FEC FORM 1	STATEMEN ORGANIZA	_	PAGE 1 / 4 Office Use Only				
1. NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5				
Texas Associatio	n of Business Fe	dPac (TXBIZ FE					
ADDRESS (number and street)	1209 Nueces Street						
(Check if address is changed)							
	Austin └		TX 78701 STATE ▲ ZIP CODE ▲				
COMMITTEE'S E-MAIL ADDRE	SS						
(Check if address is changed)	cwallace@txbiz.org						
2 /	Optional Second E-Mail Add	ress					
COMMITTEE'S WEB PAGE ADD	DRESS (URL)						
2. DATE 01 28							
3. FEC IDENTIFICATION NU	JMBER ► C co	0505818					
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 it is true, correct and complete.							
Type or Print Name of Treasure	r Wallace, Chris, , ,						
Signature of Treasurer	ce, Chris, , ,	[Electronically Filed]	Date 01 / 28 / 2018	Y			
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 Use Only		For further information co Federal Election Commission Toll Free 800-424-9530 Local 202-694-1100					

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TYPE OF COMMITTEE	
Candidate Committee:	
(a) This committee is a principal campaign committee. (Complete the candidate information be	iow.)
(b) This committee is an authorized committee, and is NOT a principal campaign committee. (information below.)	Complete the candidate
Name of Candidate	
Candidate Office Party Affiliation Office Sought: House Senate Presider	State
(c) This committee supports/opposes only one candidate, and is NOT an authorized committee	е.
Name of Candidate I	
Party Committee:	
(d) This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party
Political Action Committee (PAC):	
(e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its	s connected organization is
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 separat committee. (i.e., nonconnected committee)	te segregated fund or part
In addition, this committee is a Lobbyist/Registrant PAC.	
In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Joint Fundraising Representative:	
(g) This committee collects contributions, pays fundraising expenses and disburses net proceeds committees/organizations, at least one of which is an authorized committee of a federal candid	
(h) This committee collects contributions, pays fundraising expenses and disburses net proceeds f committees/organizations, none of which is an authorized committee of a federal candidate.	for two or more political
Committees Participating in Joint Fundraiser	
1 FEC ID number C	
2 FEC ID number C	
3	
4	

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ZIP CODE

477

6721

STATE

Telephone number

512

Write or Type Committee Name

Title or Position President/COO

Texas Association of Business FedPac (TXBIZ FEDPAC)

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

Ľ	exas Association of B	Susiness																		
	Mailing Address	1209 Nueces \$	Street																	
		Austin									ТХ			7870	1		-			
				CITY							STA	ΓE				ZIP	СО	DE		
		l Organization			mmitte						Repre									onsor
7.	Custodian of Records: Iden books and records.	tify by name, a	iddress (j	phone	numbe	er C	ption	al) a	ind p	oositio	on of t	the p	ers	on in	pos	ses	sion	of c	omr	nittee
	Wallace, C	hris, , ,					1													.
	Full Name	1209 Nueces	Street																	
	Mailing Address																			
		Austin									TX			7870	1					
	Title or Position			CITY							STATI	E				ZIP	COI	DE		
							Te	eleph	none	num	ber									
8.	Treasurer: List the name and any designated agent (e.g., a			er op	ptional)	of th	ne tre	asur	er o	f the	comm	ittee;	an	d the	nar	ne a	and	addr	ess	of
	Full Name Wallace, Cl	hris, , ,																		
	of Treasurer																			
	Mailing Address	1209 Nueces S	Street																	
		Austin							1		TX		Į	7870	1					

CITY

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Full Name of Designated Agent	Wallace, Chris, , ,
Mailing Address	1209 Nueces Street
	Austin
	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.
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Wells F	argo Bank		
Mailing Address	605 W 15th Street		
	Austin		78701
	CITY	STATE	ZIP CODE
Name of Bank, Depository, e	etc.		
Mailing Address			
	CITY	STATE	ZIP CODE