FEC

Only

STATEMENT OF

PAGE 1 / 4

ORGANIZATION FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Howard 2 Congress PO Box 1305 ADDRESS (number and street) (Check if address is changed) Missouri City 77459 TX CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS Info@howard2congress.com (Check if address is changed) Optional Second E-Mail Address Info@idkcommunications.com COMMITTEE'S WEB PAGE ADDRESS (URL) www.howard2congress.com (Check if address is changed) DATE 2021 C00766261 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. Evans, Cierra, , , Type or Print Name of Treasurer Evans, Cierra,,, [Electronically Filed] 01 13 2021 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

Local 202-694-1100

| F | EC Fo | rm 1 (Revised 02/2009) | Page 2 | | | |
|---------------|--------------------|--|--|--|--|--|
| | | COMMITTEE 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 Cand | | Howard, Eugene, , , | | | | |
| Cand Party | idate Affiliati | on DEM Office Sought: X House Senate President | State TX District 22 | | | |
| (c) | | This committee supports/opposes only one candidate, and is NOT an authorized committee. | | | | |
| Name Cand | | | | | | |
| Part | y Con | nmittee: | Comporatio | | | |
| (d) | | | Democratic, epublican, etc.) Party. | | | |
| Polit | tical A | ction Committee (PAC): | | | | |
| (e) | | This committee is a separate segregated fund. (Identify connected organization on line 6.) Its conn | ected 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 seg committee. (i.e., nonconnected committee) | 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 | t Fund | draising 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. | or more political | | | |
| | Com | mittees Participating in Joint Fundraiser | | | | |
| | 1. | FEC ID number C | | | | |
| | 2. | FEC ID number C | | | | |
| | 3. | | | | | |
| | | | | | | |

| FEC Form 1 (Revised | d 02/2009) | Page 3 |
|--|--|-------------------------|
| Write or Type Committee Nar | пе | |
| Howard 2 Con | gress | |
| | Organization, Affiliated Committee, Joint Fundraising Representative, or Leade | ership PAC Sponsor |
| NONE | | |
| | <u> </u> | |
| Moiling Address | | |
| Mailing Address | | |
| | | |
| | CITY STATE | ZIP CODE |
| Relationship: Connect | ted Organization Affiliated Committee Joint Fundraising Representative | Leadership PAC Sponsor |
| Custodian of Records: Id books and records. | lentify by name, address (phone number optional) and position of the person in p | possession of committee |
| Evans, C | Cierra, , , | |
| Mailing Address | 1101 woodway ct | |
| j vi | | |
| | Longview TX 75605 | ; |
| Title or Position | CITY STATE | ZIP CODE |
| Political consultant | | 934 - 0129 |
| B. Treasurer: List the name a any designated agent (e.g., | and address (phone number optional) of the treasurer of the committee; and the , assistant treasurer). | name and address of |
| Full Name Evans, C | Xierra, , , | |
| Mailing Address | 1101 woodway ct | |
| | | |
| | Longview TX 75605 CITY STATE | ZIP CODE |
| Title or Position Political consultant | | 934 - 0129 |

| FEC Form | n 1 (Revised 02/2009) | Page 4 |
|-------------------------------------|--|---------------|
| | | |
| Full Name of Designated Agent | | |
| Mailing Address | | |
| - | | |
| | CITY STATE Z | IP CODE |
| Title or Position | | II CODE |
| | Telephone number | |
| Name of Bank, I | Texas Bank and Trust 1801 Gilmer road | |
| | Longview TX 75605 | |
| | | IP CODE |
| Name of Bank, [| Depository, etc. | |
| | | |
| Mailing Address | | |
| | | |
| | | |
| | CITY STATE Z | IP CODE |