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STATEMEN <sup>-</sup>	T OF
ORGANIZA	ΓΙΟΝ

FEC FORM 1	STATEMEN ORGANIZA			PAGE 1 / 4 ——
1. NAME OF COMMITTEE (in full)	(Check if name is changed)	Example:If typing, type over the lines.	12FE4M5	
2024 Delegate Cor	nmittee			
ADDRESS (number and street)	1305 W 11th St			
(Check if address is changed)	213			
	Houston		TX STATE ▲	2008 
COMMITTEE'S E-MAIL ADDRE	SS			
(Check if address is changed)	les@leswilliamson.com			
	Optional Second E-Mail Add	ress		
COMMITTEE'S WEB PAGE ADD (Check if address is changed)				
2. DATE 02 / 15	D / Y Y Y Y 2024			
3. FEC IDENTIFICATION NU	JMBER ► C Co	0870279		
4. IS THIS STATEMENT	NEW (N) OR	AMENDED (A)		
I certify that I have examined th	is Statement and to the best	of my knowledge and belief it i	s true, correct and	d complete.
Type or Print Name of Treasure	Williamson, Les, , ,			
Signature of Treasurer Willia	mson, Les, , ,		Date 02	/ D D / Y Y Y Y 19 2024
NOTE: Submission of false, errone		nay subject the person signing th ION SHOULD BE REPORTED V		e penalties of 52 U.S.C. §3010
Office Use Only		For further information co Federal Election Commissio Toll Free 800-424-9530 Local 202-694-1100	ntact:	FEC FORM 1 (Revised 06/2012)

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5. 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. (Comp information below.)	lete the candidate
Name of Candidate	
Candidate Office Party Affiliation Sought: House Senate President	State
(c) X This committee supports/opposes only one candidate, and is NOT an authorized committee.	Biotriot
Name of Haley, Nikki, , , Candidate	
(d) This committee is a	nocratic, Iblican, etc.) Party
Political Action 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	abor Organization
Membership Organization Trade Association	ooperative
In addition, this committee is a Lobbyist/Registrant PAC.	
(f) This committee supports/opposes more than one Federal candidate, and is NOT a separate seg committee. (i.e., nonconnected committee)	regated 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 (Hyt	brid PAC).

## Joint Fundraising Representative:

In addition, this committee is a Lobbyist/Registrant PAC.

Relationship:

Connected Organization

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FEC Fo	rm 1 (Revised 0	2/2009)														F	Page	e <b>3</b>		
Write or Type C	committee Name																			
2024 D	elegate C	committee																		
6. Name of An	y Connected O	rganization, Affilia	ated Comr	nittee,	Joint	Fund	drais	ing	Repr	esei	ntati	ve, c	or Le	ade	rshij	p P/	AC :	Spo	nsor	
TEAM S																				
											<u> </u>									
Mailing Addr	ess	186 SEVEN FAR	MS DR																	
		STE F-401																		
										Ľ	SC		2	9492						
			CIT	Y 🔺						ST	ATE					РC	OD	E 🔺		

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

 $\boldsymbol{X}$  Joint Fundraising Representative

Leadership PAC Sponsor

Affiliated Organization

Williamson	Les, , ,
Full Name	
Mailing Address	1305 W 11th St
	Houston
	CITY ▲ STATE ▲ ZIP CODE ▲
Title or Position ▼	
Treasurer	Telephone number 214 - 676 - 7442

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	Williamson, Les, , ,
of Treasurer	
Mailing Address	1305 W 11th St
	Houston TX 77008
	CITY ▲ STATE ▲ ZIP CODE ▲
Title or Position	
Treasurer	Image: Second

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Full Name of Designated Agent		
Mailing Address		
	CITY ▲ STATE ▲	ZIP CODE
Title or Position ▼		
	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.

	Chain Bridge Bank, N.A.		
Mailing Address	1445-A Laughlin Ave		
	McLean	VA 22101	
	CITY 🔺	STATE A	ZIP CODE
Name of Bank, I			
Mailing Address			
	CITY 🔺	STATE ▲	ZIP CODE ▲