STATEMENT OF

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FEC ORGANIZATION FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Associations Inc. PAC/Associa PAC 5401 N.Central Expressway ADDRESS (number and street) Suite 300 (Check if address is changed) Dallas 75205 TX CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS slming@comerica.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 30 2013 C00413856 FEC IDENTIFICATION NUMBER > 3. X 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. Paul Reyes Type or Print Name of Treasurer Paul Reyes [Electronically Filed] 12 30 2013 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530 Only Local 202-694-1100

	EEC Ea	rm 1 (Pavisad 02/2000)	Page 2
		om 1 (Revised 02/2009) OMMITTEE	raye Z
Car	ndidate	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. (Con information below.)	nplete the candidate
Nam Can	e of didate		
	didate y Affiliati	on Office Sought: House Senate President	State
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Nam Cand	e of didate		
Par	ty Con	nmittee:	
(d)		This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.
Poli	itical A	ction Committee (PAC):	
(e)	\times	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its co	nnected organization is a:
		X Corporation Corporation w/o Capital Stock	Labor 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 s committee. (i.e., nonconnected committee)	egregated 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.)	
Join	t Fund	Iraising Representative:	
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for transmittees/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 to committees/organizations, none of which is an authorized committee of a federal candidate.	wo or more political
	Com	mittees Participating in Joint Fundraiser	
	1.	FEC ID number	
	2.	FEC ID number	
	3.	FEC ID number	
	4.		

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Write or Type Committee Nan	me	
Associations Ir	nc. PAC/Associa PAC	
6. Name of Any Connected	Organization, Affiliated Committee, Joint Fundraising Repre	esentative, or Leadership PAC Sponsor
Associations, Inc.		
Mailing Address	5401 N. Central Expressway	
Ü	Sutie 300 Dallas CITY	TX 75205 STATE ZIP CODE
Relationship: X Connecte	ed Organization Affiliated Committee Joint Fundraising	_
. Custodian of Records: Ide books and records.	entify by name, address (phone number optional) and position	on of the person in possession of committee
Comerica Full Name	a Bank	
Mailing Address	P.O. Box 75000 	
	Detroit	MI 48275-2250
Title or Position	CITY	STATE ZIP CODE
Recordkeeper	Telephone num	ber 248 - 371 - 7268
Treasurer: List the name a any designated agent (e.g.,	and address (phone number optional) of the treasurer of the assistant treasurer).	committee; and the name and address of
Full Name Paul Rey of Treasurer	/es	
Mailing Address	5401 N Central Expressway	
	Suite 290	
	Dallas	TX 75205 -
Title or Desition	CITY	STATE ZIP CODE
Title or Position PAC Treasurer	Telephone numl	per 214 - 953 - 3009

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Full Name of Designated		
Agent		
Mailing Address		
	CITY STATE	ZIP CODE
Title or Position		
	Telephone number	-
Banks or Other safety deposit be Name of Bank,		holds accounts, rents
safety deposit be Name of Bank,	oxes or maintains funds. Depository, etc. Comerica Bank P.O. Box 75000	holds accounts, rents
safety deposit be	oxes or maintains funds. Depository, etc. Comerica Bank P.O. Box 75000	holds accounts, rents
safety deposit be Name of Bank,	Depository, etc. Comerica Bank P.O. Box 75000	
safety deposit be Name of Bank,	oxes or maintains funds. Depository, etc. Comerica Bank P.O. Box 75000	
safety deposit be Name of Bank,	Depository, etc. Comerica Bank P.O. Box 75000	
safety deposit be Name of Bank,	Depository, etc. Comerica Bank P.O. Box 75000 Detroit MI 482	275
safety deposit be Name of Bank, Mailing Address	Depository, etc. Comerica Bank P.O. Box 75000 Detroit MI 482	275
safety deposit be Name of Bank, Mailing Address	Depository, etc. Comerica Bank P.O. Box 75000 Detroit MI 482	275
safety deposit be Name of Bank, Mailing Address	Depository, etc. Comerica Bank P.O. Box 75000 Detroit MI 482 CITY STATE	275
safety deposit be Name of Bank, Mailing Address	Depository, etc. Comerica Bank P.O. Box 75000 Detroit MI 482 CITY STATE	275
safety deposit be Name of Bank, Mailing Address	Depository, etc. Comerica Bank P.O. Box 75000 Detroit MI 482 CITY STATE	275