**FEC** 

## STATEMENT OF

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**ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Phillips 66 PAC 601 Pennsylvania Avenue, NW ADDRESS (number and street) Ste 1150N (Check if address is changed) Washington 20004-3650 DC CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS ed.thayer@p66.com (Check if address is changed) Optional Second E-Mail Address outsourcing@aristotle.com COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 28 2021 C00513549 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. BROUSSARD, ALEX, JORDAN, , Type or Print Name of Treasurer BROUSSARD, ALEX, JORDAN, , [Electronically Filed] 02 2021 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. Office For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530 Only

Local 202-694-1100

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		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. (Complete the candidate information below.)					
Name Candi							
Candi Party	idate Affiliatio	Office Sought: House Senate President	State				
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.					
Name Candi							
Part	y Com	mittee:	(Dama avatia				
(d)		This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party				
Polit	ical A	ction Committee (PAC):					
(e)	×	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con-	nnected 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 party 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	raising Representative:					
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for to committees/organizations, at least one of which is an authorized committee of a federal candidate.	wo or more political				
(h)		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.	vo or more political				
	Comi	mittees Participating in Joint Fundraiser					
	1.	FEC ID number					
	2.	FEC ID number					
	3.	FEC ID number					
	4						

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Write or Type Committee Na		. age c
Phillips 66 PA		
<u> </u>	I Organization, Affiliated Committee, Joint Fundraising Representative, or Lea	adershin PAC Sponsor
	organization, Annuaca Committee, John Fundraising Representative, of Eco	Addiship i Ad Sponsoi
PHILLIPS 66	<u> </u>	
Mailing Address	2331 Citywest Blvd	
Mailing Address		
	Houston TX 770	042-2862
	CITY STATE	ZIP CODE
Relationship: X Connec	ted Organization Affiliated Committee Joint Fundraising Representative	Leadership PAC Sponsor
7. Custodian of Records: Id books and records.	dentify by name, address (phone number optional) and position of the person i	in possession of committee
, Thayer,	Edward, Miller, ,	
Full Name	,1224 Rutland St	
Mailing Address	1224 Rutiana St	
	Houston TX 770	008-6833
Title or Position	CITY STATE	ZIP CODE
Custodian of Records	Telephone number 832	4546
3. <b>Treasurer:</b> List the name a any designated agent (e.g.	and address (phone number optional) of the treasurer of the committee; and the committee and the co	ne name and address of
Full Name BROUS	SARD, ALEX, JORDAN, ,	
of Treasurer		
Mailing Address	411 GLACIER DRIVE	
	MARTINEZ CA 945	553
Tu 5	CITY STATE	ZIP CODE
Title or Position Treasurer		_1 1_1
	Telephone number	

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Full Name of Designated Agent Thayer	, Edward, Miller, ,					
Mailing Address	1224 Rutland St					
	Houston	TX 7	77008-6833 ZIP CODE			
Title or Position Custodian of Records	Telephone	e number 832	_   _   _   _   _   _   4546			
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.  Arvest Bank						
Mailing Address	P.O. Box 999					
	Bartlesville	OK 7	74005			
	CITY	STATE	ZIP CODE			
Name of Bank, Depositor	ry, etc.					
Mailing Address						
	I					

## : 97 'A = G7 9 @ G B9 C I G'H9 LH'F9 @ 5 H98 'HC'5 'F9 DCF HZ G7 < 98 I @ 'CF' + H9 A = N5 H= CB

Form/Schedule: F1A Transaction ID:

This amendment to Form 1 reports a change in the Committee's treasurer.

Form/Schedule: Transaction ID: