Only

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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) over the lines. is changed) Linda Nuno For Congress / Rosalinda Nuno Trevino 1614 W Braker Ln ADDRESS (number and street) Unit B (Check if address is changed) Austin 78758 TX CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS lindanuno777@outlook.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 07 2021 C00796771 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. Arole, Sundeep, Prabhakar,, Type or Print Name of Treasurer Arole, Sundeep, Prabhakar,, [Electronically Filed] 12 08 2021 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. 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

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		COMMITTEE	
	didate	e Committee:	
(a)		This committee is a principal campaign committee. (Complete the candidate information below.)	
(b) Nam	e of	This committee is an authorized committee, and is NOT a principal campaign committee. (Complet information below.)	e the candidate
	didate	Trevino, Rosalinda, Nuno, , Ms.	
	didate / Affiliati	tion DEM Office Sought: X House Senate President	State TX
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	District
Nam Cand	e of lidate		
Par	ty Con	mmittee:	
(d)			mocratic, publican, etc.) Party.
Poli	tical A	Action Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization on line 6.)	ted organization is a
		Corporation Corporation w/o Capital Stock	abor Organization
		Membership Organization Trade Association C	ooperative
		In addition, this committee is a Lobbyist/Registrant PAC.	
(f)		This committee supports/opposes more than one Federal candidate, and is NOT a separate segre committee. (i.e., nonconnected committee)	gated fund or party
		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	draising 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 o committees/organizations, none of which is an authorized committee of a federal candidate.	r more political
	Com	nmittees Participating in Joint Fundraiser	
	1.		
	2.		
	3.		
	0.		
	4.		

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Wr	rite or Type Committee Name	3	
L	inda Nuno For	Congress / Rosalinda Nuno Trevino	
6.	Name of Any Connected C	Organization, Affiliated Committee, Joint Fundraising Representative, or Lea	adership PAC Sponsor
Lir	nda Nuno For Congr	ress / Rosalinda Nuno Trevino	
Ш			
ı	Mailing Address	1614 W Braker Ln	
		Unit B	
		Austin TX 787	758
		CITY STATE	ZIP CODE
	Relationship: X Connected	d Organization Affiliated Committee Joint Fundraising Representative	Leadership PAC Sponsor
	Custodian of Records: Ider books and records.	ntify by name, address (phone number optional) and position of the person i	in possession of committee
	Trevno, Ro	osalinda, Nuno, ,	
ı	Mailing Address	1614 W Braker Ln	
		Unit B	
		Austin TX 787	758
	Title or Position	CITY STATE	ZIP CODE
	Custodian of Records	Telephone number	- <u>703</u> - <u>2795</u>
i. 1	Treasurer : List the name an any designated agent (e.g., a	d address (phone number optional) of the treasurer of the committee; and the assistant treasurer).	ne name and address of
	Full Name Arole, Sun of Treasurer	deep, Prabhakar, ,	
ľ	Mailing Address	8509 Adirondack Cv	
		Austin	759
-	Title or Position	CITY STATE	ZIP CODE
I	Title or Position Treasurer	Telephone number	740 2535

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Full Name of Designated		
Agent		
Mailing Address		
	CITY STATE	ZIP CODE
Title or Position		
	Telephone number	
safety deposit b Name of Bank,		
-	Depository, etc. Woodforest 1614 W Braker Ln.	
Name of Bank,	Depository, etc. Woodforest 1614 W Braker Ln.	
Name of Bank,	Depository, etc. Woodforest 1614 W Braker Ln. Unit B	
Name of Bank,	Depository, etc. Woodforest 1614 W Braker Ln. Unit B	ZIP CODE
Name of Bank,	Depository, etc. Woodforest 1614 W Braker Ln. Unit B Austin TX 78758	ZIP CODE
Name of Bank, Mailing Address	Depository, etc. Woodforest 1614 W Braker Ln. Unit B Austin TX 78758	ZIP CODE
Name of Bank, Mailing Address	Depository, etc. Woodforest 1614 W Braker Ln. Unit B Austin TX 78758 CITY STATE	ZIP CODE
Name of Bank, Mailing Address Name of Bank,	Depository, etc. Woodforest 1614 W Braker Ln. Unit B Austin TX 78758 CITY STATE	ZIP CODE
Name of Bank, Mailing Address Name of Bank,	Depository, etc. Woodforest 1614 W Braker Ln. Unit B Austin TX 78758 CITY STATE	ZIP CODE