FEC

STATEMENT OF

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ORGANIZATION FORM 1 Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 COMMITTEE (in full) is changed) over the lines. Howard Steele For Congress 600 Travis Street ADDRESS (number and street) **Suite 7373** (Check if address is changed) Houston 77002 TX CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS alester@steele-law-group.com (Check if address is changed) Optional Second E-Mail Address hsteele@steele-law-group.com COMMITTEE'S WEB PAGE ADDRESS (URL) www.howardsteele.com (Check if address is changed) DATE 04 2019 C00717215 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. Lester, Andrea, , , Type or Print Name of Treasurer Lester, Andrea, , , [Electronically Filed] 10 28 2019 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

| FEC F | Form 1 (Revised 02/2009) Page 2 |
|----------------------------|--|
| | COMMITTEE te Committee: |
| (a) x | 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 | Steele, Howard, Lynn, , Jr. |
| Candidate Party Affilia | Ation REP Office Sought: X House Senate President District TX |
| (c) | This committee supports/opposes only one candidate, and is NOT an authorized committee. |
| Name of Candidate | |
| Party Co | ommittee: (National, State (Democratic, |
| (d) | (National, State (Democratic, Republican, etc.) Party. |
| Political | Action Committee (PAC): |
| (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 |
| | 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 Fur | ndraising Representative: |
| (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 committees/organizations, none of which is an authorized committee of a federal candidate. This committees/organizations, none of which is an authorized committee of a federal candidate. |
| Со | mmittees Participating in Joint Fundraiser |
| 1. | FEC ID number C |
| 2. | FEC ID number |
| 3. | FEC ID number |
| 4. | |

| FEO Forms 4 (De 1 | 24 03/3000) | De 9 |
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| FEC Form 1 (Revise Write or Type Committee Na | | Page 3 |
| | | |
| | e For Congress d Organization, Affiliated Committee, Joint Fundraising Representa | ative or Leadership DAC Spansor |
| - | u Organization, Anniated Committee, John Fundralsing Represente | nive, or Leadership FAC Sponsor |
| NONE | | |
| | | |
| Mailing Address | | |
| | | |
| | | |
| | CITY STAT | TE ZIP CODE |
| Relationship: Connec | cted Organization Affiliated Committee Joint Fundraising Repre | sentative Leadership PAC Sponsor |
| Custodian of Records: books and records. | dentify by name, address (phone number optional) and position of t | the person in possession of committee |
| | Andrea, , , | |
| Full Name | 600 Travis Street | |
| Mailing Address | Suite 7373 | |
| | Houston | 77002 |
| Title or Position | CITY STATE | ZIP CODE |
| Treasurer | Telephone number | 281 - 989 - 2971 |
| 3. Treasurer: List the name any designated agent (e.g. | and address (phone number optional) of the treasurer of the comm j., assistant treasurer). | ittee; and the name and address of |
| Full Name Lester, of Treasurer | Andrea, , , | |
| Mailing Address | 600 Travis Street | |
| | Suite 7373 | |
| | Houston | 77002 |
| Title or Position | CITY STATE | ZIP CODE |
| Treasurer | Telephone number | 281 - 989 - 2971 |

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| | | | | | |
| Full Name of Designated Agent | Reed, Tommy, , , | | | | |
| Mailing Address | 600 Travis Street | | | | |
| | Suite 7373 | | | | |
| | Houston TX 77002 CITY STATE Z | ZIP CODE | | | |
| Title or Position Assistant Treasu | rer | 99 1855 | | | |
| 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. | | | | | |
| | Amegy Bank 1100 Louisiana Street | | | | |
| Mailing Address | | | | | |
| | Houston | | | | |
| | | | | | |
| | | ZIP CODE | | | |
| Name of Bank, Do | epository, etc. | | | | |
| | | | | | |
| | | | | | |
| Mailing Address | | | | | |
| Mailing Address | | | | | |
| Mailing Address | | | | | |