Image#	11990191592	
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FEC FORM 1	STATEMENT OF ORGANIZATION (See instructions)	Office use only
1. NAME OF COMMITTEE (in f	ull) (Check if name Example: If typying, type over the lines	12FE4M5
Brookshire Bro	others Managemeth Inc. PAC	
		<u> </u>
ADDRESS (number and s	treet)	
(Check if address is changed)		
	CITY	STATE ZIP CODE
COMMITTEE'S E-MAI (Check if address is changed)	ADDRESS (Please provide only one e-mail address)	
COMMITTEE'S WEB I (Check if address is changed)		
 2. DATE 0.2 3. FEC IDENTIFICATION 4. IS THIS STATEM 		
I certify that I have examine Type or Print Name of ⁻¹ Signature of Treasurer	Electronically Eiled by Mr. Robert F. Rich	d complete Date 02 / 03 / 2011
NOTE: Submission of fals	se, erroneous, or incomplete information may subject the person signing this State ANY CHANGE IN INFORMATION SHOULD BE REPORTED W	

Office Use Only		For further information contact: Federal Election Commission Toll Free 800-424-9530 Local 202-694-1100	FEC FORM 1 (Revised 02/2009)
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		FEC F	Form 1 (Revised 02/2009)		Page 2
5.	TYPE	OF CC	DMMITTEE (Check One)		
	Cand	lidate C	Committee:		
	(a)		This committee is a principal campaign committee. (Complete the candidate info	ormation below.)
	(b)		This committee is an authorized committee, and is NOT a principal campaign co information below.)	ommittee. (Com	plete the candidate
	Name Cand				
	Cand Party	lidate Affiliatio	on Office Sought: House Senate	Presid	State State District
	(c)		This committee supports/opposes only one candidate, and is NOT an authorized	committee.	
	Name Cand				
	Party	Comm	nittee:		
	(d)		This committee is a (National, State (or subordinate) committee of the		(Democratic, Republican,etc.) Party.
	Politi	cal Act	tion Committee (PAC):		
	(e)	X	This committee is a separate segregated fund. (Identify connected organization o	n line 6.) Its co	nnected organization is a:
			X Corporation Corporation w/o Capital Stock		Labor Organization
			Membership Organization Trade Association		Cooperative
			In addition, this committee is a Lobbyist/Registrant PAC.		
	(f)	(f)	This committee supports/opposes more than one Federal candidate, and is NOT committee. (i.e., nonconnected committee)	a separate seg	regated fund or party
			In addition, this committee is a Lobbyist/Registrant PAC.		
			In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.))	
	Joint	Fundra	ising Representative:		
	(g)		This committee collects contributions, pays fundraising expenses and disburses n committees/organizations, at least one of which is an authorized committee of a fe		
	(h)		This committee collects contributions, pays fundraising expenses and disburses n committees/organizations, none of which is an authorized committee of a federal c		r two or more political
		Com	mittees Participating in Joint Fundraiser		

1.		FEC ID number	C
2.		FEC ID number	C
3.	[FEC ID number	C
4.		FEC ID number	C

Title or Position ¥

Director

	FEC Form 1 (Revised 02	/2009)		Page 3
W	rite or Type Committee Name			
	Brookshire Brothers Ma	nagemetn Inc. PAC		
6.		anization, Affiliated Committee, Joint Fundraising Re	presentative, or Leader	rship PAC Sponsor
	Brookshire Brothers Mar	nagement, Inc.		
	Mailing Address	1201 Ellen Trout Drive		
		L Lufkin		75904
		СІТҮ	STATE 🛦	ZIP CODE 🔺
	Relationship:			
	X Connected Organization	Affiliated Committee Joint Fundraisin	ng Representative	Leadership PAC Sponsor
7.		ntify by name, address, (phone number optiona	al), and position of the	e person in
7.	possession of Committee		al), and position of the	e person in
7.	possession of Committee Full Name	books and records. Isie Freeman	al), and position of the	e person in
7.	possession of Committee Full Name	books and records. usie Freeman 1201 Ellen Trout Drive		
7.	possession of Committee Full Name	books and records. Isie Freeman 1201 Ellen Trout Drive Lufkin CITY A	TX	
8.	possession of Committee Full Name Mailing Address Title or Position ♥ Admin. As Treasurer: List the name	books and records. Isie Freeman 1201 Ellen Trout Drive Lufkin CITY A	TX STATE▲ ne number936	
	possession of Committee Full Name Mrs. Su Mailing Address Title or Position ♥ Admin. As Treasurer: List the name name and address of any Full Name	books and records. Isie Freeman 1201 Ellen Trout Drive Lufkin CITY sistant Telephon and address (phone number optional) of the tre	TX STATE▲ ne number936	
	possession of Committee Full Name Mrs. Su Mailing Address Title or Position ♥ Admin. As Treasurer: List the name name and address of any Full Name	books and records. Isie Freeman I201 Ellen Trout Drive Lufkin CITY ▲ sistant Telephon and address (phone number optional) of the tre designated agent (e.g., assistant treasurer).	TX STATE▲ ne number936	

STATE

Telephone number

936

ZIP CODE 🛦

634

8155

FEC Form 1 (Revis	sed 02/2009)		Page 4
Full Name of Designated Agent			
Mailing Address			
Title or Position ▼	CITY	STATE 🛦	ZIP CODE
	Τ	elephone number	
Banks or Other Deposi safety deposit boxes or n Name of Bank, Depositor	naintains funds. ry, etc.	e committee deposits funds, ho	lds accounts, rents
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