FEC

Only

STATEMENT OF

PAGE 1/7

ORGANIZATION FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Tony Gonzales for Congress PO BOX 700442 ADDRESS (number and street) (Check if address is changed) San Antonio 78270 CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS (Check if address TonyGonzalesforCongress@gmail.com is changed) Optional Second E-Mail Address compliance@rightsidecompliance.com COMMITTEE'S WEB PAGE ADDRESS (URL) TonyGonzalesforCongress.com (Check if address is changed) DATE 2024 C00706614 FEC IDENTIFICATION NUMBER 3. X 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 HOBBS, CABELL, , HOBBS, CABELL, , , 12 03 2024 Signature of Treasurer Date 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. Office For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530

Local 202-694-1100

EC Form 1 (Revised 03/2022)			Page 2
TYPE OF COMMITTEE:			
Candidate Committee:			
(a) X This committee is a principal campaign committee	. (Complete the candidate	information below.)	
(b) This committee is an authorized committee, and is information below.)	s NOT a principal campaig	gn committee. (Complete t	he candidate
Name of Candidate Gonzales, Ernest, Anthony, , I	<u> </u> 		
Candidate Office Party Affiliation REP Sought:	House Senate	President	State TX
(c) This committee supports/opposes only one candid	late, and is NOT an autho	rized committee.	District 23
Name of Candidate			
Party Committee:			
(d) This committee is a (National, S or subordinal)	tate ate) committee of the	(Democrat Republicar	ic, n, etc.) Party
Political Action Committee (PAC):			
(e) This committee is a separate segregated fund. (Id	entify connected organizat	ion on line 6.) Its connect	ted organization is a
Corporation	orporation w/o Capital Stoo	ok Labor	Organization
	ade Association	Coope	
		Оборен	allive
In addition, this committee is a Lobbyist	-	NOT	
(f) This committee supports/opposes more than one committee. (i.e., nonconnected committee)	rederal candidate, and is	NOT a separate segregat	ed fund or party
In addition, this committee is a Lobbyist	/Registrant PAC.		
In addition, this committee is a Leaders	nip PAC. (Identify sponsor	on line 6.)	
(g) This committee is an independent expenditure-onl	y political committee (Supr	er PAC).	
In addition, this committee is a Lobbyist		,	
(h) This committee is a political committee with both	-	ibution accounts (Hybrid F	PAC)
In addition, this committee is a Lobbyist		ibation addednite (Hybrid 1	7.0).
in addition, this committee is a complete	Thegistrant FAO.		
Joint Fundraising Representative:			
(i) This committee collects contributions, pays fundra committees/organizations, at least one of which is	• .	•	or more political
(j) This committee collects contributions, pays fundra committees/organizations, none of which is an aut			or more political
Committees Participating in Joint Fundraiser			
1	1	С	

С

1	FEC Form 1 (Revised 0	2/2009)	Page 3
V	Vrite or Type Committee Name		
	Tony Gonzales f	or Congress	
6.	Name of Any Connected O	rganization, Affiliated Committee, Joint Fundraising Representative, o	or Leadership PAC Sponsor
	TONY GONZALES V	ICTORY FUND	
	Mailing Address	12000 STARCREST DR	
		STE 101	
		SAN ANTONIO TX	78247
		CITY ▲ STATE ▲	ZIP CODE ▲
	Relationship: Connected	Organization Affiliated Organization X Joint Fundraising Representat	Leadership PAC Sponso
7.		fy by name, address (phone number optional) and position of the person	in possession of committee
	books and records.		
	HOBBS, C	ABELL, , ,	
	Full Name		
	Mailing Address	11613 Huebner	
		1	
		San Antonio	78248
	Title or Decition —	CITY ▲ STATE ▲	ZIP CODE ▲
	Title or Position ▼		
	Treasurer	Telephone number	
8.	Treasurer: List the name and any designated agent (e.g.,	d address (phone number optional) of the treasurer of the committee; assistant treasurer).	and the name and address of
	Full Name HOBBS, C	ADELL	
	Full Name HOBBS, C of Treasurer	ABELL, , ,	
	Mailing Address	11613 Huebner	
	Mailing Address		
		San Antonio TX	78248
		CITY ▲ STATE ▲	ZIP CODE ▲
	Title or Position ▼		
	Treasurer	Telephone number	

FEC Form 1	(Revised 02/2009)		Page 4
Full Name of Designated Agent	Ozanus, William, K, ,		
Mailing Address	PO Box 700442		
	San Antonio	TX L	78270
Title or Position	CITY A	STATE ▲	ZIP CODE ▲
Asst. Treasurer	Telephone	number	
Banks or Other safety deposit bo	Depositories: List all banks or other depositories in which the common xes or maintains funds.	nittee deposits f	runds, holds accounts, rents
Name of Bank, D	Depository, etc.		
	Frost Bank		
Mailing Address	P.O. Box 1600		
	San Antonio	TX	
	CITY ▲	STATE ▲	ZIP CODE ▲
Name of Bank, D	Depository, etc.		
	TRUIST		
Mailing Address	1445 NEW YORK AVE NW		
	4TH FLOOR		
	WASHINGTON	DC	20005
	CITY ▲	STATE ▲	ZIP CODE ▲

FEC Form 1S (Revised 02/2017)

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

Page	of ⁷	
raue	OI .	

	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
-	d Organization, Affiliated Committee, Joint Fur SHIP TRUST PARTNERSHIP	ndraising Representative	e, or Leadership PAC Spons
TIIOI ANIC LEADEI	J. J		
Mailing Address	PO BOX 341027		
	AUSTIN		78734
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connect Designated Agent: Ident	fy by name, address (phone number - optional)		
	fy by name, address (phone number – optional)		
Designated Agent: Ident	fy by name, address (phone number – optional)		
Designated Agent: Ident	fy by name, address (phone number – optional)		
Designated Agent: Ident	fy by name, address (phone number – optional)		
Designated Agent: Ident	CITY A	STATE A	ZIP CODE A
Designated Agent: Ident Full Name L Mailing Address	CITY A	STATE A Telephone Number	ZIP CODE A
Pesignated Agent: Ident Full Name Mailing Address TITLE OR POSITIO Banks or Other Deposite safety deposit boxes or researched.	CITY ▲ ories: List all banks or other depositories in which	Telephone Number	
Pesignated Agent: Ident Full Name	CITY ▲ cries: List all banks or other depositories in which anintains funds. NBRIDGE BANK	Telephone Number	

FEC Form 1S (Revised 02/2017)

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

Page	of ⁷	
Page	Oī	

DERSHIP F		Committee, Joint	FEC IC	number number number	C C C , or Leadership PAC Sp	oonse
DERSHIP F		Committee, Joint	FEC IC	number number	C	oonso
DERSHIP F		Committee, Joint	FEC IC	number	C	oonse
DERSHIP F		Committee, Joint				oonse
DERSHIP F		Committee, Joint	Fundraising Rep	resentative	, or Leadership PAC Sp	ons
DERSHIP F		Committee, Joint	Fundraising Rep	resentative,	, or Leadership PAC Sp	ons
35	UND 2024					
1 32						
1 32				1 1 1		1 1
1 32	00 40T 0T 0F					
ess 2	20 1ST ST SE					
W	ASHINGTON			DC	20003	
		CITY A		STATE ▲	ZIP CODE	A
s L						
					1	l l
SITION V		CITY A		STATE A	ZIP CODE ▲	
OTTION V		1				
			Telephone N	umber	_ - -	
t .	Connected Orga	Connected Organization Affilia	Connected Organization Affiliated Committee The connected Organization Affiliated Committee Affiliated Committee Connected Organization Affiliated Committee	Connected Organization Affiliated Committee X Joint Fundraising The connected Organization Affiliated Committee of the control of the cont	CITY A STATE A Connected Organization Affiliated Committee X Joint Fundraising Representa State A Connected Organization Affiliated Committee X Joint Fundraising Representa CITY A STATE A STATE A	Connected Organization Affiliated Committee X Joint Fundraising Representative Leadership PAC STATE A ZIP CODE A Connected Organization Affiliated Committee X Joint Fundraising Representative Leadership PAC STATE A ZIP CODE A CITY A STATE A ZIP CODE A

FEC Form 1S (Revised 02/2017)

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

		7	
Page	of	,	

. 1							
1				FEC ID) number	С	
2				FEC IE) number	C	
3.				FEC IE	number	С	
4.				FEC ID) number	C	
							
	Any Connected (ated Committee, Joint	Fundraising Rep	eresentative	e, or Leadership PAC	Spons
Ма	iling Address	PO Box 30844					
		Bethesda			MD	20824	
Re	lationship:		CITY A		STATE A	ZIP CODE	= 🛦
esignat			Affiliated Committee X (phone number – option	Joint Fundraising	Representa	ative Leadership P	AC Sp
esignat	ed Agent: Identify				Representa	Leadership P	PAC Sp
Full 1	ed Agent: Identify				Representa	Leadership P	AC Sp
Full 1	red Agent: Identify				g Representa	Leadership P	AC Sp
Full 1	red Agent: Identify				Representa	Leadership P	AC Spe
Full Mailir	red Agent: Identify	by name, address		nal)	Representa	Leadership P	