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FECHALL CENTER

2010 FEB 23 AH 10: 58

FEC FORM 1	_	STATEMENT OF ORGANIZATION					,		
1. NAME OF COMMITTEE (in		Check if name s changed)		nple:If typing, type the lines.	12FE4M	15			
[Firitends of David Smith									
ADDRESS (number a	nd street) 857	1, 5,0,ut	hwe	isitieirini iBi	1 vd, 7	#, a,a,3,5			
(Check if a is changed)		.l.a.s			TXI	17,5,2,0,6	1-1 , , , 1		
			CITY		STATE	ZIP (			
COMMITTEES E M	AL ADDECC (Dis			drago)	JIML	<b>2</b> 17 (	, , , , , , , , , , , , , , , , , , ,		
COMMITTEE'S E-MA	AIL ADDRESS (Please		_	•	S.S.@.V.	a,h,o,o,.,c	.,o,m, , , ,		
(Check if is change	address	davidsmithforcongresseyahoo							
COMMITTEE'S WEE	PAGE ADDRESS (U			_					
(Check if	address Www.	4. davilid	s m	+ L FO GCO.	n,g,r,e	5,5,1,40,1	<b>K</b>		
is change									
2. DATE 02 22 2010									
3. FEC IDENTIFICATION NUMBER C0.4.7.26.0.5									
4. IS THIS STATEMENT NEW (N) OR AMENDED (A)									
I certify that I have	examined this Statem	ent and to the best	of my k	nowledge and belief it	is true, corre	ect and complete.			
Type or Print Name of Treasurer David Smith									
Signature of Treasurer Date 02 22 2010									
NOTE: Submission of		-	-	ject the person signing th		-	2 U.S.C. §437g.		
Office Use Only				For further information co Federal Election Commission Toll Free 800-424-9530 Local 202-694-1100		FEC F(			

F	EC Fo	rm 1 (Revised 02/2009)	Page 2						
TYPE OF COMMITTEE									
Candidate Committee:									
(a)	М	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 David Smith									
Candi Party	date Affiliatio	on R.E.P. Office M House Senate President	State TX District 3.3						
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.							
Name Candi									
Part	у Соп	nmittee:							
(d)			Democratic, epublican, etc.) Party.						
Polit	ical A	ction Committee (PAC):							
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its conn	ected 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 Fundraising Representative:									
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate.	or more political						
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	or more political						
Committees Participating in Joint Fundraiser									
	1.	FEC ID number C							
	2.	FEC ID number							
	3.	FEC ID number							
	4.	FEC ID number							

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Write or Type Committee Name								
Friends of David Smith								
6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor								
<b>.</b>								
	<u></u>							
Mailing Address	<u> </u>							
Mailing Address								
		<u> </u>						
	CITY STATE	ZIP CODE						
Relationship: Connect	ed Organization Affiliated Committee Joint Fundraising Represent	tative TI eadership PAC Sponsor						
rielationalip.	ad Organization	Leadership 1710 openes.						
7. Custodian of Records: Ide	entify by name, address (phone number optional) and position of the	person in possession of committee						
books and records.		, .						
Full Name Da	i.d. 5mi.i.h.	<u> </u>						
Mailing Address	185711 Southwestern Blive	#12,2,3,5, , , , , , ,						
•								
	Dallas IX	7,5,2,0,6-						
Title or Position	CITY STATE	ZIP CODE						
Candidate	Telephone number	<u>1141-12351-1912115</u>						
8. Treasurer: List the name a	nd address (phone number optional) of the treasurer of the committee	e; and the name and address of						
any designated agent (e.g.,								
Full Name of Treasurer	1, d. 5 m. 1, +, d.							
Mailing Address	185711 Southwestern Blive	# 12,2,3,5						
•								
	Pallas, Tix	7,52,0,6 -						
Title or Position	CITY STATE	ZIP CODE						
Candilidate	Telephone number	14-235-9215						

CITY

STATE

ZIP CODE

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Name of Bank, Depository, etc.

Mailing Address

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(3/2005)

## **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. Date of Receipt Hand Delivered Postmarked **USPS First Class Mail** Postmarked (R/C) **USPS** Registered/Certified Postmarked **USPS** Priority Mail Delivery Confirmation™ or Signature Confirmation™ Label Postmarked **USPS Express Mail** 2/22/10 Postmark Illegible No Postmark **Shipping Date** Overnight Delivery Service (Specify): **Next Business Day Delivery** Date of Receipt 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 or Postmarked Other (Specify): **PREPARER** DATE PREPARED