

# STATEMENT OF ORGANIZATION

(See reverse side for instructions)

RECEIVED  
FEDERAL ELECTION  
COMMISSION  
PUBLIC DISCLOSURE  
DIVISION

Jun 24 5 53 PM '96

**HAND DELIVERED**

1 (a) NAME OF COMMITTEE IN FULL <input type="checkbox"/> (Check if name is changed)	2. DATE
TEXANS FOR ALAN KEYES FOR PRESIDENT '96	1-8-96
(b) Number and Street Address <input checked="" type="checkbox"/> (Check if address is changed)	3. FEC Identification Number
5450 Northwest Central Suite 101 (c) City, State and ZIP Code	4. Is This Report An Amendment? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
Houston, Texas 77092	

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 Alan Keyes	Candidate Party Affiliation Republican	Office Sought President	State/District USA
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(c) This committee supports/opposes only one candidate \_\_\_\_\_ and is NOT an authorized committee.  
(name of candidate)

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

(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 a party committee.

6. Name of Any Connected Organization or Affiliated Committee	Mailing Address and ZIP Code	Relationship
ALAN KEYES FOR PRESIDENT '96, Inc.	Box 25643 Alexandria, Va 22313-5643	Affiliated

Type of Connected Organization  
 Corporation  Corporation w/o Capital Stock  Labor Organization  Membership Organization  Trade Association  Cooperative

7. Custodian of Records: Identify by name, address (phone number - optional) and position of the person in possession of committee books and records.

<b>Full Name</b>	<b>Mailing Address</b>	<b>Title or Position</b>
Herschel Smith	7526 Morley, Houston, Texas 77061	State Director

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).

<b>Full Name</b>	<b>Mailing Address</b>	<b>Title or Position</b>
Jim C. West	16710 Telge Road, Cypress, Texas 77429	State Finance Director
Christopher I. Kuhlman	10950 Briar Forest #705, Houston, Texas 77042	Treasurer

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.

<b>Name of Bank, Depository, etc.</b>	<b>Mailing Address and ZIP Code</b>
First Northwestern Bank	12200 Northwest Freeway, Houston, TX 77292-0874

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 Christopher Kuhlman	SIGNATURE OF TREASURER <i>Chris Kuhlman</i>	DATE 1/24/96
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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.

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Federal Election Commission  
**ENVELOPE REPLACEMENT PAGE  
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2LT 1/24/96

PREPARER DATE PREPARED

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