STATEMENT OF

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FORM 1		0	RGANIZ	ZATIO	NC				0	office Us	e Only	,		
1. NAME OF COMMITTEE (ir	n full)		Check if name s changed)		mple:If typir r the lines.	ıg, type	12	FE4M		mice os	Se Only			
DAVID ALA	MEE	L FOR	CONGR	RESS										
ADDRESS (number a	nd street)	5310 HA	RVEST HILL ROA	D SUITE 2	200									
X ◀ (Check if a is changed		DALLAS	TY 🛦				L ^{TX} STA	(TE _	752	230	ZIP	COD	DE A	
COMMITTEE'S E-MA	AIL ADDR	ESS												
(Check if a is changed		davidal	ameelforcong	ress@gr	mail.com									
		Optional david	Second E-Mail A Dalameelford	Address congres	s.com									
COMMITTEE'S WEB (Check if a is changed)	address	,	RL) prcongress.com											
2. DATE 0	M / D	28 / Y	2013											
3. FEC IDENTIFIC	CATION N	NUMBER •	. C	C0050748	33									
4. IS THIS STATE	MENT	NEW	(N) OR	×	AMEN	DED (A)								
certify that I have e	examined	this Stateme	nt and to the be	st of my	knowledge a	nd belief	it is true	e, corre	ect and	d com	olete.			
Type or Print Name	of Treasur	er Dr. Davi	d Alameel											
Signature of Treasure	er <i>Dr</i> .	David Alameel			[Electronical	ly Filed]	Date		06	2			2013	Y
NOTE: Submission of	false, erro		omplete informatio	-						penal	ties of	2 U.S	S.C. §	437g.
Office Use					For further in						C FC			

Office			For further information contact:
Use			Federal Election Commission
Only			Toll Free 800-424-9530
Offig			Local 202-694-1100

	-C - -	wm 1 (Paying 02/2000)	Pogo 2
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		COMMITTEE Committee:	
(a)	X	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. (Comple information below.)	te the candidate
Name (Candid		Dr. David Alameel	
Candid Party A		on DEM Office Sought: X House Senate President	State TX District 33
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candida			
Party	Con	nmittee:	
(d)		· · · ·	emocratic, publican, etc.) Party.
Politic	cal A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization or line 6.)	cted organization is a:
		Corporation Corporation w/o Capital Stock	abor Organization
		Membership Organization Trade Association	Cooperative
		In addition, this committee is a Lobbyist/Registrant PAC.	
(f)		This committee supports/opposes more than one Federal candidate, and is NOT a separate segre committee. (i.e., nonconnected committee)	egated fund or party
		In addition, this committee is a Lobbyist/Registrant PAC.	
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Joint I	Func	Iraising Representative:	
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate.	or more political
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	or more political
	Com	mittees Participating in Joint Fundraiser	
	1.		
	2.	C Inditiber	
	3.	FEC ID number	
	4		

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Write or Type Committee Nam		. age 🐱
DAVID ALAME	EL FOR CONGRESS	
	Organization, Affiliated Committee, Joint Fundraising Representative, or	Leadership PAC Sponsor
NONE		
Mailing Address		
Mailing Address		
	CITY STATE	ZIP CODE
Relationship: Connecte	ed Organization Affiliated Committee Joint Fundraising Representative	_
. Custodian of Records: Ide books and records.	entify by name, address (phone number optional) and position of the perso	on in possession of committee
Full Name		
Mailing Address		
Title or Position	CITY STATE	ZIP CODE
	Telephone number	
Treasurer: List the name ar any designated agent (e.g.,	nd address (phone number optional) of the treasurer of the committee; and assistant treasurer).	d the name and address of
Full Name Nadya Ala	ameel	1
of Treasurer	5020 Tanbark Rd.	
Mailing Address		
	Dallas TX TX	75229
T 5	CITY STATE	ZIP CODE
Title or Position TREASURER	972 Telephone number	_ 479 _ 5800

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Full Name of		
Designated Agent		
Mailing Address		
	CITY STATE	ZIP CODE
Title or Position		
	Telephone number	
safety deposit bo	Depositories: List all banks or other depositories in which the committee deposits funds, holoxes or maintains funds. Depository, etc.	as accounts, rong
	oxes or maintains funds.	
safety deposit be Name of Bank, I	Depository, etc. City Bank of Texas 7800 PRESTON RD STE 201	
safety deposit be Name of Bank, I	Depository, etc. City Bank of Texas 7800 PRESTON RD STE 201	ZIP CODE
safety deposit be Name of Bank, I	Depository, etc. City Bank of Texas 7800 PRESTON RD STE 201 PLANO CITY STATE	
safety deposit be Name of Bank, I	Depository, etc. City Bank of Texas 7800 PRESTON RD STE 201 PLANO CITY STATE Depository, etc.	
Safety deposit be Name of Bank, I Mailing Address	Depository, etc. City Bank of Texas 7800 PRESTON RD STE 201 PLANO CITY STATE	
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