         Carol, Metteauer         Contributor address; City; State; Zip Code         Palestine, TX 75803-6850 |

|   | The Instru     | ction Guide explains how to complete this f           | orm.                         | 1           | Total pages Schedule A1:<br>Sch: 3/14 Rpt: 6/21 |                     |
|---|----------------|---|------------------------------|-------------|---|---------------------|
| 2 | FILER NAME     |   |                              | 3           | Filer ID (Ethics Commission                     | Filers)             |
|   | National Ass   | sociation of Insurance and Financial Advisors - Texas | IS PAC                       |             | 00015644  |                     |
| 4 | Date           | 5 Full name of contributor out-of-state PAC (ID#:_    | )                            | 7           | Amount of Contribution (\$)                     |                     |
|   | 06/10/2025     | Chane, Reagan   |                              |             | .,  | \$10.00             |
|   | 00.20.20       | 6 Contributor address; City; State; Zip Code          |                              | ·           |   | <b>+</b> - <b>-</b> |
|   |                | Continuation address, City, State, Zip Code           |                              |             |   |                     |
|   |                |   |                              |             |   |                     |
|   |                | Montgomery, TX 77316-6882                             |                              |             |   |                     |
| 8 | Principal occu |   | 9 Employer (See Instructions | <u>ار</u>   |   |                     |
|   | Agent Adviso   |   | AuguStar Financial Serv      |             | 24  |                     |
|   | -              |   |                              | <del></del> |   |                     |
|   | Date           | Full name of contributor out-of-state PAC (ID#:       | )                            |             | Amount of Contribution (\$)                     |                     |
|   | 06/10/2025     | Charles, Matejowsky                                   |                              |             |   | \$33.60             |
|   | I              | Contributor address; City; State; Zip Code            |                              | 1           |   |                     |
|   |                |   |                              |             |   |                     |
|   |                |   |                              |             |   |                     |
|   |                | Brenham, TX 77833-4605                                |                              |             |   |                     |
|   | Principal occu | ipation / Job title (See Instructions)                | Employer (See Instructions   | s)          |   |                     |
|   | Agent Adviso   | or  | Van Dyke, Rankin Fin. S      | . Services  |   |                     |
|   | Date           | Full name of contributor out-of-state PAC (ID#:       | )                            | Τ           | Amount of Contribution (\$)                     |                     |
|   | 06/10/2025     | Cheri, Stanwix  |                              |             | · ·   | \$16.80             |
|   |                |   |                              | ·           |   | ·                   |
|   |                | Commuter address, only, state, zip source             |                              |             |   |                     |
|   |                |   |                              |             |   |                     |
|   |                | Celina, TX 75009-4630                                 |                              |             |   |                     |
| ⊢ | Principal occu | upation / Job title (See Instructions)                | Employer (See Instructions   | <u> </u>    |   |                     |
|   | Agent Adviso   |   | Stanwix Insurance & Be       |             | lite  |                     |
|   |                |   |                              | <del></del> |   |                     |
|   | Date           | Full name of contributor out-of-state PAC (ID#:       | )                            |             | Amount of Contribution (\$)                     |                     |
|   | 06/10/2025     | Crissman, Crombie                                     |                              |             |   | \$20.00             |
|   | I              | Contributor address; City; State; Zip Code            |                              | 1           |   |                     |
|   |                |   |                              |             |   |                     |
|   |                |   |                              |             |   |                     |
|   |                | Benbrook, TX 76126-4525                               |                              |             |   |                     |
|   | Principal occu | pation / Job title (See Instructions)                 | Employer (See Instructions   | s)          |   |                     |
|   | Agent Adviso   | or  | Crombie Financial Grou       | ۱۱,qu       | с   |                     |
|   | Date           | Full name of contributor out-of-state PAC (ID#:       | )                            | Τ           | Amount of Contribution (\$)                     |                     |
|   | 06/10/2025     | Cynthia, Price  |                              |             |   | \$10.00             |
|   | I              |   |                              | ·           |   |                     |
|   |                |   |                              |             |   |                     |
|   |                |   |                              |             |   |                     |
|   |                | Amarillo, TX 79106-5730                               |                              |             |   |                     |
| ⊢ | Principal occu | pation / Job title (See Instructions)                 | Employer (See Instructions   | <u>റ</u>    |   |                     |
|   | Agent Adviso   |   | New York Life Insurance      |             | O & NVI IEE Securities                          |                     |
|   |                |   |                              |             |   |                     |
|   |                |   |                              |             |   |                     |

| ⊢ |                |  |                              |          |   |           |
|---|----------------|--|------------------------------|----------|---|-----------|
|   | The Instru     | ction Guide explains how to complete this f          | iorm.                        | 1        | Total pages Schedule A1:<br>Sch: 4/14 Rpt: 7/21 |           |
| 2 | FILER NAME     |  |                              | 3        | Filer ID (Ethics Commission                     | ı Filers) |
|   | National Ass   | sociation of Insurance and Financial Advisors - Texa | as PAC                       |          | 00015644  |           |
| 4 | Date           | 5 Full name of contributor Out-of-state PAC (ID#:    | )                            | 7        | Amount of Contribution (\$)                     |           |
|   | 06/10/2025     | Danny, O'Connell                                     |                              |          | • -   | \$84.00   |
|   |                | 6 Contributor address; City; State; Zip Code         |                              | ł        |   |           |
|   |                |  |                              |          |   |           |
|   |                |  |                              |          |   |           |
|   |                | Dallas, TX 75225-2114                                |                              |          |   |           |
| 8 | Principal occu | upation / Job title (See Instructions)               | 9 Employer (See Instructions | 5)       |   |           |
|   | Agent/Owne     | r  | Next Level Insurance Ag      | ger      | icy, LLC  |           |
|   | Date           | Full name of contributor out-of-state PAC (ID#:_     | ·)                           | Γ        | Amount of Contribution (\$)                     |           |
|   | 06/10/2025     | David, Bronstad                                      |                              |          |   | \$4.00    |
|   |                | Contributor address; City; State; Zip Code           |                              | 1        |   |           |
|   |                |  |                              |          |   |           |
|   |                |  |                              |          |   |           |
|   |                | Bryan, TX 77802-4301                                 |                              |          |   |           |
|   | Principal occu | upation / Job title (See Instructions)               | Employer (See Instructions   | 5)       |   |           |
|   | Financial Re   | epresentative  | Thrivent Financial           |          |   |           |
| F | Date           | Full name of contributor out-of-state PAC (ID#:_     | )                            | Γ        | Amount of Contribution (\$)                     |           |
|   | 06/10/2025     | David, Farabee                                       |                              |          | • •   | \$6.80    |
|   |                | Contributor address; City; State; Zip Code           |                              | 1        |   |           |
|   |                |  |                              |          |   |           |
|   |                |  |                              |          |   |           |
|   |                | Wichita Falls, TX 76301-6824                         |                              |          |   |           |
|   | Principal occu | upation / Job title (See Instructions)               | Employer (See Instructions   | s)       |   |           |
|   | Financial Ad   | visor  | Arthur J. Gallagher & Co     | 0        |   |           |
| F | Date           | Full name of contributor Out-of-state PAC (ID#:_     | )                            | Γ        | Amount of Contribution (\$)                     |           |
|   | 06/10/2025     | David, Webb  |                              |          | • -   | \$34.00   |
|   |                | Contributor address; City; State; Zip Code           |                              | 1        |   |           |
|   |                |  |                              |          |   |           |
|   |                |  |                              |          |   |           |
|   |                | Nacogdoches, TX 75964-1388                           |                              |          |   |           |
|   | Principal occu | upation / Job title (See Instructions)               | Employer (See Instructions   | 5)       |   |           |
|   | Branch Man     | ager   | Pioneer Financial Group      | ρ        |   |           |
| ╞ | Date           | Full name of contributor out-of-state PAC (ID#:      | )                            | Γ        | Amount of Contribution (\$)                     |           |
|   | 06/10/2025     | Dee, Carter  |                              |          | • -   | \$10.00   |
|   |                | Contributor address; City; State; Zip Code           |                              | •        |   |           |
|   |                |  |                              |          |   |           |
|   |                |  |                              |          |   |           |
|   |                | Midland, TX 79701-5515                               |                              |          |   |           |
| ┢ | Principal occu | upation / Job title (See Instructions)               | Employer (See Instructions   | <u> </u> |   |           |
|   | President      |  | Carter Financial Group       |          |   |           |
| ⊢ |                |  |                              |          |   |           |
|   |                |  |                              |          |   |           |

|          | The Instru     | ction Guide explains how to complete this fo                         | orm.                         | 1 Total pages Schedule A1:<br>Sch: 5/14 Rpt: 8/21 |
|----------|----------------|--|------------------------------|---|
| 2        | FILER NAME     |  |                              | <b>3</b> Filer ID (Ethics Commission Filers)      |
|          | National Ass   | sociation of Insurance and Financial Advisors - Texas                | s PAC                        | 00015644  |
| 4        | Date           | 5 Full name of contributor Out-of-state PAC (ID#:                    | )                            | 7 Amount of Contribution (\$)                     |
| <b>–</b> | 06/10/2025     | Don, Hutto   | /                            | \$4.00  |
|          | 00/10/2023     |  |                              | φ <del>4</del> .00                                |
|          |                | 6 Contributor address; City; State; Zip Code                         |                              |   |
|          |                |  |                              |   |
|          |                | Burleson, TX 76028-3264  |                              |   |
| 8        | Principal occu |  | 9 Employer (See Instructions | <u> </u>  |
| ľ        | Agent Advis    |  | Hutto Insurance Service      |   |
| ╘        | -              |  |                              |   |
|          | Date           | Full name of contributor out-of-state PAC (ID#:                      | )                            | Amount of Contribution (\$)                       |
|          | 06/10/2025     | Douglas, Massey  |                              | \$70.00   |
|          |                | Contributor address; City; State; Zip Code                           |                              |   |
|          |                |  |                              |   |
|          |                |  |                              |   |
|          |                | San Angelo, TX 76904-5772  |                              |   |
|          |                | upation / Job title (See Instructions)                               | Employer (See Instructions   |   |
|          | Agent/Owne     | r  | OFG Financial Services       | s, Inc.   |
| F        | Date           | Full name of contributor out-of-state PAC (ID#:                      | )                            | Amount of Contribution (\$)                       |
|          | 06/10/2025     | Dudley, Vickers  |                              | \$4.00  |
|          |                |  |                              | •   |
|          |                |  |                              |   |
|          |                |  |                              |   |
|          |                | Bryan, TX 77808-8402   |                              |   |
| $\vdash$ | Principal occu | upation / Job title (See Instructions)                               | Employer (See Instructions   | 5)  |
|          | Financial_A    |  | Mutual of Omaha Comp         |   |
| ╞        | <br>Date       |  | )                            | Amount of Contribution (\$)                       |
|          | 06/10/2025     | Full name of contributor out-of-state PAC (ID#:<br>Enrique, Cisneros | )                            | \$10.00   |
|          | 00/10/2025     |  |                              | φτυ.υυ  |
|          |                | Contributor address; City; State; Zip Code                           |                              |   |
|          |                |  |                              |   |
|          |                | 0  |                              |   |
|          | - · · ·        | Socorro, TX 79927-3398   |                              |   |
|          |                | upation / Job title (See Instructions)                               | Employer (See Instructions   | •   |
|          | AGENT          |  | Enrique Cisneros Insura      | ance  |
| Γ        | Date           | Full name of contributor out-of-state PAC (ID#:                      | )                            | Amount of Contribution (\$)                       |
|          | 06/10/2025     | Eugene, Bentley  |                              | \$20.00   |
|          |                | Contributor address; City; State; Zip Code                           |                              | 1   |
|          |                |  |                              |   |
|          |                |  |                              |   |
|          |                | Bullard, TX 75757-5345   |                              |   |
|          | Principal occu | upation / Job title (See Instructions)                               | Employer (See Instructions   | 5)  |
|          | President      |  | Customized Employee E        | Benefit Plans of East Texas, I                    |
|          |                |  |                              |   |
|          |                |  |                              |   |

|   | The Instrue                          | ction Guide explains how to complete this f         | orm.                         | 1              | Total pages Schedule A1:<br>Sch: 6/14 Rpt: 9/21 |         |
|---|--------------------------------------|---|------------------------------|----------------|---|---------|
| 2 | FILER NAME                           |   |                              | 3              | Filer ID (Ethics Commission                     | Filers) |
|   | National Ass                         | ociation of Insurance and Financial Advisors - Texa | s PAC                        |                | 00015644  |         |
| 4 | Date                                 | 5 Full name of contributor out-of-state PAC (ID#:_  | )                            | 7              | Amount of Contribution (\$)                     |         |
|   | 06/10/2025                           | Eugene, Forsythe                                    | /                            | ľ              | (1)   | \$4.00  |
|   | 00,20,2020                           | 6 Contributor address; City; State; Zip Code        |                              | •              |   | +       |
|   |                                      | Contributor address, City, State, Zip Code          |                              |                |   |         |
|   |                                      |   |                              |                |   |         |
|   |                                      | Houston, TX 77057-4732                              |                              |                |   |         |
| 8 | Princinal occu                       | pation / Job title (See Instructions)               | 9 Employer (See Instructions | <u> </u><br>ເ) |   |         |
| ľ | Agent Adviso                         |   | Northwestern Mutual          | 5)             |   |         |
| ╘ | -                                    |   |                              | _              |   |         |
|   | Date                                 | Full name of contributor out-of-state PAC (ID#:     | )                            |                | Amount of Contribution (\$)                     |         |
|   | 06/10/2025                           | Filemon, Esquivel                                   |                              |                |   | \$3.40  |
|   |                                      | Contributor address; City; State; Zip Code          |                              |                |   |         |
|   |                                      |   |                              |                |   |         |
|   |                                      |   |                              |                |   |         |
|   |                                      | Kingsville, TX 78363-5774                           |                              |                |   |         |
|   |                                      | pation / Job title (See Instructions)               | Employer (See Instructions   | 5)             |   |         |
|   | AGENT                                |   | New York Life                |                |   |         |
|   | Date                                 | Full name of contributor out-of-state PAC (ID#:     | )                            |                | Amount of Contribution (\$)                     |         |
|   | 06/10/2025                           | Gary, Kneip   |                              |                |   | \$6.80  |
|   |                                      | Contributor address; City; State; Zip Code          |                              | 1              |   |         |
|   |                                      |   |                              |                |   |         |
|   |                                      |   |                              |                |   |         |
|   |                                      | Victoria, TX 77905-3178                             |                              |                |   |         |
|   | Principal occu                       | pation / Job title (See Instructions)               | Employer (See Instructions   | 5)             |   |         |
|   | Owner/President Crossroads Insurance |   | Crossroads Insurance F       | Prof           | essionals Inc.                                  |         |
| F | Date                                 | Full name of contributor out-of-state PAC (ID#:     | )                            | Γ              | Amount of Contribution (\$)                     |         |
|   | 06/10/2025                           | Gary, Schmiedekamp                                  | /                            |                |   | \$10.00 |
|   |                                      | Contributor address; City; State; Zip Code          |                              | •              |   |         |
|   |                                      | Contributor address, City, State, Zip Code          |                              |                |   |         |
|   |                                      |   |                              |                |   |         |
|   |                                      | Temple, TX 76502-3673                               |                              |                |   |         |
|   | Principal occu                       | pation / Job title (See Instructions)               | Employer (See Instructions   | <u> </u>       |   |         |
|   | MR                                   |   | Southern Farm Bureau         |                | e Insurance                                     |         |
| ⊨ | Data                                 | Full name of contributor Out-of-state PAC (ID#:     |                              | <u> </u>       |   |         |
|   | Date<br>06/10/2025                   |   | )                            |                | Amount of Contribution (\$)                     | \$6.80  |
|   | 00/10/2025                           |   |                              |                |   | Φ0.00   |
|   |                                      | Contributor address; City; State; Zip Code          |                              |                |   |         |
|   |                                      |   |                              |                |   |         |
|   |                                      | EL Daga TX 70026 6221                               |                              |                |   |         |
| ⊢ | Deine i d                            | El Paso, TX 79936-6231                              | Franks (2)                   |                |   |         |
| 1 |                                      | pation / Job title (See Instructions)               | Employer (See Instructions   | 5)             |   |         |
| L | Agent Adviso                         | זכ  | Guardian                     |                |   |         |
|   |                                      |   |                              |                |   |         |

| Contributor address; City; State; Zip Code         Amarillo, TX 79109-5908         Principal occupation / Job title (See Instructions)         Agency Owner         Date         Full name of contributor         Out-of-state PAC (ID#:)         Amount of Contribution (\$)  |          |                |  |                               |          |                             |           |
|--|----------|----------------|--|-------------------------------|----------|-----------------------------|-----------|
| National Association of Insurance and Financial Advisors - Texas PAC       00013544         4       Date       5       Full name of contribution       out-of-state PAC (Der)       7       Amount of Contribution (S)       \$34.00         06/10/2025       6       Contributor address: City, State: Zip Code       7       Amount of Contribution (S)       \$34.00         8       Principal occupation / Job title (See Instructions)       9       Employer (See Instructions)       Pen Mutual Wealth Strategies         Date       O6/10/2025       Full name of contributor       out-or-state PAC (Dor  |          | The Instru     | ction Guide explains how to complete this f      | orm.                          | 1        |                             |           |
| National Association of Insurance and Financial Advisors - Texas PAC       00013544         4       Date       5       Full name of contribution       out-of-state PAC (Der)       7       Amount of Contribution (S)       \$34.00         06/10/2025       6       Contributor address: City, State: Zip Code       7       Amount of Contribution (S)       \$34.00         8       Principal occupation / Job title (See Instructions)       9       Employer (See Instructions)       Pen Mutual Wealth Strategies         Date       O6/10/2025       Full name of contributor       out-or-state PAC (Dor  | 2        | FILER NAME     |  |                               | 3        | Filer ID (Ethics Commission | ו Filers) |
| 4       Date       5       Full name of contributor       out-d-state PAC (Dir:  | -        |                |  | as PAC                        |          |                             |           |
| 06/10/2025       Grover, Brillhart       \$\$34.00         6       Contributor address; City; State: Zip Code       \$\$ Employer (See Instructions)         Agent Advisor       9       Employer (See Instructions)         Agent Advisor       9       Employer (See Instructions)         06/10/2025       Full name of contributor       out-ot-state PAC (tot::       Amount of Contribution (\$)         06/10/2025       Full name of contributor       out-ot-state PAC (tot::       Amount of Contribution (\$)         06/10/2025       Full name of contributor       out-ot-state PAC (tot::       Amount of Contribution (\$)         06/10/2025       Full name of contributor       out-ot-state PAC (tot::       Amount of Contribution (\$)         06/10/2025       Jack, Knight       Contributor address; City; State; Zip Code       Amount of Contribution (\$)         06/10/2025       Jack, Knight       Contributor address; City; State; Zip Code       Amount of Contribution (\$)         06/10/2025       Full name of contributor       out-of-state PAC (tot::       Jack Knight Insurance Assoc         06/10/2025       Full name of contributor       out-of-state PAC (tot::       Jack Knight Insurance Assoc         06/10/2025       Jason, Mickey       Contributor address; City; State; Zip Code       Amount of Contribution (\$)         06/10/2025       Jason, Mickey<   | 4        |                |  |                               | +        | Amount of Contribution (\$) |           |
| 6       Contributor address; City: State: 2ip Code         Wylie, TX 75098-4036       9       Employer (See Instructions)         Agent Advisor       Principal occupation / Job title (See Instructions)       Penn Mutual Wealth Strategies         Date       Full name of contributor out of state PAC (ID#  | <b>–</b> |                |  | /                             | .        | Amount of Contribution (1)  | ¢34 00    |
| Wyle, TX 75098-4036       Principal occupation / Job the (See Instructions)<br>Agent Advisor       9       Employer (See Instructions)<br>Penn Mutual Wealth Strategies         Date       Full name of contributor       out-of-state PAC (D#   |          | 00/10/2020     |  |                               |          |                             | Ψ07.00    |
| 8       Principal occupation / Job title (See Instructions)<br>Agent Advisor       9       Employer (See Instructions)<br>Penn Mutual Wealth Strategies         Date       Full name of contributor       out-of-state PAC (ID#)       Amount of Contribution (\$)       \$100.00         06/10/2025       Hollie, Gandy Donohue       Contributor address; City State; Zip Code       Amount of Contribution (\$)       \$100.00         06/10/2025       Hollie, Gandy Donohue       Contributor address; City State; Zip Code       Amount of Contribution (\$)       \$100.00         OwnerSenior Producer       Contributor address; City; State; Zip Code       Employer (See Instructions)       Amount of Contribution (\$)       \$18.00         06/10/2025       Jack, Knight       Contributor address; City; State; Zip Code       Amount of Contribution (\$)       \$18.00         06/10/2025       Full name of contributor       out-of-state PAC (ID#)       Amount of Contribution (\$)       \$18.00         06/10/2025       Full name of contributor       out-of-state PAC (ID#)       Amount of Contribution (\$)       \$68.80         06/10/2025       Full name of contributor       out-of-state PAC (ID#)       Amount of Contribution (\$)       \$68.80         06/10/2025       Full name of contributor       out-of-state PAC (ID#)       Amount of Contribution (\$)       \$68.80 <t< td=""><td></td><td>ļ</td><td>6 Contributor address; City; State; Zip Coue</td><td>ļ</td><td></td><td></td><td></td></t<>  |          | ļ              | 6 Contributor address; City; State; Zip Coue     | ļ                             |          |                             |           |
| B       Principal occupation / Job title (See Instructions)<br>Agent Advisor       9       Employer (See Instructions)<br>Penn Mutual Wealth Strategies         Date       Full name of contributor       out-of-state PAC (ID#)       Amount of Contribution (\$)         06/10/2025       Hollie, Gandy Donohue       \$100.00         Contributor address: City: State; Zip Code       Amount of Contribution (\$)       \$100.00         Object       Amarillo, TX 79106-4633       Employer (See Instructions)<br>Texas Retirement Solutions       Amount of Contributor (\$)         OwnerSenior Producer       Texas Retirement Solutions       Texas Retirement Solutions       \$18.00         Object/01/2025       Full name of contributor address; City: State; Zip Code       Amount of Contribution (\$)       \$18.00         Object/01/2025       Jack, Knight       Contributor address; City: State; Zip Code       Amount of Contribution (\$)       \$18.00         Object/01/2025       Full name of contributor       out-of-state PAC (ID#)       Amount of Contribution (\$)       \$68.80         Object/01/2025       Full name of contributor       out-of-state PAC (ID#)       Amount of Contribution (\$)       \$68.80         Object/01/2025       Full name of contributor       out-of-state PAC (ID#)       Amount of Contribution (\$)       \$68.80         Object/01/2025       Full name of contri  |          | ļ              | 1  | ł                             |          |                             |           |
| B       Principal occupation / Job title (See Instructions)<br>Agent Advisor       9       Employer (See Instructions)<br>Penn Mutual Wealth Strategies         Date       Full name of contributor       out-of-state PAC (ID#)       Amount of Contribution (\$)         06/10/2025       Hollie, Gandy Donohue       \$100.00         Contributor address: City: State; Zip Code       Amount of Contribution (\$)       \$100.00         Object       Amarillo, TX 79106-4633       Employer (See Instructions)<br>Texas Retirement Solutions       Amount of Contributor (\$)         OwnerSenior Producer       Texas Retirement Solutions       Texas Retirement Solutions       \$18.00         Object/01/2025       Full name of contributor address; City: State; Zip Code       Amount of Contribution (\$)       \$18.00         Object/01/2025       Jack, Knight       Contributor address; City: State; Zip Code       Amount of Contribution (\$)       \$18.00         Object/01/2025       Full name of contributor       out-of-state PAC (ID#)       Amount of Contribution (\$)       \$68.80         Object/01/2025       Full name of contributor       out-of-state PAC (ID#)       Amount of Contribution (\$)       \$68.80         Object/01/2025       Full name of contributor       out-of-state PAC (ID#)       Amount of Contribution (\$)       \$68.80         Object/01/2025       Full name of contri  |          | 1              | While TX 75098-4036                              | ł                             |          |                             |           |
| Agent Advisor       Penn Mutual Wealth Strategies         Date       Full name of contributor       out-of-state PAC (10#;   |          | Principal occu |  | To Employer (See Instruction) | د)<br>   |                             |           |
| Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         06/10/2025       Hollie, Gandy Donohue       \$100.00         Contributor address; City; State; Zip Code       Amarillo, TX 79106-4633       Employer (See Instructions)         OwnerSenior Producer       Texas Retirement Solutions       Amount of Contribution (\$)         Od/10/2025       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         Od/10/2025       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         Oak       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         Ob/10/2025       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         Agency Owner       Employer (See Instructions)       Jack Knight Insurance Assoc         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         O6/10/2025       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         O6/10/2025       Full name of contributor       out-of-state PAC (ID#:)   | ľ        |                |  |                               |          | paines                      |           |
| 06/10/2025       Hollie, Gandy Donohue       \$100.00         Contributor address; City, State; Zip Code       Amarillo, TX 79106-4633       Employer (See Instructions)         OwnerSenior Producer       Texas Retirement Solutions       Texas Retirement Solutions         Date       Jack, Knight       Amount of Contribution (\$)       \$18.00         06/10/2025       Jack, Knight       Amount of Contribution (\$)       \$18.00         Contributor address; City; State; Zip Code       Amount of Contribution (\$)       \$18.00         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       \$18.00         Agency Owner       Jack Knight Insurance Assoc       \$18.00       \$18.00         Date       Full name of contributor  | ⊨        |                |  |                               | T        |                             |           |
| Contributor address; City; State; Zip Code         Amarillo, TX 79106-4633         Principal occupation / Job title (See Instructions)         OwnerSenior Producer         Date         06/10/2025         Amarillo, TX 79109-5908         Principal occupation / Job title (See Instructions)         Contributor address; City; State; Zip Code         Amarillo, TX 79109-5908         Principal occupation / Job title (See Instructions)         Agency Owner         Jack, Knight         Contributor address; City; State; Zip Code         Amarillo, TX 79109-5908         Principal occupation / Job title (See Instructions)         Agency Owner         Jason, Mickey         O6/10/2025         Full name of contributor         Out-of-state PAC (ID#)         Amount of Contribution (\$)         Spring, TX 77388-5012         Principal occupation / Job title (See Instructions)         Financial Advisor, Managing Associate         Wealth Design Group         Date         06/10/2025         Full name of contributor         Out-of-state PAC (ID#)         Amount of Contribution (\$)         Spring, TX 77388-5012         Principal occupation / Job title (See Instructions) <td></td> <td></td> <td></td> <td>)</td> <td></td> <td>Amount of Contribution (\$)</td> <td>÷100.00</td>   |          |                |  | )                             |          | Amount of Contribution (\$) | ÷100.00   |
| Amarillo, TX 79106-4633         Principal occupation / Job title (See instructions)         OwnerSenior Producer         Date         06/10/2025         Amarillo, TX 79109-5908         Principal occupation / Job title (See instructions)         Contributor address; City; State; Zip Code         Amarillo, TX 79109-5908         Principal occupation / Job title (See instructions)         Agency Owner         Jack, Knight         06/10/2025         Full name of contributor         out-of-state PAC (ID#)         Amount of Contribution (\$)         Spring, TX 77388-5012         Principal occupation / Job title (See Instructions)         Spring, TX 77388-5012         Principal occupation / Job title (See Instructions)         Financial Advisor, Managing Associate         Date         06/10/2025         Spring, TX 77388-5012         Principal occupation / Job title (See Instructions)         Financial Advisor, Managing Associate         Wealth Design Group         Date         06/10/2025         Jay, Schroeder         Contributor address; City; State; Zip Code         Brenham, TX 77833-5067         Principal occupation / Job title (See Instructions)  |          | 06/10/2025     | -  | ,                             |          |                             | \$100.00  |
| Principal occupation / Job title (See Instructions)<br>OwnerSenior Producer       Employer (See Instructions)<br>Texas Retirement Solutions         Date<br>06/10/2025       Full name of contributor out-of-state PAC (ID#:)<br>Jack, Knight<br>Contributor address; City; State; Zip Code       Amount of Contribution (\$)<br>\$18.00         Principal occupation / Job title (See Instructions)<br>Agency Owner       Employer (See Instructions)<br>Jack Knight Insurance Assoc         Date<br>06/10/2025       Full name of contributor  |          | ļ              |  | ,                             |          |                             |           |
| Principal occupation / Job title (See Instructions)<br>OwnerSenior Producer       Employer (See Instructions)<br>Texas Retirement Solutions         Date<br>06/10/2025       Full name of contributor out-of-state PAC (ID#:)<br>Jack, Knight<br>Contributor address; City; State; Zip Code       Amount of Contribution (\$)<br>\$18.00         Principal occupation / Job title (See Instructions)<br>Agency Owner       Employer (See Instructions)<br>Jack Knight Insurance Assoc         Date<br>06/10/2025       Full name of contributor  |          | ł              |  | ļ                             |          |                             |           |
| Principal occupation / Job title (See Instructions)<br>OwnerSenior Producer       Employer (See Instructions)<br>Texas Retirement Solutions         Date       Full name of contributor out-of-state PAC (ID#)<br>Jack, Knight       Amount of Contribution (\$)<br>State; Zip Code         O6/10/2025       Jack, Knight       \$18.00         Contributor address; City; State; Zip Code       Amarillo, TX 79109-5908         Principal occupation / Job title (See Instructions)<br>Agency Owner       Employer (See Instructions)<br>Jack Knight Insurance Assoc         Date       Full name of contributor out-of-state PAC (ID#:)<br>Jason, Mickey       Amount of Contribution (\$)<br>Spring, TX 77388-5012         Principal occupation / Job title (See Instructions)<br>Agency Owner       Employer (See Instructions)<br>Jack Knight Insurance Assoc         Date       Full name of contributor out-of-state PAC (ID#:)<br>Jason, Mickey       Amount of Contribution (\$)<br>Spring, TX 77388-5012         Principal occupation / Job title (See Instructions)<br>Financial Advisor, Managing Associate       Employer (See Instructions)<br>Wealth Design Group         Date       Full name of contributor out-of-state PAC (ID#:)<br>Jay, Schroeder       Amount of Contribution (\$)<br>State; Zip Code         O6/10/2025       Full name of contributor out-of-state PAC (ID#:)<br>Jay, Schroeder       Amount of Contribution (\$)<br>State; Zip Code         Brenham, TX 77833-5067       Employer (See Instructions)       State; Zip Code <t< td=""><td></td><td>ł</td><td></td><td>ļ</td><td></td><td></td><td></td></t<> |          | ł              |  | ļ                             |          |                             |           |
| OwnerSenior Producer       Texas Retirement Solutions         Date       Full name of contributor  |          |                |  | -                             |          |                             |           |
| Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         06/10/2025       Jack, Knight       \$18.00         Contributor address; City; State; Zip Code       Amarillo, TX 79109-5908       Employer (See Instructions)         Principal occupation / Job title (See Instructions)       Jack Knight Insurance Assoc       Amount of Contribution (\$)         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         06/10/2025       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         06/10/2025       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       \$6.80         Spring, TX 77388-5012       Employer (See Instructions)       \$6.80         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       \$4.80         06/10/2025       Full name of contributor       out-of-state PAC (ID#:   |          |                |  |                               |          |                             |           |
| 06/10/2025       Jack, Knight       \$18.00         Contributor address; City; State; Zip Code       Amarillo, TX 79109-5908       Employer (See Instructions)         Principal occupation / Job title (See Instructions)       Agency Owner       Jack Knight Insurance Assoc         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         06/10/2025       Jason, Mickey       \$6.80         Contributor address; City; State; Zip Code       \$6.80         Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Principal occupation / Job title (See Instructions)       Amount of Contribution (\$)         06/10/2025       Jay, Schroeder       \$4.80         Contributor address; City; State; Zip Code       \$4.80         Date       Full name of contributor       out-of-state PAC (ID#:)         06/10/2025       Jay, Schroeder       \$4.80         Contributor address; City; State; Zip Code       Employer (See Instructions)         Brenham, TX 77833-5067       Employer (See Instructio   | L        | OwnerSenio     | r Producer                                       | Texas Retirement Soluti       | tions    | S                           |           |
| Contributor address; City; State; Zip Code         Amarillo, TX 79109-5908         Principal occupation / Job title (See Instructions)         Agency Owner       Jack Knight Insurance Assoc         Date       Full name of contributor       out-of-state PAC (ID#:)         O6/10/2025       Jason, Mickey       \$6.80         "Contributor address; City; State; Zip Code       Amount of Contribution (\$)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Spring, TX 77388-5012       Employer (See Instructions)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Financial Advisor, Managing Associate       Wealth Design Group         Date       Full name of contributor       out-of-state PAC (ID#:)         O6/10/2025       Jay, Schroeder       \$4.80         Contributor address; City; State; Zip Code       \$4.80         Date       Full name of contributor       out-of-state PAC (ID#:)         O6/10/2025       Jay, Schroeder       \$4.80         Contributor address; City; State; Zip Code       Brenham, TX 77833-5067         Principal occupation / Job title (See Instructions)       Employer (See Instructions)  |          | Date           | Full name of contributor out-of-state PAC (ID#:_ | )                             | Τ        | Amount of Contribution (\$) |           |
| Contributor address; City; State; Zip Code         Amarillo, TX 79109-5908         Principal occupation / Job title (See Instructions)         Agency Owner         Date         Full name of contributor         Od:10/2025         Jason, Mickey         Contributor address; City; State; Zip Code         Contributor address; City; State; Zip Code         Spring, TX 77388-5012         Principal occupation / Job title (See Instructions)         Employer (See Instructions)         Financial Advisor, Managing Associate         Date         Gol10/2025         Jay, Schroeder         Contributor address; City; State; Zip Code         Brenham, TX 77833-5067         Principal occupation / Job title (See Instructions)         Employer (See Instructions)         Brenham, TX 77833-5067   |          | 06/10/2025     |  | ļ                             |          |                             | \$18.00   |
| Principal occupation / Job title (See Instructions)<br>Agency Owner       Employer (See Instructions)<br>Jack Knight Insurance Assoc         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         06/10/2025       Jason, Mickey       Amount of Contributor       \$6.80         Contributor address; City; State; Zip Code       Spring, TX 77388-5012       Employer (See Instructions)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       Mount of Contribution (\$)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       Mount of Contribution (\$)         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         06/10/2025       Jay, Schroeder       Out-of-state PAC (ID#:)       Amount of Contribution (\$)         06/10/2025       Brenham, TX 77833-5067       Employer (See Instructions)       \$4.80         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       \$4.80  |          | ,              |  |                               | 1        |                             |           |
| Principal occupation / Job title (See Instructions)<br>Agency Owner       Employer (See Instructions)<br>Jack Knight Insurance Assoc         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         06/10/2025       Jason, Mickey       Amount of Contributor       \$6.80         Contributor address; City; State; Zip Code       Spring, TX 77388-5012       Employer (See Instructions)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       Mount of Contribution (\$)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       Mount of Contribution (\$)         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         06/10/2025       Jay, Schroeder       Out-of-state PAC (ID#:)       Amount of Contribution (\$)         06/10/2025       Brenham, TX 77833-5067       Employer (See Instructions)       \$4.80         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       \$4.80  |          | ļ              | 1  | ł                             |          |                             |           |
| Principal occupation / Job title (See Instructions)<br>Agency Owner       Employer (See Instructions)<br>Jack Knight Insurance Assoc         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         06/10/2025       Jason, Mickey       Amount of Contributor       \$6.80         Contributor address; City; State; Zip Code       Spring, TX 77388-5012       Employer (See Instructions)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       Mount of Contribution (\$)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       Mount of Contribution (\$)         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         06/10/2025       Jay, Schroeder       Out-of-state PAC (ID#:)       Amount of Contribution (\$)         06/10/2025       Brenham, TX 77833-5067       Employer (See Instructions)       \$4.80         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       \$4.80  |          | ļ              | 1  | ļ                             |          |                             |           |
| Agency Owner       Jack Knight Insurance Assoc         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         06/10/2025       Jason, Mickey       \$6.80         Contributor address; City; State; Zip Code       \$6.80         Spring, TX 77388-5012       Employer (See Instructions)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Financial Advisor, Managing Associate       Wealth Design Group         Date       Full name of contributor       out-of-state PAC (ID#:)         06/10/2025       Jay, Schroeder       \$4.80         Contributor address; City; State; Zip Code       \$4.80         Brenham, TX 77833-5067       Employer (See Instructions)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)   |          |                | Amarillo, TX 79109-5908                          |                               |          |                             |           |
| Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         06/10/2025       Jason, Mickey       \$6.80         Contributor address; City; State; Zip Code       Spring, TX 77388-5012         Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Financial Advisor, Managing Associate       Wealth Design Group         Date       Full name of contributor       out-of-state PAC (ID#:)         06/10/2025       Full name of contributor       out-of-state PAC (ID#:)         06/10/2025       Full name of contributor       out-of-state PAC (ID#:)         06/10/2025       Brenham, TX 77833-5067       Amount of Contributions)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)  |          | Principal occu | pation / Job title (See Instructions)            | Employer (See Instructions    | s)       |                             |           |
| 06/10/2025       Jason, Mickey       \$6.80         Contributor address; City; State; Zip Code       \$6.80         Spring, TX 77388-5012       Employer (See Instructions)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Financial Advisor, Managing Associate       Wealth Design Group         Date       Full name of contributor out-of-state PAC (ID#:)         Jay, Schroeder       Amount of Contribution (\$)         Contributor address; City; State; Zip Code       \$4.80         Brenham, TX 77833-5067       Employer (See Instructions)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)  |          | Agency Owr     | ier  | Jack Knight Insurance A       | Asso     | 00                          |           |
| 06/10/2025       Jason, Mickey       \$6.80         Contributor address; City; State; Zip Code       \$6.80         Spring, TX 77388-5012       Employer (See Instructions)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Financial Advisor, Managing Associate       Wealth Design Group         Date       Full name of contributor out-of-state PAC (ID#:)         Jay, Schroeder       Amount of Contribution (\$)         Contributor address; City; State; Zip Code       \$4.80         Brenham, TX 77833-5067       Employer (See Instructions)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)  | F        | Date           | Full name of contributor out-of-state PAC (ID#:  | )                             | Τ        | Amount of Contribution (\$) |           |
| Contributor address; City; State; Zip Code         Spring, TX 77388-5012         Principal occupation / Job title (See Instructions)         Financial Advisor, Managing Associate         Date         Full name of contributor         Od/10/2025         Jay, Schroeder         Contributor address; City; State; Zip Code         Brenham, TX 77833-5067         Principal occupation / Job title (See Instructions)         Employer (See Instructions)         Employer (See Instructions)         Brenham, TX 77833-5067         Principal occupation / Job title (See Instructions)  |          |                |  |                               |          |                             | \$6.80    |
| Spring, TX 77388-5012         Principal occupation / Job title (See Instructions)         Financial Advisor, Managing Associate         Date         Full name of contributor         Od/10/2025         Jay, Schroeder         Contributor address; City; State; Zip Code         Brenham, TX 77833-5067         Principal occupation / Job title (See Instructions)         Employer (See Instructions)         Employer (See Instructions)         Wealth Design Group         Amount of Contribution (\$)         \$4.80         Brenham, TX 77833-5067         Principal occupation / Job title (See Instructions)         Employer (See Instructions)  |          | 00.21          | -  |                               | -        |                             | Ŧ -       |
| Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Financial Advisor, Managing Associate       Wealth Design Group         Date       Full name of contributor       out-of-state PAC (ID#:)         06/10/2025       Jay, Schroeder       Amount of Contribution (\$)         Contributor address; City; State; Zip Code       Brenham, TX 77833-5067       Employer (See Instructions)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       Employer (See Instructions)  |          | ļ              | CUITIBUTION AUDIESS, City, State, Lip Sous       | ł                             |          |                             |           |
| Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Financial Advisor, Managing Associate       Wealth Design Group         Date       Full name of contributor       out-of-state PAC (ID#:)         06/10/2025       Jay, Schroeder       Amount of Contribution (\$)         Contributor address; City; State; Zip Code       Brenham, TX 77833-5067       Employer (See Instructions)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       Employer (See Instructions)  |          | ļ              | 1  | ļ                             |          |                             |           |
| Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Financial Advisor, Managing Associate       Wealth Design Group         Date       Full name of contributor       out-of-state PAC (ID#:)         06/10/2025       Jay, Schroeder       Amount of Contribution (\$)         Contributor address; City; State; Zip Code       Brenham, TX 77833-5067       Employer (See Instructions)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       Employer (See Instructions)  |          | ļ              | Sprina, TX 77388-5012                            | ł                             |          |                             |           |
| Financial Advisor, Managing Associate       Wealth Design Group         Date       Full name of contributor       out-of-state PAC (ID#:)         06/10/2025       Jay, Schroeder       Amount of Contribution (\$)         Contributor address; City; State; Zip Code       State; Zip Code         Brenham, TX 77833-5067       Employer (See Instructions)  | $\vdash$ | Principal occu |  | T Employer (See Instructions  | L<br>s)  |                             |           |
| Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         06/10/2025       Jay, Schroeder       \$4.80         Contributor address; City; State; Zip Code       \$4.80         Brenham, TX 77833-5067       Employer (See Instructions)  |          | •              |  |                               | -,       |                             |           |
| 06/10/2025       Jay, Schroeder       \$4.80         Contributor address; City; State; Zip Code       \$4.80         Brenham, TX 77833-5067       Employer (See Instructions)  | ⊨        |                |  |                               | Τ        | Amount of Contribution (\$) |           |
| Contributor address; City; State; Zip Code         Brenham, TX 77833-5067         Principal occupation / Job title (See Instructions)         Employer (See Instructions)  |          |                |  | J                             |          |                             | ¢4 80     |
| Brenham, TX 77833-5067       Principal occupation / Job title (See Instructions)       Employer (See Instructions)   |          | 00/10/2020     | -  |                               | -        |                             | Ψ7.00     |
| Principal occupation / Job title (See Instructions) Employer (See Instructions)  |          | ļ              | Contributor address; City; State; Zip Coue       | ,                             |          |                             |           |
| Principal occupation / Job title (See Instructions) Employer (See Instructions)  |          | ļ              | 1  | ł                             |          |                             |           |
| Principal occupation / Job title (See Instructions) Employer (See Instructions)  |          | ļ              | Brenham TY 77833-5067                            | ł                             |          |                             |           |
|  | $\vdash$ | Drincinal OCCL |  | T Employer (See Instruction:  | <u> </u> |                             |           |
| AGENT Southern Faith Bureau Eile insurance   |          |                | pation / Job line (See instructions)             |                               |          | - Incurance                 |           |
|  | L        | AGEINI         |  |                               | Lite     |                             |           |
|  |          |                |  |                               |          |                             |           |

|          | The Instru  | ction Guide explains how to complete this f          | iorm.                        | 1                | Total pages Schedule A1:<br>Sch: 8/14 Rpt: 11/21 |           |
|----------|---|--|------------------------------|------------------|--|-----------|
| 2        | FILER NAME  |  |                              | 3                | Filer ID (Ethics Commission                      | ı Filers) |
|          | National Ass  | sociation of Insurance and Financial Advisors - Texa | IS PAC                       |                  | 00015644   |           |
| 4        | Date  | 5 Full name of contributor out-of-state PAC (ID#:    | )                            | 7                | Amount of Contribution (\$)                      |           |
|          | 06/10/2025  | Jim, Hutson  |                              |                  |  | \$12.00   |
|          |   | 6 Contributor address; City; State; Zip Code         |                              | 1                |  |           |
|          |   |  |                              |                  |  |           |
|          |   |  |                              |                  |  |           |
|          |   | Amarillo, TX 79109-5039                              |                              |                  |  |           |
| 8        | Principal occu  | ipation / Job title (See Instructions)               | 9 Employer (See Instructions | 3)               |  |           |
|          | Owner   |  | The Jim Hutson Agency        | /, L             | LC   |           |
|          | Date  | Full name of contributor out-of-state PAC (ID#:      | )                            | Γ                | Amount of Contribution (\$)                      |           |
|          | 06/10/2025  | Joey, Ussery   |                              |                  |  | \$40.00   |
|          |   | Contributor address; City; State; Zip Code           |                              | 1                |  |           |
|          |   |  |                              |                  |  |           |
|          |   |  |                              |                  |  |           |
|          |   | Bellville, TX 77418-3822                             |                              |                  |  |           |
|          | Principal occupation / Job title (See Instructions) Emp |  | Employer (See Instructions   | 5)               |  |           |
|          | Regional V.F  | ٥.   | John Hancock Life Insur      | ran              | ice  |           |
| F        | Date  | Full name of contributor Out-of-state PAC (ID#:      |                              | Γ                | Amount of Contribution (\$)                      |           |
|          | 06/10/2025 John, Brieden                                |  |                              |                  |  | \$6.80    |
|          | -   |  |                              | 1                |  |           |
|          |   |  |                              |                  |  |           |
|          |   |  |                              |                  |  |           |
|          |   | Brenham, TX 77833-4916                               |                              |                  |  |           |
|          | Principal occu  | upation / Job title (See Instructions)               | Employer (See Instructions   | 5)               |  |           |
|          | Agent Advisor S   |  | State Farm Insurance C       | Com              | ıpanies  |           |
| F        | Date  | Full name of contributor Out-of-state PAC (ID#:      | <u> </u>                     | Г                | Amount of Contribution (\$)                      |           |
|          | 06/10/2025  | John, Denton   |                              |                  |  | \$3.40    |
|          | -   | Contributor address; City; State; Zip Code           |                              |                  |  |           |
|          |   |  |                              |                  |  |           |
|          |   |  |                              |                  |  |           |
|          |   | Amarillo, TX 79109-3534                              |                              |                  |  |           |
| $\vdash$ | Principal occu  | upation / Job title (See Instructions)               | Employer (See Instructions   | <u> </u>         |  |           |
|          | Field_Repre   |  | Northwestern Mutual          |                  |  |           |
| ⊨        | Date  | Full name of contributor Out-of-state PAC (ID#:      | <u> </u> )                   | Γ                | Amount of Contribution (\$)                      |           |
|          | 06/10/2025  | John, Rivard   |                              |                  |  | \$4.00    |
|          |   |  |                              | $\left  \right $ |  |           |
|          |   |  |                              |                  |  |           |
|          |   |  |                              |                  |  |           |
|          |   | Dallas, TX 75214-2614                                |                              |                  |  |           |
| $\vdash$ | Principal occu  | I upation / Job title (See Instructions)             | Employer (See Instructions   | 」<br>s)          |  |           |
|          | Agent Adviso  |  | Borden Hamman Agenc          |                  |  |           |
| ⊢        |   |  | -                            |                  |  |           |
|          |   |  |                              |                  |  |           |

| 1 Total pages Schedule  |                   |
|---|-------------------|
| The Instruction Guide explains how to complete this form.   |                   |
| 2 FILER NAME 3 Filer ID (Ethics Com   | mission Filers)   |
| National Association of Insurance and Financial Advisors - Texas PAC 00015644   |                   |
| 4 Date 5 Full name of contributor out-of-state PAC (ID#: ) 7 Amount of Contribution   | n (\$)            |
| 06/10/2025 John, Still  | \$6.80            |
| 6 Contributor address; City; State; Zip Code  | + <del></del> -   |
| Continuation address, City, State, Zip Code   |                   |
|   |                   |
| Nacogdoches, TX 75965-3586  |                   |
| 8 Principal occupation / Job title (See Instructions) 9 Employer (See Instructions)   |                   |
| Agent/Owner Still Financial Group   |                   |
| Date     Full name of contributor     out-of-state PAC (ID#:)     Amount of Contribution  | n (\$)            |
| 06/10/2025 John, Wheeler Jr.  | \$168.00          |
|   | φ100.00           |
| Contributor address; City; State; Zip Code  |                   |
|   |                   |
| Montgomery, TX 77356-1798   |                   |
| Principal occupation / Job title (See Instructions) Employer (See Instructions)   |                   |
| Executive Senior Partner Totus Wealth Management LLC  |                   |
|   | ··· (个)           |
| Date Full name of contributor out-of-state PAC (ID#:) Amount of Contribution  | n (\$)<br>\$3.40  |
| 06/10/2025 Jon, Sharp   | Φ <b>3.</b> 40    |
| Contributor address; City; State; Zip Code  |                   |
|   |                   |
| Victoria, TX 77904-3392   |                   |
| Principal occupation / Job title (See Instructions) Employer (See Instructions)   |                   |
| District Manager National Life  |                   |
|   | ··· (ආ)           |
| Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution         06/10/2025       Karen, True       Image: Contribution of Contribution     |                   |
|   | \$20.00           |
| Contributor address; City; State; Zip Code  |                   |
|   |                   |
| Dallas, TX 75214-3188   |                   |
| Principal occupation / Job title (See Instructions)     Employer (See Instructions)   |                   |
| Executive Vice President NAIFA - Dallas   |                   |
|   |                   |
|   | n (\$)<br>\$10.00 |
| Date     Full name of contributor     out-of-state PAC (ID#:)     Amount of Contribution  |                   |
| 06/10/2025 Ken, Quach   | Φ10.00            |
|   | \$10.00           |
| 06/10/2025 Ken, Quach   | \$10.00           |
| 06/10/2025 Ken, Quach<br>Contributor address; City; State; Zip Code   | \$10.00           |
| 06/10/2025 Ken, Quach<br>Contributor address; City; State; Zip Code<br>Fulshear, TX 77441-2505  | \$10.00           |
| 06/10/2025 Ken, Quach<br>Contributor address; City; State; Zip Code<br>Fulshear, TX 77441-2505<br>Principal occupation / Job title (See Instructions) Employer (See Instructions) | \$10.00           |
| 06/10/2025 Ken, Quach<br>Contributor address; City; State; Zip Code<br>Fulshear, TX 77441-2505  |                   |

| The Instruction Guide explains how to complete this form.       1       Total pages Schedule AL:<br>Sch: 10/14 Rpt 13/21         2       FILER NAME<br>National Association of Insurance and Financial Advisors - Texas PAC       3       Filer ID       (Eines commissio<br>00015644         4       Date<br>06/10/2025       5       Full name of contributor<br>of contributor address; City; State; Zip Code       7       Amount of Contribution (S)         6       Contributor address; City; State; Zip Code       7       Amount of Contribution (S)         06/10/2025       Full name of contributor<br>address; City; State; Zip Code       9       Employer (See Instructions)<br>The Haworth Company         06/10/2025       Full name of contributor<br>contributor address; City; State; Zip Code       9       Employer (See Instructions)<br>The Haworth Company         06/10/2025       Full name of contributor<br>contributor address; City; State; Zip Code       Amount of Contribution (S)         06/10/2025       Full name of contributor<br>Lannie, Jackson       Employer (See Instructions)<br>Don Boozer & Assoc.         06/10/2025       Full name of contributor<br>Lannie, Jackson       Employer (See Instructions)<br>Jackson Benefits Group         06/10/2025       Full name of contributor<br>contributor address; City; State; Zip Code       Amount of Contribution (S)         06/10/2025       Full name of contributor<br>Lesley, Pinckard       Out of state PAC (ID#)<br>Jackson Benefits Group         06 |               |
|--|---------------|
| National Association of Insurance and Financial Advisors - Texas PAC       00015644         4 Date       5 Full name of contributor       out-of-state PAC (De       7       Amount of Contribution (\$)         6 Contributor address; City; State; Zip Code       Amount of Contribution (\$)       7       Amount of Contribution (\$)         8 Principal occupation / Job title (See Instructions)       9       Employer (See Instructions)       Amount of Contribution (\$)         Date       Full name of contributor       out-of-state PAC (De:       Amount of Contribution (\$)         06/10/2025       Full name of contributor       out-of-state PAC (De:       Amount of Contribution (\$)         Date       Denton, TX 76205-8008       Employer (See Instructions)       Amount of Contribution (\$)         Principal occupation / Job title (See Instructions)       Don Boozer & Assoc.       Don Boozer & Assoc.         Date       Full name of contributor       out-of-state PAC (De:       Amount of Contribution (\$)         06/10/2025       Full name of contributor       out-of-state PAC (De:       Amount of Contribution (\$)         Obj(10/2025       Full name of contributor       out-of-state PAC (De:       Amount of Contribution (\$)         06/10/2025       Full name of contributor       out-of-state PAC (De:       Amount of Contribution (\$)         06/10/2025       Full name of contributor  |               |
| National Association of Insurance and Financial Advisors - Texas PAC       00015644         4 Date       5 Full name of contributor       out-of-state PAC (De       7       Amount of Contribution (\$)         6 Contributor address; City; State; Zip Code       Amount of Contribution (\$)       7       Amount of Contribution (\$)         8 Principal occupation / Job title (See Instructions)       9       Employer (See Instructions)       Amount of Contribution (\$)         Date       Full name of contributor       out-of-state PAC (De:       Amount of Contribution (\$)         06/10/2025       Full name of contributor       out-of-state PAC (De:       Amount of Contribution (\$)         Date       Denton, TX 76205-8008       Employer (See Instructions)       Amount of Contribution (\$)         Principal occupation / Job title (See Instructions)       Don Boozer & Assoc.       Don Boozer & Assoc.         Date       Full name of contributor       out-of-state PAC (De:       Amount of Contribution (\$)         06/10/2025       Full name of contributor       out-of-state PAC (De:       Amount of Contribution (\$)         Obj(10/2025       Full name of contributor       out-of-state PAC (De:       Amount of Contribution (\$)         06/10/2025       Full name of contributor       out-of-state PAC (De:       Amount of Contribution (\$)         06/10/2025       Full name of contributor  | on Filers)    |
| 06/10/2025       Kirk, Haworth         6       Contributor address; City; State; Zip Code         Amarillo, TX 79159-0265       9         8       Principal occupation / Job title (See Instructions)         Agent Advisor       9         Date       Full name of contributor  |               |
| 06/10/2025       Kirk, Haworth         6       Contributor address; City; State; Zip Code         Amarillo, TX 79159-0265       9         8       Principal occupation / Job title (See Instructions)         Agent Advisor       9         Date       Full name of contributor  |               |
| Amarillo, TX 79159-0265       Pincipal occupation / Job title (See Instructions)<br>Agent Advisor       P Employer (See Instructions)<br>The Haworth Company<br>The Haworth Company         Date       Full name of contributor       out-of-state PAC (ID#)       Amount of Contribution (\$)         06/10/2025       Full name of contributor       out-of-state PAC (ID#)       Amount of Contribution (\$)         Date       Denton, TX 76205-8008       Employer (See Instructions)<br>Denton, TX 76205-8008       Employer (See Instructions)<br>Don Boozer & Assoc.         Vice President - Marketing       Dout-of-state PAC (ID#)       Amount of Contribution (\$)         06/10/2025       Full name of contributor       out-of-state PAC (ID#)       Amount of Contribution (\$)         06/10/2025       Full name of contributor       out-of-state PAC (ID#)       Amount of Contribution (\$)         06/10/2025       Full name of contributor       out-of-state PAC (ID#)       Amount of Contribution (\$)         06/10/2025       Full name of contributor       out-of-state PAC (ID#)       Amount of Contribution (\$)         06/10/2025       Full name of contributor       out-of-state PAC (ID#)       Amount of Contribution (\$)         06/10/2025       Full name of contributor       out-of-state PAC (ID#)       Amount of Contribution (\$)         06/10/2025       Full name of contributor  | \$10.00       |
| Amarillo, TX 79159-0265       Principal occupation / Job title (See Instructions)<br>Agent Advisor       P Employer (See Instructions)<br>The Haworth Company<br>The Haworth Company<br>The Haworth Company<br>The Haworth Company<br>The Haworth Company         Date       Full name of contributor       out-of-state PAC (ID#  |               |
| 8       Principal occupation / Job title (See Instructions)<br>Agent Advisor       9       Employer (See Instructions)<br>The Haworth Company         Date<br>06/10/2025       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         Date<br>06/10/2025       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         Denton, TX 76205-8008       Employer (See Instructions)<br>Vice President - Marketing       Denton, TX 76205-8008       Amount of Contribution (\$)         Date<br>06/10/2025       Full name of contributor       out-of-state PAC (ID#:)       Don Boozer & Assoc.         Date<br>06/10/2025       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         06/10/2025       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         Owner       Coppell, TX 75019-4007       Employer (See Instructions)<br>Jackson Benefits Group       Amount of Contribution (\$)         Owner       Contributor address; City; State; Zip Code       Amount of Contribution (\$)       Amount of Contribution (\$)         O6/10/2025       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         O6/10/2025       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         Financial Advisor  |               |
| 8       Principal occupation / Job title (See Instructions)<br>Agent Advisor       9       Employer (See Instructions)<br>The Haworth Company         Date<br>06/10/2025       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         Date<br>06/10/2025       Denton, TX 76205-8008       Employer (See Instructions)<br>Don Boozer & Assoc.       Amount of Contribution (\$)         Principal occupation / Job title (See Instructions)<br>Vice President - Marketing       Don Boozer & Assoc.       Amount of Contribution (\$)         Date<br>06/10/2025       Full name of contributor out-of-state PAC (ID#:)       Amount of Contribution (\$)         Oak       Contributor address; City; State; Zip Code       Amount of Contribution (\$)         06/10/2025       Full name of contributor out-of-state PAC (ID#:)       Amount of Contribution (\$)         Owner       Coppell, TX 75019-4007       Employer (See Instructions)<br>Jackson Benefits Group       Amount of Contribution (\$)         Owner       Contributor address; City; State; Zip Code       Amount of Contribution (\$)       Amount of Contribution (\$)         O6/10/2025       Full name of contributor out-of-state PAC (ID#:)       Amount of Contribution (\$)       Employer (See Instructions)<br>Jackson Benefits Group       Amount of Contribution (\$)         O6/10/2025       Full name of contributor out-of-state PAC (ID#:  |               |
| Agent Advisor       The Haworth Company         Date<br>06/10/2025       Full name of contributor  |               |
| Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         06/10/2025       Lane, Boozer       Contributor address; City; State; Zip Code       Amount of Contribution (\$)         Denton, TX 76205-8008       Employer (See Instructions)       Don Boozer & Assoc.         Vice President - Marketing       Don Boozer & Assoc.       Amount of Contribution (\$)         06/10/2025       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         06/10/2025       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         06/10/2025       Coppell, TX 75019-4007       Employer (See Instructions)       Amount of Contribution (\$)         Ok/10/2025       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         06/10/2025       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         06/10/2025       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         06/10/2025       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         06/10/2025       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         06/10/2025   |               |
| 06/10/2025       Lane, Boozer         Contributor address; City; State; Zip Code         Denton, TX 76205-8008         Principal occupation / Job title (See Instructions)         Vice Presid=rt - Marketing         Date         06/10/2025         Lannie, Jackson         Contributor address; City; State; Zip Code         O6/10/2025         Lannie, Jackson         Contributor address; City; State; Zip Code         Contributor address; City; State; Zip Code         Principal occupation / Job title (See Instructions)         Date         O6/10/2025         Full name of contributor         Out-of-state PAC (ID#:         Amount of Contribution (\$)         O6/10/2025         Full name of contributor         Ode/10/2025         Lesley, Pinckard         Contributor address; City; State; Zip Code         Fort Worth, TX 76135-4424         Principal occupation / Job title (See Instructions)         Employer (See Instructions)         Linda, Goss         Contributor address; City; State; Zip Code         Principal occupation / Job title (See Instructions)         Financial Advisor         Date       Full name of contributor         Ode/10/2025       Fu  |               |
| Contributor address; City; State; Zip Code       Employer (See Instructions)       Don Boozer & Assoc.         Principal occupation / Job title (See Instructions)       Don Boozer & Assoc.       Don Boozer & Assoc.         Date       Full name of contributor       out-of-state PAC (ID#   |               |
| Contributor address; City; State; Zip Code       Denton, TX 76205-8008         Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Vice President - Marketing       Don Boozer & Assoc.         Date       Full name of contributorout-of-state PAC (ID#;)       Amount of Contribution (\$)         06/10/2025       Lannie, Jackson  | \$34.00       |
| Principal occupation / Job title (See Instructions)<br>Vice President - Marketing       Employer (See Instructions)<br>Don Boozer & Assoc.         Date       Full name of contributor out-of-state PAC (ID#:)<br>Lannie, Jackson       Amount of Contribution (\$)         O6/10/2025       Contributor address; City; State; Zip Code       Amount of Contribution (\$)         Principal occupation / Job title (See Instructions)<br>OWNER       Employer (See Instructions)<br>Jackson Benefits Group         Date       Full name of contributor out-of-state PAC (ID#:)<br>Lesley, Pinckard       Amount of Contribution (\$)         O6/10/2025       Full name of contributor out-of-state PAC (ID#:)<br>Lesley, Pinckard       Amount of Contribution (\$)         Principal occupation / Job title (See Instructions)<br>Dof/10/2025       Full name of contributor out-of-state PAC (ID#:)<br>Lesley, Pinckard       Amount of Contribution (\$)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)<br>LP Insurance and Financial Services         Date       Full name of contributor out-of-state PAC (ID#:)       Amount of Contribution (\$)         Date       Full name of contributor out-of-state PAC (ID#:)       Amount of Contribution (\$)         Date       Full name of contributor out-of-state PAC (ID#:)       Amount of Contribution (\$)         Date       Full name of contributor out-of-state PAC (ID#:)       Amount o   |               |
| Principal occupation / Job title (See Instructions)<br>Vice President - Marketing       Employer (See Instructions)<br>Don Boozer & Assoc.         Date       Full name of contributor out-of-state PAC (ID#:)<br>Lannie, Jackson       Amount of Contribution (\$)         O6/10/2025       Contributor address; City; State; Zip Code       Amount of Contribution (\$)         Principal occupation / Job title (See Instructions)<br>OWNER       Employer (See Instructions)<br>Jackson Benefits Group         Date       Full name of contributor out-of-state PAC (ID#:)<br>Lesley, Pinckard       Amount of Contribution (\$)         O6/10/2025       Full name of contributor out-of-state PAC (ID#:)<br>Lesley, Pinckard       Amount of Contribution (\$)         Principal occupation / Job title (See Instructions)<br>D0f10/2025       Full name of contributor out-of-state PAC (ID#:)<br>Lesley, Pinckard       Amount of Contribution (\$)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)<br>LP Insurance and Financial Services         Date       Full name of contributor out-of-state PAC (ID#:)<br>Linda, Goss       Amount of Contribution (\$)         Date       Full name of contributor out-of-state PAC (ID#:)<br>Linda, Goss       Amount of Contribution (\$)   |               |
| Principal occupation / Job title (See Instructions)<br>Vice President - Marketing       Employer (See Instructions)<br>Don Boozer & Assoc.         Date       Full name of contributor out-of-state PAC (ID#:)<br>Lannie, Jackson       Amount of Contribution (\$)         O6/10/2025       Contributor address; City; State; Zip Code       Amount of Contribution (\$)         Principal occupation / Job title (See Instructions)<br>OWNER       Employer (See Instructions)<br>Jackson Benefits Group         Date       Full name of contributor out-of-state PAC (ID#:)<br>Lesley, Pinckard       Amount of Contribution (\$)         O6/10/2025       Full name of contributor out-of-state PAC (ID#:)<br>Lesley, Pinckard       Amount of Contribution (\$)         Principal occupation / Job title (See Instructions)<br>Dof/10/2025       Employer (See Instructions)<br>Lesley, Pinckard       Amount of Contribution (\$)         O6/10/2025       Fort Worth, TX 76135-4424       Principal occupation / Job title (See Instructions)<br>Financial Advisor       Employer (See Instructions)<br>LP Insurance and Financial Services         Date       Full name of contributor out-of-state PAC (ID#:)<br>Linda, Goss       Amount of Contribution (\$)         O6/10/2025       Full name of contributor out-of-state PAC (ID#:)<br>Linda, Goss       Amount of Contribution (\$)   |               |
| Vice President - Marketing       Don Boozer & Assoc.         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         06/10/2025       Lannie, Jackson       Contributor address; City; State; Zip Code       Amount of Contribution (\$)         Coppell, TX 75019-4007       Employer (See Instructions)       Amount of Contribution (\$)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       Amount of Contribution (\$)         Ob/10/2025       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         06/10/2025       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         06/10/2025       Fort Worth, TX 76135-4424       Employer (See Instructions)       Employer (See Instructions)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       LP Insurance and Financial Services         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         06/10/2025       Linda, Goss       Contributor address; City; State; Zip Code       Amount of Contribution (\$)   |               |
| Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         06/10/2025       Lannie, Jackson       Contributor address; City, State; Zip Code       Amount of Contribution (\$)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       Jackson Benefits Group         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         06/10/2025       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       Amount of Contribution (\$)         06/10/2025       Fort Worth, TX 76135-4424       Employer (See Instructions)       Employer (See Instructions)         Financial Advisor       Employer (See Instructions)       LP Insurance and Financial Services         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         06/10/2025       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         06/10/2025       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)  |               |
| 06/10/2025       Lannie, Jackson         Contributor address; City; State; Zip Code         Coppell, TX 75019-4007         Principal occupation / Job title (See Instructions)         OWNER         Date         Full name of contributor         06/10/2025         Lesley, Pinckard         Contributor address; City; State; Zip Code         Fort Worth, TX 76135-4424         Principal occupation / Job title (See Instructions)         Fort Worth, TX 76135-4424         Principal occupation / Job title (See Instructions)         Financial Advisor         Date         6/10/2025         Lesley, Pinckard         Contributor address; City; State; Zip Code         Fort Worth, TX 76135-4424         Principal occupation / Job title (See Instructions)         Financial Advisor         Date         6/10/2025         Full name of contributor         0ut-of-state PAC (ID#:  |               |
| Contributor address; City; State; Zip Code         Coppell, TX 75019-4007         Principal occupation / Job title (See Instructions)<br>OWNER       Employer (See Instructions)<br>Jackson Benefits Group         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         06/10/2025       Engloyer (See Instructions)<br>Lesley, Pinckard       Amount of Contribution (\$)         Fort Worth, TX 76135-4424       Fort Worth, TX 76135-4424         Principal occupation / Job title (See Instructions)<br>Financial Advisor       Employer (See Instructions)<br>LP Insurance and Financial Services         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         06/10/2025       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         06/10/2025       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         06/10/2025       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         06/10/2025       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)  | <b>#10.00</b> |
| Coppell, TX 75019-4007       Employer (See Instructions)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)         OWNER       Full name of contributor       out-of-state PAC (ID#:)         Date       Full name of contributor       out-of-state PAC (ID#:)         O6/10/2025       Lesley, Pinckard       Amount of Contribution (\$)         Contributor address; City; State; Zip Code       Fort Worth, TX 76135-4424         Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Financial Advisor       LP Insurance and Financial Services         Date       Full name of contributor       out-of-state PAC (ID#:)         O6/10/2025       Full name of contributor       out-of-state PAC (ID#:)         Date       Full name of contributor       out-of-state PAC (ID#:)         O6/10/2025       Full name of contributor       out-of-state PAC (ID#:)         O6/10/2025       Contributor address; City; State; Zip Code       Amount of Contribution (\$)   | \$10.00       |
| Principal occupation / Job title (See Instructions)<br>OWNER       Employer (See Instructions)<br>Jackson Benefits Group         Date       Full name of contributor       out-of-state PAC (ID#:)         06/10/2025       Lesley, Pinckard       Amount of Contribution (\$)         Contributor address; City; State; Zip Code       Fort Worth, TX 76135-4424       Amount of Contributions)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       Employer (See Instructions)         Financial Advisor       Employer (See Instructions)       LP Insurance and Financial Services         Date       Full name of contributor out-of-state PAC (ID#:)       Amount of Contribution (\$)         06/10/2025       Full name of contributor out-of-state PAC (ID#:)       Amount of Contribution (\$)         06/10/2025       Contributor address; City; State; Zip Code       Amount of Contribution (\$)   |               |
| Principal occupation / Job title (See Instructions)<br>OWNER       Employer (See Instructions)<br>Jackson Benefits Group         Date       Full name of contributor       out-of-state PAC (ID#:)<br>Lesley, Pinckard       Amount of Contribution (\$)         06/10/2025       Fort Worth, TX 76135-4424       Fort Worth, TX 76135-4424         Principal occupation / Job title (See Instructions)<br>Financial Advisor       Employer (See Instructions)<br>LP Insurance and Financial Services         Date       Full name of contributor       out-of-state PAC (ID#:)<br>Linda, Goss       Amount of Contribution (\$)   |               |
| Principal occupation / Job title (See Instructions)<br>OWNER       Employer (See Instructions)<br>Jackson Benefits Group         Date       Full name of contributor       out-of-state PAC (ID#:)         06/10/2025       Lesley, Pinckard       Amount of Contribution (\$)         Contributor address; City; State; Zip Code       Fort Worth, TX 76135-4424       Amount of Contributions)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       Employer (See Instructions)         Financial Advisor       Employer (See Instructions)       LP Insurance and Financial Services         Date       Full name of contributor out-of-state PAC (ID#:)       Amount of Contribution (\$)         06/10/2025       Full name of contributor out-of-state PAC (ID#:)       Amount of Contribution (\$)         06/10/2025       Contributor address; City; State; Zip Code       Amount of Contribution (\$)   |               |
| Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         06/10/2025       Lesley, Pinckard  |               |
| 06/10/2025       Lesley, Pinckard         Contributor address; City; State; Zip Code         Fort Worth, TX 76135-4424         Principal occupation / Job title (See Instructions)         Financial Advisor         Date         Full name of contributor         06/10/2025         Linda, Goss         Contributor address; City; State; Zip Code   |               |
| 06/10/2025       Lesley, Pinckard         Contributor address; City; State; Zip Code         Fort Worth, TX 76135-4424         Principal occupation / Job title (See Instructions)         Financial Advisor         Date         Full name of contributor         06/10/2025         Linda, Goss         Contributor address; City; State; Zip Code   |               |
| Fort Worth, TX 76135-4424         Principal occupation / Job title (See Instructions)         Financial Advisor         Date         Full name of contributor         06/10/2025         Linda, Goss         Contributor address; City; State; Zip Code  | \$22.80       |
| Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Financial Advisor       LP Insurance and Financial Services         Date       Full name of contributor out-of-state PAC (ID#:)         06/10/2025       Linda, Goss         Contributor address; City; State; Zip Code       Amount of Contribution (\$)  |               |
| Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Financial Advisor       LP Insurance and Financial Services         Date       Full name of contributor       out-of-state PAC (ID#:)         06/10/2025       Linda, Goss       Amount of Contribution (\$)         Contributor address; City; State; Zip Code       Contributor address; City; State; Zip Code   |               |
| Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Financial Advisor       LP Insurance and Financial Services         Date       Full name of contributor       out-of-state PAC (ID#:)         06/10/2025       Linda, Goss       Amount of Contribution (\$)         Contributor address; City; State; Zip Code       Contributor address; City; State; Zip Code   |               |
| Financial Advisor       LP Insurance and Financial Services         Date       Full name of contributor out-of-state PAC (ID#:)       Amount of Contribution (\$)         06/10/2025       Linda, Goss       Contributor address; City; State; Zip Code  |               |
| Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         06/10/2025       Linda, Goss       Contributor address; City; State; Zip Code       Amount of Contribution (\$)  |               |
| 06/10/2025 Linda, Goss<br>Contributor address; City; State; Zip Code   |               |
| Contributor address; City; State; Zip Code   |               |
| Contributor address; City; State; Zip Code   | \$10.00       |
| Leander, TX 78641-3802   |               |
| Leander, TX 78641-3802   |               |
| Leander, 1X 78641-3802   |               |
|  |               |
| Principal occupation / Job title (See Instructions)Employer (See Instructions)Agent AdvisorLinda Goss  |               |
| Agent Advisor Linda Goss   |               |
|  |               |

| The Instruction Guide explains how to complete this form.       1 Total pages Stateling         2 FLER NAME<br>National Association of Insurance and Financial Advisors - Texas PAC       3 Filer (D (Ethics Commission Filers)<br>00015644         4 Date<br>06/10/2025       5 Full name of contributor out-et-state PAC (UD#)       7 Amount of Contribution (S)<br>00015644         8 Principal occupation / Job tile (See Instructions)<br>Apent Advisor       9 Employer (See Instructions)<br>Retired       7 Amount of Contribution (S)<br>00015644         9 Date<br>06/10/2025       Full name of contributor out-et-state PAC (UD#)       Amount of Contribution (S)<br>00015644         9 Principal occupation / Job tile (See Instructions)<br>Principal occupation / Job tile (See Instructions)<br>Financial Associate       9 Employer (See Instructions)<br>Thrivent Financial       Amount of Contribution (S)<br>S20.80         Principal occupation / Job tile (See Instructions)<br>Financial Associate       Employer (See Instructions)<br>Thrivent Financial       Amount of Contribution (S)<br>S18.00         Principal occupation / Job tile (See Instructions)<br>Financial Associate       Employer (See Instructions)<br>Thrivent Financial       Amount of Contribution (S)<br>S18.00         Principal occupation / Job tile (See Instructions)<br>Environment address: City: State: Zip Code<br>Contributor address: City: State: Zip Code<br>Plano, TX 75024-6324       Employer (See Instructions)<br>The Shamicok Group       Amount of Contribution (S)<br>S10.00         Date<br>O01/02/2025       Full mane of contributor<br>Planck Wider       Contributor address; City: State: Zip C |                |  |                              |                                     |                 |
|---|----------------|--|------------------------------|-------------------------------------|-----------------|
| National Association of Insurance and Financial Advisors - Texas PAC       00015644         4 Date       5 Full name of contributor on constance PAC (Dormannian Contribution (\$)       7 Amount of Contribution (\$)         06/10/2025       6 Contributor address; City; State; Zip Code       7 Amount of Contribution (\$)         8 Principal occupation / Job tite (See Instructions)<br>Agent Advisor       9 Employer (See Instructions)<br>Retired       Amount of Contribution (\$)         Date       06/10/2025       Full name of contributor or out-state PAC (Dormannian Contribution (\$)       Amount of Contribution (\$)         Principal occupation / Job tite (See Instructions)<br>Retired       Finançal Associate       Amount of Contribution (\$)         Principal occupation / Job tite (See Instructions)       Employer (See Instructions)<br>Thrivent Financial       Amount of Contribution (\$)         Principal occupation / Job tite (See Instructions)       Employer (See Instructions)<br>Thrivent Financial       Amount of Contribution (\$)         Od/10/2025       Full name of contributor or distate PAC (Dormannian Contribution (\$)       S18.00         Od/10/2025       Full name of contributor or out-state PAC (Dormannian Contribution (\$)       Amount of Contribution (\$)         Od/10/2025       Full name of contributor or out-state PAC (Dormannian Contribution (\$)       S18.00         Od/10/2025       Full name of contributor or out-state PAC (Dormannian Contribution (\$)       Amount of Contribution (\$)  | The Inst       | ruction Guide explains how to complete this f            | form.                        |                                     |                 |
| National Association of Insurance and Financial Advisors - Texas PAC       00015644         4 Date       5 Full name of contributor on constance PAC (Dormannian Contribution (\$)       7 Amount of Contribution (\$)         06/10/2025       6 Contributor address; City; State; Zip Code       7 Amount of Contribution (\$)         8 Principal occupation / Job tite (See Instructions)<br>Agent Advisor       9 Employer (See Instructions)<br>Retired       Amount of Contribution (\$)         Date       06/10/2025       Full name of contributor or out-state PAC (Dormannian Contribution (\$)       Amount of Contribution (\$)         Principal occupation / Job tite (See Instructions)<br>Retired       Finançal Associate       Amount of Contribution (\$)         Principal occupation / Job tite (See Instructions)       Employer (See Instructions)<br>Thrivent Financial       Amount of Contribution (\$)         Principal occupation / Job tite (See Instructions)       Employer (See Instructions)<br>Thrivent Financial       Amount of Contribution (\$)         Od/10/2025       Full name of contributor or distate PAC (Dormannian Contribution (\$)       S18.00         Od/10/2025       Full name of contributor or out-state PAC (Dormannian Contribution (\$)       Amount of Contribution (\$)         Od/10/2025       Full name of contributor or out-state PAC (Dormannian Contribution (\$)       S18.00         Od/10/2025       Full name of contributor or out-state PAC (Dormannian Contribution (\$)       Amount of Contribution (\$)  | 2 FILER NAM    | <br>1E   |                              | 3 Filer ID (Ethics Commission Filer | rs)             |
| 06/10/2025       Mark, Warren       S84.00         6       Contributor address: City: State: Zip Code       Plainview, TX 79073-0626         7       Plainview, TX 79073-0626       Plainview, TX 79073-0626         8       Principal occupation / Job Ittle (See Instructions)<br>Agent Advisor       Plainview, TX 79073-0626         Date       Full name of contributor       ou of state PAC (De:       Amount of Contribution (S)         06/10/2025       Marvin, Spreen       Contributor address; City: State: Zip Code       S20.80         Principal occupation / Job Ittle (See Instructions)       Employer (See Instructions)       Amount of Contribution (S)         Financial Associate       Thrivent Financial       Amount of Contribution (S)       \$18.00         Contributor address; City: State: Zip Code       Contributor address; City: State: Zip Code       Amount of Contribution (S)       \$18.00         Principal occupation / Job Ittle (See Instructions)       Employer (See Instructions)       The DI Center       S3.40         O6/10/2025       Full name of contributor       out-of-state PAC (De:  | National A     | ssociation of Insurance and Financial Advisors - Texa    | as PAC                       |                                     |                 |
| 06/10/2025       Mark, Warren       \$84.00         6       Contributor address; City; State; Zip Code       Plainview, TX 79073-0626         9       Principal occupation / Job title (See Instructions)       9       Employer (See Instructions)         Agent Advisor       Pull name of contributor       ox-of-state PAC (Dir       Amount of Contribution (\$)         06/10/2025       Full name of contributor       ox-of-state PAC (Dir       Amount of Contribution (\$)         9       Employer (See Instructions)       Full name of contributor       ox-of-state PAC (Dir         06/10/2025       Full name of contributor       ox-of-state PAC (Dir       Amount of Contribution (\$)         510.00       Full name of contributor       ox-of-state PAC (Dir       Amount of Contribution (\$)         06/10/2025       Full name of contributor       ox-of-state PAC (Dir       Amount of Contribution (\$)         06/10/2025       Full name of contributor       ox-of-state PAC (Dir       Amount of Contribution (\$)         06/10/2025       Full name of contributor       ox-of-state PAC (Dir       Amount of Contribution (\$)         06/10/2025       Patrick, Wilder       ox-of-state PAC (Dir       Amount of Contribution (\$)         06/10/2025       Patrick, Wilder       ox-of-state PAC (Dir       Amount of Contribution (\$)         06/10/2025  | 4 Date         | <b>5</b> Full name of contributor Out-of-state PAC (ID#: | )                            | 7 Amount of Contribution (\$)       |                 |
| 6       Contributor address; City; State; Zip Code         Plainview, TX 79073-0626       Plainview, TX 79073-0626         8       Principal occupation / Job title (See Instructions)<br>Agent Advisor       P Employer (See Instructions)<br>Retired         Date       Full name of contributor       out-of-state PAC (IDI:   |                |  |                              |                                     | 84.00           |
| Plainview, TX 79073-0626         8       Principal occupation / Job title (See Instructions)<br>Agent Advisor       9       Employer (See Instructions)<br>Retired         Date       O6/10/2025       Full name of contributor       out-of-state PAC (Dir.       Amount of Contribution (\$)         06/10/2025       Full name of contributor       out-of-state PAC (Dir.       Amount of Contribution (\$)       \$20.80         Principal occupation / Job title (See Instructions)<br>Financial Associate       Employer (See Instructions)<br>Thrivent Financial       Amount of Contribution (\$)       \$18.00         O6/10/2025       Full name of contributor       out-of-state PAC (Dir.       Amount of Contribution (\$)       \$18.00         O6/10/2025       Full name of contributor       out-of-state PAC (Dir.       Amount of Contribution (\$)       \$18.00         O6/10/2025       Full name of contributor       out-of-state PAC (Dir.       Amount of Contribution (\$)       \$18.00         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       Financial Associate       Amount of Contribution (\$)       \$3.40         O6/10/2025       Full name of contributor       out-of-state PAC (Dir.       Amount of Contribution (\$)       \$3.40         O6/10/2025       Full name of contributor       out-of-state PAC (Dir.       Amount of Contribution (\$)       \$3.00         O6/10/2  |                |  |                              |                                     | -               |
| 8       Principal occupation / Job title (See Instructions)<br>Agent Advisor       9       Employer (See Instructions)<br>Retired         Date<br>06/10/2025       Full name of contributor       out-of-state PAC (IDE:)<br>Marvin, Spreen       Amount of Contribution (\$)         S20.80       Gof10/2025       Full name of contributor       out-of-state PAC (IDE:)       Amount of Contribution (\$)         Principal occupation / Job title (See Instructions)<br>Financial Associate       Employer (See Instructions)<br>Thrivent Financial       Amount of Contribution (\$)         Date<br>06/10/2025       Full name of contributor       out-of-state PAC (IDE:)       Amount of Contribution (\$)         06/10/2025       Full name of contributor       out-of-state PAC (IDE:)       Amount of Contribution (\$)         06/10/2025       Full name of contributor       out-of-state PAC (IDE:)       Amount of Contribution (\$)         06/10/2025       Full name of contributor       out-of-state PAC (IDE:)       Amount of Contribution (\$)         06/10/2025       Full name of contributor       out-of-state PAC (IDE:)       Amount of Contribution (\$)         06/10/2025       Full name of contributor       out-of-state PAC (IDE:)       Amount of Contribution (\$)         06/10/2025       Full name of contributor       out-of-state PAC (IDE:)       Amount of Contribution (\$)         06/10   |                |  |                              |                                     |                 |
| 8       Principal occupation / Job title (See Instructions)<br>Agent Advisor       9       Employer (See Instructions)<br>Retired         Date<br>06/10/2025       Full name of contributor       out-of-state PAC (IDE:)<br>Marvin, Spreen       Amount of Contribution (\$)         S20.80       Gof10/2025       Full name of contributor       out-of-state PAC (IDE:)       Amount of Contribution (\$)         Principal occupation / Job title (See Instructions)<br>Financial Associate       Employer (See Instructions)<br>Thrivent Financial       Amount of Contribution (\$)         Date<br>06/10/2025       Full name of contributor       out-of-state PAC (IDE:)       Amount of Contribution (\$)         06/10/2025       Full name of contributor       out-of-state PAC (IDE:)       Amount of Contribution (\$)         06/10/2025       Full name of contributor       out-of-state PAC (IDE:)       Amount of Contribution (\$)         06/10/2025       Full name of contributor       out-of-state PAC (IDE:)       Amount of Contribution (\$)         06/10/2025       Full name of contributor       out-of-state PAC (IDE:)       Amount of Contribution (\$)         06/10/2025       Full name of contributor       out-of-state PAC (IDE:)       Amount of Contribution (\$)         06/10/2025       Full name of contributor       out-of-state PAC (IDE:)       Amount of Contribution (\$)         06/10   |                |  |                              |                                     |                 |
| 8       Principal occupation / Job title (See Instructions)<br>Agent Advisor       9       Employer (See Instructions)<br>Retired         Date<br>06/10/2025       Full name of contributor       out-of-state PAC (IDE:)<br>Marvin, Spreen       Amount of Contribution (\$)         S20.80       Gof10/2025       Full name of contributor       out-of-state PAC (IDE:)       Amount of Contribution (\$)         Principal occupation / Job title (See Instructions)<br>Financial Associate       Employer (See Instructions)<br>Thrivent Financial       Amount of Contribution (\$)         Date<br>06/10/2025       Full name of contributor       out-of-state PAC (IDE:)       Amount of Contribution (\$)         06/10/2025       Full name of contributor       out-of-state PAC (IDE:)       Amount of Contribution (\$)         06/10/2025       Full name of contributor       out-of-state PAC (IDE:)       Amount of Contribution (\$)         06/10/2025       Full name of contributor       out-of-state PAC (IDE:)       Amount of Contribution (\$)         06/10/2025       Full name of contributor       out-of-state PAC (IDE:)       Amount of Contribution (\$)         06/10/2025       Full name of contributor       out-of-state PAC (IDE:)       Amount of Contribution (\$)         06/10/2025       Full name of contributor       out-of-state PAC (IDE:)       Amount of Contribution (\$)         06/10   |                | Plainview, TX 79073-0626                                 |                              |                                     |                 |
| Agent Advisor       Retired         Date       Full name of contributor       out-of-state PAC (Dor       Amount of Contribution (\$)         06/10/2025       Marvin, Spreen       \$20.80         Contributor address; City, State, Zip Code       Employer (See Instructions)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Financial Associate       Full name of contributor       out-of-state PAC (Der         Date       Full name of contributor       out-of-state PAC (Der       Amount of Contribution (\$)         06/10/2025       Full name of contributor       out-of-state PAC (Der       Amount of Contribution (\$)         06/10/2025       Full name of contributor       out-of-state PAC (Der       Amount of Contribution (\$)         Brokerage Manager       Full name of contributor       out-of-state PAC (Der       Amount of Contribution (\$)         06/10/2025       Full name of contributor       out-of-state PAC (Der       Amount of Contribution (\$)         06/10/2025       Patrick, Wilder       S3.40       S3.40         06/10/2025       Full name of contributor       out-of-state PAC (Der       Amount of Contribution (\$)         0ale       Villame of contributor       out-of-state PAC (Der       Amount of Contribution (\$)         0fof/10/2025       Full name of contribut   | 8 Principal or | L<br>cupation / Job title (See Instructions)             | 9 Employer (See Instructions | )<br>;)                             |                 |
| 06/10/2025       Marvin, Spreen       \$20.80         Contributor address; City; State; Zip Code       Brenham, TX 77833-7708       Employer (See Instructions)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       Thrivent Financial         Date       Full name of contributor       out-of-state PAC (Der  |                |  |                              |                                     |                 |
| 06/10/2025       Marvin, Spreen       \$20.80         Contributor address; City; State; Zip Code       Brenham, TX 77833-7708       Employer (See Instructions)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       Thrivent Financial         Date       Full name of contributor       out-of-state PAC (Der  | Date           | Full name of contributor Out-of-state PAC (ID#:          | )                            | Amount of Contribution (\$)         |                 |
| Contributor address: City; State; Zip Code       Employer (See Instructions)         Brenham, TX 77833-7708       Employer (See Instructions)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Thrivent Financial       Amount of Contribution (\$)         06/10/2025       Full name of contributor or out-of-state PAC (Datate PAC (Datate)       Amount of Contribution (\$)         06/10/2025       Full name of contributor or out-of-state; Zip Code       Amount of Contribution (\$)         06/10/2025       Coppelit, TX 75019-3404       Employer (See Instructions)         Brokerage Manager       The DI Center         Date       Full name of contributor or out-of-state PAC (Datate)       Amount of Contribution (\$)         06/10/2025       Full name of contributor or out-of-state PAC (Datate)       Amount of Contribution (\$)         06/10/2025       Full name of contributor or out-of-state PAC (Datate)       Amount of Contribution (\$)         06/10/2025       Patrick, Wilder       Amount of Contribution (\$)       \$3.40         Contributor address; City; State; Zip Code       Full name of contributor or out-of-state PAC (Datate)       Amount of Contribution (\$)         06/10/2025       Full name of contributor or out-of-state PAC (Datate)       Employer (See Instructions)       S10.00         06/10/2025       Full name of contributor or out-of-state)   |                |  | ,                            |                                     | 20.80           |
| Brenham, TX 77833-7708       Employer (See Instructions)         Principal occupation / Job tille (See Instructions)       Thrivent Financial         Date       Full name of contributor out-of-state PAC (D#:)       Amount of Contribution (\$)         06/10/2025       Full name of contributor out-of-state PAC (D#:)       Amount of Contribution (\$)         06/10/2025       Full name of contributor out-of-state PAC (D#:)       Amount of Contribution (\$)         06/10/2025       Full name of contributor out-of-state PAC (D#:)       Amount of Contribution (\$)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       The DI Center         Date       Full name of contributor out-of-state PAC (D#:)       Amount of Contribution (\$)       \$3.40         06/10/2025       Full name of contributor out-of-state PAC (ID#:)       Amount of Contribution (\$)       \$3.40         06/10/2025       Full name of contributor out-of-state PAC (ID#:)       Amount of Contribution (\$)       \$3.40         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       \$3.40         Odf/10/2025       Full name of contributor out-of-state PAC (ID#:)       Amount of Contribution (\$)       \$3.00         06/10/2025       Full name of contributor out-of-state PAC (ID#:)       Amount of Contribution (\$)       \$10.00<   | 00/20/202      |  |                              | *-                                  | 20100           |
| Principal occupation / Job title (See Instructions)<br>Financial Associate       Employer (See Instructions)<br>Thrivent Financial         Date<br>06/10/2025       Full name of contributorout-of-state PAC (ID#:)<br>Michael, Evans<br>Contributor address; City; State; Zip Code       Amount of Contribution (\$)<br>\$18.00         Principal occupation / Job title (See Instructions)<br>Brokerage Manager       Employer (See Instructions)<br>The DI Center       Amount of Contribution (\$)<br>\$3.40         Date<br>06/10/2025       Full name of contributorout-of-state PAC (ID#:)<br>Ode/10/2025       Amount of Contribution (\$)<br>Patrick, Wilder       Amount of Contribution (\$)<br>\$3.40         Date<br>06/10/2025       Full name of contributorout-of-state PAC (ID#:)<br>Patrick, Wilder       Amount of Contribution (\$)<br>\$3.40         Principal occupation / Job title (See Instructions)<br>Agent Advisor       Employer (See Instructions)<br>The Shamrock Group       \$3.40         Date<br>06/10/2025       Full name of contributorout-of-state PAC (ID#:)<br>Amount of Contribution (\$)<br>Contributor address; City; State; Zip Code       Amount of Contribution (\$)<br>The Shamrock Group       Amount of Contribution (\$)<br>\$10.00         Date<br>06/10/2025       Full name of contributorout-of-state PAC (ID#:)<br>Contributor address; City; State; Zip Code       Amount of Contribution (\$)<br>\$10.00         Contributor       Out-of-state PAC (ID#:)<br>Contributor address; City; State; Zip Code       Amount of Contribution (\$)<br>\$10.00         Principal occcupation / Job title (See Instructions)  |                | Continuation address, City, State, Zip Code              |                              |                                     |                 |
| Principal occupation / Job title (See Instructions)<br>Financial Associate       Employer (See Instructions)<br>Thrivent Financial         Date<br>06/10/2025       Full name of contributorout-of-state PAC (ID#:)<br>Michael, Evans<br>Contributor address; City; State; Zip Code       Amount of Contribution (\$)<br>\$18.00         Principal occupation / Job title (See Instructions)<br>Brokerage Manager       Employer (See Instructions)<br>The DI Center       Amount of Contribution (\$)<br>\$3.40         Date<br>06/10/2025       Full name of contributorout-of-state PAC (ID#:)<br>Ode/10/2025       Amount of Contribution (\$)<br>Patrick, Wilder       Amount of Contribution (\$)<br>\$3.40         Date<br>06/10/2025       Full name of contributorout-of-state PAC (ID#:)<br>Patrick, Wilder       Amount of Contribution (\$)<br>\$3.40         Principal occupation / Job title (See Instructions)<br>Agent Advisor       Employer (See Instructions)<br>The Shamrock Group       \$3.40         Date<br>06/10/2025       Full name of contributorout-of-state PAC (ID#:)<br>Amount of Contribution (\$)<br>Contributor address; City; State; Zip Code       Amount of Contribution (\$)<br>The Shamrock Group       Amount of Contribution (\$)<br>\$10.00         Date<br>06/10/2025       Full name of contributorout-of-state PAC (ID#:)<br>Contributor address; City; State; Zip Code       Amount of Contribution (\$)<br>\$10.00         Contributor       Out-of-state PAC (ID#:)<br>Contributor address; City; State; Zip Code       Amount of Contribution (\$)<br>\$10.00         Principal occcupation / Job title (See Instructions)  |                |  |                              |                                     |                 |
| Principal occupation / Job title (See Instructions)<br>Financial Associate       Employer (See Instructions)<br>Thrivent Financial         Date<br>06/10/2025       Full name of contributorout-of-state PAC (ID#:)<br>Michael, Evans<br>Contributor address; City; State; Zip Code       Amount of Contribution (\$)<br>\$18.00         Principal occupation / Job title (See Instructions)<br>Brokerage Manager       Employer (See Instructions)<br>The DI Center       Amount of Contribution (\$)<br>\$3.40         Date<br>06/10/2025       Full name of contributorout-of-state PAC (ID#:)<br>Ode/10/2025       Amount of Contribution (\$)<br>Patrick, Wilder       Amount of Contribution (\$)<br>\$3.40         Date<br>06/10/2025       Full name of contributorout-of-state PAC (ID#:)<br>Patrick, Wilder       Amount of Contribution (\$)<br>\$3.40         Principal occupation / Job title (See Instructions)<br>Agent Advisor       Employer (See Instructions)<br>The Shamrock Group       \$3.40         Date<br>06/10/2025       Full name of contributorout-of-state PAC (ID#:)<br>Amount of Contribution (\$)<br>Contributor address; City; State; Zip Code       Amount of Contribution (\$)<br>The Shamrock Group       Amount of Contribution (\$)<br>\$10.00         Date<br>06/10/2025       Full name of contributorout-of-state PAC (ID#:)<br>Contributor address; City; State; Zip Code       Amount of Contribution (\$)<br>\$10.00         Contributor       Out-of-state PAC (ID#:)<br>Contributor address; City; State; Zip Code       Amount of Contribution (\$)<br>\$10.00         Principal occcupation / Job title (See Instructions)  |                | Brenham. TX 77833-7708                                   |                              |                                     |                 |
| Financial Associate       Thrivent Financial         Date       Full name of contributor       out-of-state PAC (ID#:   | Principal or   |  | Employer (See Instructions   | <u> </u>                            |                 |
| Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         06/10/2025       Michael, Evans       \$18.00         Contributor address; City; State; Zip Code       Coppell, TX 75019-3404       \$18.00         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       The DI Center         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         06/10/2025       Patrick, Wilder       Amount of Contribution (\$)       \$3.40         06/10/2025       Patrick, Wilder       Amount of Contribution (\$)       \$3.40         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       \$3.40         Of/10/2025       Patrick, Wilder       Amount of Contribution (\$)       \$3.40         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       \$3.40         Of/10/2025       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)       \$10.00         O6/10/2025       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)       \$10.00         O6/10/2025       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)       \$10.00   |                |  |                              | /                                   |                 |
| 06/10/2025       Michael, Evans       \$18.00         Contributor address; City; State; Zip Code       Coppell, TX 75019-3404       Employer (See Instructions)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       Amount of Contribution (\$)         Date       Full name of contributor       out-of-state PAC (ID#:  |                |  |                              | Amount of Contribution (\$)         |                 |
| Contributor address; City; State; Zip Code         Coppell, TX 75019-3404         Principal occupation / Job title (See Instructions)         Brokerage Manager         Date         06/10/2025         Plano, TX 75024-6324         Principal occupation / Job title (See Instructions)         Date         Plano, TX 75024-6324         Principal occupation / Job title (See Instructions)         Agent Advisor         Date         Full name of contributor out-of-state PAC (ID#;   |                |  | )                            |                                     | 1 0 00          |
| Coppell, TX 75019-3404       Employer (See Instructions)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Brokerage Manager       The DI Center         Date       Full name of contributor out-of-state PAC (ID#:)       Amount of Contribution (\$)         06/10/2025       Patrick, Wilder       \$3.40         Contributor address; City; State; Zip Code       Plano, TX 75024-6324       Amount of Contribution (\$)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       \$3.40         Agent Advisor       The Shamrock Group       The Shamrock Group         Date       Full name of contributor out-of-state PAC (ID#:)       Amount of Contribution (\$)         06/10/2025       Robert, Hopper       Amount of Contribution (\$)       \$10.00         Contributor address; City; State; Zip Code       Contributor address; City; State; Zip Code       Amount of Contribution (\$)         Contributor address; City; State; Zip Code       Contributor address; City; State; Zip Code       Amount of Contribution (\$)         Carrollton, TX 75007-2422       Employer (See Instructions)       Employer (See Instructions)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)   | 00/10/202      |  |                              | Ψ-                                  | 10.00           |
| Principal occupation / Job title (See Instructions)<br>Brokerage Manager       Employer (See Instructions)<br>The DI Center         Date       Full name of contributor       out-of-state PAC (ID#:)<br>Patrick, Wilder       Amount of Contribution (\$)         06/10/2025       Patrick, Wilder       \$3.40         Contributor address; City; State; Zip Code       Plano, TX 75024-6324         Principal occupation / Job title (See Instructions)<br>Agent Advisor       Employer (See Instructions)<br>The Shamrock Group         Date       Full name of contributor out-of-state PAC (ID#:)<br>Robert, Hopper       Amount of Contribution (\$)         06/10/2025       Full name of contributor out-of-state PAC (ID#:)<br>Robert, Hopper       Amount of Contribution (\$)         Contributor address; City; State; Zip Code       Contributor address; City; State; Zip Code       Amount of Contribution (\$)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       Amount of Contribution (\$)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       \$10.00   |                | Contributor address; City; State; Zip Code               |                              |                                     |                 |
| Principal occupation / Job title (See Instructions)<br>Brokerage Manager       Employer (See Instructions)<br>The DI Center         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         06/10/2025       Patrick, Wilder       \$3.40         Contributor address; City; State; Zip Code       Plano, TX 75024-6324       \$3.40         Principal occupation / Job title (See Instructions)<br>Agent Advisor       Employer (See Instructions)<br>The Shamrock Group       Amount of Contribution (\$)         Date       Full name of contributor       out-of-state PAC (ID#:)<br>Robert, Hopper       Amount of Contribution (\$)         06/10/2025       Full name of contributor       out-of-state PAC (ID#:)<br>Robert, Hopper       Amount of Contribution (\$)         Contributor address; City; State; Zip Code       Contributor address; City; State; Zip Code       Amount of Contribution (\$)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       St0.00         Contributor address; City; State; Zip Code       Employer (See Instructions)       \$10.00         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       \$10.00   |                |  |                              |                                     |                 |
| Principal occupation / Job title (See Instructions)<br>Brokerage Manager       Employer (See Instructions)<br>The DI Center         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         06/10/2025       Patrick, Wilder       \$3.40         Contributor address; City; State; Zip Code       Plano, TX 75024-6324       \$3.40         Principal occupation / Job title (See Instructions)<br>Agent Advisor       Employer (See Instructions)<br>The Shamrock Group       Amount of Contribution (\$)         Date       Full name of contributor       out-of-state PAC (ID#:)<br>Robert, Hopper       Amount of Contribution (\$)         06/10/2025       Full name of contributor       out-of-state PAC (ID#:)<br>Robert, Hopper       Amount of Contribution (\$)         Contributor address; City; State; Zip Code       Contributor address; City; State; Zip Code       Amount of Contribution (\$)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       St0.00         Contributor address; City; State; Zip Code       Employer (See Instructions)       \$10.00         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       \$10.00   |                | Connell. TX 75019-3404                                   |                              |                                     |                 |
| Brokerage Manager       The DI Center         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         06/10/2025       Patrick, Wilder       \$3.40         Contributor address; City; State; Zip Code       Full name of contributor       \$3.40         Plano, TX 75024-6324       Employer (See Instructions)       Agent Advisor         Principal occupation / Job title (See Instructions)       Employer (See Instructions)       Amount of Contribution (\$)         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         06/10/2025       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         06/10/2025       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         06/10/2025       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         06/10/2025       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         Contributor address; City; State; Zip Code       Contributor address; City; State; Zip Code       Amount of Contributor         Carrollton, TX 75007-2422       Employer (See Instructions)       Employer (See Instructions)   | Principal or   |  | Employer (See Instructions   | )<br>;)                             |                 |
| Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         06/10/2025       Patrick, Wilder       \$3.40         Contributor address; City; State; Zip Code       Plano, TX 75024-6324         Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Agent Advisor       The Shamrock Group         Date       Full name of contributor       out-of-state PAC (ID#:)         06/10/2025       Robert, Hopper       Amount of Contribution (\$)         Contributor address; City; State; Zip Code       Amount of Contribution (\$)         Date       Full name of contributor       out-of-state PAC (ID#:)         O6/10/2025       Robert, Hopper       Amount of Contribution (\$)         Contributor address; City; State; Zip Code       Contributor address; City; State; Zip Code         Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)   | -              |  |                              | <i>י</i>                            |                 |
| 06/10/2025       Patrick, Wilder       \$3.40         Contributor address; City; State; Zip Code       Plano, TX 75024-6324         Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Agent Advisor       Employer (See Instructions)         Date       Full name of contributor       out-of-state PAC (ID#:)         Advisor       Robert, Hopper       Amount of Contribution (\$)         Contributor address; City; State; Zip Code       \$10.00         Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Carrollton, TX 75007-2422       Employer (See Instructions)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)   |                | -  |                              | Amount of Contribution (\$)         |                 |
| Contributor address; City; State; Zip Code         Plano, TX 75024-6324         Principal occupation / Job title (See Instructions)         Agent Advisor         Date         Full name of contributor out-of-state PAC (ID#:)         Robert, Hopper         Contributor address; City; State; Zip Code         Contributor address; City; State; Zip Code         Contributor address; City; State; Zip Code         Principal occupation / Job title (See Instructions)         Principal occupation / Job title (See Instructions)         Employer (See Instructions)         Employer (See Instructions)   |                |  | )                            |                                     | ቀጋ ለበ           |
| Plano, TX 75024-6324         Principal occupation / Job title (See Instructions)<br>Agent Advisor       Employer (See Instructions)<br>The Shamrock Group         Date       Full name of contributor       out-of-state PAC (ID#:)         D6/10/2025       Robert, Hopper       Amount of Contribution (\$)         Contributor address; City; State; Zip Code       full name of contributor address; City; State; Zip Code         Principal occupation / Job title (See Instructions)       Employer (See Instructions)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)  | 00/10/202      |  |                              |                                     | \$ <b>3.</b> 40 |
| Principal occupation / Job title (See Instructions)<br>Agent Advisor       Employer (See Instructions)<br>The Shamrock Group         Date       Full name of contributor       out-of-state PAC (ID#:)         06/10/2025       Robert, Hopper       Amount of Contribution (\$)         Contributor address; City; State; Zip Code       S10.00         Carrollton, TX 75007-2422       Employer (See Instructions)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)  |                | Contributor address; City; State; Zip Code               |                              |                                     |                 |
| Principal occupation / Job title (See Instructions)<br>Agent Advisor       Employer (See Instructions)<br>The Shamrock Group         Date       Full name of contributor       out-of-state PAC (ID#:)         06/10/2025       Robert, Hopper       Amount of Contribution (\$)         Contributor address; City; State; Zip Code       S10.00         Carrollton, TX 75007-2422       Employer (See Instructions)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)  |                |  |                              |                                     |                 |
| Principal occupation / Job title (See Instructions)<br>Agent Advisor       Employer (See Instructions)<br>The Shamrock Group         Date       Full name of contributor       out-of-state PAC (ID#:)         06/10/2025       Robert, Hopper       Amount of Contribution (\$)         Contributor address; City; State; Zip Code       S10.00         Carrollton, TX 75007-2422       Employer (See Instructions)         Principal occupation / Job title (See Instructions)       Employer (See Instructions)  |                | Plano TX 75024-6324                                      |                              |                                     |                 |
| Agent Advisor       The Shamrock Group         Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         06/10/2025       Robert, Hopper       for the state; Zip Code       for the state; Zip Code         Contributor address; City; State; Zip Code       for the state; Zip Code       for the state; Zip Code         Carrollton, TX 75007-2422       for the state; Zip Code       for the state; Zip Code         Principal occupation / Job title (See Instructions)       for the state; Zip Code       for the state; Zip Code   | Principal or   |  | Employer (See Instructions   |                                     |                 |
| Date       Full name of contributor       out-of-state PAC (ID#:)       Amount of Contribution (\$)         06/10/2025       Robert, Hopper       \$10.00         Contributor address; City; State; Zip Code       Contributor address; City; State; Zip Code         Carrollton, TX 75007-2422       Employer (See Instructions)   |                |  |                              | )                                   |                 |
| 06/10/2025       Robert, Hopper       \$10.00         Contributor address; City; State; Zip Code       \$10.00         Carrollton, TX 75007-2422       Employer (See Instructions)  |                |  | · · · · · ·                  |                                     |                 |
| Contributor address; City; State; Zip Code Carrollton, TX 75007-2422 Principal occupation / Job title (See Instructions) Employer (See Instructions)  |                |  | )                            |                                     | 10.00           |
| Carrollton, TX 75007-2422       Principal occupation / Job title (See Instructions)       Employer (See Instructions)   | 06/10/202      |  |                              | Φ.                                  | 10.00           |
| Principal occupation / Job title (See Instructions) Employer (See Instructions)   |                | Contributor address; City; State; Zip Code               |                              |                                     |                 |
| Principal occupation / Job title (See Instructions) Employer (See Instructions)   |                |  |                              |                                     |                 |
| Principal occupation / Job title (See Instructions) Employer (See Instructions)   |                | Corrollton TV 75007 2422                                 |                              |                                     |                 |
|   | Drivelaalaa    |  |                              | 、<br>、                              |                 |
| Financial Planner   | -              |  |                              | 3)                                  |                 |
|   | Financiai      | Planner  | National Life                |                                     |                 |
|   |                |  |                              |                                     |                 |

|          | The Instru     | ction Guide explains how to complete this fo          | orm.                          | 1                                     | Total pages Schedule A1:<br>Sch: 12/14 Rpt: 15/21 |         |
|----------|----------------|---|-------------------------------|---------------------------------------|---|---------|
| 2        | FILER NAME     |   |                               | 3                                     | Filer ID (Ethics Commission                       | Filers) |
|          | National Ass   | sociation of Insurance and Financial Advisors - Texas |                               |                                       | 00015644  | -       |
| 4        | Date           | 5 Full name of contributor Out-of-state PAC (ID#:_    |                               | 7                                     | Amount of Contribution (\$)                       |         |
|          | 06/10/2025     | Rodney, Mogen   | /                             | Ι.                                    | Amount of Contribution (+)                        | \$20.00 |
|          | 00/10/2020     |   |                               |                                       |   | Ψ20.00  |
|          |                | 6 Contributor address; City; State; Zip Code          |                               |                                       |   |         |
|          |                |   |                               |                                       |   |         |
|          |                | Austin TV 70722 2452                                  |                               |                                       |   |         |
| Ļ        |                | Austin, TX 78732-2453                                 | 1                             | Ļ                                     |   |         |
| 8        |                |   | 9 Employer (See Instructions) |                                       |   |         |
| L        | DI/Business    | Insurance Expert for Advisor's                        | Brokerage Director @ M        | las                                   | ss Mutual & Solve Ur Puzzle                       |         |
| Γ        | Date           | Full name of contributor out-of-state PAC (ID#:       | )                             | Γ                                     | Amount of Contribution (\$)                       |         |
|          | 06/10/2025     | Rolando, Barrera                                      |                               |                                       |   | \$20.00 |
|          |                | Contributor address; City; State; Zip Code            |                               |                                       |   |         |
|          |                |   |                               |                                       |   |         |
|          |                |   |                               |                                       |   |         |
|          |                | Corpus Christi, TX 78413-2634                         |                               |                                       |   |         |
|          | Principal occu | upation / Job title (See Instructions)                | Employer (See Instructions)   | ـــــــــــــــــــــــــــــــــــــ |   |         |
|          | Agency_Ow      |   | Roland Barrera Insuranc       |                                       |   |         |
| $\vdash$ | Date           |   |                               | —                                     | Amount of Contribution (\$)                       |         |
|          |                |   | )                             |                                       | Amount of Contribution (\$)                       | ቀር ባባ   |
|          | 06/10/2025     |   |                               |                                       |   | \$6.80  |
|          |                | Contributor address; City; State; Zip Code            |                               |                                       |   |         |
|          |                |   |                               |                                       |   |         |
|          |                |   |                               |                                       |   |         |
| L        |                | Abilene, TX 79602-6105                                | J                             |                                       |   |         |
|          |                | upation / Job title (See Instructions)                | Employer (See Instructions)   | ;)                                    |   |         |
|          | President      |   | Perry Hunter Hall             |                                       |   |         |
| F        | Date           | Full name of contributor out-of-state PAC (ID#:       | )                             | Γ                                     | Amount of Contribution (\$)                       |         |
|          | 06/10/2025     | Ruth, Shannon   |                               |                                       |   | \$34.00 |
|          |                | Contributor address; City; State; Zip Code            |                               |                                       |   |         |
|          |                |   |                               |                                       |   |         |
|          |                |   |                               |                                       |   |         |
|          |                | Highland Village, TX 75077-1859                       |                               |                                       |   |         |
| $\vdash$ | Principal occu | upation / Job title (See Instructions)                | Employer (See Instructions)   | ـــــــــــــــــــــــــــــــــــــ |   |         |
|          | Agent          |   | Ruth Shannon State Far        |                                       |   |         |
| ╞        | Date           | Full name of contributor Out-of-state PAC (ID#:       |                               | —                                     | Amount of Contribution (\$)                       |         |
|          |                |   | /                             |                                       |   | ¢2 10   |
|          | 06/10/2025     |   |                               |                                       |   | \$3.40  |
|          |                | Contributor address; City; State; Zip Code            |                               |                                       |   |         |
|          |                |   |                               |                                       |   |         |
|          |                |   |                               |                                       |   |         |
| L        |                | Longview, TX 75605-7347                               | ]                             |                                       |   |         |
|          |                | upation / Job title (See Instructions)                | Employer (See Instructions)   | ;)                                    |   |         |
|          | Agent Advise   | or  | The Ward Agency               |                                       |   |         |
| $\vdash$ |                |   |                               |                                       |   |         |
|          |                |   |                               |                                       |   |         |

|   | The Instru   | ction Guide explains how to complete this f          | iorm.                        | 1  | Total pages Schedule A1:<br>Sch: 13/14 Rpt: 16/21 |           |
|---|--------------|--|------------------------------|----|---|-----------|
| 2 | FILER NAME   |  |                              | 3  | Filer ID (Ethics Commission                       | n Filers) |
| [ |              | sociation of Insurance and Financial Advisors - Texa | IS PAC                       | ľ  | 00015644  | 11 11013) |
| 4 | Date         | 5 Full name of contributor out-of-state PAC (ID#:_   | )                            | 7  | Amount of Contribution (\$)                       |           |
|   | 06/10/2025   | T., Littleton  | I                            |    |   | \$34.00   |
|   |              | 6 Contributor address; City; State; Zip Code         |                              | 1  |   |           |
|   |              |  |                              |    |   |           |
|   |              |  | l                            |    |   |           |
|   |              | Nacogdoches, TX 75965-2964                           |                              |    |   |           |
| 8 |              | ipation / Job title (See Instructions)               | 9 Employer (See Instructions |    |   |           |
|   | Agent        |  | TL LITTLETON INS AG          | Y  |   |           |
|   | Date         | Full name of contributor out-of-state PAC (ID#:      | )                            | Ē  | Amount of Contribution (\$)                       |           |
|   | 06/10/2025   | Thomas, Mahony                                       |                              |    |   | \$6.80    |
|   |              | Contributor address; City; State; Zip Code           |                              | 1  |   |           |
|   |              |  |                              |    |   |           |
|   |              |  |                              |    |   |           |
|   |              | Ft Worth, TX 76132-1518                              |                              |    |   |           |
|   |              | upation / Job title (See Instructions)               | Employer (See Instructions   | 5) |   |           |
|   | Owner        |  | TMA Financial                |    |   |           |
|   | Date         | Full name of contributor out-of-state PAC (ID#:      | )                            | Γ  | Amount of Contribution (\$)                       |           |
|   | 06/10/2025   | Timothy, Roels                                       |                              |    |   | \$10.00   |
|   |              | Contributor address; City; State; Zip Code           |                              | 1  |   |           |
|   |              |  |                              |    |   |           |
|   |              |  | l                            |    |   |           |
|   |              | Fort Worth, TX 76116-5604                            |                              |    |   |           |
|   |              | upation / Job title (See Instructions)               | Employer (See Instructions   | 5) |   |           |
|   | Agent Adviso | or   | Marketing Group              |    |   |           |
|   | Date         | Full name of contributor out-of-state PAC (ID#:      | )                            | Ē  | Amount of Contribution (\$)                       |           |
|   | 06/10/2025   | Tracy, Miller  |                              |    |   | \$8.00    |
|   |              | Contributor address; City; State; Zip Code           |                              | 1  |   |           |
|   |              |  | I                            |    |   |           |
|   |              |  |                              |    |   |           |
|   |              | Sugar Land, TX 77478-5331                            |                              |    |   |           |
|   |              | upation / Job title (See Instructions)               | Employer (See Instructions   | 3) |   |           |
|   | Agent Adviso | or   | TMiller Financial            |    |   |           |
| Γ | Date         | Full name of contributor out-of-state PAC (ID#:      | )                            | Ē  | Amount of Contribution (\$)                       |           |
|   | 06/10/2025   | Victoria, Henly                                      | I                            |    |   | \$8.00    |
|   |              | Contributor address; City; State; Zip Code           |                              | 1  |   |           |
|   |              |  |                              |    |   |           |
|   |              |  |                              |    |   |           |
|   |              | San Augustine, TX 75972-1324                         |                              |    |   |           |
|   |              | upation / Job title (See Instructions)               | Employer (See Instructions   | 3) |   |           |
|   | OWNER        |  | Henly Insurance              |    |   |           |
|   |              |  |                              |    |   |           |
|   |              |  |                              |    |   |           |

| The Inst      | ruction Guide explains how to complete this t          | form.                        | 1            | otal pages Schedule A1:<br>Sch: 14/14 Rpt: 17/21 |         |
|---------------|--|------------------------------|--------------|--|---------|
|               |  |                              |              |  |         |
| 2 FILER NAI   |  |                              | <b>3</b> F   | iler ID (Ethics Commission                       | Filers) |
| National /    | Association of Insurance and Financial Advisors - Texa | as PAC                       | C            | 00015644   |         |
| 4 Date        | 5 Full name of contributor out-of-state PAC (ID#:_     | )                            | 7 A          | Amount of Contribution (\$)                      |         |
| 06/10/202     | — —  |                              |              |  | \$40.00 |
|               | 6 Contributor address; City; State; Zip Code           |                              | ·-           |  |         |
|               | Contributor address, City, State, Zip Code             |                              |              |  |         |
|               |  |                              |              |  |         |
|               |  |                              |              |  |         |
|               | Willis, TX 77318-6431                                  |                              |              |  |         |
| 8 Principal o | ccupation / Job title (See Instructions)               | 9 Employer (See Instructions | s)           |  |         |
| General A     | gent   | National Life                |              |  |         |
| Date          | Full name of contributor out-of-state PAC (ID#:        | )                            |              | Amount of Contribution (\$)                      |         |
| 06/10/202     |  | )                            | '            |  | \$4.00  |
| 00/10/202     |  |                              |              |  | φ4.00   |
|               | Contributor address; City; State; Zip Code             |                              |              |  |         |
|               |  |                              |              |  |         |
|               |  |                              |              |  |         |
|               | Garland, TX 75044-3531                                 |                              |              |  |         |
| Principal o   | ccupation / Job title (See Instructions)               | Employer (See Instructions   | s)           |  |         |
| Director c    | f Development  | National Life                |              |  |         |
|               |  |                              |              |  |         |
| Date          | Full name of contributor out-of-state PAC (ID#:        | )                            | <sup>4</sup> | Amount of Contribution (\$)                      |         |
| 06/10/202     | 25 Yuka, Nakahara-Goven                                |                              |              |  | \$36.00 |
|               | Contributor address; City; State; Zip Code             |                              | 1            |  |         |
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|               |  |                              |              |  |         |
|               | Carrollton, TX 75007-4852                              |                              |              |  |         |
| Principal o   | ccupation / Job title (See Instructions)               | Employer (See Instructions   | s)           |  |         |
| Agent Ad      |  | New York Life                | -,           |  |         |
| , igenit / ig |  | New Fork Life                |              |  |         |
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## MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION

SCHEDULE C1

| т | he Instruc                 | ction Guide explains how to complete this form.  |   | Total pages Schedule C1:<br>Sch: 1/3 Rpt: 18/21 |
|---|----------------------------|--|---|---|
|   | ILER NAME<br>lational Asso | ociation of Insurance and Financial Advisors - Texas PAC   |   | Filer ID (Ethics Commission Filers)<br>00015644 |
| 0 | 6/10/2025                  | <ul> <li>5 Corporation / Labor Organization name<br/>Annie</li> <li>6 Corporation / Labor Organization address; City; State; Zip Code</li> </ul> | 7 | Amount of contribution (\$)<br>\$6.00           |
|   |                            | Corpus Christi, TX 78413-4825  |   |   |
|   | ate<br>6/10/2025           | Corporation / Labor Organization name<br>Charles<br>Corporation / Labor Organization address; City; State; Zip Code                              |   | Amount of contribution (\$)<br>\$16.80          |
|   |                            | Decatur, TX 76234-1373   |   |   |
|   | eate<br>6/10/2025          | Corporation / Labor Organization name<br>Dereck<br>Corporation / Labor Organization address; City; State; Zip Code                               |   | Amount of contribution (\$)<br>\$40.00          |
|   |                            | Shallowater, TX 79363-5136   |   |   |
|   | eate<br>6/10/2025          | Corporation / Labor Organization name<br>Don<br>Corporation / Labor Organization address; City; State; Zip Code                                  |   | Amount of contribution (\$)<br>\$6.80           |
|   |                            | Denton, TX 76205-8008  |   |   |
|   | ate<br>6/10/2025           | Corporation / Labor Organization name<br>Frank<br>Corporation / Labor Organization address; City; State; Zip Code                                |   | Amount of contribution (\$)<br>\$6.80           |
|   |                            | Plano, TX 75075-7729   |   |   |
|   | ate<br>6/10/2025           | Corporation / Labor Organization name<br>Frank<br>Corporation / Labor Organization address; City; State; Zip Code                                |   | Amount of contribution (\$)<br>\$4.00           |
|   |                            | Tomball, TX 77377-8649   |   |   |
|   | eate<br>6/10/2025          | Corporation / Labor Organization name<br>Jason<br>Corporation / Labor Organization address; City; State; Zip Code                                |   | Amount of contribution (\$)<br>\$84.00          |
|   |                            | Floresville, TX 78114-0576   |   |   |

## MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION

SCHEDULE C1

| - | The Instruc                 | tion Guide explains how to complete this form.   | 1 Total pages Schedule C1:<br>Sch: 2/3 Rpt: 19/21              |
|---|-----------------------------|--|--|
|   | FILER NAME<br>National Asso | ociation of Insurance and Financial Advisors - Texas PAC   | <b>3</b> Filer ID (Ethics Commission Filers) 00015644          |
|   | 06/10/2025                  | <ul> <li>5 Corporation / Labor Organization name<br/>Jim</li> <li>6 Corporation / Labor Organization address; City; State; Zip Code</li> </ul> | <ul><li>7 Amount of contribution (\$)</li><li>\$6.80</li></ul> |
|   |                             | Eastland, TX 76448-0895  |  |
|   | Date<br>D6/10/2025          | Corporation / Labor Organization name<br>Joe<br>Corporation / Labor Organization address; City; State; Zip Code                                | Amount of contribution (\$)<br>\$3.40                          |
|   |                             | Fort Worth, TX 76116-1620  |  |
|   | Date<br>06/10/2025          | Corporation / Labor Organization name<br>John<br>Corporation / Labor Organization address; City; State; Zip Code                               | Amount of contribution (\$)<br>\$10.00                         |
|   |                             | Nacogdoches, TX 75965-8716   |  |
|   | Date<br>D6/10/2025          | Corporation / Labor Organization name<br>John<br>Corporation / Labor Organization address; City; State; Zip Code                               | Amount of contribution (\$)<br>\$100.00                        |
|   |                             | Nacogdoches, TX 75965-1929   |  |
|   | Date<br>D6/10/2025          | Corporation / Labor Organization name<br>Keith<br>Corporation / Labor Organization address; City; State; Zip Code                              | Amount of contribution (\$)<br>\$20.00                         |
|   |                             | San Antonio, TX 78258-7540   |  |
|   | Date<br>D6/10/2025          | Corporation / Labor Organization name<br>Lilia<br>Corporation / Labor Organization address; City; State; Zip Code                              | Amount of contribution (\$)<br>\$6.80                          |
|   |                             | Corpus Christi, TX 78411-4917  |  |
|   | Date<br>06/10/2025          | Corporation / Labor Organization name<br>Michael<br>Corporation / Labor Organization address; City; State; Zip Code                            | Amount of contribution (\$)<br>\$10.00                         |
|   |                             | San Antonio, TX 78270-1307   |  |

## MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION

SCHEDULE C1

|                      | ction Guide explains how to complete this form.  | Total pages Sche<br>Sch: 3/3 Rpt: 2 |                        |
|----------------------|--|-------------------------------------|------------------------|
| FILER NAME           |  | Filer ID (Ethic                     | s Commission Filers)   |
| National Ass         | ociation of Insurance and Financial Advisors - Texas PAC   | 00015644                            |                        |
| 4 Date<br>06/10/2025 | <ul> <li>5 Corporation / Labor Organization name<br/>Michael</li> <li>6 Corporation / Labor Organization address; City; State; Zip Code</li> </ul> | Amount of contrib                   | oution (\$)<br>\$6.80  |
|                      | HEATH, TX 75032-5998   |                                     |                        |
| Date<br>06/10/2025   | Corporation / Labor Organization name<br>Peter<br>Corporation / Labor Organization address; City; State; Zip Code                                  | Amount of contrit                   | oution (\$)<br>\$10.00 |
|                      | Spring, TX 77379-2542  |                                     |                        |
| Date                 | Corporation / Labor Organization name  | Amount of contril                   | .,                     |
| 06/10/2025           | Raymond<br>Corporation / Labor Organization address; City; State; Zip Code   |                                     | \$8.00                 |
|                      | Pearland, TX 77581-5853  |                                     |                        |
| Date                 | Corporation / Labor Organization name  | Amount of contril                   | oution (\$)            |
| 06/10/2025           | Rodney<br>Corporation / Labor Organization address; City; State; Zip Code  |                                     | \$120.00               |
|                      | Southlake, TX 76092-9162   |                                     |                        |
| Date                 | Corporation / Labor Organization name  | Amount of contril                   | oution (\$)            |
| 06/10/2025           | Vincente   |                                     | \$10.00                |
|                      | Corporation / Labor Organization address; City; State; Zip Code  |                                     |                        |
|                      |  |                                     |                        |

## NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE I

| The Instruction Guide explains how to complete this form.      |  |  |  |  |
|--|--|--|--|--|
| Total pages Schedule I:<br>Sch: 1/1 Rpt:                       | 2       FILER NAME       3       Filer ID       (Ethics Commission Filers         National Association of Insurance and Financial       00015644   |  |  |  |
| Date<br>05/29/2025   | 5 Payee name<br>NAIFA-Texas  |  |  |  |
| Amount (\$)<br>2,000.00<br>Expenditure from<br>corporate funds | 7 Payee Address; City; State; Zip<br>3755 Attucks Drive<br>Powell, OH 43065  |  |  |  |
| PURPOSE<br>OF<br>EXPENDITURE                                   | (a) Category (See instructions for examples of acceptable categories)       (b) Description       (See instructions regarding type of information required         Office Overhead/Rental Expense       Monthly Admin Fee to manage PAC  |  |  |  |
| Date<br>05/29/2025   | Payee name<br>NAIFA-Texas  |  |  |  |
| Amount (\$)<br>1,514.70<br>Expenditure from                    | Payee Address; City; State; Zip<br>3755 Attucks Drive<br>Powell, OH 43065  |  |  |  |
| Corporate funds<br>PURPOSE<br>OF<br>EXPENDITURE                | (a) Category (See instructions for examples of acceptable categories)       (b) Description       (See instructions regarding type of information required         Travel Out of District       Travel Expenses of PAC Chair to attend 2025         NAIFA National Congressional Conference in |  |  |  |
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