## STATEMENT OF

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**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. committee to elect Phil Hornback 1742 Mira Lago Cir ADDRESS (number and street) (Check if address is changed) Ruskin  $\mathsf{FL}$ 33570 CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS hornbackforcongress@gmail.com (Check if address is changed) Optional Second E-Mail Address horn1028@msn.com COMMITTEE'S WEB PAGE ADDRESS (URL) hornbackforcongress.com (Check if address is changed) DATE 2017 C00661652 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. Hornback, Phil, , , Type or Print Name of Treasurer Hornback, Phil, , , [Electronically Filed] 03 25 2018 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

FE	C <b>Fo</b>	rm 1 (Revised 02/2009)	Page 2		
		OMMITTEE Committee:			
(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 Candida		Hornback, Phil, , ,			
Candida Party A		on DEM Office Sought: <b>X</b> House Senate President	State FL District 15		
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.			
Name of Candida					
Party	Com	nmittee:	(Domooratio		
(d)			(Democratic, Republican, etc.) Party.		
Politic	al A	ction Committee (PAC):			
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con-	nected organization is a		
		Corporation Corporation w/o Capital Stock	Labor Organization		
		Membership Organization Trade Association	Cooperative		
		In addition, this committee is a Lobbyist/Registrant PAC.			
(f)		This committee supports/opposes more than one Federal candidate, and is NOT a separate se committee. (i.e., nonconnected committee)	gregated 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 F	und	raising Representative:			
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate.	o or more political		
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	o or more political		
(	Com	mittees Participating in Joint Fundraiser			
	1.	FEC ID number			
	2.	FEC ID number			
;	3.	FEC ID number			
	1				

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Write or Type Committee Name	9	
committee to el	ect Phil Hornback	
6. Name of Any Connected (	Organization, Affiliated Committee, Joint Fundraising Representative, or Leaders	hip PAC Sponsor
NONE		
Mailing Address		
	CITY STATE	ZIP CODE
Relationship: Connected	d Organization Affiliated Committee Joint Fundraising Representative Lea	adership PAC Sponsor
Custodian of Records: Idea books and records.	ntify by name, address (phone number optional) and position of the person in pos	ssession of committee
Hornback	Phil, , ,	1
Full Name	1742 Mira Lago Cir	
Mailing Address		
	Ruskin FL 33570	
Title or Position	CITY STATE	ZIP CODE
		777 – 4076
3. <b>Treasurer:</b> List the name an any designated agent (e.g.,	d address (phone number optional) of the treasurer of the committee; and the na assistant treasurer).	me and address of
Full Name Hornback, of Treasurer	Phil, , ,	
Mailing Address	1742 Mira Lago Cir	
	Ruskin FL 33570	
Title or Position		ZIP CODE
Treasure	Telephone number 813 - [	777 - 4076

FEC Form	<b>1</b> (Revised 02/2009)	Page <b>4</b>				
Full Name of Designated Agent	Hornback, Sara, , ,					
Mailing Address	1742 Mira Lago Cir					
	Ruskin FL 33570  CITY STATE Z	IP CODE				
Title or Position	Telephone number					
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.    Mid Florida Credit Union						
Mailing Address	825 W Brandon Blvd					
	Brandon FL 33511					
	CITY STATE Z	IP CODE				
Name of Bank, D	Depository, etc.					
Mailing Address						
	CITY STATE Z	IP CODE				