

FEC  
FORM 1

STATEMENT OF  
ORGANIZATION

RECEIVED  
FEC MAIL CENTER  
2018 SEP 11 PM 2:21

1. NAME OF  
COMMITTEE (in full)

(Check if name  
is changed)

Example: If typing, type  
over the lines.

12FE4M5

RUN SISTER RUN POLITICAL ACTION COMMITTEE

ADDRESS (number and street)

PO BOX 66470

(Check if address  
is changed)

HOUSTON

CITY ▲

TX

STATE ▲

77266-6470

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

(Check if address  
is changed)

TEXRSR@GMAIL.COM

Optional Second E-Mail Address

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address  
is changed)

WWW.RUNSISTERRUNPAC.COM

2. DATE

02 26 2018

3. FEC IDENTIFICATION NUMBER

C

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 Print Name of Treasurer

Nicole M. DeLoach

Signature of Treasurer

Nicole M. DeLoach

Date

08 20 2018

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 52 U.S.C. §30109.

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

Office Use Only				
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For further information contact:  
Federal Election Commission  
Toll Free 800-424-9530  
Local 202-694-1100

FEC FORM 1  
(Revised 06/2012)

NOTICE: ON 10/10/18, THE FOLLOWING INFORMATION WAS RECEIVED FROM THE FEDERAL ELECTION COMMISSION:

5. TYPE OF COMMITTEE

**Candidate 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 \_\_\_\_\_

Candidate Party Affiliation  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 Committee:**

(d)  This committee is a  (National, State or subordinate) committee of the  (Democratic, Republican, etc.) Party.

**Political Action Committee (PAC):**

- (e)  This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected 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 segregated fund or party committee. (i.e., nonconnected committee)
  - In addition, this committee is a Lobbyist/Registrant PAC.
  - In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)

**Joint Fundraising Representative:**

- (g)  This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.
- (h)  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.

**Committees Participating in Joint Fundraiser**

1.	_____	FEC ID number	<input type="checkbox"/>	_____
2.	_____	FEC ID number	<input type="checkbox"/>	_____
3.	_____	FEC ID number	<input type="checkbox"/>	_____
4.	_____	FEC ID number	<input type="checkbox"/>	_____

20140210 10:00:00 AM

Write or Type Committee Name

Run Sister Run Political Action Committee

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

NONE

Mailing Address

[Empty grid for mailing address]

CITY

STATE

ZIP CODE

Relationship:  Connected Organization  Affiliated Committee  Joint Fundraising Representative  Leadership PAC Sponsor

7. Custodian of Records: Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Full Name

NICOLE DELOACH

Mailing Address

912 W 26th St

HOUSTON

TX

77008

Title or Position

CITY

STATE

ZIP CODE

TREASURER

Telephone number

713-426-3777

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 of Treasurer

NICOLE DELOACH

Mailing Address

912 W 26th St

HOUSTON

TX

77008

Title or Position

CITY

STATE

ZIP CODE

TREASURER

Telephone number

713-426-3777

2010-03-04 10:00 AM

Full Name of Designated Agent

KARLA FLEMING-JONES

Mailing Address

10807 EVANFIELD CT

CYPRESS TX 77433

CITY

STATE

ZIP CODE

Title or Position

ASSISTANT TREASURER

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.

WELLS FARGO NA

Mailing Address

4010 BRAESWOOD BLVD

HOUSTON TX 77025

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

CITY

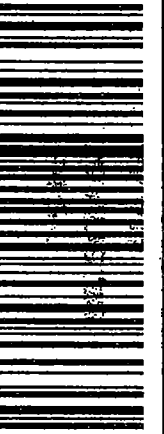
STATE

ZIP CODE

NON-PROFIT ORGANIZATION

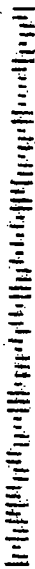
Kun Sister Kun PAC  
P.O. Box 66470  
Houston, TX 77266

7017 0660 0000 1803 1763



Federal Election Commission  
1050 First Street, N.E.  
Washington, DC 20463

20463-



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Hand Delivered Date of Receipt

USPS First Class Mail Date of Receipt  
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*8-29-2018*

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Other (Specify): Date of Receipt or Postmarked

*bed S*  
 PREPARER

*9-4-2018*  
 DATE PREPARED

11-10-2018 10:00:00 AM