FEC FORM 1

STATEMENT OF ORGANIZATION

RECEIVED EC MAIL CENTER

2019 JUL 18 AM 8: 55

			Office Use Only
NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5
Al, Woolum4CongressTX12			
	<u> </u>		
ADDRESS (number and street)	729 Grapevine Hwy., St	e. 305	
(Check if address is changed)			
	Hurst		TX 76054
COMMITTEE'S E-MAIL ADDRE	SS		
(Check if address is changed)	alwoolum4congress@c	gmail _r com _{, 'j''',} , , , , ,	
	Optional Second E-Mail Add alwoolum69@gmail.co		<u> </u>
COMMITTEE'S WEB PAGE ADI	DRESS (URL)	general de la companya de la company	•
(Check if address is changed)	www.alwoolum4congre	essTX12.com	
bad is changed)		_	·
2. DATE 04 08	2019		
3. FEC IDENTIFICATION NU	JMBER ▶ C.000	701649	
4. IS THIS STATEMENT	NEW (N) OR	AMENDED (A)	
I certify that I have examined th	nis Statement and to the best	of my knowledge and belief it	t is true, correct and complete.
Type or Print Name of Treasure	Albert E. Woolum	Christi C	Saxe Rodgers
Signature of Treasurer	Chit My		Date 07 / 04 / 2019
NOTE: Submission of false, errone		may subject the person signing	this Statement to the penalties of 52 U.S.C. §30109 WITHIN 10 DAYS.
Office Use Only		For further information of Federal Election Commiss Toll Free 800-424-9530 Local 202-694-1100	EEL. ELIMINI

	FE	C Forr	n 1 (Revised 02/2009)	Page 2
5.			DMMITTEE Committee:	
		×	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. (Corinformation below.)	mplete the candidate
	Name o		Albert E. Woolum	
	Candida Party A		Democr Office Sought: House Senate President	State TX District 12
	(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
	Name o Candida			
	Party	Com	mittee:	
	(d)		This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.
	Politic	al Ac	etion Committee (PAC):	
	(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its co	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.	•
	(f)		This committee supports/opposes more than one Federal candidate, and is NOT a separate scommittee. (i.e., nonconnected committee)	segregated 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 F	Fundr	raising 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.
	Com	nmittees Participating in Joint Fundraiser

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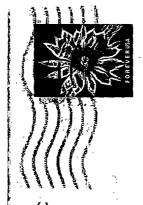
. FEC ID number C	·.		•	
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Write or Type Committee Nar	ne				
. Name of Any Connected	Organization, Affiliated	Committee, Joint F	Fundraising Rep	resentative, o	or Leadership PAC Sponsor
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Mailing Address					
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	1		1 1 1 1	1 , 1	1
	<u> </u>	CITY		STATE	ZIP CODE
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Relationship: Connect	ed Organization Affiliat	tea Committee	Joint Fundraising	nepresentati	Leadership PAC Spon
					
Custodian of Records: Id books and records.	entify by name, address (p	ohone number op	otional) and posit	ion of the per	rson in possession of committ
Full Name		1 1 1 1 1 1			
Full Name					
		CITY		STATE	ZIP CODE
Mailing Address		CITY	Telephone nur		ZIP CODE
Mailing Address		CITY	Telephone nur		
Mailing Address Title or Position	nd address (phone numbe		·	mber	
Title or Position Treasurer: List the name a any designated agent (e.g.	nd address (phone numbe	er optional) of the	·	mber	
Title or Position Treasurer: List the name a any designated agent (e.g.	nd address (phone number assistant treasurer).	er optional) of the	e treasurer of the	mber	
Title or Position Treasurer: List the name a any designated agent (e.g. Full Name of Treasurer	nd address (phone number assistant treasurer).	er optional) of the	e treasurer of the	mber	
Title or Position Treasurer: List the name a any designated agent (e.g. Full Name of Treasurer	nd address (phone number assistant treasurer).	er optional) of the	e treasurer of the	mber	
Title or Position Treasurer: List the name a any designated agent (e.g. Full Name of Treasurer	nd address (phone number assistant treasurer). 1511 Garye	er optional) of the	e treasurer of the	mber	

2019

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NORTH TEXAS TX PADO 12 7.11 2015 PMS.1 DALLAS TX 750



Federal Elections Commission 1050 First Street NE 20463 Washington, DC

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ENVELOPE REPLACEM		nission INCOMING DOCUMENTS to indicate how it was received.
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	Postmarked	Date of Receipt
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USPS Priority Mail Express	,	Postmarked
Postmark Illegible		
No Postmark	. *	
Overnight Delivery Service	(Specify):	Shipping Date
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Received from House Reco	ords & Registration	Date of Receipt Office
Received from Senate Publ	lic Records Office	Date of Receipt
Received from Electronic F	iling Office	Date of Receipt
Other (Specify):		Date of Receipt or Postmarked
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and and a second		7-18-19
PREPAR#R (3/2015)		DATE PREPARED