mage# 202002049186353033				PAGE 1 / 5
FEC FORM 1	STATEMEI ORGANIZ			
			Office	Use Only
1. NAME OF COMMITTEE (in full)	(Check if name is changed)	Example:If typing, type over the lines.	12FE4M5	
Lone Star Forwa	ard			
	PO Box 302343			
DDRESS (number and street)				
is changed)	Austin		TX78703	
			TX 78703 STATE ▲	
OMMITTEE'S E-MAIL ADDR	ESS			
(Check if address is changed)	lonestarforward@gmai			
	Optional Second E-Mail Ad	dress		
 (Check if address is changed) 	www.lonestarforward.org			
	04 / Y Y Y Y 2020			
. FEC IDENTIFICATION N	NUMBER ► C c	00735829		
. IS THIS STATEMENT	× NEW (N) OR	AMENDED (A)		
certify that I have examined	this Statement and to the best	of my knowledge and belief it	is true correct and co	omplete
ype or Print Name of Treasu	er Gavito, Tory, , ,			
ignature of Treasurer	ito, Tory, , ,	[Electronically Filed]	Date 02	04 / Y Y Y Y Y 04 2020
OTE: Submission of false, erro	neous, or incomplete information ANY CHANGE IN INFORMATI	may subject the person signing ON SHOULD BE REPORTED W		nalties of 2 U.S.C. §437g.
Office Use Only		For further information c Federal Election Commissi Toll Free 800-424-9530 Local 202-694-1100	ion F	EC FORM 1 Revised 06/2012)

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TYPE OF	COMMITTEE
Candida	te 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 Candidate	
Candidate Party Affilia	ation Office Sought: House Senate President District
(C)	This committee supports/opposes only one candidate, and is NOT an authorized committee.
Name of Candidate	
Party Co	ommittee:
(d)	This committee is a(National, State or subordinate) committee of the(Democratic, Republican, etc.) Party
Political	Action Committee (PAC):
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is
	Corporation Corporation w/o Capital Stock Labor Organization
	Membership Organization Trade Association Cooperative
	In addition, this committee is a Lobbyist/Registrant PAC.
(f) x	This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)
	In addition, this committee is a Lobbyist/Registrant PAC.
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)
Joint Fur	ndraising Representative:
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.
(h)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.
Со	mmittees Participating in Joint Fundraiser
1.	FEC ID number
2.	FEC ID number
3.	FEC ID number
4.	FEC ID number

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Lone Star Forward

Write or Type Committee Name

6.	N	ame	of	Any	Co	nne	ecte	ed	Or	gar	niza	atio	on,	A	ffil	iate	ed	Сс	om	mi	tte	e, .	Joi	nt	Fu	ndr	ais	inę	J R	epr	es	en	tat	ive	e, O	r L	ea	de	rs	hip	P P	AC	Sr	or	iso	r
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	R	elatio	onsl	nip:		Co	nne	ecte	ed (Drg	an	iza	tio	n		Aff	ilia	tec	I C	on	۱m	itte	е	C	Jo	oint	Fu	ndr	ais	ing	Re	epr	es	ent	ativ	/e	C	l	_ea	ade	ersl	nip	PA	.C :	Spo	onso

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

Gavito, Tor	гу, , ,
Full Name	
Mailing Address	PO Box 302343
	L
	Austin TX 78703
Title or Position	CITY STATE ZIP CODE
Treasurer	Telephone_number

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	Gavito, Tory, , ,
Mailing Address	PO Box 302343
	Austin
	CITY STATE ZIP CODE
Title or Position Treasurer	Telephone number

FEC Form 1 (Revised 02/2009)

Full Name of Designated Agent				1				ĺ																	1		
Mailing Address																											
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								CIT	Y								ST	ATE				ZI	р С	COD	θE		
Title or Position																											
												Tele	eph	ione	e ni	uml	ber										

9. 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.

l	Amalgamated Bank		
Mailing Address	275 Seventh Avenue		
	New York		10001
	CITY	STATE	ZIP CODE
Name of Bank, De	epository, etc.		
l			
Mailing Address			
	CITY	STATE	ZIP CODE

:97 `A=G79 @@5 B9CIG`H9LH`F9 @5 H98 `HC`5 `F9DCFHžG7<98 I@9 `CF`+H9A=N5 H=CB

Form/Schedule: F1N Transaction ID :

This committee intends to make independent expenditures, and consistent with the U.S. Court of Appeals for the District of Columbia Circuit decision in SpeechNow v. FEC, it therefore intends to raise funds in unlimited amounts. This committee will not use those funds to make contributions, whether direct, in-kind, or via coordinated communications, to federal candidates or committees.

Form/Schedule: Transaction ID: