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STATEMENT OF **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. Joe Chow for U.S. Congress 4848 Belt Line Road ADDRESS (number and street) (Check if address is changed) **Dallas** 75254 TX CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS jchow@joechowcampaign.com (Check if address is changed) Optional Second E-Mail Address ijoecchow@gmail.com COMMITTEE'S WEB PAGE ADDRESS (URL) www.joechowcampaign.com (Check if address is changed) DATE 2012 C00499749 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. Chi Chi Lin Type or Print Name of Treasurer Chi Chi Lin [Electronically Filed] 10 15 2012 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

FEC F	orm 1 (Revised 02/2009)	Page 2
	COMMITTEE e Committee:	
(a) X	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.)	lete the candidate
Name of Candidate	Mr. Joe Chow	
Candidate Party Affilia	tion Rep Office Sought: X House Senate President	State TX District 06
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate		
Party Co		Democratic,
(d)	· · · ·	Republican, etc.) Party.
Political A	Action Committee (PAC):	
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its conr	nected organization is a:
	Corporation Wo 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 seg 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 Fun	draising Representative:	
(g)	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.	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
Cor	nmittees Participating in Joint Fundraiser	
1.	FEC ID number	
2.	FEC ID number	
3.	FEC ID number	
4		

FEC Form 1 (Revised C		Page 3
Write or Type Committee Name		
Joe Chow for U		
-	rganization, Affiliated Committee, Joint Fundraising Representative, or Leadership	PAC Sponsor
NONE		
Mailing Address		
Ç		
		I_I
	CITY STATE ZIP	CODE
Delationship. Connected	Organization Affiliated Committee Joint Fundraising Representative Leader	ship PAC Sponsor
Relationship: Connected	Organization Anniated Committee Joint Fundraising Representative Leader	silip FAC Spolisoi
7. Custodian of Records: Iden	tify by name, address (phone number optional) and position of the person in posses	sion of committee
books and records.	thy by fiame, address (prione humber optional) and position of the person in posses	sion of committee
1		
Full Name		
Mailing Address		
Title or Position	CITY STATE ZIP	CODE
I	I I I-I	1_1
	Telephone number	
8. Treasurer: List the name and	l address (phone number optional) of the treasurer of the committee; and the name	and address of
any designated agent (e.g., a	ssistant treasurer).	
Full Name Chi Chi Lin of Treasurer		
Mailing Address	4848 Beltline Rd.	
	Dallas TX 75254	
Title or Position	CITY STATE ZIP	CODE
Treasurer		

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Full Name of		
Designated Agent		
Mailing Address		
	CITY STATE	ZIP CODE
Title or Position		
	Telephone number	
. Banks or Other	r Depositories: List all banks or other depositories in which the committee deposits funds, he	olds accounts, rents
safety deposit b	ooxes or maintains funds.	
	ooxes or maintains funds.	
safety deposit b	ooxes or maintains funds.	
safety deposit b Name of Bank,	Depository, etc. Town North Bank 14455 LBJ Freeway	
safety deposit b	Depository, etc. Town North Bank 14455 LBJ Freeway	
safety deposit b Name of Bank,	Depository, etc. Town North Bank 14455 LBJ Freeway	
safety deposit b Name of Bank,	Depository, etc. Town North Bank 4455 LBJ Freeway Dallas TX 75244	1
safety deposit b Name of Bank,	Depository, etc. Town North Bank 4455 LBJ Freeway	
safety deposit b Name of Bank,	Depository, etc. Town North Bank 4455 LBJ Freeway Dallas TX 75244 CITY STATE	1
safety deposit b Name of Bank, Mailing Address	Depository, etc. Town North Bank 4455 LBJ Freeway Dallas TX 75244 CITY STATE	1
safety deposit b Name of Bank, Mailing Address	Depository, etc. Town North Bank 4455 LBJ Freeway Dallas TX 75244 CITY STATE	1
safety deposit b Name of Bank, Mailing Address	Depository, etc. Town North Bank 4455 LBJ Freeway Dallas CITY STATE Depository, etc.	1
safety deposit b Name of Bank, Mailing Address Name of Bank,	Depository, etc. Town North Bank 4455 LBJ Freeway Dallas CITY STATE Depository, etc.	1
safety deposit b Name of Bank, Mailing Address Name of Bank,	Depository, etc. Town North Bank 4455 LBJ Freeway Dallas CITY STATE Depository, etc.	1