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Office Use Only

FEC FORM 1

STATEMENT OF ORGANIZATION

(See instructions)

1. NAME OF COMMITTEE (in full) (Check if name is changed) Example: If typing, type over the lines. 12FE4M5

Oregon Republican Party

ADDRESS (number and street) 570 Liberty SE #200

(Check if address is changed)

Salem OR 97301

CITY ▲ STATE ▲ ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

infoaargopong

COMMITTEE'S WEB PAGE ADDRESS (URL)

wwvargopong

2. DATE 01 27 2003

3. FEC IDENTIFICATION NUMBER ▶ C00153031

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 Vince Day

Signature of Treasurer [signature] 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 Use Only				

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

FEC FORM 1
(Revised 1/01)

FF1AN048.PDF

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

Candidate Party Affiliation | Office Sought: House ☐ Senate ☐ President ☐ | State | District

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

Name of Candidate

(d) ☒ This committee is a STA (National, State or subordinate) committee of the REP (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**

Oregon Victory Committee

Mailing Address PO Box 789

Salem OR 97308

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: Sandy Howard

Mailing Address: 570 Liberty SE #200

Salem OR

CITY ▲ STATE ▲ ZIP CODE ▲: 97301-

Title or Position ▼: Administrator

Telephone number: 503-587-8233

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: Vance Day

Mailing Address: 339 Washington SE

Salem OR 97302-

CITY ▲ STATE ▲ ZIP CODE ▲

Title or Position ▼

Telephone number: 503-365-0748

Full Name of Designated Agent:

Mailing Address:

CITY ▲ STATE ▲ ZIP CODE ▲

Title or Position ▼

Telephone number:

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.

Key Bank

Mailing Address 1500 Edgewater

Salem OR 97304-1

CITY ▲ STATE ▲ ZIP CODE ▲

Name of Bank, Depository, etc.

South Umpqua Bank

Mailing Address P.O. Box 4029

Salem OR 97302

CITY ▲ STATE ▲ ZIP CODE ▲

Federal Election Commission

ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

The Commission has added this page to the end of this filing to indicate how it was received.

☐	Hand Delivered	Date of Receipt
☑	First Class Mail	POSTMARKED 1-30-03
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☐	Received from the Senate Office of Public Records	Date of Receipt
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☐	Electronic Filing	

PREPARER	DATE PREPARED 2-7-03

(6/2000)