Image# 202203089493743401				03/06/2022 13 . 43
FEC FORM 1	STATEMEI ORGANIZ			PAGE 1 / 4 —
			c	Office Use Only
1. NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5	
ADDRESS (number and street)	P.O. Box 234			
(Check if address is changed)				
is changed)			TX 78	838
	CITY A		STATE A	ZIP CODE A
COMMITTEE'S E-MAIL ADDF	RESS			
(Check if address is changed)		S@GMAIL.COM		
	Optional Second E-Mail Ad	dress		
	spiritotow1112@yah			
COMMITTEE'S WEB PAGE A (Check if address is changed)	DDRESS (URL)			
	03 ⁷ Y Y Y Y 2021			
3. FEC IDENTIFICATION I		00807966		
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	d complete.
		,	-,	
Type or Print Name of Treasu	rer Arredondo-Lynch, Alma, , ,			
Signature of Treasurer	edondo-Lynch, Alma, , ,	[Electronically Filed]	Date 03	/ D D / Y Y Y Y 08 2022
NOTE: Submission of false, erro	neous, or incomplete information ANY CHANGE IN INFORMATI			penalties of 2 U.S.C. §437g.
Office Use Only		For further information Federal Election Commis Toll Free 800-424-9530 Local 202-694-1100		FEC FORM 1 (Revised 06/2012)

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F	FEC Fo	rm 1 (Revised 02/2009)	Page 2
		OMMITTEE • 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 Cand	e of lidate	Arredondo-Lynch, Alma, , , D.D.S	
	lidate ⁄ Affiliati	on REP Office Sought: K House Senate President	State TX District 23
(C)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name Cand			
Part	ty Con	nmittee:	(D
(d)		This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party
Poli	tical A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its co	nnected organization is a
		Corporation Corporation w/o Capital Stock	Labor Organization
		Membership Organization	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 party
		In addition, this committee is a Lobbyist/Registrant PAC.	
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Join	t Func	Iraising 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.	wo or more political
(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
	Com	mittees Participating in Joint Fundraiser	
	1.	FEC ID number	
	2.	FEC ID number	
	3.	FEC ID number	
	4.	FEC ID number	

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Write or Type Committee Name

DR.ALMA4CONGRESS

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

Mailing Address										
	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.

Arredondo	-Lynch, Alma, , ,
Full Name	
Mailing Address	P.O. Box 234
	Concan, Texas 78838
	CONCAN TX 78838
Title or Position	CITY STATE ZIP CODE
	Telephone number 830 - 591 - 9586

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 Arredor of Treasurer	ndo-Lynch, Alma, , ,		
Mailing Address	P.O. Box 234		
	Concan, Texas 78838		
			78838
	CITY	STATE	ZIP CODE
Title or Position			
		Telephone number	

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Full Name of Designated Agent			I	I		1							 											1							
Mailing Address																															
			L																1										1		
					1			1	1												1			L					I		
CITY										STATE ZIP CODE																					
Title or Position																															
															Tele	eph	ione	e n	uml	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.

	NK		
Mailing Address	2065 E MAIN ST		
	UVALDE	TX 78801	
	CITY	STATE	ZIP CODE
Name of Bank, Depository,	etc.		
Mailing Address			
	CITY	STATE	ZIP CODE