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202-214-[illegible]

FEC FORM 1

STATEMENT OF ORGANIZATION

Office Use Only

1. NAME OF COMMITTEE (in full) (Check if name is changed) Example: If typing, type over the lines. 12 Points

LONGHORN PAC

ADDRESS (number and street) (Check if address is changed)

c/o BRANDON WINFREY
628 S. WASHINGTON STREET SUITE B-20
ALEXANDRIA VA 22314

CITY | STATE | ZIP CODE

COMMITTEE'S E-MAIL ADDRESS

BWINFREY@WINFREYANDCOMPANY.COM

COMMITTEE'S WEB PAGE ADDRESS (URL)

COMMITTEE'S FAX NUMBER

703-299-4605

2. DATE 07/18/2004

3. FEC IDENTIFICATION NUMBER ▶ C00402602

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 Tobin Smith / Brandon ~~Winfrey~~ Winfrey / Asst. Treasurer

Signature of Treasurer Asst X Brandon Winfrey Date 06 23 2004

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 15 DAYS.

Office Use Only					For further information contact Federal Election Commission Toll Free 800-424-9530 Local 202-694-1001	FEC FORM 1 (Revised 06/2003)

5. TYPE OF COMMITTEE (Check One)

(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

Candidate Party Affiliation

Office Sought: House Senate President State District

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

Name of Candidate

(d) This committee is a (National, State or subordinate) committee of the (Democratic Republican, etc.) Party.

(e) This committee is a separate segregated fund.

(f) X This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee.

6. Name of Any Connected Organization or Affiliated Committee

Mailing Address

CITY ▲ STATE ▲ ZIP CODE ▲

Relationship

Type of Connected Organization:

Corporation Corporation w/o Capital Stock Labor Organization

Membership Organization Trade Association Cooperative

FEC Form 5 (Revised 6/2004) Page 5

Note = Type Committee Name

7. Custodian of Records: clerk, by name, address (phone number – optional) and position of the person in possession of committee

Full Name: BRANDON WINFREY

Mailing Address: 228 S. WASHINGTON STREET, B-20
ALEXANDRIA VA 22314

Title or Position: ASST TREASURER
City:
State:
ZIP Code:
Telephone number: 703-299-4602

8. Treasurer: Use 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: TOBIN SMITH

Mailing Address: c/o BRANDON WINFREY AND COMPANY
228 S WASHINGTON STREET B-20
ALEXANDRIA VA 22314

Title or Position: TREASURER
City:
State:
ZIP Code:
Telephone number: 703-299-4602

Full Name of Designated Agent: BRANDON WINFREY

Mailing Address: 228 S. WASHINGTON STREET B-20
ALEXANDRIA VA 22314

Title or Position: ASST TREASURER
City:
State:
ZIP Code:
Telephone number: 703-299-4602

Signature

Signature

Date: Received / Other Specify

SUBTOTAL of Continuation Title Page (Attached) ▶

TOTAL This Period (not since the first number only) ▶

Previous

(No Schedule Form 5) Not Sold

2. 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.

FROST NATIONAL BANK

Mailing Address 110 AUSTIN HWY

SAN ANTONIO TX 78209-

CITY ▲ STATE ▲ ZIP CODE ▲

Name of Bank, Depository, etc.

Mailing Address

CITY ▲ STATE ▲ ZIP CODE ▲

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Federal Election Commission

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N/A PREPARER	N/A DATE PREPARED

(5/2004)