

**FEC
FORM 1****STATEMENT OF
ORGANIZATION**

(See instructions)

Office use only

1. NAME OF
COMMITTEE (in full)☐(Check if name
is changed)Example: If typing, type
over the lines

12FE4M5

TEAM TEXAS POLITICAL ACTION COMMITTEE

ADDRESS (number and street)

110 BROADWAY☒(Check if address
is changed)**SUITE 550****SAN ANTONIO****TX****78205**

CITY ▲

STATE ▲

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

murray@mhvelaw.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

None

COMMITTEE'S FAX NUMBER

2102239708

2. DATE

M M
1 0/ D D
0 2/ Y Y Y Y
2 0 0 6

3. FEC IDENTIFICATION NUMBER

C C00397265

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

W. James Jonas, III

Signature of Treasurer

Electronically Filed by **W. James Jonas, III**

Date

M M
1 0/ D D
0 2/ Y Y Y Y
2 0 0 6

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
OnlyFor further information contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-694-1100**FEC FORM 1**
(Revised 02/2003)

Cooperative

Write or Type Committee Name

TEAM TEXAS POLITICAL ACTION COMMITTEE

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 **Murray H. Van Eman**

Mailing Address **110 Broadway**

Suite 550

san Antonio TX 78205

Title or Position ▼ **CITY ▲ STATE ▲ ZIP CODE ▲**

210 860 8804

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 **Murray H. Van Eman**

Mailing Address **110 Broadway**

Suite 550

san Antonio TX 78205

Title or Position ▼ **CITY ▲ STATE ▲ ZIP CODE ▲**

Attorney

210 860 8804

Telephone number

Full Name of Designated Agent

Mailing Address

CITY ▲ STATE ▲ ZIP CODE ▲

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.

Plains Capital Bank

Mailing Address

919 Congress Ave.

Suite 100

Austin

TX

78701

CITY ▲

STATE ▲

ZIP CODE ▲

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.

[ADDITIONAL]

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Any Connected Organization or Affiliated Committee

[ADDITIONAL]

None

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship

Type of Connected Organization:

☐

Corporation

☐

Corporation w/o Capital Stock

☐

Labor Organization

☐

Membership Organization

☐

Trade Association

☐

Cooperative

[ADDITIONAL]

ZIP CODE ▲

Telephone number _____ - _____ - _____