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. 12FEAMS

LONGHORN PAC
HONORARY CHAIRMAN REP LAMAR SMITH

ADDRESS (number and street) c/o BRANDON WINFREY
☐ (Check if address is changed) 228 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 06 23 2004

3. FEC IDENTIFICATION NUMBER ▶ C

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 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 10 DAYS.

Office Use Only					For further information contact: Federal Election Commission Toll Free 800-424-9530 Local 202-694-1100	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 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) ☒ 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

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Write or Type Committee Name

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

Full Name: BRANDON WINFREY

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

ALEXANDRIA VA 22314-1

Title or Position ▼ | CITY ▲ | STATE ▲ | ZIP CODE ▲

ASST TREASURER | Telephone number: 703-299-4603

8. Treasurer: List 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: TODD N. SMITH

Mailing Address: c/o WINFREY AND COMPANY
228 S. WASHINGTON STREET, B-20
ALEXANDRIA VA 22314-1

Title or Position ▼ | CITY ▲ | STATE ▲ | ZIP CODE ▲

TREASURER | Telephone number: 703-299-4603

Full Name of Designated Agent: BRANDON WINFREY

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

ALEXANDRIA VA 22314-1

Title or Position ▼ | CITY ▲ | STATE ▲ | ZIP CODE ▲

ASST TREASURER | Telephone number: 703-299-4603

3. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safe 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 ▲

Federal Election Commission

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N/A PREPARER	N/A DATE PREPARED

(5/2004)