| FEC FORM 1 | STATEMENT OF ORGANIZATION | PAGE 1 / 4 |
|---|--|---|
| 1. NAME OF COMMITTEE (in full) | (Check if name Example: If typing, type is changed) over the lines. | 12FE4M5 |
| | | |
| ADDRESS (number and street) | 9800 CENTRE PARKWAY SUITE 200 | |
| (Check if address is changed) | HOUSTON | TX 77036 STATE ▲ ZIP CODE ▲ |
| COMMITTEE'S E-MAIL ADDR | ESS | |
| (Check if address is changed) | prolife@texasrighttolife.com | |
| | Optional Second E-Mail Address | |
| COMMITTEE'S WEB PAGE AI | DDRESS (URL) | |
| 2. DATE 01 / | 30 / Y Y Y Y 2018 | |
| 3. FEC IDENTIFICATION N | NUMBER ► C C00419242 | |
| 4. IS THIS STATEMENT | NEW (N) OR × AMENDED (A) | |
| I certify that I have examined | this Statement and to the best of my knowledge and belief it | is true, correct and complete. |
| Type or Print Name of Treasu | GRAHAM, ELIZABETH, , , | |
| Signature of Treasurer | AHAM, ELIZABETH, , , [Electronically Filed] | Date 01 / 01 / 2018 |
| NOTE: Submission of false, erro | neous, or incomplete information may subject the person signing ANY CHANGE IN INFORMATION SHOULD BE REPORTED W | |
| Office Use Only | For further information c Federal Election Commissi Toll Free 800-424-9530 Local 202-694-1100 | |

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| FEC | Form 1 (Revised 02/2009) Page 2 | | | |
| TYPE OF | COMMITTEE | | | |
| Candida | ate 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 of Candidate | | | | |
| Candidate Party Affil | | | | |
| (c) | This committee supports/opposes only one candidate, and is NOT an authorized committee. | | | |
| Name of Candidate | | | | |
| Party C | ommittee: | | | |
| (d) | This committee is a (National, State or subordinate) committee of the (Democratic, Republican, etc.) Party | | | |
| Politica | I Action Committee (PAC): | | | |
| (e) × | This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is | | | |
| | Corporation Corporation w/o Capital Stock Labor Organization | | | |
| | X 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 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 Fu | ndraising 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) | 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. | | | |
| Co | ommittees Participating in Joint Fundraiser | | | |
| 1. | FEC ID number | | | |
| 2. | FEC ID number | | | |
| 3. | FEC ID number | | | |
| 4. | FEC ID number | | | |

FEC Form 1 (Revised 02/2009)

Write or Type Committee Name

TEXAS RIGHT TO LIFE POLITICAL ACTION C

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

| Texas Right to Life Co | mmittee | |
|------------------------|---------------------|----------|
| | | |
| Mailing Address | 9800 Centre Parkway | |
| | Suite 200 | |
| | | |
| | Houston | TX 77036 |
| | Houston CITY | |

7. Custodian of Records: Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

| GRAHAM, | ELIZABETH, , , |
|-------------------|---|
| Full Name | |
| Mailing Address | 9800 CENTRE PARKWAY |
| | SUITE 200 |
| | HOUSTON TX 77036 |
| Title or Position | CITY STATE ZIP CODE |
| Treasurer | Telephone number 713 782 5433 |

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 | GRAHAM, ELIZABETH, , , |
|--------------------------------|---|
| of Treasurer | |
| Mailing Address | 9800 CENTRE PARKWAY SUITE 200 |
| | |
| | HOUSTON |
| | CITY STATE ZIP CODE |
| Title or Position Treasurer | Telephone number 713 - 782 - 5433 |

| Full Name of Designated Agent | PARMA, REBECCA, , , |
|-------------------------------------|---------------------------------------|
| Mailing Address | 9800 CENTRE PARKWAY |
| | SUITE 200 |
| | HOUSTON |
| | CITY STATE ZIP CODE |
| Title or Position Assistant Treasu | rer Telephone number 713 _ 782 _ 5433 |

9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

| Frost E | ank | | |
|---------------------------|----------------------|-------|----------|
| Mailing Address | 601 Jefferson Street | | |
| | | | |
| | | | 002 |
| | CITY | STATE | ZIP CODE |
| Name of Bank, Depository, | etc. | | |
| | | | |
| Mailing Address | | | |
| | | | |
| | | | |
| | CITY | STATE | ZIP CODE |