PAGE 1/4

STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 COMMITTEE (in full) over the lines. is changed) Adams & Adams (for J. Lynn Adams) 5100 Sweetbriar Lane ADDRESS (number and street) Apt. #608 (Check if address is changed) Tyler 75703 TX CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS jack_adams@outlook.com (Check if address is changed) Optional Second E-Mail Address ilynnadams@hotmail.com COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 01 2015 C00582106 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. Jack Lynn Adams Type or Print Name of Treasurer Jack Lynn Adams [Electronically Filed] 09 02 2015 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 Form 1	(Revised 02/2009)	Page 2
TYPE OF COMM		
Candidate Cor	mmittee: s committee is a principal campaign committee. (Complete the candidate information below.))
(b) This	s committee is an authorized committee, and is NOT a principal campaign committee. (Com	
Name of Candidate	Jack Lynn Adams	
Candidate Party Affiliation	REP Office Sought: House Senate X President	State
(c) This	s committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate		
Party Committ		(Domogratio
(d) This	(National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.
Political Action	n Committee (PAC):	
(e) This	s committee is a separate segregated fund. (Identify connected organization on line 6.) Its cor	nnected 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.	
	s committee supports/opposes more than one Federal candidate, and is NOT a separate semittee. (i.e., nonconnected committee)	egregated 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 Fundrais	ing Representative:	
(0)	committee collects contributions, pays fundraising expenses and disburses net proceeds for twimittees/organizations, at least one of which is an authorized committee of a federal candidate.	vo or more political
	committee collects contributions, pays fundraising expenses and disburses net proceeds for tw mittees/organizations, none of which is an authorized committee of a federal candidate.	vo or more political
Committe	es Participating in Joint Fundraiser	
1.	FEC ID number	
2.	FEC ID number	
3.		
4		

FEC Form 1 (Revised	1 02/2009)	Page 3
Write or Type Committee Nar		<u> </u>
Adams & Adar	ns (for J. Lynn Adams)	
	Organization, Affiliated Committee, Joint Fundraising Representa	ative, or Leadership PAC Sponsor
NONE		
Mailing Address		
	CITY STAT	TE ZIP CODE
Relationship: Connect	eed Organization Affiliated Committee Joint Fundraising Representation	sentative Leadership PAC Sponso
. Custodian of Records: Id books and records.	entify by name, address (phone number optional) and position of t	the person in possession of committee
Jack Lyr	nn Adams	
Mailing Address	5100 Sweetbriar Lane	
	Apt. # 608	
	Tyler TX	75703
Title or Position	CITY STATE	E ZIP CODE
Treasurer	Telephone number	
3. Treasurer: List the name a any designated agent (e.g.	and address (phone number optional) of the treasurer of the comm, assistant treasurer).	nittee; and the name and address of
Full Name Jack Lyn	n Adams	
Mailing Address	5100 Sweetbriar Lane	
-	Apt. # 608	
	Tyler	75703
	CITY STATE	ZIP CODE
Title or Position Treasurer	Telephone number	

FEC Forr	n 1 (Revised 02/2009)	Page 4
Full Name of Designated		, , , , , , , I
Agent Mailing Address		
Mailing Address		
	CITY STATE ZIE	P CODE
Title or Position		
	Telephone number	
Name of Bank, I	SouthSide Bank, N.A. 1201 S. Beckham Ave. Tyler TX 75701	
	CITY STATE ZI	P CODE
Name of Bank, I	Depository, etc.	
Mailing Address		
	CITY STATE ZI	P CODE