Image# 202007279260820375				0//2//2020 10 . 34
FEC FORM 1	STATEMEI ORGANIZ			PAGE 1 / 4
1. NAME OF	(Check if name	Example: If typing, type	12FE4M5	
COMMITTEE (in full)	is changed)	over the lines.		
REPUBLICAN V	OTERS OF TEX	AS-PAC		
	30310 CHARLIE LANE			
ADDRESS (number and street)				
(Check if address is changed)				
				355
	CITY A		STATE A	ZIP CODE▲
COMMITTEE'S E-MAIL ADDR	ESS			
(Check if address is changed)	republicanvoterstx@gr			
	Optional Second E-Mail Ad			
COMMITTEE'S WEB PAGE A (Check if address is changed)	https://republicanvoterstx.con	n/ 		
	01 <sup>7</sup> Y Y Y Y 2020			
3. FEC IDENTIFICATION N	NUMBER ► C C	00753046		
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 i	t is true, correct and	d complete.
Type or Print Name of Treasu	rer STUCKEY, LINDA, E, ,			
Signature of Treasurer	JCKEY, LINDA, E, ,	[Electronically Filed]	Date 07	/ D D / Y Y Y Y 27 2020
NOTE: Submission of false, erro	neous, or incomplete information ANY CHANGE IN INFORMATI	may subject the person signing ON SHOULD BE REPORTED V		penalties of 2 U.S.C. §437g.
Office Use Only		For further information of Federal Election Commiss Toll Free 800-424-9530 Local 202-694-1100		FEC FORM 1 (Revised 06/2012)

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FEC Form 1 (Revised 02/2009)	Page <b>2</b>
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. (Con information below.)	nplete the candidate
Name of Candidate	
Candidate 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.) Par
Political Action Committee (PAC):	
(e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its co	nnected 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) This committee supports/opposes more than one Federal candidate, and is NOT a separate s committee. (i.e., nonconnected committee)	egregated fund or par
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 t 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 the committees/organizations, none of which is an authorized committee of a federal candidate.	wo or more political
Committees Participating in Joint Fundraiser	
1 FEC ID number C	
2 FEC ID number C	
3 FEC ID number C	
4	

FEC Form 1 (Revised 02/2009)

Write or Type Committee Name

## **REPUBLICAN VOTERS OF TEXAS-PAC**

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

NONE					
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.

STUCKEY	′, LINDA, E, ,
Full Name	
	30310 CHARLIE LANE
Mailing Address	
	MAGNOLIA TX 77355
Title or Position	CITY STATE ZIP CODE
	Telephone number     713     302     8380

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	STUCKEY, LINDA, E, ,
Mailing Address	30310 CHARLIE LANE
	MAGNOLIA
	CITY STATE ZIP CODE
Title or Position	Telephone number 713 - 302 - 8380

Full Name of Designated Agent	KERR, ANNETTE, , ,	
Mailing Address	31410 WISTERIA LANE	
	MAGNOLI TX 77355	
	CITY STATE ZIP CODE	
Title or Position	AGENT	

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.

BAN			
Mailing Address	1431 GRAHAM DRIVE		
			77375
	CITY	STATE	ZIP CODE
Name of Bank, Deposite	pry, etc.		
Mailing Address			
	CITY	STATE	ZIP CODE