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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) over the lines. is changed) DALLAS COUNTY REPUBLICAN PARTY - PRIMARY 11617 N Central Expy ADDRESS (number and street) Ste 240 (Check if address X is changed) **Dallas** 75243-3844 TX CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS nick@dallasgop.org (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) www.dallasgop.org (Check if address is changed) DATE 07 2018 C00342857 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. Weidenkopf, Nicholas, , , Type or Print Name of Treasurer Weidenkopf, Nicholas, , , [Electronically Filed] 05 17 2018 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. FEC FORM 1

| Office |  |  | For further information contact: |
|--------|--|--|----------------------------------|
| Use    |  |  | Federal Election Commission      |
|        |  |  | Toll Free 800-424-9530           |
| Only   |  |  | Local 202-694-1100               |

| ı            | FEC <b>Fo</b>         | rm 1 (Revised 02/2009)  | Page <b>2</b>           |
|--------------|-----------------------|---|-------------------------|
|              |                       | 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. (Cominformation below.)   | plete the candidate     |
| Name<br>Cand | e of<br>didate        |   |                         |
|              | didate<br>/ Affiliati | Office Sought: House Senate President   | State                   |
| (c)          |                       | This committee supports/opposes only one candidate, and is NOT an authorized committee.   |                         |
| Name<br>Cand | e of<br>lidate        |   |                         |
| Part         | ty Con                | nmittee:  (National, State  | (Democratic,            |
| (d)          | ×                     | This committee is a SUB or subordinate) committee of the REP  | Republican, etc.) Party |
| Poli         | tical A               | ction Committee (PAC):  |                         |
| (e)          |                       | This committee is a separate segregated fund. (Identify connected organization on line 6.) Its cor-   | nected 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 secommittee. (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 Fund                | raising Representative:   |                         |
| (g)          | П                     | This committee collects contributions, pays fundraising expenses and disburses net proceeds for to  | vo or more political    |
| (h)          |                       | committees/organizations, at least one of which is an authorized committee of a federal candidate.  This committee collects contributions, pays fundraising expenses and disburses net proceeds for to committees/organizations, none of which is an authorized committee of a federal candidate. | o or more political     |
|              | Com                   | mittees Participating in Joint Fundraiser   |                         |
|              | 1.                    | FEC ID number   |                         |
|              |                       |   |                         |
|              | 2.                    |   |                         |
|              | 3.                    | FEC ID number C   |                         |
|              | 4.                    |   |                         |

Title or Position Treasurer

|    | _  |  |                                | _                         |
|----|--|--|--------------------------------|---------------------------|
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| ٧  | Write or Type Committee Name                               |  |                                |                           |
|    | DALLAS COUN  | TY REPUBLICAN PAR  | RTY - PRIMAR                   | Y                         |
| 6. | Name of Any Connected C                                    | rganization, Affiliated Committee, Joint Fun                                       | draising Representative, or    | Leadership PAC Sponsor    |
| R  | Republican Party of Te                                     | xas .  |                                |                           |
| ī  |  |  |                                |                           |
|    | Mailing Address  | PO Box 2206  |                                |                           |
|    | <b>3</b>   | Austin   | TX TX STATE                    | 78768-2172<br>            |
|    |  | Organization Affiliated Committee X Jountify by name, address (phone number option | int Fundraising Representative |                           |
|    |  | f, Nicholas, , ,   |                                |                           |
|    | Mailing Address  | 11617 North Central Expressway   |                                |                           |
|    |  | Ste. 240   |                                |                           |
|    |  | Dallas   | TX                             | 75243-3844                |
|    | Title or Position  | CITY   | STATE                          | ZIP CODE                  |
|    | Custodian of Records                                       | <u> </u>   | Telephone number 214           |                           |
| 3. | Treasurer: List the name and any designated agent (e.g., a | address (phone number optional) of the tr<br>ssistant treasurer).                  | easurer of the committee; an   | d the name and address of |
|    | Full Name Weidenkop of Treasurer                           | f, Nicholas, , ,   |                                |                           |
|    | Mailing Address  | 11617 North Central Expressway   |                                |                           |
|    |  | Ste. 240   |                                |                           |
|    |  | Dallas   |                                | 75243-3844                |
|    |  | CITY   | STATE                          | ZIP CODE                  |

802

Telephone number

1752

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|---|---|-----------|
|   |   |           |
| Full Name of  |   |           |
| Designated<br>Agent                                   |   |           |
| Mailing Address                                       |   |           |
|   |   |           |
|   |   |           |
|   | CITY STATE  | ZIP CODE  |
| Title or Position                                     |   |           |
|   | Telephone number  |           |
|   |   |           |
|   |   |           |
| safety deposit be<br>Name of Bank,                    | or <b>Depositories:</b> List all banks or other depositories in which the committee deposits fund boxes or maintains funds.  Depository, etc. |           |
| safety deposit be                                     | poxes or maintains funds.   |           |
| safety deposit be<br>Name of Bank,                    | Depository, etc.  Amegy Bank-Federal Account  PO Box 27459  |           |
| safety deposit be                                     | Depository, etc.  Amegy Bank-Federal Account  PO Box 27459  |           |
| safety deposit be<br>Name of Bank,                    | Depository, etc.  Amegy Bank-Federal Account  PO Box 27459  |           |
| safety deposit be<br>Name of Bank,                    | Depository, etc.  Amegy Bank-Federal Account  PO Box 27459  | 77227     |
| safety deposit be<br>Name of Bank,                    | Depository, etc.  Amegy Bank-Federal Account  PO Box 27459  |           |
| safety deposit be<br>Name of Bank,                    | Depository, etc.  Amegy Bank-Federal Account  PO Box 27459  Houston  TX  7  CITY  STATE   | 77227     |
| safety deposit be<br>Name of Bank,<br>Mailing Address | Depository, etc.  Amegy Bank-Federal Account  PO Box 27459  Houston  TX  7  CITY  STATE   | 77227     |
| safety deposit be<br>Name of Bank,<br>Mailing Address | Depository, etc.  Amegy Bank-Federal Account  PO Box 27459  Houston  TX  7  CITY  STATE   | 77227<br> |
| safety deposit be<br>Name of Bank,<br>Mailing Address | Depository, etc.  Amegy Bank-Federal Account PO Box 27459 Houston TX 7  CITY STATE  | 77227<br> |
| safety deposit be<br>Name of Bank,<br>Mailing Address | Depository, etc.  Amegy Bank-Federal Account PO Box 27459 Houston TX 7  CITY STATE  | 77227<br> |
| safety deposit be<br>Name of Bank,<br>Mailing Address | Depository, etc.  Amegy Bank-Federal Account PO Box 27459 Houston TX 7  CITY STATE  | 77227<br> |