FORM MPAC MONTHLY FILING GENERAL-PURPOSE COMMITTEE CAMPAIGN FINANCE REPORT **COVER SHEET PG 1** 2 Total pages filed: The MPAC Instruction Guide explains how to complete this form. (Ethics Commission Filers) 00015672 3 COMMITTEE NAME **OFFICE USE ONLY** Wholesale Beer Distributors Of Texas PAC Date Received **ELECTRONICALLY FILED** 11/05/2025 COMMITTEE ADDRESS / PO BOX; APT / SUITE #: CITY: STATE: ZIP **ADDRESS** 823 Congress Ave., Ste.1313 Austin, TX 78701-2429 Date Hand-delivered or Date Postmarked CAMPAIGN MS / MRS / MR **FIRST** MI **TREASURER** Receipt # Amount Mr. Tom NAME Date Processed **NICKNAME SUFFIX** LAST Date Imaged Spilman CAMPAIGN STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE **TREASURER** 823 Congress Ave., Ste. 1313 STREET **ADDRESS** (Residence or Business) Austin, TX 78701-2429 **CAMPAIGN** STREET ADDRESS OR PO BOX; APT / SUITE #; CITY: STATE: ZIP CODE **TREASURER** 823 Congress Ave., Ste. 1313 MAILING **ADDRESS** Austin, TX 78701-2429 **CAMPAIGN** AREA CODE PHONE NUMBER **EXTENSION TREASURER PHONE** (512) 476-0697 REPORT TYPE 10th day after campaign X Monthly Dissolution (Attach PAC-DR) treasurer termination 10 MONTHLY January 5 April 5 July 5 October 5 REPORT FILING **DEADLINE** February 5 May 5 August 5 November 5 March 5 December 5 September 5 June 5 11 PERIOD Month Day Year Month Day Year **THROUGH COVERED** 09/26/2025 10/25/2025

MONTHLY FILING GPAC REPORT: PURPOSE AND TOTALS

FORM MPAC COVER SHEET PG 2

2 COMMITTEE NAME			13 File		(Ethics Commission Filers)
Wholesale Beer Distribu	itors Of Texas PAC		000	15672	
4 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported			
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures	A. Supported			
	(Describe by date and location of election and nature of issue.)	7. Supported			
		B. Opposed			
	Officeholders Assisted (Identify by name or, if applicable, classify by party.)	Greg Bonnen State R	Representative		
5 CONTRIBUTION		POLITICAL CONTRIBUTIONS (OTHER	THAN	<u> </u>	
TOTALS	PLEDGES, LOANS, CONTRIBUTIONS M	OR GUARANTEES OF LOANS, OR ADE ELECTRONICALLY) qualifies for the higher itemization threshold	THAN	\$	0.00
	2. TOTAL POLITICA	CONTRIBUTIONS		\$	2,172.00
	`	GES, LOANS, OR GUARANTEES OF LO	DANS)		
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED	POLITICAL EXPENDITURES		\$	0.00
	4. TOTAL POLITICA	_ EXPENDITURES		\$	13,800.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL (OF THE REPORTING	ONTRIBUTIONS MAINTAINED AS OF T E PERIOD	HE LAST DAY	\$	153,796.96
OUTSTANDING LOAN TOTALS		MOUNT OF ALL OUTSTANDING LOANS	S AS OF THE	\$	0.00
6 AFFIDAVIT	<u> </u>				
		I swear, or affirm, under per true and correct and include under Title 15, Election Cod	es all information i		
			Mr. Tom Spilm	an	
		Signat	ture of Campaign	Treasur	er
AFFIX NOTARY	STAMP / SEAL ABOVE				
Sworn to and subscribed	before me, by the said		, this the		day
		hich, witness my hand and seal of office.			
Signature of officer adr	ministering oath	Printed name of officer administering oath	ı Title	of office	er administering oath

MONTHLY FILING GPAC REPORT: PURPOSE

FORM MPAC ADDENDUM

					Page 3 of 12
12 COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
Wholesale Beer Distributo	rs Of Texas PAC			00015672	
14 COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported			
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures	A. Supported			
	(Describe by date and location of election and nature of issue.)				
		B. Opposed			
	Officeholders Assisted (Identify by name or, if applicable, classify by party.)		Trey Martinez Fischer State Re	presentative	
COMMITTEE	1. Candidates	A. Supported			
ACTIVITY	(Identify by name or, if applicable, classify by party.)				
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	Officeholders Assisted (Identify by name or, if applicable, classify by party.)		Matt Shaheen State Representa	ative	
COMMITTEE	1. Candidates	A. Supported			
ACTIVITY	(Identify by name or, if applicable, classify by party.)				
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	Officeholders Assisted (Identify by name or, if		Royce West State Senator		
	applicable, classify by party.)				

MONTHLY FILING GPAC REPORT: PURPOSE

FORM MPAC ADDENDUM

					Page 4 of 12
L2 COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
Wholesale Beer Distributor	s Of Texas PAC			00015672	
14 COMMITTEE ACTIVITY	1. Candidates (Identify by name or, if applicable, classify by party.)	A. Supported			
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures	A. Supported			
	(Describe by date and location of election and nature of issue.)				
		B. Opposed			
	Officeholders Assisted (Identify by name or, if applicable, classify by party.)		Claudia Ordaz State Represent	ative	
COMMITTEE	Candidates	A. Supported			
ACTIVITY	(Identify by name or, if applicable, classify by party.)				
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	3. Officeholders Assisted (Identify by name or, if applicable, classify by party.)		Liz Campos State Representativ	/e	
COMMITTEE	Candidates		Pooja Sethi State Representativ	/e	
ACTIVITY	(Identify by name or, if applicable, classify by party.)				
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures (Describe by date and location of election and	A. Supported			
	nature of issue.)	B. Opposed			
	3. Officeholders Assisted				
	(Identify by name or, if applicable, classify by party.)				

MONTHLY FILING GPAC REPORT: PURPOSE

FORM MPAC ADDENDUM

2 COMMITTEE NAME				13 Filer ID	(Ethics Commission Filers)
/holesale Beer Distributo	ors Of Texas PAC			00015672	(Lunes commission riters)
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported			
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	Officeholders Assisted (Identify by name or, if applicable, classify by party.)		Terry Canales State Representa	ative	
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported	Josh Reyna State Representation	/e	
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	2. Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	Officeholders Assisted (Identify by name or, if applicable, classify by party.)				
COMMITTEE ACTIVITY	Candidates (Identify by name or, if applicable, classify by party.)	A. Supported			
(Attach lists on plain paper to complete this report if necessary.)		B. Opposed			
	Measures (Describe by date and location of election and nature of issue.)	A. Supported			
		B. Opposed			
	Officeholders Assisted (Identify by name or, if applicable, classify by party.)		Adam Hinojosa State Senator		

FORM MPAC MONTHLY FILING GPAC REPORT: PURPOSE **ADDENDUM** Page 6 of 12 12 COMMITTEE NAME 13 Filer ID (Ethics Commission Filers) Wholesale Beer Distributors Of Texas PAC 00015672 14 COMMITTEE 1. Candidates A. Supported **ACTIVITY** (Identify by name or, if applicable, classify by party.) (Attach lists on plain B. Opposed paper to complete this report if necessary.) A. Supported 2. Measures (Describe by date and location of election and nature of issue.) B. Opposed 3. Officeholders David Cook State Representative Assisted (Identify by name or, if applicable, classify by party.

SUBTOTALS - MPAC

FORM MPAC COVER SHEET PG 3

	7 of 12					
17 CO	MMITTE	E NAME	18 Filer ID	(Ethics Commission Filers)		
l	olesale	(Ethios commission Filoso)				
19 SCI	HEDULI	E SUBTOTALS	<u>I</u>			
l	ME OF	SUBTOTAL AMOUNT				
1.	X	SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS		\$ 2,172.00		
2.		SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS		\$		
3.		SCHEDULE B: PLEDGED CONTRIBUTIONS		\$		
4.		SCHEDULE C1: MONETARY CONTRIBUTIONS FROM CORPORATION OR LABOURGANIZATION)R	\$		
5.		SCHEDULE C2: NON-MONETARY (IN-KIND) CONTRIBUTIONS FROM CORPORALABOR ORGANIZATION	ATION OR	\$		
6.		SCHEDULE C3: MONETARY SUPPORT FROM CORPORATION OR LABOR ORG	ANIZATION	\$		
7.		SCHEDULE C4: NON-MONETARY SUPPORT FROM CORPORATION OR LABOR ORGANIZATION		\$		
8.	8. SCHEDULE D: PLEDGED CONTRIBUTIONS FROM CORPORATION OR LABOR ORGANIZATION		\$			
9.	9. SCHEDULE E: LOANS		\$			
10.	X	SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	S	\$ 13,800.00		
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.		SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTION	ONS	\$		
15.	15. SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER		\$			

	MONETARY POLITICAL CONTRIBUTIONS		SCHEDULE A1
	The Instruction Guide explains how to complete this form.	1	Total pages Schedule A1: Sch: 1/1 Rpt: 8/12
2	FILER NAME Wholesale Beer Distributors Of Texas PAC	3	Filer ID (Ethics Commission Filers) 00015672
4	Date 09/30/2025 5 Full name of contributor out-of-state PAC (ID#:) Kristen, Mark 6 Contributor address; City; State; Zip Code	7	Amount of Contribution (\$) \$2,172.00
	Bryan, TX 77803		
8	Principal occupation / Job title (See Instructions) A Business Person 9 Employer (See Instructions)	ns)	

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

EXPENDITURE CATEGORIES FOR BOX 8(a) Event Expense Food/Beverage Expense

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District Travel in District

Candidate/Officeholder/Politica Credit Card Payment	
Credit Card Payment	The Instruction Guide explains how to complete this form.
1 Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
Sch: 1/4 Rpt: 9/12	Wholesale Beer Distributors Of Texas PAC 00015672
4 Date	5 Payee name
09/30/2025	Bonnen, Greg
6 Amount (\$)	7 Payee address; City; State; Zip Code
\$1,500.00	P.O. Box 1183
Expenditure from corporate funds	Friendswood, TX 77549
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Candidate/Officeholder/Political Committee
	Campaign Contribution
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OI	Candidate/Officeholder name Office sought Office held
experientare to benefit ever	
Date	Payee name
10/10/2025	Campos, Liz
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	1028 Rigsby
Evpanditura from	
Expenditure from corporate funds	San Antonio, TX 78210
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
	Candidate/Officeholder/Political Committee
	Campaign Contribution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	
D-4-	
Date 10/16/2025	Payee name
	Canales, Terry
Amount (\$)	Payee address; City; State; Zip Code
\$1,500.00	2727 W. University
Expenditure from	
corporate funds	Edinburg, TX 78539
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Campaign Contribution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/OI	

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense Contributions/ Donations Made By -

Event Expense Fees Food/Beverage Expense Gift/Awards/Memorials Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense
Printing Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District
Travel Out of District

	Candidate/Officeholder/Politica Credit Card Payment	Committee Legal Services Salaries/Wages/Contract Labor OTHER (enter a category not listed above)
1	Total pages Schedule F1:	2 FILER NAME 3 Filer ID (Ethics Commission Filers)
	Sch: 2/4 Rpt: 10/12	Wholesale Beer Distributors Of Texas PAC 00015672
4	Date	5 Payee name
	10/22/2025	Cook, David
6	Amount (\$) \$1,000.00	7 Payee address; City; State; Zip Code 309 E Broad St
	Expenditure from corporate funds	Mansfield, TX 76063
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign Contribution
9	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	10/21/2025	Hinojosa, Adam
	Amount (\$)	Payee address; City; State; Zip Code
	\$1,500.00	PO Box 18301
	Expenditure from corporate funds	Corpus Christi, TX 78480
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee (b) Description Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense Campaign Contribution
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
	Date	Payee name
	10/02/2025	Martinez-Fischer, Trey
	Amount (\$) \$1,500.00 Expenditure from corporate funds	Payee address; City; State; Zip Code 104 Babcock Rd Ste 107 San Antonio, TX 78201
	PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
	OF EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense Campaign Contribution
	Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held

SCHEDULE F1

Advertising Expense Accounting/Banking Consulting Expense

Event Expense Fees Food/Beverage Expense

EXPENDITURE CATEGORIES FOR BOX 8(a)

Loan Repayment/Reimbursement Office Overhead/Rental Expense Polling Expense

Solicitation/Fundraising Expense Transportation Equipment & Related Expense Travel in District

Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment	
4 Tatal range Cabadala F4.	
1 Total pages Schedule F1:	
Sch: 3/4 Rpt: 11/12	Wholesale Beer Distributors Of Texas PAC 00015672
4 Date	5 Payee name
10/10/2025	Ordaz, Claudia
6 Amount (ft)	7 Payee address; City; State; Zip Code
6 Amount (\$)	
\$1,000.00	P.O. Box 71738
Expenditure from	
corporate funds	El Paso, TX 79917
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF	Contributions/Donations Made By Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Candidate/Officeholder/Political Committee Check if Austin, TX, officeholder living expense
	Campaign Contribution
9 Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	
Date	Payee name
10/17/2025	Reyna, Josh
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	7421 Burnet Rd
, -, -, -, -, -, -, -, -, -, -, -, -, -,	#111
Expenditure from	
corporate funds	Austin, TX 78757
PURPOSE	(a) Category (See Categories listed at the top of this schedule) (b) Description
OF EXPENDITURE	Contributions/Donations Made By
LXI ENDITORE	Candidate/Officeholder/Political Committee
	Campaign Contribution
Complete ONLY if direct	Candidate/Officeholder name Office sought Office held
expenditure to benefit C/O	H
Date	Davida nama
	Payee name
10/16/2025	Sethi, Pooja
Amount (\$)	Payee address; City; State; Zip Code
\$1,000.00	4321 House of York
Expenditure from corporate funds	Austin, TX 78730
<u>'</u>	
PURPOSE OF	(a) Category (See Categories listed at the top of this schedule) (b) Description
EXPENDITURE	Contributions/Donations Made By Candidate/Officeholder/Political Committee Check if travel outside of Texas. Complete Schedule T. Check if Austin, TX, officeholder living expense
	Candidate/Officeriolder/Political Committee Campaign Contribution
	Sampaigh Continuation
Operation Objects in	Constitute (Office helder name
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sought Office held
onpolititude to beliefit 6/0	

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense Accounting/Banking

Event Expense Fees

Loan Repayment/Reimbursement Office Overhead/Rental Expense

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense

Consulting Expense Contributions/ Donations Made By Candidate/Officeholder/Politica Credit Card Payment		Expense Travel Out of District Wages/Contract Labor OTHER (enter a category not listed above)
1 Total pages Schedule F1:	2 FILER NAME	3 Filer ID (Ethics Commission Filers)
Sch: 4/4 Rpt: 12/12	Wholesale Beer Distributors Of Texas PAC	00015672
4 Date	5 Payee name	
10/07/2025	Shaheen, Matt	
6 Amount (\$)	7 Payee address; City; State; Zip C	ode
\$1,000.00	3917 Malton Dr.	
Expenditure from corporate funds	Plano, TX 75025	
8 PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Contributions/Donations Made By	Check if travel outside of Texas. Complete Schedule T.
	Candidate/Officeholder/Political Committee	Check if Austin, TX, officeholder living expense
		Campaign Contribution
Complete ONLY if direct expenditure to benefit C/O	Candidate/Officeholder name Office soil	ught Office held
Date	Payee name	
09/29/2025	The Austin Club	
Amount (\$)	Payee address; City; State; Zip C	nde
\$300.00	110 E. 9th Street	
φ300.00	110 L. 9til Street	
Expenditure from	A	
corporate funds	Austin, TX 78701	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF EXPENDITURE	Food/Beverage Expense	Check if travel outside of Texas. Complete Schedule T.
		Check if Austin, TX, officeholder living expense
		In-kind contribution for refreshments for the Cesar Blanco event
Complete <u>ONLY</u> if direct expenditure to benefit C/O	Candidate/Officeholder name Office sor	ught Office held
Date	Payee name	
10/09/2025	West, Royce	
	·	
Amount (\$)	Payee address; City; State; Zip C	ode
\$1,500.00	5787 South Hampton Road	
Expenditure from	Suite 385	
corporate funds	Dallas, TX 75232	
PURPOSE	(a) Category (See Categories listed at the top of this schedule)	(b) Description
OF	Contributions/Donations Made By	Check if travel outside of Texas. Complete Schedule T.
EXPENDITURE	Candidate/Officeholder/Political Committee	Check if Austin, TX, officeholder living expense
		Campaign Contribution
Complete ONLY if direct	Candidate/Officeholder name Office so	ught Office held
expenditure to benefit C/O	H	