FEC FORM 1	STATEMENT OF ORGANIZATION						Office Use Only								
1. NAME OF COMMITTEE (in	n full)	(Check if name is changed)		ple:If typi the lines.	ng, type	Ð	12	FE4	M5	Office	Use	Only			
	-							-	_	-					
		PO BOX 341027													
ADDRESS (number a															
(Check if a is changed		#353													
		AUSTIN					STA	TE ▲	Ľ	78734		 ZIP C			
COMMITTEE'S E-MA	AIL ADDRES	SS													
(Check if a is changed		compliance@rightside	complia	nce.com	1										
	-)	Optional Second E-Mail Add	dress cast.Ne	et											
COMMITTEE'S WEB	address	PRESS (URL)													
2. DATE Of		D / Y Y Y Y 2022													
3. FEC IDENTIFIC	CATION NU	MBER ► C C	00553883												
4. IS THIS STATEN	/ENT	NEW (N) OR	×	AMEN	IDED (/	4)									
I certify that I have e	examined thi	s Statement and to the best	of my kr	owledge	and bel	ief it is	s true	, corr	rect a	ind co	omple	ete.			
Type or Print Name	of Treasurer	HOBBS, CABELL, , ,													
Signature of Treasure	er HOBB	S, CABELL, , ,	[	Electronica	lly Filed]	7 1	Date	N	05	/	20	1	y y 20	22 22	Y
NOTE: Submission of	false, errone	ous, or incomplete information ANY CHANGE IN INFORMA			-	-					naltie	s of 5	2 U.S.	C. §:	30109
Office Use Only				For further Federal Elec Foll Free 80 Local 202-65	tion Com 0-424-953	missior							<b>RM</b> . /2012)		

Image# 202205209512498019

05/20/2022 15 : 23

PAGE 1/4

FE	FEC Form 1 (Revised 03/2022)	Page <b>2</b>	
5.	5. TYPE OF COMMITTEE:		
	Candidate Committee:		
	(a) This committee is a principal campaign committee. (Comp	plete the candidate information below.)	
	(b) This committee is an authorized committee, and is NOT a information below.)	a principal campaign committee. (Complete the candidate	
	Name of Candidate		
	Candidate Office Party Affiliation Sought: House	Senate President District	
	(c) This committee supports/opposes only one candidate, and	d is NOT an authorized committee.	
	Name of Candidate		
	Party Committee:       (National, State or subordinate) com         (d)       This committee is a	nmittee of the (Democratic, Republican, etc.) Party	
	Political Action Committee (PAC):		
	(e) This committee is a separate segregated fund. (Identify co	connected organization on line 6.) Its connected organization is	a:
	Corporation	on w/o Capital Stock	
	Membership Organization Trade Ass	sociation Cooperative	
	In addition, this committee is a Lobbyist/Registra	ant PAC.	
	(f) <b>X</b> This committee supports/opposes more than one Federal committee. (i.e., nonconnected committee)	candidate, and is NOT a separate segregated fund or party	
	In addition, this committee is a Lobbyist/Registra	ant PAC.	
	x In addition, this committee is a Leadership PAC	2. (Identify sponsor on line 6.)	
	(g) This committee is an independent expenditure-only politication	al committee (Super PAC).	
	In addition, this committee is a Lobbyist/Registra	ant PAC.	
	(h) This committee is a political committee with both contribu	ition and non-contribution accounts (Hybrid PAC).	
	In addition, this committee is a Lobbyist/Registra	ant 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
 2.

Relationship:

Connected Organization

	FEC Form 1 (Revised 0	2/2009)																			Pag	je i	3		
W	Vrite or Type Committee Name																								
	<b>BUILDING AM</b>	<u>ERICA</u> N	<u>1 CO</u>	NS	<u>E</u> F	<u>2</u> V	Ά٦	<u> </u>	<u>3</u> N	<u> 1</u> P	Ά	<u>C</u>													
6.	Name of Any Connected Or Weber, Randy, , ,	rganization, Af	filiated	Comn	nittee	, Joi	int F	Func	Irais	ing	Rep	ores	ent	ativ	e, o	or L	eac	lers	shij	рР	AC	Sŗ	on	sor	
										1			_												
	Mailing Address	1701 Bending	Stream																						
		Friendswood											TX			Ľ	7754	46 							
				CITY	( 🔺							S	STAT	Έ	•				ZI	IP (		DE			

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

Joint Fundraising Representative

x Leadership PAC Sponsor

Affiliated Organization

Rennaker,	Nancy, , ,						
Full Name							
Mailing Address	PO Box 341027						
	Austin			78734			
		CITY A	STATE 🔺	ZIP CODE			
Title or Position ▼							
Custodian of Records							

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	HOBBS, CABELL, , ,							
of Treasurer								
Mailing Address	PO BOX 341027							
	AUSTIN							
	CITY ▲ STATE ▲ ZIP CODE ▲							
Title or Position ▼								
Treasurer	Telephone number							

FEC	Form	1	(Revised	02/2009)
FEC	гопп		(neviseu	02/2009

Page	4
------	---

Full Name of Designated	RENNAKER, NANCY, , ,	
Agent		
Mailing Address	PO BOX 341027	1
Maining Address		
	Austin TX 78734	
	CITY ▲ STATE ▲ ZIP CODE ▲	
Title or Position		
Assistant Treasu	er 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.

	Fargo		
Mailing Address	200 West Parkwood Avenue		
	Friendswood	TX 77546	
	CITY 🔺	STATE A	ZIP CODE
Name of Bank, Depository,	etc.		
Mailing Address			
	CITY A	STATE A	ZIP CODE