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FEC  
FORM 1

# STATEMENT OF ORGANIZATION

Office Use Only

1. NAME OF  
COMMITTEE (in full)



(Check if name  
is changed)

Example: If typing, type  
over the lines.

12FE4M5

BURNS4TEXAS2008

ADDRESS (number and street)

4558 ARCADE AVENUE



(Check if address  
is changed)

HIGHLAND PARK

TX

75205-3607

CITY ▲

STATE ▲

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

ONSKIDOOBAY@MAC.COM

COMMITTEE'S WEB PAGE ADDRESS (URL)

www.Burns4Texas.com

COMMITTEE'S FAX NUMBER

-

2. DATE

01 / 17 / 2008

3. FEC IDENTIFICATION NUMBER ►

C

4. IS THIS STATEMENT



NEW (N)

OR



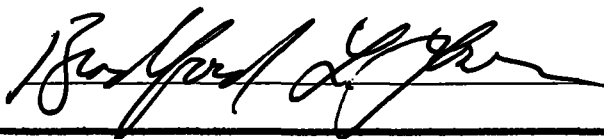
AMENDED (A)

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

BRADFORD L. LARSEN

Signature of Treasurer



Date

01 / 17 / 2008

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 02/2003)

## 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

DENNIS C. BURNS

Candidate Party Affiliation

DEM

Office Sought:

X

House

Senate

President

State

TX

District

32

- (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 w/o Capital Stock

☐  
☐

Labor Organization

Membership Organization

Trade Association

Cooperative

Write or Type Committee Name

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 ANDREA W. BURNSMailing Address 4558 ARCADE AVENUEHIGHLAND PARKTX 75205-3607

Title or Position ▼

CITY ▲

STATE ▲

ZIP CODE ▲

CUSTODIAN OF RECORDSTelephone number 214-443-9746

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 BRADFORD L. LARSENMailing Address 1835 T. L. TOWNSENDBURNS 4 TEXAS 2008 (COMMITTEE)ROCKWALL TX 75082

Title or Position ▼

CITY ▲

STATE ▲

ZIP CODE ▲

TREASURERTelephone number 972-774-9798Full Name of Designated Agent ANDREA W. BURNSMailing Address 4558 ARCADE AVENUEHIGHLAND PARKTX 75205-

Title or Position ▼

CITY ▲

STATE ▲

ZIP CODE ▲

CUSTODIAN OF RECORDSTelephone number 214-443-9746

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.

UNITED MISSOURI BANK (WARSAW)

Mailing Address

FIDELITY INVESTMENTS

P.O. BOX 770001

CINCINNATI OH 45277-0003

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Bank, Depository, etc.

BANK ONE

Mailing Address

MERIDIAN LINCOLN WK MA

BANK ONE, COLUMBUS, OH

COLUMBUS OH 43271

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.

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|                                                                                                                                                                                                                              |                                 |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------|
| <input type="checkbox"/> Hand Delivered                                                                                                                                                                                      | Date of Receipt                 |
| <input 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 type="checkbox"/> Postmark Illegible                                                                                                                                                                                  |                                 |
| <input type="checkbox"/> No Postmark                                                                                                                                                                                         |                                 |
| <input checked="" type="checkbox"/> Overnight Delivery Service (Specify): <i>Fed Ex</i> Shipping Date <i>1/18/08</i><br><div style="text-align: right;">Next Business Day Delivery <input checked="" type="checkbox"/></div> |                                 |
| <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   |
|                                                                                                                                                                                                                              | <i>1/22/08</i><br>DATE PREPARED |

PREPARER  
(3/2005)