Only

## STATEMENT OF

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**FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. ONGHORN PAC PO Box 30844 ADDRESS (number and street) (Check if address is changed) Bethesda 20824-0844 MD CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS info@campaignfinancial.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 01 2016 C00402602 FEC IDENTIFICATION NUMBER > 3. X OR IS THIS STATEMENT NEW (N) 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. O'Lene Stone Type or Print Name of Treasurer O'Lene Stone [Electronically Filed] 06 2016 Signature of Treasurer Date 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 For further information contact: **FEC FORM 1** Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530

Local 202-694-1100

ı	FEC <b>Fo</b> i	rm 1 (Revised 02/2009)	Page <b>2</b>
		OMMITTEE  Committee:	-
(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. (Corinformation below.)	nplete the candidate
Nam Cand	e of didate		
	didate / Affiliation	Office Sought: House Senate President	State
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name Cand	e of lidate		
Par	ty Con	mittee: (National, State	(Democratic,
(d)		This committee is a or subordinate) committee of the	Republican, etc.) Party
Poli	tical A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its co	nnected 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)	X	This committee supports/opposes more than one Federal candidate, and is NOT a separate s committee. (i.e., nonconnected committee)	egregated fund or party
		In addition, this committee is a Lobbyist/Registrant PAC.	
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Join	t Fund	raising Representative:	
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for t	wo 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 to committees/organizations, none of which is an authorized committee of a federal candidate.	wo or more political
	Com	mittees Participating in Joint Fundraiser	
	1.	FEC ID number	
	2.	FEC ID number	
	3.		
	4.		

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Write or Type Committee N	Name	
LONGHORN	PAC	
6. Name of Any Connect	ed Organization, Affiliated Committee, Joint Fundraising Representative, or Le	adership PAC Sponsor
Lamar Smith		
Mailing Address	PO Box 6155	
	San Antonio TX 78	209-0155
	CITY STATE	ZIP CODE
Relationship: Conno	ected Organization Affiliated Committee Joint Fundraising Representative	X Leadership PAC Sponsor
. Custodian of Records: books and records.	Identify by name, address (phone number optional) and position of the person	in possession of committee
Camp	paign Financial Services	
Mailing Address	PO Box 30844	
Mailing Address		
	Bethesda MD 20	824-0844
Title or Position	CITY STATE	ZIP CODE
Custodian of Records	Telephone number	-   654   -   3220
. <b>Treasurer:</b> List the name any designated agent (e	e and address (phone number optional) of the treasurer of the committee; and t.g., assistant treasurer).	he name and address of
Full Name O'Len	e Stone	
Mailing Address	PO Box 30844	
. <b>.</b>		
	Bethesda   MD   20	824-0844   _   _
Title or Position	CITY STATE	ZIP CODE
Treasurer	Telephone number	- 654 - 3220

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Full Name of Designated Agent		
Mailing Address		
	CITY STATE	ZIP CODE
Title or Position		1.1
	Telephone number	
Name of Bank,  Mailing Address	Wells Fargo Bank 7901 Wisconsin Avenue Bethesda MD 20814	
		[_1 ]
	CITY STATE	ZIP CODE
Name of Bank,		ZIP CODE
Name of Bank,		ZIP CODE
Name of Bank,  Mailing Address	Depository, etc.	ZIP CODE
	Depository, etc.	ZIP CODE
	Depository, etc.	ZIP CODE