				RECEIVED FEG MAIL CENTE	IN.
FEC FORM 1	STATEME ORGANIZ			2010 J.M. 22 PH 12:	05
1. NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE41		
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ADDRESS (number and street)	114,4,5,0 Hige	PIER RANCH	RA		Ļ
(Check if address is changed)		<u>å </u>			⊥⊥
	WILLIS		TX	77378-	⊥
		CITY	STATE	ZIP CODE	
COMMITTEE'S E-MAIL ADDF	RESS (Please provide only one e				
(Check if address is changed)		htibiaiker Foiric	+angr		
COMMITTEE'S WEB PAGE A	ADDRESS (URL)				
(Check if address is changed)	WWW.JSGOTI	ibiaikie:rifioiricio	ingirie]]
2. DATE 0.1	19120110				
3. FEC IDENTIFICATION		กรูกการสมุทธิสายสารรู้สายสารรู้สายสารรู้สายสารรู้สายสารรู้สายสารรู้สายสารรู้สายสารรู้สายสารรู้สายสารรู้สายสารร สร้างสารระดับการหรือการระดับการสารรู้สายสารรู้สายสารรู้สายสารรู้สายสารรู้สายสารรู้สายสารรู้สายสารรู้สายสารรู้สา			
4. IS THIS STATEMENT	NEW (N) OR	AMENDED (A)			,
I certify that I have examined	t this Statement and to the bes		t <mark>is true, co</mark> n	rect and complete.	
Type or Print Name of Treasu	ITOP KATHY W	EST			
Signature of Treasurer	Machagues	st	Date	57 1.9 207	ð
NOTE: Submission of false, error	oneous, or incomplete information ANY CHANGE IN INFORMAT	may subject the person signing to the person signing to the person signing to the person signing to the person significance of the person sis of the person			437g.

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	Office Use		For further information contact: Federal Election Commission	FEC FORM 1	-
L	Only		Toll Free 800-424-9530 Local 202-694-1100	(Revised 02/2009)	

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5.			OMMITTEE Committee:
	(a)	TT.	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
	Name Candi	-	Information below.)
	Candi Party	date Affiliatio	on R.E.P. Office State TX Sought: House Senate President District 0.8
	(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.
	Name Candi	-	
	Part	y Com	mittee:
	(d)		This committee is a (National, State (Democratic, or subordinate) committee of the Republican, etc.) Party.
	Polit	ical A	ction 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	Fund	raising 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 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.
		Com	mittees Participating in Joint Fundraiser
		1.	
		2.	
		3.	
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		4.	

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Write or Type Committee Name

6.	Name of Any Connected (Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor												
1														
	Mailing Address													
	-													
		CITY STATE ZIP CODE												
	Relationship: Connecte	d Organization 🗍 Affiliated Committee 📑 Joint Fundraising Representative 🚺 Leadership PAC Sponso												
	-	Remail 12003 Univer												
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 Kathy West													
	Mailing Address	Mibi314151 KIRIEIEINI Meradioni Lionophi IIIIII												
		Willis TY 7,3,1,81-L.												
	Title or Position	CITY STATE ZIP CODE												
	Kampaingn	$T_{1} C_{1} C_{1} A_{1} S_{1} U_{1} C_{1} C_{1$												
8.	Treasurer: List the name ar any designated agent (e.g.,	d address (phone number - optional) of the treasurer of the committee; and the name and address of assistant treasurer).												
	Full Name of Treasurer	hy west,												
	Mailing Address	11.63.4.5 Green Meiadow Laop												
		L												
		CITY STATE ZIP CODE												
L	Title or Position $C_1 a_1 m_1 p_1 a_1 m_1 g_1 n_1$	$\frac{\Gamma_1 \Gamma_1 e_1 q_1 S_1 u_1 \Gamma_1 e_1 \Gamma_1}{1 + 1 + 1 + 1 + 1 + 1 + 1 + 1 + 1 + 1 +$												

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FEC	Form	1	(Revised	02/2009)

Page	4

Full Name of Designated Agent	Jane	H. Bak	e, r, , , , , , ,		<u> </u>	<u> </u>		1.1	_ <u>}_</u>	1_1			1_1	
Mailing Address		P.Q Bo	x1 201	5	<u> </u>		L J	<u> </u>				<u></u>	LL.	
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		Willin	<u>5</u>	└┈┟╌┟╴┟	<u> </u>]	LT STA	ואי	Ľ	7.7	3;718 ZIP (<u>II</u> .	
Title or Position	<u>ant</u>	<u>_T(1e1Q5)</u>	CITY UITIEITI	J	Teleph	one nu			30	2 - [8,56		12(<u>.</u>

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.

Woodfiorest, National Bank,																																			
Mailing Address 15,5,0, Monitgiomerry Sitreet																																			
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Name of Bank,	Depository,	etc.															-																		
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Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING I The FEC added this page to the end of this filing to indicate h	
Hand Delivered	Date of Receipt
USPS First Class Mail	Postmarked
USPS Registered/Certified	Postmarked (R/C)
USPS Priority Mail	Postmarked
Delivery Confirmation [™] or Signature Confirm	ation [™] Label
USPS Express Mail	Postmarked
Postmark Illegible	
No Postmark	
Overnight Delivery Service (Specify):	Shipping Date
Next Business	Day Delivery
Received from House Records & Registration Office	Date of Receipt
Received from Senate Public Records Office	Date of Receipt
Received from Electronic Filing Office	Date of Receipt
Date of Re Other (Specify):	ceipt or Postmarked
a	1/22/10
PREPARER (3/2005)	DATE PREPARED