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	
Williamson Co	ounty Republican Pa	arty Federal PAC		1
ADDRESS (number and str	PO 393 eet)			
(Check if addre is changed)	SS			
	Round Rock └ │ │ │ │ │ │ │ │ │ │ │ CITY ▲		TX 78 STATE ▲	3680
COMMITTEE'S E-MAIL A	DDRESS			
 (Check if addre is changed) 	ss treasurer@williamsonc	countygop.org		
	Optional Second E-Mail Add	dress		1
COMMITTEE'S WEB PAG (Check if addre is changed)				
2. DATE 10	06 / Y Y Y Y 06			
3. FEC IDENTIFICATIO	ON NUMBER ► C co	00454942		
4. IS THIS STATEMENT	NEW (N) OR	× AMENDED (A)		
I certify that I have exami	ned this Statement and to the best	of my knowledge and belief it	is true, correct an	d complete.
Type or Print Name of Tre	asurer Wornardt, Rochelle, , ,			
Signature of Treasurer	Wornardt, Rochelle, , ,	[Electronically Filed]	Date 10	/ D D / Y Y Y Y 06 2022
NOTE: Submission of false,	erroneous, or incomplete information ANY CHANGE IN INFORMA	may subject the person signing the first state of the person signing the first state of the person state o		e penalties of 52 U.S.C. §3010
Office Use Only		For further information cc Federal Election Commissic Toll Free 800-424-9530 Local 202-694-1100		FEC FORM 1 (Revised 06/2012)

Image# 202210069532082445

10/06/2022 14 : 03

EC Form 1 (Revised 03/2022)	Page 2
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 information below.)	e the candidate
Name of Candidate	
Candidate Office Party Affiliation 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: (National, State or subordinate) committee of the (Democratic committee) (d) x This committee is a SUB (national, State or subordinate) committee of the REP	ratic, can, etc.) Party
Political Action Committee (PAC):	
(e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected	ected organization is a:
Corporation Corporation w/o Capital Stock Labo	r Organization
Membership Organization Trade Association Coop	perative
In addition, this committee is a Lobbyist/Registrant PAC.	
(f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segreg committee. (i.e., nonconnected committee)	ated 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.)	
(g) This committee is an independent expenditure-only political committee (Super PAC).	
In addition, this committee is a Lobbyist/Registrant PAC.	
(h) This committee is a political committee with both contribution and non-contribution accounts (Hybric	I PAC).
In addition, this committee is a Lobbyist/Registrant PAC.	
Joint Fundraising Representative:	

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.

(j) 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

(i)

1.	L														С				
2.	L														С				

FEC Form 1 (Revised 02/2009)	Page 3
Write or Type Committee Name	

Williamson County Republican Party Federal PAC

6.	Name of Any Connected O Republican Party of	-	iated Cor	nmitte	e, J	oint	Fu	undr	aisi	ing	Rep	ores	sen	tati	ve,	or	Lea	ade	rsh	ip∣	PAC	S	pon	sor	
	Mailing Address	900 Congress S	t, ste 300																						
		Austin											T	X 			78	613	3			- [_			
			С	ITY 🔺								ę	STA	ΤE					Z	ΙP	со	DE			
	Relationship: Connected	Organization	Affiliated	Organiz	atio	n		Joi	nt F	undı	aisi	ng	Rep	ores	enta	ativ	е		Le	ade	ərsh	ip F	PAC	Spo	onso

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

Wornardt,	Rochelle, , ,	
Full Name		
Mailing Address	2323 Wolf Ranch Parkway #438	
	Georgetown	TX78628
	CITY 🔺	STATE ▲ ZIP CODE ▲
Title or Position ▼		
Treasurer	Telephon	ne number

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	Wornardt, Rochelle, , ,								
of Treasurer									
Mailing Address	2323 Wolf Ranch Parkway #438								
	Georgetown TX 78628 - - -								
	CITY ▲ STATE ▲ ZIP CODE ▲								
Title or Position ▼									
Treasurer	Image: Image in the image i								

FEC Form 1	(Revised 02/2009) Page 4
Full Name of Designated Agent	Armbruster, Steve, , ,
Mailing Address	3201 Tenaza Cv
	Round Rock TX 78664
	CITY ▲ STATE ▲ ZIP CODE ▲
Title or Position	
Party Chairman	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.

PNC			
Mailing Address	10 Spring St		
	Georgetown		
	CITY 🔺	STATE A	ZIP CODE
Name of Bank, Depository,	etc.		
Mailing Address			
	CITY 🔺	STATE A	ZIP CODE ▲