**FEC** 

## 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. AMARILLO MATTERS PAC PO BOX 1532 ADDRESS (number and street) (Check if address is changed) **AMARILLO** 76105 TX CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS COMPLIANCE@RIGHTSIDECOMPLIANCE.COM (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 09 2020 C00751248 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. HALL, ANDREW, , , Type or Print Name of Treasurer HALL, ANDREW, , , [Electronically Filed] 07 2020 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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	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	
AMARILLO N	MATTERS PAC	
6. Name of Any Connec	cted Organization, Affiliated Committee, Joint Fundraising Representative, or Lo	eadership PAC Sponsor
NONE		
Mailing Address		
	CITY STATE	ZIP CODE
Relationship: Conr	nected Organization Affiliated Committee Joint Fundraising Representative	Leadership PAC Sponsor
Custodian of Records books and records.	s: Identify by name, address (phone number optional) and position of the person	in possession of committee
REN	INAKER, NANCY, , ,	
Full Name	PO BOX 341027	
Mailing Address	PO BOX 341027	
	AUSTIN	8734
Title or Position	CITY STATE	ZIP CODE
ASSISTANT TREASU	RER Telephone number	]
Treasurer: List the name any designated agent (	ne and address (phone number optional) of the treasurer of the committee; and e.g., assistant treasurer).	the name and address of
Full Name HALL of Treasurer	L, ANDREW, , ,	
Mailing Address	PO BOX 1532	
	AMARILLO	9105
Title or Decision	CITY STATE	ZIP CODE
Title or Position	806 Telephone number	-  637  -  4828

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Full Name of Designated Agent	ENNAKER, NANCY, , ,				
Mailing Address	PO BOX 341027				
	AUSTIN TX 78734  CITY STATE	ZIP CODE			
Title or Position ASSISTANT TREA	SURER 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.  AMARILLO NATIONAL BANK					
Mailing Address	410 S TAYLOR ST				
	AMARILLO TX 76101				
	CITY STATE	ZIP CODE			
Name of Bank, Dep	pository, etc.				
L					
Mailing Address					
	CITY STATE	ZIP CODE			

## : 97 A = G7 9 @ G5 B9 CI G H9 L H F 9 @ 5 H9 8 HC 5 F 9 DC F H Z G7 < 98 I @ C F → H9 A = N 5 H = C B

Form/Schedule: F1N Transaction ID:

Prior to filing this Form 1 registration, this filer previously filed reports for this cycle as an Independent Expenditor under ID C90019209.

Form/Schedule: F1N Transaction ID:

This committee intends to make independent expenditures, and consistent with the U.S. Court of Appeals for the District of Columbia Circuit decision in SpeechNow v. FEC, it therefore intends to raise funds in unlimited amounts. This committee will not use those funds to make contributions, whether direct, in-kind, or via coordinated communications, to federal candidates or committees.