

FEC
FORM 1STATEMENT OF
ORGANIZATION

Office Use Only

1. NAME OF
COMMITTEE (in full)(Check if name
is changed)Example: If typing, type
over the lines.

12FE4M5

A STRONGER TEXAS FUND

ADDRESS (number and street)

PO BOX 37384

 (Check if address
is changed)

HOUSTON

TX

77237

CITY ▲

STATE ▲

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

 (Check if address
is changed)

ASTRONGERTEXASFUND@GMAIL.COM

Optional Second E-Mail Address

COMMITTEE'S WEB PAGE ADDRESS (URL)

 (Check if address
is changed)

2. DATE

04

04

2018

3. FEC IDENTIFICATION NUMBER ►

C

C00675397

4. 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.

Type or Print Name of Treasurer BOX, ANGELA, , ,Signature of Treasurer BOX, ANGELA, , ,

[Electronically Filed]

Date

06

03

2021

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
Use
OnlyFor further information contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-694-1100FEC FORM 1
(Revised 06/2012)

5. 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 candidate information below.)

Name of
Candidate

1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36 37 38 39 40 41 42 43 44 45 46 47 48 49 50 51 52 53 54 55 56 57 58 59 60 61 62 63 64 65 66 67 68 69 70 71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 88 89 90 91 92 93 94 95 96 97 98 99 100

Candidate Party Affiliation

1

**Office
Sought:**

House

Senate

President

State

1

District

(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate

11. *What is the primary purpose of the following sentence?*

Party Committee:

(d) This committee is a (National, State or subordinate) committee of the (Democratic, Republican, 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 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 segregated fund or party committee. (i.e., nonconnected committee)

In addition, this committee is a Lobbyist/Registrant PAC.

In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)

Joint Fundraising Representative:

(g) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.

(h) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.

Committees Participating in Joint Fundraiser

1.	<input style="width: 150px; height: 20px; border: 1px solid black; border-radius: 5px; padding: 2px; margin-right: 10px;" type="text"/>	FEC ID number	<input style="width: 10px; height: 20px; border: 1px solid black; border-radius: 5px; padding: 2px; margin-right: 10px;" type="text"/> C <input style="width: 150px; height: 20px; border: 1px solid black; border-radius: 5px; padding: 2px;" type="text"/>
2.	<input style="width: 150px; height: 20px; border: 1px solid black; border-radius: 5px; padding: 2px; margin-right: 10px;" type="text"/>	FEC ID number	<input style="width: 10px; height: 20px; border: 1px solid black; border-radius: 5px; padding: 2px; margin-right: 10px;" type="text"/> C <input style="width: 150px; height: 20px; border: 1px solid black; border-radius: 5px; padding: 2px;" type="text"/>
3.	<input style="width: 150px; height: 20px; border: 1px solid black; border-radius: 5px; padding: 2px; margin-right: 10px;" type="text"/>	FEC ID number	<input style="width: 10px; height: 20px; border: 1px solid black; border-radius: 5px; padding: 2px; margin-right: 10px;" type="text"/> C <input style="width: 150px; height: 20px; border: 1px solid black; border-radius: 5px; padding: 2px;" type="text"/>
4.	<input style="width: 150px; height: 20px; border: 1px solid black; border-radius: 5px; padding: 2px; margin-right: 10px;" type="text"/>	FEC ID number	<input style="width: 10px; height: 20px; border: 1px solid black; border-radius: 5px; padding: 2px; margin-right: 10px;" type="text"/> C <input style="width: 150px; height: 20px; border: 1px solid black; border-radius: 5px; padding: 2px;" type="text"/>

Write or Type Committee Name

A STRONGER TEXAS FUND

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

NONE

Mailing Address

CITY					STATE		ZIP CODE		

CITY

STATE

ZIP CODE

Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor

7. **Custodian of Records:** Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Title or Position **CITY** **STATE** **ZIP CODE**

CITY

STATE

ZIP CODE

Telephone number **818-422-2938**

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	BOX, ANGELA, , ,
Mailing Address	PO BOX 37384 [] []
	HOUSTON [] CITY TX [] 77237 [] ZIP CODE

Title or Position _____ Telephone number _____ 818 _____ - _____ 422 _____ - _____ 2938 _____

Full Name of
Designated
Agent

Mailing Address

CITY

STATE

ZIP CODE

Title or Position

Telephone number

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.

BANK OF TEXAS

5320 BELLAIRE BLVD

Mailing Address

BELLAIRE

TX

77401

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

CITY

STATE

ZIP CODE