Support Your Down Ballot Super PAC 118 Vintage Park Blvd, Ste. W Houston, TX 77070 346-401-8096 PEC MAIL CENTER 2016 MAY 23 AM 9:23

May 15, 2016

.

Federal Election Commission 999 E St., NW Washington, DC 20463

Re: Form 1, Statement of Organization – Unlimited Contributions

To Whom It May Concern:

This committee intends to make unlimited independent expenditures, and consistent with the U.S. Court of Appeals for the District of Columbia Circuit decision in SpeechNow v. FEC, it therefore intends to raise funds in unlimited amounts. This committee will not use those funds to make contributions, whether direct, in-kind, or via coordinated communications, to federal candidates or committees.

Respectfully submitted **David Jackson**

Treasurer

FEC FORM 1	STATEMENT OF ORGANIZATION	PECETVED PEC MAIL GENTER 2016 MAY Office Use Only
1. NAME OF COMMITTEE (ir	n full) (Check if name Example: If typing, type over the lines.	12FE4M5
Support Your D	Down Ballot Super PAC	
ADDRESS (number a		
L is changed	d) L → ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓	$\begin{bmatrix} T_1 X \end{bmatrix} \begin{bmatrix} 7_1 7_1 0_1 7_1 0 \end{bmatrix} - \begin{bmatrix} 1 \\ 1 \\ 2 \end{bmatrix}$ STATE \blacktriangle ZIP CODE \bigstar
COMMITTEE'S E-M	AIL ADDRESS	
☐ ◀ (Check if is change		
COMMITTEE'S WEE (Check if is change		
	Cation Number \blacktriangleright	
4. IS THIS STATE	MENT 🔀 NEW (N) OR 🚺 AMENDED (A)	
I certify that I have Type or Print Name	examined this Statement and to the best of my knowledge and belief it of Treasurer David L Jackson	is true, correct and complete.
Signature of Treasur	er D	
NOTE: Submission of	talse, erroneous, or incomplete information may subject the person signing the ANY CHANGE IN INFORMATION SHOULD BE REPORTED W	
Office Use Only	For further information co Federal Election Commissio Toll Free 800-424-9530 Local 202-694-1100	

1

I

ļ

; ;

· · FEC Form 1 (Revised 02/2009)

Page 2

ζ

5.		-	OMMITTEE Committee:			
	(a) ·		This committee is a principal campaign committee. (Complete the candidate information below.)			
	(b)		This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)			
	Name Candio					
	Candio Party	date Affiliatio	on Con Sought: House Senate Dresident District			
	(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.			
	Name Candio					
	Party	y Com	Imittee:			
	(d)	Ω	This committee is a cr subordinate) committee of the Republican, etc.) Party.			
•	Political Action Committee (PAC):					
	(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:			
	•		Corporation Corporation w/o Capital Stock Labor Organization			
			Membership Organization Trade Association Cooperative			
			In addition, this committee is a Lobbyist/Registrant PAC.			
	(f)	X	This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)			
	•		In addition, this committee is a Lobbyist/Registrant PAC.			
			In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)			
	Joint	Fund	Iraising Representative:			
	(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.			
	(h)	D	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.			
		Com	mittees Participating in Joint Fundraiser			
		1.				
		2.				
		3.	FEC ID number			
		4.				

Write or Type Committee Name Support Your Down Ballot Super PAC 6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor Mailing Address Line of Any Connected Organization Affiliated Committee Mailing Address Line of Connected Organization Affiliated Committee Prevention Citry State ZiP CODE Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor Cutstodian of Records: Identify by name, address (phone number - optional) and position of the person in possession of comm books and records. Full Name Q a Y, i, (d, L, L, J a g X, s, o P,, L, T, X) Line Address	FEC Form 1 (Revised 0	12/2009)	Page 3
6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor Mailing Address Mailing Address CITY State ZIP CODE Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor 7. Custodian of Records: Identify by name, address (phone number - optional) and position of the person in possession of comm books and records. Full Name [] 1/18 Vintage.Park Blvd, Ste, W Houston CITY State ZIP CODE Full Name [] 1/18 Vintage.Park Blvd, Ste, W [] Houston CITY State ZIP CODE [] Tregesurer: List the name and address (phone number optional) of the treasurer of the committee, and the name and address or any designated agent (e.g. assistant treasurer). Full Name [] Pavid.L.Jackson GITY STATE ZIP CODE [] Tregesurer: List the name and address (phone number optional) of the treasurer of the committee, and the name and address or any designated agent (e.g. assistant treasurer). <	Write or Type Committee Name		
Mailing Address	Support Your Down	Ballot Super PAC	
Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Spo Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Spo r. Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of comm books and records. Full Name P a v_i_i_dLJ a g x_i_s_o_p	6. Name of Any Connected O	rganization, Affiliated Committee, Joint Fundraising Representative	e, or Leadership PAC Sponsor
Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Spo Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Spo r. Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of comm books and records. Full Name P a v_i_i_dLJ a g x_i_s_o_p]		
Address Image: Park Blvd, Ster W Title or Position CITY State ziP code Address Image: Park Blvd, Ster W Title or Position CITY State ziP code Mailing Address Image: Park Blvd, Ster W Image: Ima		<u></u>	
Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Spo Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Spo r. Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of comm books and records. Full Name P a v_i_i_dLJ a g x_i_s_o_p			
Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Spont 7. Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of commit books and records. Full Name D a v_i_i_dL_J a q_k_s_o_n Mailing Address	Mailing Address		
Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Spont 7. Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of commit books and records. Full Name D a v_i_i_dL_J a q_k_is_o_n Mailing Address			
Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Spont 7. Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of commit books and records. Full Name D a v_i_i_dL_J a q_k_is_o_n Mailing Address			
Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of comm books and records. Full Name			(Caracteria
books and records. Full Name P a v, i, d, L, J a q k, s, o, n, Mailing Address	Relationship: Connected	I Organization Affiliated Committee Joint Fundraising Represent	tative Leadership PAC Sponsor
books and records. Full Name P a v, i, d, L, J a q k, s, o, n, Mailing Address	7 Custodian of Becords: Iden		nerson in possession of committee
Mailing Address 118 Yintage Park Blvd, Ster W Houston Trx Houston Trx Title or Position CITY State ZIP CODE Treasurer: List the name and address (phone number optional) of the treasurer of the committee; and the name and address (phone number optional) of the treasurer of the committee; and the name and address of Treasurer Full Name of Treasurer David L Jackson Mailing Address 118 Yintage Park Blvd, Ste. W H_o_ust_t_o_n Treasurer Line Treasurer David L Jackson Treasurer CITY STATE ZIP CODE			
Mailing Address 118 Yintage Park Blvd, Ster W Houston Trx Houston Trx Title or Position CITY State ZIP CODE Treasurer: List the name and address (phone number optional) of the treasurer of the committee; and the name and address (phone number optional) of the treasurer of the committee; and the name and address of Treasurer Full Name of Treasurer David L Jackson Mailing Address 118 Yintage Park Blvd, Ste. W H_o_ust_t_o_n Treasurer Line Treasurer David L Jackson Treasurer CITY STATE ZIP CODE	- Davi	id. L. Jackson,	
Maining Address Image Park Bivd, Ste. W Houston Image Park Bivd, Ste. W Image Park I I I I I I I I I I I I I I I I I I I			
Title or Position CITY STATE ZIP CODE $[\underline{T_{reasurer}}]$ \underline{I}	Mailing Address		<u>↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓ ↓</u>
Title or Position CITY STATE ZIP CODE $[\underline{T_{reasurer}}]$ \underline{I}			
Treasurer List the name and address (phone number optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer). Full Name of Treasurer David L Jackson Mailing Address 118 Vintage Park Blvd, Ste. W H_o_u_s_t_o_n Treasurer CITY STATE			
8. Treasurer: List the name and address (phone number optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer). Full Name of Treasurer Dayid L Jackson	Title or Position	CITY STATE	ZIP CODE
8. Treasurer: List the name and address (phone number optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer). Full Name of Treasurer David_L Jackson Mailing Address 118 Vintage Park Blvdr, Ste. W H_o_u_s_t_o_n K_io_u_s_t_o_n CITY	Treasµrer	Telephone number	
any designated agent (e.g., assistant treasurer). Full Name of Treasurer $Payid_{L}Jackson$ Mailing Address 118 Vintage $Park_BVd_r$, Ste. W $H_1o_1u_1s_1t_1o_1n_1$ CITY STATE ZIP CODE			
of Treasurer $[\underline{David}_{L} Jackson]$ Mailing Address $[\underline{118} Vintage_{Park} Blvd_{r}, Ste. W]$ $[\underline{118} $			e; and the name and address of
$\begin{bmatrix} H_1 \circ_1 u_1 s_1 t_1 \circ_1 n_1 & \dots & \dots & \dots \\ \hline \\ CITY & STATE & ZIP CODE \end{bmatrix}$	L Dovid L	Jackson	
CITY STATE ZIP CODE	Mailing Address	118 Yintage Park Blvd, Ste. W	
CITY STATE ZIP CODE			
Treasµrer Telephone number	Title or Position 【エアタスシルr _l er】		

20-10:00 · 20:00 · 000250-19

7.

ı

FEC Form 1 (Revised 02/2009)

Full Name of	<u></u>	۳۵۵٬۰٬۰٬۰٬۰٬۰٬۰٬۰٬۰٬۰٬۰٬۰٬۰٬۰٬۰٬۰٬۰٬۰٬۰٬	
Designated	s _l a J _l açk _i sqn _{i i i i i i i i i i i i i i i i i i i}		
Mailing Address	118 Vintage Park Blvd,, Ste. W		
	Houston CITY	」」 STATE	77070
Title or Position	urer Telep	hone number]-[]-[
Banks or Other Depo safety deposit boxes of	ositories: List all banks or other depositories in which the or maintains funds.	e committee deposits fund	s, holds accounts, rents
Name of Bank, Depos	sitory, etc.		
ĽΨ	ells Fargo Bank, N,A		
Mailing Address	14094,FM 2920,		_ <u></u>
			<u></u>
	∫ T _i ombal , , , , , , , , , , , , , , , , , , ,		77377
·.			
		STATE	ZIP CODE
Name of Bank, Depos	CITY		ZIP CODE
Name of Bank, Depos	CITY		
Mailing Address			
L			
Mailing Address			

Page 4



- huld fork Blud -

Doughon, TX 17070

Federal Elsetion Commission gaare. St., NW Washington, DC 20463

RECEIVED MAIL CENTER

AM 9:23

fie

2016 MAY 23

ՈւվուՄեն ենթեկներությունը ին ներում իրուներուն

Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS The FEC added this page to the end of this filing to indicate how it was received. Date of Receipt Hand Delivered Postmarked Date of Receipt JSPS First Class Mail 6 Postmarked (R/C) **USPS** Registered/Certified Postmarked **USPS** Priority Mail Postmarked **USPS Priority Mail Express** Postmark Illegible No Postmark Shipping Date **Overnight Delivery Service (Specify):** Next Business Day Delivery Date of Receipt **Received from House Records & Registration Office** Date of Receipt Received from Senate Public Records Office Date of Receipt Received from Electronic Filing Office Date of Receipt or Postmarked Other (Specify): PREPARER DATE PREPARED (3/2015)