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STATEMENT OF ORGANIZATION

FORM 1		-	Of	fice Use Only
1. NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5	
Brookshire Broth	ers, Inc.			
ADDRESS (number and street)	1201 Ellen Trout Drive			
(Check if address is changed)				
	Lufkin CITY ▲		TX 759 STATE ▲	004
COMMITTEE'S E-MAIL ADDRE	ISS			
(Check if address is changed)	sfreeman@brookshire			
	Optional Second E-Mail Add	dress		
COMMITTEE'S WEB PAGE AD	DRESS (URL)			
2. DATE 02 0	1 / Y Y Y Y Y 2017			
3. FEC IDENTIFICATION N	UMBER ► C co	00457093		
4. IS THIS STATEMENT	NEW (N) OR	AMENDED (A)		
I certify that I have examined the	his Statement and to the best	of my knowledge and belief it	is true, correct and	complete.
Type or Print Name of Treasure	Oliver, Brandon, Clay, ,			
Signature of Treasurer	r, Brandon, Clay, ,	[Electronically Filed]	Date 10	07 / Y Y Y Y 2022
NOTE: Submission of false, erron		may subject the person signing th TION SHOULD BE REPORTED V		penalties of 52 U.S.C. §3010
Office Use Only		For further information co Federal Election Commissio Toll Free 800-424-9530 Local 202-694-1100		FEC FORM 1 (Revised 06/2012)

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TYPE OF COMMITTEE:	
Candidate Committee:	
(a) This committee is a principal campaign committee. (Complete the candidate information below	w.)
(b) This committee is an authorized committee, and is NOT a principal campaign committee. (Co	omplete the candidate
Name of Candidate	
CandidateOfficeParty AffiliationSought:HouseSenatePresidential	State lent District
(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.	District
Name of Candidate	
(d) This committee is a	Democratic, Jepublican, etc.) Party
Political Action Committee (PAC):	
(e) x This committee is a separate segregated fund. (Identify connected organization on line 6.) Its	s 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) This committee supports/opposes more than one Federal candidate, and is NOT a separate committee. (i.e., nonconnected committee)	segregated 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.)	
(g) This committee is an independent expenditure-only political committee (Super PAC).	
In addition, this committee is a Lobbyist/Registrant PAC.	
(h) This committee is a political committee with both contribution and non-contribution accounts	(Hybrid PAC).
In addition, this committee is a Lobbyist/Registrant PAC.	
Joint Fundraising Representative:	

(i) 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.

(j) 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.

Committees Participating in Joint Fundraiser

1.	L														C		
2.	L								1						C		

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٧	Vrite or Type Committee Name	
	Brookshire Brothers, Inc.	
6.	Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership	PAC Sponsor

Brookshire Brothers,	Inc.			1
Mailing Address	1201 Ellen Trout Dr	ive		
	Lufkin			75904
		CITY A	STATE A	ZIP CODE
Relationship: X Connected	Organization Af	iliated Organization	pint Fundraising Representativ	/e Leadership PAC Sponso

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

Oliver, Bra	ndon, Clay, ,					
Full Name						
Mailing Address	P.O. Box 1688					
	Lufkin			TX 75902		
	(STATE 🔺	ZIP CODE	
Title or Position ▼						
CFO			Telephone num	nber 936 – [634 – 8155	

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	Oliver, Brandon, Clay, ,
of Treasurer	
Mailing Address	P.O. Box 1688
	Lufkin TX 75902
	CITY ▲ STATE ▲ ZIP CODE ▲
Title or Position	
	Telephone number

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Full Name of Designated Agent		
Mailing Address		
	CITY A STATE A	ZIP CODE ▲
Title or Position ▼		
	Telephone number	

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.

S	outhside Bank		1
Mailing Address	2510 West Frank Street		
	Lufkin		904
	CITY 🔺	STATE 🔺	ZIP CODE
Nome of Bonk, Don	opitory, oto		
Name of Bank, Dep	ository, etc.		
L			
Mailing Address			
	CITY 🔺	STATE 🔺	ZIP CODE