NOTE OF THE NOTE OF THE STATE O

FEC	
FORM	•

STATEMENT OF ORGANIZATION

FORM 1				Office Use Only
NAME OF COMMITTEE (in	n full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5
LiEar	1	Sarifr	esident	
	1111			
ADDRESS (number a	nd street)	12822	<u> </u>	·/
☐ ◀ (Check if a is changed				
· · · · · ·		Claritisu	6//e	STATE A ZIP CODE A
COMMITTEE'S E-MA	AIL ADDRESS	•	•	•
(Check if a is changed	address d) [earl for p	resident	a outlook com
•	. (Optional Second E-Mail Ad	dress 16, Rhotima	eil com
COMMITTEE'S WEB	PAGE ADDR	ESS (URL)		
☐ 【 (Check if a is changed	address : [earlidion	ris for pr	esidentia Misi
	l			
2. DATE	, M / D, V 6	2072	•	
3. FEC IDENTIFIC	CATION NUM	BER ▶ C		
4 IS THIS STATE	MENT	NEW (N) OR	AMENDED (A)	
I certify that I have e	examined this	Statement and to the best	of my knowledge and belief it	is true, correct and complete.
Type or Print Name	of Treasurer	Brend	a J. Do	. <i>U</i> i S
Signature of Treasure	er Br	ender Da		Date II 11 2022
NOTE: Submission of			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	EEL EUBNI I

FEC Form 1 ((Revised 03/2022)	Page 2
5. TYPE OF	COMMITTEE:	
Candidat	te Committee:	
(a) 1	This committee is a principal campaign committee. (Complete the candidate information below.)	
Throat C	This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the information below.)	he candidate
Name of Candidat		
Candidat Party Affi		State
(c) 🔲 1	This committee supports/opposes only one candidate, and is NOT an authorized committee.	District
· Name · Candid	1	
Party Co	ommittee: . (National State	:_
(d)`	This committee is a (National, State (Democrat or subordinate) committee of the Republicar	n, etc.) Party
Political .	Action Committee (PAC):	
(e) 1	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connect	ed organization is a:
. [Organization
Į.	Membership Organization [Trade Association Cooper In addition, this committee is a Lobbytst/Pregistrant PAC.	rative
	This committee supports opposes more than one Federal candidate, and is NOT a separate segregate committee. (i.e., nonconnected committee)	ed fund or party
	In addition, this committee is a copbyist/Registrant PAC	·
general .	In addition, this committee is a Leagership FAC. (identify sponsor on line 6.)	
(g)	This committee is an independent experiditure only political committee (Super PAC).	-
	In addition, this committee is a Lobbyist/Registrant PAC.	
(h)	This committee is a political committee with both contribution and non-contribution accounts (Hybrid F	PAC).
	In addition, this committee is a Lobbyist/Registrant PAC.	`
Joint Fur	ndraising 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.	or more political
	This committee collects contributions, pays undraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	or more political
Commi	ittees Participating in Joint Fundraiser	
1.	C	
2.		لسنسا

		·
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W	Vrite or Type Committee Name	•
6.	Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadersh	ip PAC Sponsor
	1	1
	N / N	
	Mailing Address	
٠.		
	CITY ▲ STATE ▲	ZIP CODE A
	Relationship: Connected Organization Affiliated Organization Joint Fundraising Representative	eadership PAC Sponso
_		<u>.</u>
7.	Custodian of Records: Identify by name, address (phone number optional) and position of the person in possessic books and records.	on of committee
	Full Name Eas Will Davis H	
	Mailing Address	
	1. Clar 13 utlle 1 1 100 1754	261-1
	the state of the s	71D 0005 A
	CITY ▲ STATE ▲ Title or Position ▼	ZIP CODE ▲
		00 1 1 00 00
	Condidate Telephone number	901-1902
. —		·
8 .	Treasurer: List the name and address (phone number optional) of the treasurer of the committee; and the name any designated agent (e.g., assistant treasurer).	ne and address of
		-
	Full Name of Treasurer Brenda, I Davis, I Davis, I I I I I I I I I I I I I I I I I I I	
		`
-	Mailing Address 12827 CR 2/66	
		1 1 1 1 1
	1. Charts 4/1/1e 11 1701 1754	1261
	•	71D 0005 4
	CITY ▲ STATE ▲ Title or Position ▼	ZIP CODE A
	1120.12	Con 10079
	Treasure 17 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	711-11/14

Full Name of Designated Agent Full Mailing Address	—	216/ 1111	
	Clar Ksusille		D5162-6-11
Title or Position ▼	CITY ▲	STATE ▲	ZIP CODE ▲
[Card Halaster		Telephone number	1301-13901-199021
Banks or Other Depositori safety deposit boxes or main	ies: List all banks or other depositories in ntains funds.	which the committee deposits	s funds, holds accounts, rents
Name of Bank, Depository,	etc.		·
LW	Pelils Fargo	Bank	
Mailing Address	12317 Rich	monderRic	
	Texacikana		175161-1111
	CITY ▲	STATE ▲	ZIP CODE ▲
Name of Bank, Depository,	etc.		
: <u>L</u>			
Mailing Address			
			<u> </u>
	CITY ▲	STATE ▲	ZIP CODE ▲

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FEC Form 1S (Revised 03/2022)

Optional Supplemental Information for Lines 5(i) or (j), 6, 8 and/or 9

Page ___ **of** ___

5(i) or (i)	Joint Fundraising	Participant:			
5(i) or (j). 1. 2. 3.	P. ·			FEC ID number FEC ID number FEC ID number	
6. Name	of Any Connected C	Organization, Affiliated	·····	FEC ID number	e, or Leadership PAC Sponsor
<u></u>	Mailing Address				
	Relationship. Connected	Organization Affili	CITY ▲ ated Committee	STATE ▲ nt Fundraising Representa	ZIP CODE ▲ tive Leadership PAC Sponsor
	nated Agent: Identify	by name, address (ph	one number - optional)		
Fu		by name, address (ph	one number – optional)		
Fu M a	ull Name •		CITY A	STATE A	ZIP CODE A
Fu Ma T ——— 9. Banks	ailing Address	es: List all banks or o	CITY A	Telephone Number	ZIP CODE A
Fu Ma	ailing Address FITLE OR POSITION S or Other Depositori	es: List all banks or o	CITY A	Telephone Number	

FEC MALLES ITER W2 NOV 21 AM 9: 10

Parks of the sident Parks 11/3 Clarks will & Jexas 75426

Federal Election Comm.
1050 First St. NE
Washington, DC 20463

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Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING The FEC added this page to the end of this filing to indicate	• 1
Hand Delivered	Date of Receipt
USPS First Class Mail Postmarked 1 15 22	Date of Receipt
USPS Registered/Certified	Postmarked (R/C)
! USPS Priority Mail	Postmarked ,
USPS Priority Mail Express	Postmarked
Postmark Illegible	
No Postmark	
Overnight Delivery Service (Specify):	Shipping Date
Next Busine	ess Day Delivery
Received from House Records & Registration Office	Date of Receipt
Received from Senate Public Records Office	Date of Receipt
Received from Electronic Filing Office	Date of Receipt
Other (Specify):	Receipt or Postmarked
PREPARÉR	11/21/22 DATE PREPARED

(3/2015)