**FEC** 

## STATEMENT OF

PAGE 1 / 4

**ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Moser for Congress 2726 Bissonnett St. ADDRESS (number and street) Ste 240-517 (Check if address is changed) Houston 77005 TX CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS mbrengarth@mbacg.com (Check if address is changed) Optional Second E-Mail Address Isnyder@mbacg.com COMMITTEE'S WEB PAGE ADDRESS (URL) www.moserforcongress.com (Check if address is changed) DATE 2017 C00638726 FEC IDENTIFICATION NUMBER > 3. X OR IS THIS STATEMENT NEW (N) 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. Cohen, Meryl, , , Type or Print Name of Treasurer Cohen, Meryl, , , [Electronically Filed] 06 2017 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

	C. Farm 1 (Parison 00/0000)	Dogg 2
	C Form 1 (Revised 02/2009)  OF COMMITTEE	Page 2
	idate 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. (Corinformation below.)	mplete the candidate
Name o	INUSCI, Laura,	1   1   1   1
Candida Party A	ate Office Sought: X House Senate President	State TX District 07
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name o Candida		
Party	Committee:	(D
(d)	This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.
Politic	cal Action 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 s committee. (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	Fundraising Representative:	
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for 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 t committees/organizations, none of which is an authorized committee of a federal candidate.	
	Committees Participating in Joint Fundraiser	
	1.	
	2. FEC ID number	
	3.	
	4.	

FEC Form 1 (Revised 0	2/2009)	Page <b>3</b>
Write or Type Committee Name	· · · · · · ·	9
Moser for Cong	ress	
	rganization, Affiliated Committee, Joint Fundraising Representative, or Leader	ship PAC Sponsor
NONE		
Mailing Address		
	CITY STATE	ZIP CODE
Relationship: Connected	Organization Affiliated Committee Joint Fundraising Representative Lo	eadership PAC Sponso
<ol> <li>Custodian of Records: Identification books and records.</li> </ol>	ify by name, address (phone number optional) and position of the person in po	ossession of committee
Mele, Steve	en, , ,	
Full Name	611 Pennsylvania Ave SE Unit 143	
Mailing Address		
	Washington DC 20003	
Title or Position	CITY STATE	ZIP CODE
Assistant Treasurer	Telephone number	
Treasurer: List the name and any designated agent (e.g., a	address (phone number optional) of the treasurer of the committee; and the n ssistant treasurer).	ame and address of
Full Name Cohen, Men of Treasurer	yl, , ,	
Mailing Address	2726 Bissonnet St.	
	Ste 240-517	
	Houston TX 77005 CITY STATE	ZIP CODE
Title or Position , Treasurer	CITY STATE	ZIP CODE

	<b>orm 1</b> (Revised 02/2009)	
Full Name of Designated Agent	Mele, Steven, , ,	
Mailing Address	611 Pennsylvania Ave SE Unit 143	
	Washington DC 20003  CITY STATE ZIF	P CODE
Title or Position Assistant Treas		
Banks or Othe	er Depositories: List all banks or other depositories in which the committee deposits funds, holds a	accounts, rents
safety deposit b	boxes or maintains funds.	
safety deposit b	boxes or maintains funds. , Depository, etc.	
safety deposit b		1 1 1 1 1 1
safety deposit b	, Depository, etc.  Frost Bank ,5925 Kirby Dr	
safety deposit b Name of Bank,	, Depository, etc.  Frost Bank ,5925 Kirby Dr	
safety deposit b Name of Bank,	, Depository, etc.  Frost Bank ,5925 Kirby Dr	
safety deposit b Name of Bank,	Frost Bank  5925 Kirby Dr  Houston  TX  77005	P CODE
safety deposit by Name of Bank,  Mailing Address	Frost Bank  5925 Kirby Dr  Houston  TX  77005	P CODE
safety deposit by Name of Bank,  Mailing Address	Frost Bank  5925 Kirby Dr  Houston  TX  777005  CITY  STATE  ZI	P CODE
safety deposit by Name of Bank,  Mailing Address	Frost Bank  5925 Kirby Dr  Houston  CITY  STATE  ZI  Amalgamated Bank  1825 K St NW	P CODE
safety deposit by Name of Bank,  Mailing Address  Name of Bank,	Frost Bank  5925 Kirby Dr  Houston  CITY  STATE  ZI  Amalgamated Bank  1825 K St NW	P CODE
safety deposit by Name of Bank,  Mailing Address  Name of Bank,	Frost Bank  5925 Kirby Dr  Houston  CITY  STATE  ZI  Amalgamated Bank  1825 K St NW	P CODE