Image# 27940059214

FEC FORM 1

## STATEMENT OF ORGANIZATION

FORM 1		(See instruction			Office use only
1. NAME OF COMMITTEE (in		Check if name s changed)	Example: If typying, type over the lines	12FE4M5	
Stand Tall Am	erica PAC (STAPA	.C)			
ADDRESS	Post	Office Box 2382			
ADDRESS (number and	street)				
(Check if addr is changed)	ess Amari	llo		TX L	79105   2382
			CITY▲	STATE▲	ZIP CODE 📥
committee's e-ma					,
Sum @ louopu.e					<u> </u>
COMMITTEE'S WEB	PAGE ADDRESS (UR	L)			
			11111111		
COMMITTEE'S FAX N 8063735288	NUMBER				
2. DATE 0.1	/ D D / Y	<sup>°</sup> 2 0 0 7			
3. FEC IDENTIFICA	ATION NUMBER	C	C C00404418		
4. IS THIS STATEM	MENT X NEW	(N) OR	AMENDED (A)		
I certify that I have exam	ined this Statement and t	o the best of my know	vledge and belief it is true, correct a	and complete	
Type or Print Name of	Treasurer Sa	amuel B Lovela	dy		
Type of Time Hame of					
Signature of Treasurer	Electronically Filed	by Samuel B	Lovelady	Date 0 1	18 Y 2007
NOTE: Submission of fa			subject the person signing this Sta		
Office Use Only			For further information Federal Election Commi Toll Free 800-424-9530	ssion	FEC FORM 1 (Revised 02/2003)

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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 complete t	candidate
	Name of Candidate	
	Candidate Office Party Affiliation 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 Reference  (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 committee.	emocratic, epublican,etc.) Party.  und or party
6.	Name of Any Connected Organization or Affiliated Committee	
L		
	Mailing Address	
	CITY A STATE A	ZIP CODE
	Relationship	
	Type of Connected Organization:	
	Corporation Corporation w/o Capital Stock Labor Organizat	ion
	Membership Organization Trade Association Cooperative	

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Write or Type Committee Na	me						
Stand Tall America	PAC (STAPAC)						
	Custodian of Records: Identify by name, address, (phone number optional), and position of the person in possession of Committee books and records.						
Full Name	muel B Lovelady						
Mailing Address	g Address 801 S. Fillmore, Suite 420						
	Amarillo		79101				
Title or Position ♥	CITY A	STATE▲	ZIP CODE ▲				
		Telephone number					
name and address of  Full Name of Treasurer  Sa		er).					
Mailing Address	801 S. Fillmore, Suite 420						
	Amarillo		79101 _				
Title or Position ♥	CITY A	STATE	ZIP CODE A				
		Telephone number					
Full Name of Designated Agent Sy	lvia Nugent						
Mailing Address	660 Preston Forest Center	r					
	Box 520						
	Dallas		75230				
Title or Position ♥	CITY A	STATE A	ZIP CODE A				

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9.	Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts safety deposit boxes or maintains funds.  Name of Bank, Depository, etc.				
	Mailing Address	Amarillo National Bank PO Box 1		_	
		Amarillo TX 79105		_	

STATE ∠

 $\textbf{ZIP CODE} \quad \triangle$ 

CITY 🗷