Only

STATEMENT OF

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FEC ORGANIZATION FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. MJ for Texas PO Box 7156 ADDRESS (number and street) (Check if address is changed) Round Rock 78683 TX CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS dacey@tmwcompliance.com (Check if address is changed) Optional Second E-Mail Address committee@mjfortexas.com COMMITTEE'S WEB PAGE ADDRESS (URL) www.mjfortexas.com (Check if address is changed) DATE 2019 C00649350 FEC IDENTIFICATION NUMBER > 3. X OR IS THIS STATEMENT NEW (N) 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. Reiser, Adam, , , Type or Print Name of Treasurer Reiser, Adam, , , [Electronically Filed] 09 16 2019 Signature of Treasurer Date 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 For further information contact: **FEC FORM 1** Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530

Local 202-694-1100

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		rm 1 (Revised 02/2009)	Page 2
		OMMITTEE 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. (Con information below.)	nplete the candidate
Nam Cand	e of didate	Hegar, Mary Jennings, MJ, ,	
	didate y Affiliati	on DEM Office Sought: House X Senate President	State TX District
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Nam Cand	e of didate		
Par	ty Con	nmittee:	
(d)		(National, State This committee is a or subordinate) committee of the	(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 co	nnected 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 s 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.)	
Join	t Fund	Iraising Representative:	
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for t committees/organizations, at least one of which is an authorized committee of a federal candidate.	·
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for to committees/organizations, none of which is an authorized committee of a federal candidate.	wo or more political
	Com	mittees Participating in Joint Fundraiser	
	1.	FEC ID number	
	2.	FEC ID number	
	3.	FEC ID number C	
	4.		

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Write or Type Committee Nar	ne	-
MJ for Texas		
. Name of Any Connected	Organization, Affiliated Committee, Joint Fundraising Representative	e, or Leadership PAC Sponsor
MJ Victory Fund		
Mailing Address	PO Box 7156	
	Round Rock TX CITY STATE	78683 ZIP CODE
Relationship: Connect	ed Organization Affiliated Committee 🗴 Joint Fundraising Represent	ative Leadership PAC Sponso
Custodian of Records: Id books and records.	entify by name, address (phone number optional) and position of the p	person in possession of committee
	, Dacey, , ,	
Full Name Mailing Address	PO Box 97241	
Walling Address		
	Phoenix	85060
Title or Position	CITY STATE	ZIP CODE
Compliance Officer	Telephone number	602 - 228 - 8902
Treasurer: List the name a any designated agent (e.g.,	and address (phone number optional) of the treasurer of the committee assistant treasurer).	e; and the name and address of
Full Name Reiser, A	.dam, , ,	
Mailing Address	1501 Hillmont St	
	Austin	78704
Title or Position	CITY STATE	ZIP CODE
Treasurer	Telephone number	512 636 6990

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Full Name of Designated Agent Montoya, I	Dacey, , ,		
Mailing Address	PO Box 97241		
	Phoenix CITY	STATE 85060	ZIP CODE
Title or Position Compliance Officer	Telephone ı	number 602	228 - 8902
safety deposit boxes or mair Name of Bank, Depository, e		mittee deposits funds, hold	ds accounts, rents
	Round Rock	TX 78664	
	CITY	STATE	ZIP CODE
Name of Bank, Depository, e	etc.		
Amalga Mailing Address	amated Bank 1825 K St NW		
	Washington	DC 20006	
	CITY	STATE	ZIP CODE

FEC Form 1S (Revised 02/2017)

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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h). Joint Fundraisi r	,	EEO 15 .	
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	C
ame of Any Connected	Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spon
MA House Victory	/ Fund		
Mailing Address	918 Pennsylvania Ave SE		
	Washington	DC	20003
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte	d Organization Affiliated Committee	Fundraising Representa	Leadership PAC Sp
	d Organization Affiliated Committee Joint y by name, address (phone number – optional)	Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif		Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identif		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif Full Name Mailing Address	y by name, address (phone number – optional)	Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif	y by name, address (phone number – optional) CITY		
esignated Agent: Identif Full Name	y by name, address (phone number – optional) CITY CITY Telepries: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A
esignated Agent: Identification Full Name	y by name, address (phone number – optional) CITY CITY Telestries: List all banks or other depositories in which aintains funds. Fargo	STATE A	ZIP CODE A

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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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(h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	C
Gideon Hegar 20	Organization, Affiliated Committee, Joint Fun 20 Victory	draising Representative	e, or Leadership PAC Spons
Mailing Address	611 Pennsylvania Ave SE		
	Num 143		
	Washington	DC	20003
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Affiliated Committee	int Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identi		int Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		int Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		int Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		int Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi	y by name, address (phone number – optional)	STATE	Leadership PAC Sp
esignated Agent: Identing Full Name Mailing Address	by by name, address (phone number – optional) CITY		
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION	y by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identification Full Name	y by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identification Full Name	y by name, address (phone number – optional) CITY CITY pries: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A

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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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(h). Joint Fundraisi	• '		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	C
lame of Any Connected	d Organization, Affiliated Committee, Joint Fu	ndraising Representativ	e, or Leadership PAC Spons
2020 Senate Imp	oact		
Mailing Address	918 Pennsylvania Ave SE		
	Washington	DC	20003
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	ed Organization Affiliated Committee x J	oint Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi			ative Leadership PAC Sp
esignated Agent: Identi			ative Leadership PAC Sp
esignated Agent: Identi			ative Leadership PAC Sp
esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional		ative Leadership PAC Sp
esignated Agent: Identi Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional		
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION	fy by name, address (phone number – optional CITY A CITY A ories: List all banks or other depositories in what intains funds.	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identification Full Name Mailing Address TITLE OR POSITION anks or Other Deposite afety deposit boxes or management of Bank, repository, etc.	fy by name, address (phone number – optional CITY A CITY A ories: List all banks or other depositories in what intains funds.	STATE A Telephone Number ich the committee deposit	ZIP CODE A ts funds, holds accounts, rent