FEC FORM 1	STATEMEN ORGANIZ	_	PAGE 1 / 4
1. NAME OF COMMITTEE (in full)	(Check if name is changed)	Example:If typing, type over the lines.	12FE4M5
	PETE		
ADDRESS (number and street)			
is changed)	AUSTIN		TX 78749   STATE ▲ ZIP CODE ▲
COMMITTEE'S E-MAIL ADDF	RESS		
(Check if address is changed)	petegallego@gmail.cor	<b>n</b>	
	Optional Second E-Mail Add	dress	
COMMITTEE'S WEB PAGE A (Check if address is changed)			
2. DATE 01 /	05 / Y Y Y Y 2021		
3. FEC IDENTIFICATION	NUMBER ► C C	00575043	
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	t is true, correct and complete.
Type or Print Name of Treasu	rer Arriola, Sylvia, , ,		
Signature of Treasurer	riola, Sylvia, , ,	[Electronically Filed]	Date 01 / D D / Y Y Y Y 05 / 2021
NOTE: Submission of false, erro		may subject the person signing ON SHOULD BE REPORTED V	this Statement to the penalties of 2 U.S.C. §437g. VITHIN 10 DAYS.
Office Use Only		For further information of Federal Election Commiss Toll Free 800-424-9530 Local 202-694-1100	

Image# 202101059394537373

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TYPE OF	COMMITTEE
Candid	ate Committee:
(a) X	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	GALLEGO, PETE, P., ,
Candidate Party Affi	DEM
(C)	This committee supports/opposes only one candidate, and is NOT an authorized committee.
Name of Candidate	
Party C	ommittee:
(d)	This committee is a(National, State or subordinate) committee of the(Democratic, Republican, etc.) Party.
Politica	I 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 Fu	ndraising 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.
C	ommittees Participating in Joint Fundraiser
1.	FEC ID number
2.	FEC ID number
3.	
4.	FEC ID number C

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Write or Type Committee Name

## **TEXANS FOR PETE**

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

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.

Arriola, Sy	Ivia, , ,
Full Name	
Mailing Address	22819 East Range
	San Antonio     TX     78255       -     -     -     -
Title or Position	CITY STATE ZIP CODE
Treasurer	Telephone number 210 802 9801

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	Arriola, Sylvia, , ,
Mailing Address	22819 East Range
	San Antonio   TX   78255     TX   TX
	CITY STATE ZIP CODE
Title or Position Treasurer	Telephone number 210 802 9801

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Full Name of Designated Agent																	1			1			I		1			_
Mailing Address																												
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Title or Position																												
													Tele	eph	ione	e ni	umt	ber			_							

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.

	Amalgamated Bank		
Mailing Address	1825 K St NW		
	Washington		20006-1202
	CITY	STATE	ZIP CODE
Name of Bank, D	epository, etc.		
Mailing Address			
	CITY	STATE	ZIP CODE