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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 X COMMITTEE (in full) is changed) over the lines. Restoring Oklahoman Values PO Box 341027 ADDRESS (number and street) (Check if address is changed) Austin 78734 TX CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS compliance@rightsidecompliance.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 08 2022 C00753491 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. Hobbs, Cabell, , , Type or Print Name of Treasurer Hobbs, Cabell, , , [Electronically Filed] 03 08 2022 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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	orm 1 (Revised 02/2009)  COMMITTEE	Page <b>2</b>
	e 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. (Compinformation below.)	plete the candidate
Name of Candidate		
Candidate Party Affiliat	ion 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 Cor		_
(d)		Democratic, Republican, etc.) Party
Political A	Action Committee (PAC):	
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con-	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) <b>x</b>	This committee supports/opposes more than one Federal candidate, and is NOT a separate secommittee. (i.e., nonconnected committee)	gregated 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.)	
Joint Fund	draising Representative:	
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for tw committees/organizations, at least one of which is an authorized committee of a federal candidate.	o or more political
(h)	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.	o or more political
Com	nmittees 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		<u> </u>
Restoring Ok	klahoman Values	
	cted Organization, Affiliated Committee, Joint Fundraising Representative, or	Leadership PAC Sponsor
NONE		
Mailing Address		
	CITY STATE	ZIP CODE
Relationship: Con	nected Organization Affiliated Committee Joint Fundraising Representative	e Leadership PAC Sponsor
Custodian of Records books and records.	s: Identify by name, address (phone number optional) and position of the pers	on in possession of committee
Hobb Full Name	bs, Cabell, , ,	
	PO Box 341027	
Mailing Address		
	Austin	78734
Title or Position	CITY STATE	ZIP CODE
Treasurer		
. <b>Treasurer:</b> List the nam	ne and address (phone number optional) of the treasurer of the committee; and e.g., assistant treasurer).	nd the name and address of
	os, Cabell, , ,	
of Treasurer	PO Box 341027	
Mailing Address		
	L Austin	170724
	Austin TX CITY STATE	ZIP CODE
Title or Position , Treasurer	CITY STATE	ZIF CODE
	Telephone number	

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Full Name of Designated		
Agent		
Mailing Address		
Title or Position	CITY STATE	ZIP CODE
	Telephone number	
	r Depositories: List all banks or other depositories in which the committee deposits funds, hold	ds accounts, rents
	poxes or maintains funds.	
	poxes or maintains funds.	I
Name of Bank,	Depository, etc.  Truist Bank  1445 New York Ave. NW	<u> </u>
	Depository, etc.  Truist Bank  1445 New York Ave. NW	
Name of Bank,	Depository, etc.  Truist Bank  1445 New York Ave. NW	
Name of Bank,	Depository, etc.  Truist Bank  1445 New York Ave. NW  4th Floor	ZIP CODE
Name of Bank,	Depository, etc.  Truist Bank  1445 New York Ave. NW  4th Floor  Washington  CITY  STATE	ZIP CODE
Name of Bank,  Mailing Address	Depository, etc.  Truist Bank  1445 New York Ave. NW  4th Floor  Washington  CITY  STATE	ZIP CODE
Name of Bank,  Mailing Address	Depository, etc.  Truist Bank  1445 New York Ave. NW  4th Floor  Washington  CITY  STATE	ZIP CODE
Name of Bank,  Mailing Address	Depository, etc.  Truist Bank  1445 New York Ave. NW  Washington  CITY  STATE  Depository, etc.	ZIP CODE
Name of Bank,  Mailing Address  Name of Bank,	Depository, etc.  Truist Bank  1445 New York Ave. NW  Washington  CITY  STATE  Depository, etc.	ZIP CODE
Name of Bank,  Mailing Address  Name of Bank,	Depository, etc.  Truist Bank  1445 New York Ave. NW  Washington  CITY  STATE  Depository, etc.	ZIP CODE

## : 97 A = G7 9 @ G5 B9 CI G H9 L H F 9 @ 5 H9 8 HC 5 F 9 DC F H Z G7 < 98 I @ C F → H9 A = N 5 H = C B

Form/Schedule: F1A Transaction ID:

This committee intends to make independent expenditures, and consistent with the U.S. Court of Appeals for the District of Columbia Circuit decision in SpeechNow v. FEC, it therefore intends to raise funds in unlimited amounts. This committee will not use those funds to make contributions, whether direct, in-kind, or via coordinated communications, to federal candidates or committees.

Form/Schedule: Transaction ID: