Only

## STATEMENT OF

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**FEC ORGANIZATION** FORM 1 Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 COMMITTEE (in full) is changed) over the lines. Harris County Republican Party Federal Committee 8588 KATY FREEWAY ADDRESS (number and street) SUITE 445 (Check if address is changed) Houston 77024 CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS TREAS@HARRISCOUNTYGOP.COM (Check if address is changed) Optional Second E-Mail Address COMPLIANCE@RIGHTSIDECOMPLIANCE.COM COMMITTEE'S WEB PAGE ADDRESS (URL) www.harriscountygop.com (Check if address is changed) DATE 10 2022 C00326835 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. MILLARD, DAVID, , , Type or Print Name of Treasurer MILLARD, DAVID, , , [Electronically Filed] 06 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

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	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 the information below.)	he candidate			
	Name of Candidate ''','','','','				
	Candidate Party Affiliation Office 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:				
	(Mational, State (Democrati	ic, n, etc.) Party			
	Political Action Committee (PAC):				
	(e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connect	ed organization is a:			
	Corporation Corporation w/o Capital Stock Labor (	Organization			
	Membership Organization Trade Association Cooper	_			
	In addition, this committee is a Lobbyist/Registrant PAC.				
		ad fund or party			
	(f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregate committee. (i.e., nonconnected committee)	ed fulld of 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 (Hybrid F	PAC).			
	In addition, this committee is a Lobbyist/Registrant PAC.				
	Joint Fundraising Representative:				
	(i) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate.	or more political			
	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	or more political			
	Committees Participating in Joint Fundraiser				
	1 C				

TREASURER

l	FEC Form 1 (Revised 0)	2/2009)	Page <b>3</b>		
V	Vrite or Type Committee Name				
	_	Republican Party Federal Committee			
6.	Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor				
	Republican Party of	exas 			
	Mailing Address	1108 Lavaca St., Ste 500			
		Austin	78701		
		CITY ▲ STATE ▲	ZIP CODE ▲		
	Relationship: Connected	Organization X Affiliated Organization Joint Fundraising Represent	tative Leadership PAC Sponso		
7.	Custodian of Records: Identi books and records.	fy by name, address (phone number optional) and position of the perso	on in possession of committee		
	MILLARD, [	DAVID, , ,			
	Full Name				
	Mailing Address	8588 KATY FREEWAY			
		SUITE 445			
		HOUSTON	77024		
		CITY ▲ STATE ▲	ZIP CODE ▲		
	Title or Position ▼				
	TREASURER	Telephone number			
8.	Treasurer: List the name and any designated agent (e.g., a	d address (phone number optional) of the treasurer of the committee assistant treasurer).	e; and the name and address of		
	Full Name MILLARD, [	DAVID, , ,			
	of Treasurer				
	Mailing Address	8588 KATY FREEWAY			
		SUITE 445			
		HOUSTON	77024		
		CITY ▲ STATE ▲	ZIP CODE ▲		
	Title or Position ▼				

Telephone number

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Full Name of Designated Agent	Price, William, , ,	
Mailing Address	8588 KATY FREEWAY SUITE 445	
	Houston	77024
Title or Position <b>▼</b>	CITY ▲ STATE A	▲ ZIP CODE ▲
Assistant Treasur		
Banks or Other safety deposit box	<b>Depositories:</b> List all banks or other depositories in which the committee depositions or maintains funds.	ts funds, holds accounts, rents
Name of Bank, D	epository, etc.	
	Allegiance Bank	
Mailing Address	Houston	77241
	CITY ▲ STATE 4	ZIP CODE ▲
Name of Bank, D	epository, etc.	
	AMEGY BANK	
Mailing Address	1717 W LOOP SOUTH	
	HOUSTON	77027
	CITY A STATE A	ZIP CODE ▲

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

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	ng Participant:		
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	С
ame of Any Connected	Organization, Affiliated Committee, Joint Fund	draising Representative	e, or Leadership PAC Spon
TEXAS RELOAD	ED		
I			
Mailing Address	5900 MEMORIAL DR STE 215		
	HOUSTON	TX	77007
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
Па	d Organization	nt Fundraising Representa	
esignated Agent: Identif	y by name, address (phone number – optional)		
Full Name	y by name, address (phone number – optional)		
	y by name, address (phone number – optional)		
Full Name	y by name, address (phone number – optional)		
Full Name			
Full Name	CITY A	STATE A	ZIP CODE A
Full Name	CITY A	STATE A	
Full Name	CITY A		
Full Name Mailing Address  TITLE OR POSITION	CITY A  City A  pries: List all banks or other depositories in which	Telephone Number	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposited the state of	CITY ▲  CITY ▲  pries: List all banks or other depositories in which aintains funds.	Telephone Number	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, FROS	CITY A  City A  pries: List all banks or other depositories in which	Telephone Number	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or m  ame of Bank, epository, etc.	CITY ▲  CITY ▲  pries: List all banks or other depositories in which aintains funds.	Telephone Number	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, FROS	CITY ▲  CITY ▲  pries: List all banks or other depositories in which aintains funds.	Telephone Number	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or m  ame of Bank, epository, etc.	CITY A  CITY A  Pries: List all banks or other depositories in which aintains funds.  T BANK  PO BOX 1600	Telephone Number	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or m  ame of Bank, epository, etc.	CITY ▲  CITY ▲  pries: List all banks or other depositories in which aintains funds.	Telephone Number	ZIP CODE A