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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) over the lines. is changed) James Buford For Congress Campaign Committee PO Box 532126 ADDRESS (number and street) (Check if address is changed) **Grand Prairie** 75053 TX CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS buford4congress@gmail.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2021 C00787713 FEC IDENTIFICATION NUMBER > 3. 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. Buford, Samantha, , , Type or Print Name of Treasurer Buford, Samantha, , , [Electronically Filed] 80 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 Only Local 202-694-1100

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TYPE OF COMMITTEE						
	e Committee:					
(a) <b>x</b>	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	Buford, James, , ,					
Candidate	on REP Office Sought: X House Senate President	State				
Party Affiliation	on REP Sought: X House Senate President	District 06				
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.					
Name of Candidate						
Party Con						
(d)		(Democratic, Republican, etc.) Party.				
Political A	ction Committee (PAC):					
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con-	nnected 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 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 Fund	Iraising 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.	vo 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.	vo or more political				
Com	mittees Participating in Joint Fundraiser					
1.	FEC ID number					
2.	FEC ID number					
3.	FEC ID number					
4.						

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Write or Type Committee Name				. age <b>e</b>	
•	or Congress Ca	mpaign Comn	nittee		
	Organization, Affiliated Committ			eadership PAC Sponsor	
NONE	, gamano, , , , , , , , , , , , , , , , , , ,	аа		одологир голо оролоо.	
Mailing Address					
	CITY		STATE	ZIP CODE	
Relationship: Connecte	d Organization Affiliated Comm	mittee Joint Fundraising	Representative	Leadership PAC Sponsor	
Custodian of Records: Idea books and records.	ntify by name, address (phone nu	ımber optional) and positi	on of the person	in possession of committee	
Buford, Samantha, , ,					
Full Name	PO Box 532126				
Mailing Address					
	Grand Prairie		, TX , , , , , , , , , , , ,	5053	
Title or Position	CITY		STATE	ZIP CODE	
Treasurer		Telephone num	nber 214	395 2212	
Treasurer: List the name an any designated agent (e.g.,)	d address (phone number optionssistant treasurer).	onal) of the treasurer of the	committee; and	the name and address of	
Full Name Buford, Sa	mantha, , ,			1	
Mailing Address	PO Box 532126				
	Grand Prairie		TX    75	5053	
	CITY		STATE	ZIP CODE	
Title or Position Treasurer		Telephone num	aber 214	395 2212	

9.

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Full Name of Designated Agent Redinger,	Cassie, , ,						
Mailing Address	7304 Sun Grace Drive						
	Arlington TX 76001  CITY STATE ZII	P CODE					
Title or Position Assistant Treasurer	Telephone number 817 - 28	7   -   9018					
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.  Bank of the West							
Mailing Address	2400 West Irving Blvd.						
ivialility Address							
	Irving TX 75061						
	CITY STATE ZI	P CODE					
Name of Bank, Depository, etc.							
Mailing Address							
	CITY STATE ZI	P CODE					

## : 97 'A = G7 9 @ G B9 C I G'H9 LH'F9 @ 5 H98 'HC'5 'F9 DCF HZ G7 < 98 I @ 'CF' + H9 A = N5 H= CB

Form/Schedule: F1N Transaction ID:

We will not exceed 50,000 in contributions but will continue to file electronically.

Form/Schedule: Transaction ID: