Image# 20210715945	1093559

07/15/2021 01 : 33

FEC FORM 1	03333	_	EMEN ANIZA	_				Office		PAGE 1 / 5 —
1. NAME OF COMMITTEE (in	full)	(Check is chang		Exampl over th	e:If typing, e lines.	type	12FE4		e Use Only	,
ADDRESS (number an Check if a is changed	ddress	815A BRAZOS 4500 AUSTIN CITY ▲					TX STATE	  78701		
COMMITTEE'S E-MA	IL ADDRES	S								
Check if a is changed		soleary@righ			9 <b>m</b> 					
COMMITTEE'S WEB	address	PRESS (URL)								
2. DATE 0	7 / D	D / Y Y Y 2021	Y							
3. FEC IDENTIFIC	ation NU	MBER 🕨	C cod	0638387						
4. IS THIS STATEN		NEW (N)	OR	×	AMENDE	D (A)				
I certify that I have e	examined thi	s Statement and	to the best c	of my kno	wledge and	belief it i	s true, cor	rect and c	omplete.	
Type or Print Name of	of Treasurer	HOBBS, CABEL	_L, , ,							
Signature of Treasure	er HOBB	S, CABELL, , ,		[El	ectronically 1	Filed]	Date	07 /	D D 15	2021
NOTE: Submission of		ous, or incomplete ANY CHANGE IN							nalties of	2 U.S.C. §437g.
Office Use Only				Fe Tol	further info deral Election Free 800-42 cal 202-694-1	Commissior 4-9530			EC FC Revised	<b>DRM 1</b> 06/2012)

-		
FE	C Form 1 (Revised 02/2009)	Page <b>2</b>
TYPE (	DF COMMITTEE	
Candi	date 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. (Com information below.)	plete the candidate
Name o Candida		
Candida Party A		State
(C)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name o Candida		
Party	Committee:	
(d)	This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.
Politic	al Action Committee (PAC):	
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its cor	nected 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 se 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.)	
Joint F	undraising Representative:	
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for the committees/organizations, at least one of which is an authorized committee of a federal candidate.	vo 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.	vo or more political
(	Committees Participating in Joint Fundraiser	
	1 FEC ID number C	
:	2 FEC ID number C	
;	3 FEC ID number C	
	4.	

FEC Form 1 (Revised 02/2009)

Page 3

**#PROJECTREDTX** 

Write or Type Committee Name

																																												_
6.	Nam	e of	Any	Cor	nne	cte	d C	Drg	ani	zat	ion	, A	\ffi	liat	ed	Со	mr	nit	tee	e, J	loi	nt I	ur	ndra	ais	ing	Re	pre	ese	nta	itiv	e, (	or I	_ea	de	ersl	hip	P	AC	Sp	on	sor	r	
N	ONE																																											
	Mailin	ig Ai	ddres	s				L																																				
								L																																				
								L																									L											
																С	ITY	/											S	TAT	E						ZI	P (	CO	DE				
	Relati	ionsł	nip:		Con	nec	cte	d O	rga	iniz	atic	n		Af	filia	ted	С	om	mit	ttee	Э		Jo	int	Fur	ndra	aisir	ng I	Rep	ore	ser	tat	ive	C	] I	Lea	ide	ersł	nip	PA	IC S	бро	nso	or

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

HOBB	3S, CABELL, , ,
Full Name	
Mailing Address	815A BRAZOS
	#500
	AUSTIN
Title or Position	CITY STATE ZIP CODE
	Telephone number

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 of Treasurer	HOBBS, CABELL, , ,	
Mailing Address	815A BRAZOS	
	<b>#500</b>	
	AUSTIN	
	CITY STATE ZIP COD	Ε
Title or Position	Telephone number	

Full Name of Designated Agent	OLEARY, SHANNON, , ,		
Mailing Address	815A BRAZOS		
	#500		
	AUSTIN	TX 78701	
	CITY	STATE	ZIP CODE
Title or Position			

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.

	Frontier Bank of Texas		
Mailing Address	1213 Highway 290		
	Elgin		521 
	CITY	STATE	ZIP CODE
Name of Bank, De	pository, etc.		
l			
Mailing Address			
	CITY	STATE	ZIP CODE

## :97 `A=G79 @@5 B9CIG`H9LH`F9 @5 H98 `HC`5 `F9DCFHžG7<98 I@9 `CF`+H9A=N5 H=CB

Form/Schedule: F1A Transaction ID :

This committee intends to make independent expenditures, and consistent with the U.S. Court of Appeals for the District of Columbia Circuit decision in SpeechNow v. FEC, it therefore intends to raise funds in unlimited amounts. This committee will not use those funds to make contributions, whether direct, in-kind, or via coordinated communications, to federal candidates or committees.

Form/Schedule: Transaction ID: