

FEC FORM 1

STATEMENT OF ORGANIZATION

Office Use Only

1. NAME OF COMMITTEE (in full) (Check if name is changed) Example: If typing, type over the lines. 12FE4M5

Markland 2024

ADDRESS (number and street) 4000 S. Broadway Ave.

(Check if address is changed)

Dallas TX 75028
CITY ▲ STATE ▲ ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS
 (Check if address is changed) leemarkland@gmail.com

Optional Second E-Mail Address
mlmarkland1@gmail.com

COMMITTEE'S WEB PAGE ADDRESS (URL)
 (Check if address is changed)

2. DATE 06 / 18 / 2023

3. FEC IDENTIFICATION NUMBER C C00767509

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 Treasurer Reisser, Elizabeth, , ,

Signature of Treasurer Reisser, Elizabeth, , , [Electronically Filed] Date 06 / 20 / 2023

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 52 U.S.C. §30109. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

5. TYPE OF COMMITTEE:

Candidate 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. (Complete the candidate information below.)

Name of Candidate Markland, Montgomery, , ,

Candidate Party Affiliation REP Office Sought: House Senate President State TX District 00

- (c) This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate _____

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 connected 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 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.)

- (g) This committee is an independent expenditure-only political committee (Super PAC).

In addition, this committee is a Lobbyist/Registrant PAC.

- (h) This committee is a political committee with both contribution and non-contribution accounts (Hybrid PAC).

In addition, this committee is a Lobbyist/Registrant PAC.

Joint Fundraising Representative:

- (i) 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.
- (j) 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.

Committees Participating in Joint Fundraiser

1. _____

C _____

2. _____

C _____

Write or Type Committee Name

Markland 2024

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

NONE

Grid for organization name

Mailing Address

Grid for mailing address

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship: Connected Organization Affiliated Organization Joint Fundraising Representative Leadership PAC Sponsor

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

Markland, Montgomery, , ,

Full Name

Grid for full name

Mailing Address

Grid for mailing address: 4000 S. Broadway Ave. Suite 3310 Flower Mound TX 75028

CITY ▲

STATE ▲

ZIP CODE ▲

Title or Position ▼

Candidate

Grid for title/position

Telephone number

Grid for telephone number: 972-768-4378

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).

Reisser, Elizabeth, , ,

Full Name of Treasurer

Grid for full name of treasurer

Mailing Address

Grid for mailing address: 4000 S. Broadway Ave. Suite 3310 Flower Mound TX 75028

CITY ▲

STATE ▲

ZIP CODE ▲

Title or Position ▼

Grid for title/position

Telephone number

Grid for telephone number: 972-768-4378

Full Name of Designated Agent Markland, Dale, , ,

Mailing Address 8117 Preston Road Suite 300 Dallas TX 75225 CITY STATE ZIP CODE

Title or Position Registered Agent Telephone number

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.

Novo 1 College Avenue Somerville MA 02144 CITY STATE ZIP CODE

Name of Bank, Depository, etc.

Morgan Stanley 1585 Broadway New York NY 10036 CITY STATE ZIP CODE