Only

## STATEMENT OF

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**FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Mayra Flores for Congress PO Box 516 ADDRESS (number and street) (Check if address is changed) Los Indios 78567-0516 CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS Mayran@live.com (Check if address is changed) Optional Second E-Mail Address info@campaignfinancial.com COMMITTEE'S WEB PAGE ADDRESS (URL) www.mayrafloresforcongress.com (Check if address is changed) DATE 2023 C00768994 FEC IDENTIFICATION NUMBER 3. X 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 complete. Flores De Hinojosa, Niria V, , , Type or Print Name of Treasurer Flores De Hinojosa, Niria V,,, [Electronically Filed] 02 07 2023 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 52 U.S.C. §30109. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530

Local 202-694-1100

EC	Form 1 (Revised 03/2022)	age <b>2</b>
	YPE OF COMMITTEE:	
	andidate Committee:	
	This committee is a principal campaign committee. (Complete the candidate information below.)	
	This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candid information below.)	late
	Name of Candidate Flores, Mayra, Nohemi, ,	
	Candidate Party Affiliation REP Sought:  ** House Senate President  Distr	
	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
	Name of Candidate	
	arty Committee:	
	This committee is a (National, State (Democratic, or subordinate) committee of the Republican, etc.) Page 1	arty
	olitical Action Committee (PAC):	
	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization	ization is a:
	Corporation Corporation w/o Capital Stock Labor Organization	ion
	Membership Organization Trade Association Cooperative	
	In addition, this committee is a Lobbyist/Registrant PAC.	
	This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund o committee. (i.e., nonconnected committee)	or party
	In addition, this committee is a Lobbyist/Registrant PAC.	
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
	This committee is an independent expenditure-only political committee (Super PAC).	
	In addition, this committee is a Lobbyist/Registrant PAC.	
	This committee is a political committee with both contribution and non-contribution accounts (Hybrid PAC).	
	In addition, this committee is a Lobbyist/Registrant PAC.	
,	oint Fundraising Representative:	
	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more proceeds committees/organizations, at least one of which is an authorized committee of a federal candidate.	oolitical
	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more proceeds/organizations, none of which is an authorized committee of a federal candidate.	oolitical
	Committees Participating in Joint Fundraiser	
	1. C	

	FEC Form 1 (Revised 0	2/2009)			Page <b>3</b>
V	/rite or Type Committee Name	0			
	Mayra Flores fo	Or CONGRESS rganization, Affiliated Committee, Joir	at Fundraising Pans	ocontativo or l	andership BAC Spansor
).	TEAM MAYRA	rganization, Alimated Committee, Joh	it rundraising nepr	esentative, or i	Leadership PAC Sponsor
	Mailing Address	1005 CONGRESS AVENUE			
		SUITE 400			
		AUSTIN		TX	78701
		CITY ▲		STATE ▲	ZIP CODE ▲
	Relationship: Connected	Organization Affiliated Organization	✗ Joint Fundraising	g Representative	Leadership PAC Sponso
	_	_			
7.	Custodian of Records: Identi	ify by name, address (phone number o	otional) and position o	of the person in p	possession of committee
	CFS, Comp	oliance, , ,			
	Full Name				
	Mailing Address	PO Box 30844			
		Bethesda		MD L	20824
		CITY ▲		STATE ▲	ZIP CODE ▲
	Title or Position ▼				
	Custodian of Records		Telephone nun	nber 301	654 3220
3.	Treasurer: List the name and any designated agent (e.g., a	d address (phone number optional) o assistant treasurer).	f the treasurer of the	e committee; and	d the name and address of
	Full Name Flores De H	Hinojosa, Niria V, , ,			
	of Treasurer				
	Mailing Address	1409 S 9th Ave, Ste. 123			
		Edinburg		TX _	78539-5527
		CITY ▲		STATE ▲	ZIP CODE ▲
	Title or Position ▼				
	Treasurer		Telephone nun	nber 956	

Full Name of Designated Agent  Mailing Address  CITY ▲ STATE ▲ ZIP CODE ▲  Title or Position ▼  Telephone number  Telep	FEC Form 1	(Revised 02/2009)	Page <b>4</b>
CITY ▲ STATE ▲ ZIP CODE ▲  Title or Position ▼  Telephone number	Designated		
Title or Position ▼  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.  First Community Bank  Mailing Address  1151 W Highway 77  CITY ▲ STATE ▲ ZIP CODE ▲  Name of Bank, Depository, etc.  Chain Bridge Bank  Mailing Address  1445-A Laughline Ave	Mailing Address		
Title or Position ▼  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.  First Community Bank  Mailing Address  1151 W Highway 77  CITY ▲ STATE ▲ ZIP CODE ▲  Name of Bank, Depository, etc.  Chain Bridge Bank  Mailing Address  1445-A Laughline Ave			
Title or Position ▼  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.  First Community Bank  Mailing Address  1151 W Highway 77  CITY ▲ STATE ▲ ZIP CODE ▲  Name of Bank, Depository, etc.  Chain Bridge Bank  Mailing Address  1445-A Laughline Ave			
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.  First Community Bank  Mailing Address  CITY A STATE A ZIP CODE A  Name of Bank, Depository, etc.  Chain Bridge Bank  Mailing Address  Malling Address	Tille on Desirion		ZIP CODE ▲
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First Community Bank  Mailing Address    1151 W Highway 77			nolds accounts, rents
Mailing Address    1151 W Highway 77	Name of Bank, D	Depository, etc.	
San Benito  CITY ▲  STATE ▲  ZIP CODE ▲  Name of Bank, Depository, etc.  Chain Bridge Bank  Mailing Address  McLean  VA   22101   -	Mailing Address		
Chain Bridge Bank  Mailing Address  McLean  VA 22101	·		
Mailing Address  1445-A Laughline Ave  McLean  VA 22101	Name of Bank, D	Depository, etc.	
McLean VA 22101		Chain Bridge Bank	
	Mailing Address	1445-A Laughline Ave	
CITY ▲ STATE ▲ ZIP CODE ▲		McLean VA 221	01
		CITY ▲ STATE ▲	ZIP CODE ▲

## Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

FEC Form 1S (Revised 02/2017)

Page \_\_\_\_\_ **of** \_\_\_\_\_\_

h). <b>Joint Fundraisi</b> r		FEC ID number	С
1.		FEC ID number	C
2.			
3.		FEC ID number	C
4.		FEC ID number	C
ame of Any Connected	Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spon
	2 VICTORY FUND		
1			
Mailing Address	P.O. BOX 341027		
	AUSTIN		78734
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte	d Organization Affiliated Committee	Fundraising Representa	ative Leadership PAC S
esignated Agent: Identif	d Organization Affiliated Committee  Joint y by name, address (phone number – optional)	Fundraising Representa	ative Leadership PAC S
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esignated Agent: Identif  Full Name	y by name, address (phone number – optional)  CITY   Te	STATE A	ZIP CODE A
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Full Name Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or material deposit boxes	y by name, address (phone number – optional)  CITY   Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

Page \_\_\_\_ **of** \_\_\_\_\_\_

(h). <b>Joint Fundraisi</b>	ig Participant:		
1		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
Name of Any Connected	Organization, Affiliated Committee, Joint Fund HOUSE 2022	draising Representative	e, or Leadership PAC Spons
Mailing Address	PO BOX 30844		
	BETHESDA	MD MD	20824
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
		nt Fundraising Representa	ative Leadership PAC Spo
	Affiliated Committee Jointy by name, address (phone number – optional)	nt Fundraising Representa	Leadership PAC Spo
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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h). Joint Fundraisi	ig Participant:		
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2.		FEC ID number	С
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ame of Any Connected	Organization, Affiliated Committee, Joint Fund	draising Representative	e, or Leadership PAC Spons
GT FARM TEAM	2022		
Mailing Address	PO BOX 30844		
	BETHESDA	MD	20824
Relationship:	CITY A	STATE A	ZIP CODE ▲
Connecte	ed Organization Affiliated Committee	nt Fundraising Representa	ative Leadership PAC Sp
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## Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

FEC Form 1S (Revised 02/2017)

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IRON LADIES P.	AC 		
Mailing Address	PO BOX 341027		
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	AUSTIN	TX	78734
Relationship:	CITY A	STATE A	ZIP CODE ▲
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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	Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spon
Mailing Address	228 S WASHINGTON ST		
	STE 115		
	ALEXANDRIA	VA	22314
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Affiliated Committee Joint  Ty by name, address (phone number – optional)	Fundraising Representa	Leadership PAC Sp
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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Relationship:		CITY A	STATE A	ZIP CODE ▲
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Mailing Address	228 S WASHINGT	ON ST		
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4.				
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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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h). <b>Joint Fundraisi</b>	ng Participant:		
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HISPANIC LEAD	ERSHIP TRUST PARTNERSHIP		
Mailing Address	1005 CONGRESS AVE		
	STE 400		
	AUSTIN	, , , , , , TX ,	78701
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