FEC FORM 1	STATEMENT OF ORGANIZATION	PAGE 1 / 4
1. NAME OF COMMITTEE (in full)	(Check if name Example: If typing, type is changed) over the lines.	12FE4M5
	1900 PRESTON RD	
ADDRESS (number and str		
is changed)	PLANO	
	CITY 🔺	STATE ▲ ZIP CODE ▲
COMMITTEE'S E-MAIL A		
(Check if addre is changed)		M
	Optional Second E-Mail Address	
(Check if addressing is changed)	.ss	
2. DATE 09	/ D D / Y Y Y Y 21 2021	
3. FEC IDENTIFICATIO	ON NUMBER ► C C00789743	
4. IS THIS STATEMEN	NEW (N) OR AMENDED (A)	
I certify that I have exam	ined this Statement and to the best of my knowledge and belief it	is true, correct and complete.
Type or Print Name of Tre	easurer HOBBS, CABELL, , ,	
Signature of Treasurer	HOBBS, CABELL, , , [Electronically Filed]	Date 09 / 21 / 2021
NOTE: Submission of false	, erroneous, or incomplete information may subject the person signing t ANY CHANGE IN INFORMATION SHOULD BE REPORTED W	
Office Use Only	For further information co Federal Election Commissio Toll Free 800-424-9530 Local 202-694-1100	

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TYPE OF (COMMITTEE
Candidat	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. (Complete the candidate information below.)
Name of Candidate	
Candidate Party Affiliat	tion Office Sought: House Senate President District
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.
Name of Candidate	
Party Cor	
(d)	This committee is a (National, State or subordinate) committee of the (Democratic, Republican, etc.) Party
Political A	Action Committee (PAC):
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected 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 segregated fund or part 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 Fund	draising Representative:
(g) x	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.
Con	nmittees Participating in Joint Fundraiser
1.	VAN TAYLOR CAMPAIGN FEC ID number C C00653634
2.	DAN CRENSHAW FOR CONGRESS
3.	
4.	AMERICA RELOADED FEC ID number C C00686816

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Write or Type Committee Name

TAYLOR CRENSHAW COMMITTEE

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

Mailing Address																										
																	L	_	_				- [
CITY											ST	AT	E				Z	IP	СС	DDI	E					
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.

HOBBS, C	CABELL, , ,
Full Name	
Mailing Address	1900 PRESTON RD
	#267 PMB 229
	PLANO
Title or Position	CITY STATE ZIP CODE
	Telephone 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 of Treasurer	HOBBS, CABELL, , ,		
Mailing Address	1900 PRESTON RD		
	#267 PMB 229		
			75093
	CITY	STATE	ZIP CODE
Title or Position		Telephone number	L

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Full Name of Designated Agent														I									1			
Mailing Address																										
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						C	:IT)	(STA	ΤE				ZII	ΡC	OD	ιE		
Title or Position																										
											Tele	eph	one	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.

BB&T (NOW TRUIST)											
Mailing Address	7900 PRESTON RD										
		TX 75024									
	CITY	STATE	ZIP CODE								
Name of Bank,	Name of Bank, Depository, etc.										
Mailing Address											
	CITY	STATE	ZIP CODE								

Name of Bank, Depository, etc.