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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Chris Ekstrom for Congress 4001 SW Pkwy ADDRESS (number and street) PO Box 4438 (Check if address is changed) Wichita Falls 76308 TX CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS liz@lizcurtisassociates.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) ekstromforcongress.com (Check if address is changed) DATE 30 2019 C00725044 FEC IDENTIFICATION NUMBER > 3. X 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. Curtis, Elizabeth, , , Type or Print Name of Treasurer Curtis, Elizabeth, , , [Electronically Filed] 10 30 2019 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

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	COMMITTEE			
	This committee is a principal compaign committee (Complete the condidate information below)			
(a) *	This committee is a principal campaign committee. (Complete the candidate information below.)			
(b) Name of	This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.) Ekstrom, Chris, , ,			
Candidate				
Candidate Party Affilia	DED Times	te TX		
	Dis	trict		
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.			
Name of Candidate				
Party Co	ommittee: (National, State (Democ	ratio		
(d)	· · ·	can, etc.) Party.		
Political	Action Committee (PAC):			
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization			
	Corporation Corporation w/o Capital Stock Labor	Organization		
	Membership Organization Trade Association Coope	erative		
	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 of 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 Fur	ndraising Representative:			
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or mocommittees/organizations, at least one of which is an authorized committee of a federal candidate.	re political		
(h)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or mo committees/organizations, none of which is an authorized committee of a federal candidate.	re political		
Co	ommittees Participating in Joint Fundraiser			
1.				
2.				
3.				
4				

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Write or Type Committee Nar	ne	-
Chris Ekstrom	for Congress	
	Organization, Affiliated Committee, Joint Fundraising Representative,	or Leadership PAC Sponsor
NONE		
	<u> </u>	
Mailing Address		
		710 0005
	CITY STATE	ZIP CODE
Relationship: Connect	ted Organization Affiliated Committee Joint Fundraising Representat	tive Leadership PAC Sponso
. Custodian of Records: Id books and records.	entify by name, address (phone number optional) and position of the pe	erson in possession of committee
Curtis, E	ilizabeth, , ,	
Mailing Address	5 Halifax Ct	
	Mariton	08053
Title or Position	CITY STATE	ZIP CODE
Treasurer	Telephone number	
B. Treasurer: List the name a any designated agent (e.g.	and address (phone number optional) of the treasurer of the committee; , assistant treasurer).	and the name and address of
Full Name Curtis, E	lizabeth, , ,	
Mailing Address	5 Halifax Ct	
	Mariton	08053
Title or Position	CITY STATE	ZIP CODE
Treasurer	Telephone number	

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Full Name of Designated Agent		_ 			
Mailing Address					
<u> </u>					
	CITY STATE	ZIP CODE			
Title or Position					
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. Wells Fargo					
Mailing Address	2301 Kell E Blvd				
	Wichita Falls TX 76308				
	CITY STATE	ZIP CODE			
Name of Bank, Depository, etc.					
Mailing Address					
		-			