



FEDERAL ELECTION COMMISSION
WASHINGTON, D.C. 20463

October 8, 2008

RQ-1

Steve Maxwell, Treasurer
Tarrant Victory
3004 West Lancaster Avenue
Fortworth, TX 76107

Response Due Date:
November 10, 2008

Identification Number: C00454785

Reference: Statement of Organization, received 9/12/08

Dear Treasurer:

This letter is prompted by the Commission's preliminary review of the report(s) referenced above. This notice requests information essential to full public disclosure of your federal election campaign finances. **Failure to adequately respond by the response date noted above could result in an audit or enforcement action.** Additional information is needed for the following item:

-Your Statement of Organization indicates that your committee is a local party committee. However, Line 6 has been left blank which indicates that your committee is not affiliated with the Texas Democratic Party. However, pursuant to 11 CFR §110.3(b)(3), all contributions made by political committees established, financed, maintained, or controlled by the State party committee and by subordinate State party committees shall be presumed to be made by one political committee.

This presumption shall not apply if the political unit in question has not received funds from any other political committee established, financed, maintained, or controlled by any party unit and the political committee of the party unit in question does not make contributions in cooperation, consultation or concert with, or at the request or suggestion of any other party unit or political committee established, financed, maintained, or controlled by another party unit. Further, 11 CFR §100.5(e)(4) defines a party committee as a political committee which represents a political party and is part of the official party structure at the national, State, or local level.

Please clarify whether your committee is, in fact, independent from the Texas Democratic Party. Further, any affiliated committee must be identified on your Statement of Organization. If there are no other

Copey -
See attached

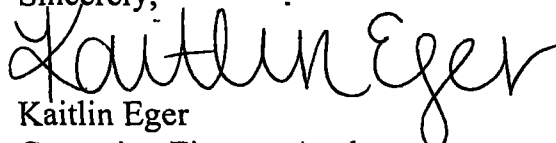
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committees or organizations with which you share control or financing, please indicate "None" on Line 6. If you do share control or financing with other committees or organizations, please list their names, addresses, and relationships on Line 6. 11 CFR §102.2

Please note, you will not receive an additional notice from the Commission on this matter. Adequate responses must be received by the Commission on or before the due date noted above to be taken into consideration in determining whether audit action will be initiated. Failure to comply with the provisions of the Act may also result in an enforcement action against the committee. Any response submitted by your committee will be placed on the public record and will be considered by the Commission prior to taking enforcement action. **Requests for extensions of time in which to respond will not be considered.**

Electronic filers must file amendments (to include statements, designations and reports) in an electronic format and must submit an amended report in its entirety, rather than just those portions of the report that are being amended. If you should have any questions regarding this matter or wish to verify the adequacy of your response, please contact me on our toll-free number (800) 424-9530 (at the prompt press 5 to reach the Reports Analysis Division) or my local number (202) 694- 1143.

Sincerely,



Kaitlin Eger
Campaign Finance Analyst
Reports Analysis Division

28039913635

FEC
FORM 1

STATEMENT OF
ORGANIZATION

RECEIVED
FEC MAIL CENTER

2008 NOV -6 AM 9:38

Office Use Only

1. NAME OF
COMMITTEE (in full)



(Check if name
is changed)

Example: If typing, type
over the lines.

12FE4M5

TARRANT VICTORY

ADDRESS (number and street)

3004 W LANCASTER Ave



(Check if address
is changed)

FORT WORTH

TX

76107

CITY

STATE

ZIP CODE

COMMITTEE'S E-MAIL ADDRESS

Tcdp@Tcdp.Net

COMMITTEE'S WEB PAGE ADDRESS (URL)

WWW.TCDP.NET

COMMITTEE'S FAX NUMBER

817-335-3632

2. DATE

MM / DD / YYYY

3. FEC IDENTIFICATION NUMBER

C00454785

4. 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.

Type or Print Name of Treasurer

Steve Maxwell

Signature of Treasurer

Steve Maxwell

Date

MM / DD / YYYY

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
Use
Only

For further information contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-694-1100

FEC FORM 1
(Revised 12/2007)

5. TYPE OF COMMITTEE

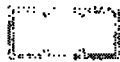
Candidate Committee: *N/A*

- (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

N/A

Candidate Party Affiliation



Office Sought:



House



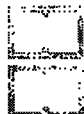
Senate



President

State

District



- (c) ☐ This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate

Party Committee:

- (d) ☒ This committee is a *SUB* (National, State or subordinate) committee of the *DEM* (Democratic, Republican, etc.) Party.

Political Action Committee (PAC): *N/A*

- (e) ☐ This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:
- ☐ Corporation ☐ Corporation w/o Capital Stock ☐ Labor Organization
- ☐ Membership Organization ☐ Trade Association ☐ Cooperative
- (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 Leadership PAC. (Identify sponsor on line 6.)

Joint Fundraising Representative: *N/A*

- (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.

Committees Participating in Joint Fundraiser

- | | | | |
|----|--------------------------|---------------|----------|
| 1. | <input type="checkbox"/> | FEC ID number | <i>C</i> |
| 2. | <input type="checkbox"/> | FEC ID number | <i>C</i> |
| 3. | <input type="checkbox"/> | FEC ID number | <i>C</i> |
| 4. | <input type="checkbox"/> | FEC ID number | <i>C</i> |
| 5. | <input type="checkbox"/> | FEC ID number | <i>C</i> |

Write or Type Committee Name

6. Name of Any Connected Organization, Affiliated Committee, Leadership PAC Sponsor or Joint Fundraising Representative

NONE

Mailing Address

CITY

STATE

ZIP CODE

Relationship:



Connected Organization



Affiliated Committee



Leadership PAC Sponsor



Joint Fundraising Representative

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

BETTY PARKHILL

Mailing Address

3004 W LANCASTER AVE

FORT WORTH

TX

76107-

CITY

STATE

ZIP CODE

Title or Position

Comptroller

Telephone number

817-335-8683

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

STEVE MAXWELL

Mailing Address

3004 W LANCASTER AVE

FORT WORTH

TX

76107-

CITY

STATE

ZIP CODE

Title or Position

CHAIRMAN

Telephone number

817-335-8683

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Full Name of
Designated
Agent

NONE

Mailing Address

Title or Position

Telephone number

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.

EECU

Mailing Address

PO Box 1777

FORT WORTH

TX

76101-1777

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

W/A

Mailing Address

CITY

STATE

ZIP CODE

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
The FEC added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input checked="" type="checkbox"/> USPS First Class Mail	Postmarked
<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
<input type="checkbox"/> USPS Priority Mail	Postmarked
Delivery Confirmation™ or Signature Confirmation™ Label <input type="checkbox"/>	
<input type="checkbox"/> USPS Express Mail	Postmarked
<input checked="" type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
Next Business Day Delivery <input type="checkbox"/>	
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

Jm W

PREPARER

(3/2005)

11/6/04

DATE PREPARED

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