FEC FORM 1		STATEMENT OF ORGANIZATION
1. NAME OF COMMITTEE (in	full)	(Check if name Example: If typing, t is changed) over the lines.
AdvoCare F	PAC	
ADDRESS (number ar	I	PO BOX 341016
(Check if a is changed	address	AUSTIN
COMMITTEE'S E-MA	IL ADDRESS	i i
	ddress	Imedoff@advocare.com

2.	DATE 09 / 16 / 2019	]
3.	FEC IDENTIFICATION NUMBER	С сообоот26
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 I	Print Name of Tre	easurer	MARTIN, TODD	۱, , ,						
Signature	e of Treasurer	MARTIN	l, TODD, , ,		[Electronically Filed]	Date	M M 09	/ D D 16	2019	
NOTE: Su	ubmission of false			-	subject the person signing HOULD BE REPORTED	-		penalties o	of 2 U.S.C. §	437g.
	Office Use Only				For further information Federal Election Commis Toll Free 800-424-9530 Local 202-694-1100			-	ORM 1 06/2012)	

1

T

09/16/2019 15 : 35

ZIP CODE

Office Use Only

78734

L

L

12FE4M5

ТХ

STATE

1 1 1

1

PAGE 1 / 4 =

F	FEC FO	rm 1 (Revised 02/2009)	Page <b>2</b>	
TYPE	E OF C	OMMITTEE		
Can	didate	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. (Comp information below.)	lete the candidate	
Name Cand	e of lidate			
	lidate / Affiliati	on Office Sought: House Senate President	State	
(C)		This committee supports/opposes only one candidate, and is NOT an authorized committee.		
Name Cand				
Part	ty Con	nmittee:		
(d)			Democratic, epublican, etc.) Party	
Poli	tical A	ction Committee (PAC):		
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its conn	ected 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 separate seg committee. (i.e., nonconnected committee)	regated 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.)		
Join	t Fund	raising Representative:		
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate.	or more political	
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	or more political	
	Committees Participating in Joint Fundraiser			
	1.	FEC ID number		
	2.	FEC ID number		
	3.	FEC ID number		
	4.			

FEC Form 1 (Revised 02/2009)

Page 3

Write or Type Committee Name

## AdvoCare PAC

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

Mailing Address			
	CITY	STATE	ZIP CODE
Relationship: Connec	ted Organization Affiliated Committee	oint Fundraising Representative	Leadership PAC Sponsor
7. Custodian of Records: lo books and records.	dentify by name, address (phone number opt	ional) and position of the perso	on in possession of committee
MARTIN	N, TODD, , ,		
Mailing Address	PO BOX 341016		

	AUSTIN		78734
Title or Position	CITY	STATE	ZIP CODE
Custodian of Records	Telen	hone number	

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	MARTIN, TODD, , ,
of Treasurer	
Mailing Address	PO BOX 341016
	AUSTIN
	CITY STATE ZIP CODE
Title or Position Treasurer	Telephone number

Full Name of Designated OLEARY	Y, SHANNON, , ,	
Mailing Address	PO BOX 341016	
	AUSTIN	TX 78734
	CITY	STATE ZIP CODE
Title or Position ASSISTANT TREASURE	R	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.

Com	erica Bank	
Mailing Address	1717 Main Street	
	Dallas	TX75201
	CITY	STATE ZIP CODE
Name of Bank, Depositor	ry, etc.	
Mailing Address		
	CITY	STATE ZIP CODE