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FEC FORM 1

STATEMENT OF ORGANIZATION

RECEIVED
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			dince (Usa-Privi		
1. NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5		
(committee	to Elect B	UCK WILLIE	· · · · · · · · · · · · · · · · · · ·		
ADDRESS (number and street)	PD BOX 15	82, , , , , ,			
(Check if address is changed)					
	Ga, I,ves, ton	لسنسسا	* 7.7 7.5.5.3 STATE ▲ ZIP CODE ▲		
COMMITTEE'S E-MAIL ADDI	RESS				
(Check if address is changed)	ContactoB	luc Kfor Going	15.6.5.5.0.7.9.		
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COMMITTEE'S WEB PAGE	ADDRESS (URL)		ALCOHOLOGICA CONTRACTOR		
(Check if address is changed)		1n.9.5.6.5.5.0.59			
is sittingsty	1	,	1		
·					
2. DATE (7 (06 2013		•		
3. FEC IDENTIFICATION	NUMBER ▶ C	en egenerale			
4. IS THIS STATEMENT	NEW (N) OR	AMENDED (A)			
I certify that I have examined	d this Statement and to the best	t of my knowledge and belief i	t is true, correct and complete.		
Type or Print Name of Treas	ΛΛ - \-				
Signature of Treasurer	Mauline K	Cerese	Date 12 09 2015		
NOTE: Submission of talse, en	<u> </u>	may subject the person signing	this Statement to the penalties of 2 U.S.C. §437g. WITHIN 10 DAYS.		
Office Use Only		For further information of Federal Election Commiss Toll Free 800-424-9530 Local 202-694-1100	contact: FFC FORM 1		

FE	C FOI	m 1 (Revised 02/2009)				
		OMMITTEE				
Cendi	date	Committee:				
(a)		This committee is a principal campaign committee. (Complete the candidate information below.)				
(b)	v	This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)				
Name o		BUCK Willis				
Candida Party Af		on De m Office Sought: House Senate President District 14				
(c)	~	This committee supports/opposes only one candidate, and is NOT an authorized committee.				
Name o Candida						
Party	Con	nmittee:				
(d)	e trans Legan	(National, State (Democratic, This committee is a or subordinate) committee of the Republican, etc.) Party.				
Politic	al A	ction 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 atddition, this committee is a Lobbyist/Registrant PAC.				
(f)	8 % 1 ₁₂₀	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 F	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.				
	jeseg Kali	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.	And the state of t				
	2.	FEC ID number C				
	3.	FEC ID number C				
	4.	FEC ID number C				

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Write or Type Committee Name		
committee	to Elect Buck Willis	
6. Name of Any Connected C	Organization, Affiliated Committee, Joint Fundralsing Representative, or Leadersh	ip PAC Sponsor
M/4111111	<u> </u>	
Mailing Address		11111
	CITY STATE 2	ZIP CODE
Relationship: Connected	d Organization Affiliated Committee Joint Fundraising Representative Lead	dership PAC Sponsor
		
 Custodian of Records: ider books and records. 	ntify by name, address (phone number optional) and position of the person in poss	session of committee
Full Name	Tingy Pagheco	
Mailing Address	11,2,1,2,50001 P. D.C.	
-		
	Killeen TX 7.6.5	43-
Title or Position	CITY STATE 2	ZIP CODE
Secretary.	1 1 1 1	00-11050
	d address (phone number optional) of the treasurer of the committee; and the name	ne and address of
any designated agent (e.g., a	assistant treasurer).	
Full Name of Treasurer Mailio	cellene casey	
Mailing Address	13,2,0,2, AV < ,0,	
	Galveston TX 17.7.5	
Title or Position	CITY STATE 2	CIP CODE

CITY

STATE

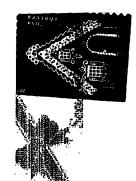
ZIP CODE

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Full Name of Designated Agent

Mailing Address



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FEC MAIL CENTER

Hilliam Millian to the Committee of the Milliam of the Committee of the Co

Tedoral Election Commission Conflessional Candidates 999 E. Street NW Washington, DC

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PREPARER (9/2013)	DATE PREPARED	
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