Only

## STATEMENT OF

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**FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Ted Cruz for Senate PO BOX 25376 ADDRESS (number and street) (Check if address is changed) HOUSTON 77265 CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS compliance@complianceconsultingva.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) www.tedcruz.org (Check if address is changed) DATE 24 2022 C00492785 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. Knippa, Bradley, Scott,, Type or Print Name of Treasurer Knippa, Bradley, Scott, , [Electronically Filed] 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 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

E	EC Form 1 (Revised 03/2022)	Page 2
	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.)	candidate
	Name of Cruz, Rafael, Edward Ted, ,	
	Candidate Party Affiliation REP Office Sought: House  Senate President	State TX  District 00
	(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.	
	Name of Candidate	
	Party Committee:	
	(d) This committee is a (National, State or subordinate) committee of the Republican, e	etc.) Party
	Political Action Committee (PAC):	
	(e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected	organization is a:
	Corporation Corporation w/o Capital Stock Labor Org	ganization
	Membership Organization Trade Association Cooperation	ve
	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 committee. (i.e., nonconnected committee)	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 (Hybrid 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 or committees/organizations, at least one of which is an authorized committee of a federal candidate.	more political
	(j) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or committees/organizations, none of which is an authorized committee of a federal candidate.	more political
	Committees Participating in Joint Fundraiser	
	1. C	

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W	/rite or Type Committe		
	Ted Cruz f	for Senate	
6.	<del>-</del>	ected Organization, Affiliated Committee, Joint Fundraising Representative, o	or Leadership PAC Sponsor
	Ted Cruz Victo	ory Committee	I
	Mailing Address	PO BOX 25376	
	Mailing Address		
		HOUSTON	77265
		CITY ▲ STATE ▲	ZIP CODE ▲
	Relationship: Co	onnected Organization Affiliated Organization X Joint Fundraising Representat	ive Leadership PAC Sponso
	rielationship.	Alimated Organization	Leadership 1 AO Oponso
7.	Custodian of Record	ds: Identify by name, address (phone number optional) and position of the person	in possession of committee
	books and records.		
	Н	obbs, Cabell, , ,	
	Full Name		
	Mailing Address	PO BOX 25376	
	Mailing / Idaiooo		
		HOUSTON	77265
		CITY ▲ STATE ▲	ZIP CODE ▲
	Title or Position ▼	3.7.12	211 0082 -
	Assistant Treasurer		12     480     0006
	7.00.00.01.	Telephone number	
3.		name and address (phone number optional) of the treasurer of the committee; nt (e.g., assistant treasurer).	and the name and address of
	I dii I tainio	nippa, Bradley, Scott, ,	
	of Treasurer		
	Mailing Address	PO BOX 25376	
		HOUSTON   TX	77265
		CITY ▲ STATE ▲	ZIP CODE ▲
	Title or Position ▼		
	Treasurer		12 - 236 - 2284

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Full Nam Designate Agent		abell, , ,			
Mailing A	ddress	PO BOX 25376			
		HOUSTON		TX	77265
Title or P	osition ▼	CITY	<b>A</b>	STATE ▲	ZIP CODE ▲
	t Treasurer		Telepho	one number	
	Other Depositor posit boxes or ma	ies: List all banks or other dep intains funds.	ositories in which the c	committee deposits fur	nds, holds accounts, rents
Name of	Bank, Depository,	etc.			
	Plains	Capital Bank			
Mailing A	ddress	919 Congress Ave			
		Austin		TX	78701
		CITY	<b>A</b>	STATE ▲	ZIP CODE ▲
Name of	Bank, Depository,	etc.			
	Truist	Bank			
Mailing A	ddress	2200 Wilson Blvd			
		Suite 100			
		Arlington		VA	22201
		CITY	<b>A</b>	STATE ▲	ZIP CODE ▲

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

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h). <b>Joint Fundraisi</b> i	1	FEC ID number	C
1.			
2.		FEC ID number	С
3.		FEC ID number	C
4		FEC ID number	C
ame of Any Connected	Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spon
CRUZ 25 FOR 22	2 VICTORY FUND		
Mailing Address	P.O. BOX 341027		
	AUSTIN		78734
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte	d Organization Affiliated Committee	Fundraising Representa	ative Leadership PAC S
esignated Agent: Identif	y by name, address (phone number – optional)	Fundraising Representa	Leadership PAC 5
		Fundraising Representa	Leadership PAC 5
esignated Agent: Identif		Fundraising Representa	Leadership PAC 5
esignated Agent: Identif		Fundraising Representa	Leadership PAC 5
esignated Agent: Identif		Fundraising Representa	Leadership PAC 5
esignated Agent: Identii  Full Name  Mailing Address	y by name, address (phone number – optional)	STATE A	ZIP CODE A
esignated Agent: Identif	by by name, address (phone number – optional)  CITY		
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or m	y by name, address (phone number – optional)  CITY   CITY   Te  pries: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A
Full Name Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or m  ame of Bank, Chain	y by name, address (phone number – optional)  CITY   CITY   Te	STATE A	ZIP CODE A
Full Name Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or m  ame of Bank, Chain	y by name, address (phone number – optional)  CITY   CITY   Te  pries: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mane of Bank, epository, etc.	y by name, address (phone number – optional)  CITY   CITY   Te  pries: List all banks or other depositories in which aintains funds.  Bridge Bank	STATE A	ZIP CODE A
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mane of Bank, epository, etc.	y by name, address (phone number – optional)  CITY   CITY   Te  pries: List all banks or other depositories in which aintains funds.  Bridge Bank	STATE A	ZIP CODE A