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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) is changed) over the lines. Darrell For Congress P.O. Box 600641 ADDRESS (number and street) (Check if address is changed) **Dallas** 75360 TX CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS committee@darrellforcongress.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) www.darrellforcongress.com (Check if address is changed) DATE 2017 C00637603 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. Rodriguez, Darrell, Allen, , Type or Print Name of Treasurer Rodriguez, Darrell, Allen,, [Electronically Filed] 10 2017 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 Only

Local 202-694-1100

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		OMMITTEE 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. (Cominformation below.)	plete the candidate
Name Candid		Rodriguez, Darrell, Allen, ,	
Candid Party	date Affiliati	on DEM Office Sought: * House Senate President	State TX District 04
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name Candid			
Party	/ Con	nmittee:	
(d)		This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.
Politi	ical A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con-	nected organization is a
		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 secommittee. (i.e., nonconnected committee)	gregated 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.)	
Joint	Fund	Iraising 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.	vo 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.	o or more political
	Com	mittees Participating in Joint Fundraiser	
	1.	FEC ID number	
	2.	FEC ID number	
	3.	FEC ID number	
	4.		

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Write or Type Committee Nam		-
Darrell For Cor	ngress	
	Organization, Affiliated Committee, Joint Fundraising Representative, or Leaders	ship PAC Sponsor
NONE		
<u> </u>		
Mailing Address		
Mailing Address		
	CITY STATE	ZIP CODE
Relationship: Connecte	ed Organization Affiliated Committee Joint Fundraising Representative Le	adership PAC Sponsor
 Custodian of Records: Ide books and records. 	ntify by name, address (phone number optional) and position of the person in po	ssession of committee
Contreas,	Juan, , ,	
Mailing Address	710 S. Edgefield Ave	
Mailing Address		
	Dallas TX 75208	
Title or Position	CITY STATE	ZIP CODE
Custodian of Records	Telephone number	
. Treasurer: List the name ar any designated agent (e.g.,	nd address (phone number optional) of the treasurer of the committee; and the na assistant treasurer).	ame and address of
Full Name Rodriguez of Treasurer	z, Darrell, Allen, ,	
Mailing Address	P.O. Box 600641	
	Dallas TX 75360	
Title or Position Treasurer Pro Tem	CITY STATE Telephone number 469	718 - 9711

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Full Name of Designated Agent	Contreas, Juan, , ,					
Mailing Address	710 S. Edgefield					
	Dallas CITY STATE ZI	P CODE				
Title or Position Custodian of Re	cords					
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.						
	Bank Of America 5010 Highway 78					
Mailing Address	<u> </u>					
	Sachse TX 75048					
	CITY STATE Z	IP CODE				
Name of Bank, D	epository, etc.					
Mailing Address						
Mailing Address						
Mailing Address						