

FEC
FORM 1

STATEMENT OF
ORGANIZATION

(See instructions)

RECEIVED
FEC MAIL ROOM

2001 JUL -6 A 10:34

Office Use Only

1. NAME OF
COMMITTEE (in full)

(Check if name
is changed)

Example: If typing, type
over the lines.

12FE4M5

TEXANS WITH COURAGE

ADDRESS (number and street)

1938 BROKEN OAK

(Check if address
is changed)

SAN ANTONIO

TX

78232

CITY ▲

STATE ▲

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

tcourage@swbel.net

COMMITTEE'S WEB PAGE ADDRESS (URL)

www.texanswithcourage.fcs.com

2. DATE

07 01 2001

3. FEC IDENTIFICATION NUMBER ▶

C

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

ZADA CARI TRUE

Signature of Treasurer

Zada Cari True

Date

07 02 2001

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					
-----------------------	--	--	--	--	--

FE1AN048.PDF

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

FEC FORM 1

(Revised 1/01)

5. TYPE OF COMMITTEE (Check One)

- (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

John Kenneth Courage

Candidate

Party Affiliation

DEM

Office
Sought:☒

House

Senate

President

State

TX

District

21

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

Name of Candidate

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

- (e) ☐ This committee is a separate segregated fund.

- (f) ☐ This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee.

6. Name of Any Connected Organization or Affiliated Committee

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship

Type of Connected Organization:

Corporation

Corporation with Capital Stock

Labor Organization

Membership Organization

Trade Association

Cooperative

Write or Type Committee Name

TEXANS With Courage

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 ZADA TRUE-COURAGE
Mailing Address 11938 Broken Oak
San Antonio TX 78232-
Title or Position CITY STATE ZIP CODE
Telephone number 210-499-5776

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 ZADA CARI TRUE
Mailing Address 1900 Broken Oak
SAN ANTONIO TX 78232-
Title or Position CITY STATE ZIP CODE
TREASURER Telephone number 210-495-5569

Full Name of Designated Agent ZADA T
Mailing Address
Title or Position CITY STATE ZIP CODE
ASST. TREASURER Telephone number 210-499-5776

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.

BANK OF AMERICA

Mailing Address

1300 CONNENT

SAN ANTONIO

TX

78205

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Bank, Depository, etc.

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲