

PAGE 1 / 4

FEC FORM 1	·	STATEMENT OF ORGANIZATION			RECEIVEL! 2014 JUN 27 PM 12: 1:9 Office, Use Company TFR		
1. NAME OF COMMITTEE (in		(Check if name is changed)	Example: If typing, typ over the lines.	De 12F	E4M5		
LEE CRUZ	MASSIE &	SCHWEIK	ERT VICTOR	RY COM	MITTE	<u>=</u> -	
		1 1 1 1 1 1	1 1 1 1 1 1 1	<u></u>			لــــــــــــــــــــــــــــــــــــــ
ADDRESS (number and street)				<u> </u>		لــــــ	
(Check if a is changed		0 	, _1				
	AUSTIN	N  :iTY ▲		STATE	78701	ZIP CODE A	
COMMITTEE'S E-MA	AL ADDRESS						
(Check if a is changed		ance@compliand	econsultingva.com				لــــا
	Optional	Second E-Mail Add	ress				
	<u> </u>					11111	لـــــ
COMMITTEE'S WEB  (Check if a is changed	nddress N/A	/RL)					<u></u> —
2. DATE 0	19 / Y	2014					
3. FEC IDENTIFIC	CATION NUMBER	C					
4. IS THIS STATEM	MENT NEW	/ (N) OR	AMENDED (	(A)			
I certify that I have e	xamined this Statement	ent and to the best	of my knowledge and be	elief it is true,	correct and co	mplete.	
Type or Print Name of Signature of Treasure	CARELL HORRS	L HOBBS	Ms	_ Date	0.6	19/201	Ÿ
NOTE: Submission of			nay subject the person sig			nalties of 2 U.S.C. §4	137g.

Office		For further information contact:
Use	}	Federal Election Commission
Only		Toll Free 800-424-9530

FEC FORM 1 (Revised 06/2012)

FEC F	Form 1 (Revised 02/2009) Page 2
	COMMITTEE
	te 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	
Candidαte Party Affilia	Office State Sought: House Senate President District
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.
Name of Candidate	
Party Co	ommittee:
(d)	This committee is a (National, State (Democratic, Republican, etc.) P
Political	Action Committee (PAC):
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization
	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 p committee. (i.e., nonconnected committee)
	In addition, this committee is a Lobbyist/Regiatrant PAC.
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)
Joint Fur	ndraising Representative:
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political
(h)	committees/organizations, at least one of which is an authorized committee of a federal candidate.  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.
_	
	mmittees Participating in Joint Fundraiser  TED CRUZ FOR SENATE
1.	THOMAS MASSIE FOR CONGRESS
2.	FEC ID number C C00509729
3.	FRIENDS OF MIKE LEE INC. FEC ID number C C00473827
4.	FRIENDS OF DAVID SCHWEIKERT

1 20 1 01111 1 (1\text{13cd 02/2003

Write or Type Com	mittee Name			
LEE CRUZ MASSIE & SCHWEIKERT VICTORY COMMITTEE				
6. Name or Any C	connected Organization, Affiliated Committee, Johnt Fundralsing Representative, or Leadership PAC Sponsor			
NONE	<u> </u>			
Mailing Address				
	CITY STATE ZIP CODE			
Relationship:	Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor			
<ul> <li>Custodian of Rebooks and record</li> </ul>	ecords: Identify by name, address (phone number optional) and position of the person in possession of committee ds.			
	CABELL HOBBS			
Full Name	,815A BRAZOS ,			
Mailing Address	PMB 550			
	AUSTIN , TX , 78701 , ,			
	LACTING TO THE PARTY OF THE PAR			
Title or Position	CITY STATE ZIP CODE			
TREASURER	Telephone number			
B. Treasurer: List the any designated a	ne name and address (phone number optional) of the treasurer of the committee; and the name and address of gent (e.g., assistant treasurer).			
Full Name of Treasurer	CABELL HOBBS			
	815A BRAZOS			
Mailing Address	PMB 550			
	AUSTIN			
	CITY STATE ZIP CODE			
Title or Position TREASURER				

	FEC Form	n 1 (Revised	1 0 2 / 2009)			Page 4
	Full Name of Designated Agent	MELODIE	JOHNSON			
	Mailing Address		815A BRAZOS	<u></u>		
			PMB 550			
			AUSTIN		STATE	78701 ZIP CODE
	Title or Position ASST. TREASU	JRER LLLL		Telephone nur	nber	
9.	Banks or Other safety deposit bo Name of Bank, I	oxes or main		in which the committ	ee deposits	funds, holds accounts, rents
		<sub>[</sub> BB&T				
	Mailing Address		1717 KING STREET			
			ALEXANDRIA		LVA	22314
			CITY		STATE	ZIP CODE
	Name of Bank, [	Depository, e	etc.			
		<u> </u>	<del></del>		<u> </u>	
	Mailing Address				1_1_1	
					ليا	<u> </u>
			CITY		STATE	ZIP CODE

## Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS The FEC added this page to the end of this filing to indicate how it was received.

The FEC added this page to the end of this filing to indicate how it was received.				
	Date of Receipt			
Hand Delivered	6/27/14			
	Postmarked			
USPS First Class Mail				
	Postmarked (R/C)			
USPS Registered/Certified				
	Postmarked			
USPS Priority Mail				
	Postmarked			
USPS Priority Mail Express	·			
Postmark filegible				
No Postmark				
	·····			
Overnight, Delivery Service (Specify):	Shipping Date			
<u></u> .				
Ne	xt Business Day Delivery			
	Date of Receipt			
Received from House Records & Registration C	Office			
	Date of Receipt			
Received from Senate Public Records Office				
	Date of Receipt			
Received from Electronic Filing Office				
	Date of Receipt or Postmarked			
Other (Specify):				
ane D	( lanlut			
PREPARER	DATE PREPARED			

(8/2013)