(Revised 06/2012)

**FEC** 

Only

## STATEMENT OF

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**ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. AdvoCare PAC PO Box 7004 ADDRESS (number and street) (Check if address is changed) **Dallas** 75209 TX CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS twilliams@advocare.com (Check if address X is changed) Optional Second E-Mail Address lbomar@advocare.com COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2016 C00600726 FEC IDENTIFICATION NUMBER > 3. X OR IS THIS STATEMENT NEW (N) 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. Levy, Allison, , , Type or Print Name of Treasurer Levy, Allison, , , [Electronically Filed] 04 15 2019 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

Toll Free 800-424-9530

Local 202-694-1100

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	orm 1 (Revised 02/2009)  COMMITTEE	Page <b>2</b>
	e 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. (Compinformation below.)	plete the candidate
Name of Candidate		
Candidate Party Affiliat	ion Office Sought: House Senate President	State District
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate		
Party Cor		_
(d)		Democratic, Republican, etc.) Party
Political A	Action Committee (PAC):	
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con-	nected 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) <b>x</b>	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	draising Representative:	
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for tw committees/organizations, at least one of which is an authorized committee of a federal candidate.	o 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	nmittees 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 Name		
AdvoCare PAC		
	Organization, Affiliated Committee, Joint Fundraising Representative, or Leaders	hip PAC Sponsor
NONE		
Mailing Address		
-		
	CITY STATE	ZIP CODE
Relationship: Connected	d Organization Affiliated Committee Joint Fundraising Representative Le	adership PAC Sponsor
Custodian of Records: Ider books and records.	ntify by name, address (phone number optional) and position of the person in pos	ssession of committee
Windham,	Trisha, , ,	
Full Name	PO Box 7004	
Mailing Address		
	Dallas TX 75209	
Tido or Decition	OLTY	7ID 00DE
Title or Position	CITY STATE	ZIP CODE
Custodian of Records		352
. <b>Treasurer:</b> List the name and any designated agent (e.g., a	d address (phone number optional) of the treasurer of the committee; and the na	me and address of
Full Name Levy, Allison of Treasurer	on, , ,	
Mailing Address	PO Box 7004	
	Dallas TX 75209 CITY STATE	ZIP CODE
Title or Position Treasurer	Telephone number	352 - 0900

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Full Name of Designated Agent	White, Robert, , ,	, , , , , , , <b>,</b> , , , , , , , , , , ,				
Mailing Address	PO Box 7004					
	Dallas TX 75209  CITY STATE ZI	P CODE				
Title or Position Assistant Treasu	urer	2 0900				
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.						
	Comerica Bank					
Mailing Address	1717 Main Street					
	Dallas TX 75201					
	CITY STATE ZI	P CODE				
Name of Bank, [	Depository, etc.					
Mailing Address						
	CITY STATE ZI	P CODE				