

**GREENE FOR CONGRESS**  
**2000 CAMPAIGN COMMITTEE**

(c) Number and Street Address  (Check if address is changed)  
**P.O. Box 126455**

(e) City, State and ZIP Code  
**BENBROOK TX 76126**

**JULY 7, 1999**

b. FEC Identification Number

c. Is This Report An Amendment?  
 YES  NO

RECEIVED  
 FEDERAL ELECTION  
 COMMISSION MAIL ROOM

**JUL 10 8 21 AM '99**

**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<br><b>MARK GREENE</b> | Candidate Party Affiliation<br><b>DEMOCRAT</b> | Office Sought<br><b>U.S. House</b> | State/District<br><b>TX/12</b> |
|---|--|------------------------------------|--------------------------------|
- (c) This committee supports/opposes only one candidate \_\_\_\_\_ and is NOT an authorized committee. (name of candidate)
  - (d) This committee is a \_\_\_\_\_ committee of the \_\_\_\_\_ Party. (National, State or subordinate) (Democratic, Republican, etc.)
  - (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 a party committee.

1. Name of Any Connected Organization or Affiliated Committee	Mailing Address and ZIP Code	Relationship

Type of Connected Organization:  
 Corporation  Corporation with Capital Stock  Labor Organization  Membership Organization  Trade Association  Cooperative

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	Mailing Address	Title or Position
<b>KELLY GREENE</b>	<b>10149 STANBERRY DR. BENBROOK TX 76126</b>	<b>SECRETARY</b>

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 (i.e., assistant treasurer).

Full Name	Mailing Address	Title or Position
<b>LYNN HAMBRIK</b>	<b>7319 AMBLEAR DR. ARLINGTON TX 76016</b>	<b>Treas</b>

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.	Mailing Address and ZIP Code
<b>FIRST NATIONAL BANK OF TEXAS BENBROOK</b>	<b>851 WINSBOTT RD. BENBROOK, TX 76126</b>

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	SIGNATURE OF TREASURER	DATE
<b>LYNN HAMBRIK</b>	<i>Lynn Hambrick</i>	<b>7/7/99</b>

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.

Federal Election Commission

**ENVELOPE REPLACEMENT PAGE  
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The Commission has added this page to the end of this filing to indicate how it was received.

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<input type="checkbox"/> Other ( Specify):	Postmarked and/or Date of Receipt
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<i>SLK</i>	7-18-99
PREPARER	DATE PREPARED