FEC FORM 1	STATEME ORGANIZ		Office	PAGE 1 / 4
1. NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5	
Mark Neese of				
ADDRESS (number and street)	P.O. BOX 1256			
(Check if address is changed)				
с, ,	Bowie		TX 76230	
	CITY A		STATE 🔺	ZIP CODE▲
COMMITTEE'S E-MAIL ADD				
(Check if address is changed)	campaign@markneese	eforcongress.com		
	Optional Second E-Mail Ad brentshaw@utexas.	dress edu		1
COMMITTEE'S WEB PAGE A (Check if address is changed)	ADDRESS (URL) www.markneeseforcongress.	com 		
2. DATE 12 /	17 / Y Y Y Y 2019			
3. FEC IDENTIFICATION	NUMBER ► C C	00731364		
4. IS THIS STATEMENT	× NEW (N) OR	AMENDED (A)		
I certify that I have examined	I this Statement and to the best	of my knowledge and belief it	is true, correct and co	omplete.
Type or Print Name of Treasu	Jrer Neese, Lois, , ,			
Signature of Treasurer	rese, Lois, , ,	[Electronically Filed]	Date 12	17 / Y Y Y Y 2019
NOTE: Submission of false, err	oneous, or incomplete information ANY CHANGE IN INFORMAT	may subject the person signing t ION SHOULD BE REPORTED W		nalties of 2 U.S.C. §437g.
Office Use Only		For further information c Federal Election Commissi Toll Free 800-424-9530 Local 202-694-1100	on F	EC FORM 1 Revised 06/2012)

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FE	EC Foi	rm 1 (Revised 02/2009)	Page 2
		OMMITTEE	
Cand	lidate	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. (Comp information below.)	plete the candidate
Name Candic		Neese, Mark, Bradley, ,	
Candic Party /		on REP Office Sought: K House Senate President	State TX District 13
(C)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name Candic			
Party	/ Com	mittee:	
(d)			Democratic, Republican, etc.) Party.
Politi	cal A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization on line 6.)	nected organization is a:
		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 second committee. (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	raising 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	mittees Participating in Joint Fundraiser	
	1.	FEC ID number	
	2.	FEC ID number	
	3.	FEC ID number	
	4.	FEC ID number	

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Write or Type Committee Name

Mark Neese of Congress

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

N						
	Mailing Address					
			CITY		STATE	ZIP CODE
	Relationship: Connecte	d Organization	iliated Committee	Joint Fundraising	Representative	Leadership PAC Sponsor
7.	Custodian of Records: Ide books and records.	ntify by name, address	s (phone number o	ptional) and position	on of the person in	n possession of committee
	Neese, Lo	xis, , ,				
	Mailing Address	P.O. BOX 1256				
		1				

	Bowie		76230
Title or Position	CITY	STATE	ZIP CODE
Committe Treasurer		Telephone number	D = 872 - 7464

8. **Treasurer:** List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name Neese, Lo	ois, , ,
Mailing Address	P.O. BOX 1256
	Bowie
	CITY STATE ZIP CODE
Title or Position Committe Treasurer	Telephone number 940 872 7464

Full Name of Designated Agent	Shaw, Michael, Brent, ,	
Mailing Address	702 Preston St	
	Bowie TX 76230	
	CITY STATE ZIP CODE	
Title or Position Designated Age	t Telephone number 940 531 22	190

9. 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.

Leger	d Bank	
Mailing Address	101 W. Tarrant St.	
	Bowie	TX 76230
	CITY	STATE ZIP CODE
Name of Bank, Depository,	etc.	
Mailing Address		
	CITY	STATE ZIP CODE