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FEC FORM 1	STATEMEN ORGANIZ		PAGE 1 / 4
1. NAME OF	(Check if name	Example: If typing, type	Office Use Only
COMMITTEE (in full)	is changed)	over the lines.	
	PO Box 7004		
ADDRESS (number and street)			
(Check if address is changed)			
	Dallas │		TX 75209 STATE ▲ ZIP CODE ▲
COMMITTEE'S E-MAIL ADDRE	SS		
(Check if address is changed)	trisha@davisadvocates	s.com	
	Optional Second E-Mail Add	dress	
COMMITTEE'S WEB PAGE AD (Check if address is changed)			
2. DATE 01 / 1	1 / Y Y Y Y 2016		
3. FEC IDENTIFICATION N	UMBER ► C ca	00600726	
4. IS THIS STATEMENT	NEW (N) OR	AMENDED (A)	
I certify that I have examined t	nis Statement and to the best	of my knowledge and belief it	is true, correct and complete.
Type or Print Name of Treasure	r Allison Levy		
Signature of Treasurer	m Levy	[Electronically Filed]	Date 01 / 01 / 2016
NOTE: Submission of false, erron		may subject the person signing to ON SHOULD BE REPORTED W	his Statement to the penalties of 2 U.S.C. §437g. ITHIN 10 DAYS.
Office Use Only		For further information cc Federal Election Commissic Toll Free 800-424-9530 Local 202-694-1100	

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FEC Forr	n 1 (Revised 02/2009)	Page 2
TYPE OF CC	DMMITTEE	
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. (Comp information below.)	lete the candidate
Name of Candidate		
Candidate Party Affiliation	n Office Sought: House Senate President	State
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate		
Party Com	mittee:	
(d)		Democratic, Republican, etc.) Part
Political Ac	tion Committee (PAC):	
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its conr	ected 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)	This committee supports/opposes more than one Federal candidate, and is NOT a separate seg committee. (i.e., nonconnected committee)	pregated fund or part
	In addition, this committee is a Lobbyist/Registrant PAC.	
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Joint Fundr	aising Representative:	
	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
	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
Comm	nittees Participating in Joint Fundraiser	
1.	FEC ID number	
2.	FEC ID number	
3.	FEC ID number	
4.	FEC ID number	

FEC Form 1 (Revised 02/2009)

Page 3

Write or Type Committee Name

AdvoCare PAC

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

Mailing Address									
	CITY	STATE	ZIP CODE						
Relationship: Connected	d Organization Affiliated Committee Joint Fo	undraising Representative	Leadership PAC Sponsor						
. Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of committee books and records.									
Trisha Windham									

Full Name	
Mailing Address	PO Box 7004
	Dallas TX 75209
Title or Position	CITY STATE ZIP CODE
Custodian of Records	Telephone number 214 - 352 - 0900

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 of Treasurer	Allison Levy		
Mailing Address	PO Box 7004		
	Dallas	TX	75209
	CITY	STATE	ZIP CODE
Title or Position Treasurer		Telephone number	

FEC Form 1 (Revised 02/2009)

Full Name of Designated Agent	Robert White	e 																								
Mailing Address	l	PO Box 70	04														1									
	l																									
	Į	Dallas												_т)	X I			75	209							
					С	ITY							S	STA	ΓE					Z	IP	COI	DE			
Title or Position	urer								Tele	epho	one	nu	mb	er			214	Ļ	- [3	52			09	00	

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.

Com	erica Bank	
Mailing Address	1717 Main Street	
	Dallas	TX75201
	CITY	STATE ZIP CODE
Name of Bank, Depositor	ry, etc.	
Mailing Address		
	CITY	STATE ZIP CODE