Image# 13941330591				08/14/2013 15 : 47
FEC FORM 1	STATEMEN ORGANIZ			PAGE 1 / 4
1. NAME OF	(Check if name	Example: If typing, type	12FE4M5	
COMMITTEE (in full)	is changed)	over the lines.	12FE4M5	
	to Elect Tony Arte	erburn jr.		
ADDRESS (number and street)	519 E. I-30 suite 310			
(Check if address is changed)				
is changed)	Rockwall		TX 75	5087
			STATE A	ZIP CODE A
COMMITTEE'S E-MAIL ADDR	ESS			
(Check if address	troy@arterburnforcong	ress.com		
is changed)	Optional Second E-Mail Add	dress		
	tjarterburn@gmail.co	pm		
COMMITTEE'S WEB PAGE AI	DDRESS (URL)			
2. DATE 08 / D	14 / Y Y Y Y 2013			
3. FEC IDENTIFICATION N	IUMBER ► C C	00541144		
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 i	t is true, correct ar	nd complete.
Type or Print Name of Treasur	er Mr. Troy Odell White II			
Signature of Treasurer	Troy Odell White II	[Electronically Filed]	Date 08	/ D D / Y Y Y Y Y 14 2013
NOTE: Submission of false, error	neous, or incomplete information ANY CHANGE IN INFORMATI	may subject the person signing ON SHOULD BE REPORTED V		e penalties of 2 U.S.C. §437g.
Office Use Only		For further information of Federal Election Commiss Toll Free 800-424-9530		FEC FORM 1 (Revised 06/2012)

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	FEC Fo	rm 1 (Revised 02/2009)	Page <b>2</b>
		OMMITTEE	
Can	ndidate	e 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. (Comp information below.)	lete the candidate
Nam Cano	e of didate	Mr. Tony Arterburn Jr.	
	didate y Affiliati	on REP Office Sought: X House Senate President	State TX District 04
(C)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Nam Cano	e of didate		
Par	ty Con	nmittee:	
(d)			Democratic, Republican, etc.) Party.
Poli	itical A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its conn	ected 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 seg committee. (i.e., nonconnected committee)	regated 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 Func	Iraising Representative:	
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate.	o 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.	o or more political
	Com	mittees 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

## The Committee to Elect Tony Arterburn jr.

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

Mailing Address										
	CITY	STATE	ZIP CODE							
Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Spo										

Mr. Troy O	Odell White II			
Full Name				
Mailing Address	519 E. I30			
	Suite310			
	Rockwall		TX	75149
Title or Position		CITY	STATE	ZIP CODE
Treasurer			Telephone number	972 - 246 - 7323

Treasurer: List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of 8. any designated agent (e.g., assistant treasurer).

Full Name of Treasurer	Mr. Troy Odell White II	1 1 1	I	1 1	1		I	I			1			1	I		1	I	1	1	1 1	I	1
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Mailing Address	519 E. I30																				<u> </u>		
	Suite310																						
	Rockwall											L	X		7	5149							
			(	CITY							Ś	STAT	Е				Z	ZIP	COE	DE			
Title or Position			<u>   </u>				Ţ	Telep	bhon	e nı			L	97	/2	] – [		246		I	732	23	

FEC Form 1 (Revised 02/2009)

Full Name of Designated Agent						I								I				I										
Mailing Address																												
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			1						1			1	1								1				-[		1	
					СП	ΓY										STA	ΤE						ZIP	С	DDE	-		
Title or Position																												
											Tele	eph	one	e nu	ımt	ber					] –				- [			

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.

BB&	<b>Γ</b>		
Mailing Address	1675 Laguna Dr,		
	Rockwall		′5087 
	CITY	STATE	ZIP CODE
Name of Bank, Depositor	y, etc.		
Mailing Address			
	CITY	STATE	ZIP CODE