08/08/2002 12 : 32

FEC FORM 1

STATEMENT OF ORGANIZATION

(See instructions)

Office Use Only

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

CONGRESSIONAL MAJORITY COMMITTEE

ADDRESS (Number and street) P. O. BOX 746

X (Check if address is changed)

Bakersfield CA 93302

CITY ▲ STATE ▲ ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

COMMITTEE'S WEB PAGE ADDRESS (URL)

2. DATE 08 / 07 / 2002

3. **FEC IDENTIFICATION NUMBER** ▶ **C00117721**

4. IS THIS STATEMENT X 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 ROBIN FOSTER

Signature of Treasurer Electronically Filed by ROBIN FOSTER Date 08 / 08 / 2002

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 202-694-110

FEC FROM 1
(Revised 1/2001)