Image# 27930	0070154
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FEC FORM 1	STATEMENT OF ORGANIZATION (See instructions)	Office use only			
1. NAME OF COMMITTEE (in 1	ull) (Check if name Example: If typying, type over the lines	12FE4M5			
FED Political #	Action Committee				
ADDRESS (number and s	treet)				
(Check if addre is changed)	Alexandria	VA 22314 3011			
	CITY	STATE ZIP CODE			
COMMITTEE'S E-MAI					
		· · · · · · · · · · · · · · · · · · ·			
COMMITTEE'S WEB	PAGE ADDRESS (URL)				
COMMITTEE'S FAX NUMBER 703-548-9836					
2. DATE 0 1	/ D D / Y Y Y Y 24 / 2007				
3. FEC IDENTIFICATION NUMBER C C00402339					
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 Dianne Thompson					
Signature of Treasurer	Electronically Filed by Dianne Thompson	Date 01 / 11 / 2007			
NOTE: Submission of fal	se, erroneous, or incomplete information may subject the person signing this State ANY CHANGE IN INFORMATION SHOULD BE REPORTED V				

Office Use Only	For further information contact: Federal Election Commission Toll Free 800-424-9530 Local 202-694-1100	FEC FORM 1 (Revised 02/2003)
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	FEOForm 1 (Revised	02/2003)	Page 2		
5.	TYPE OF COMMITTEE (Ch	eck One)			
		tee is a principal campaign committee. (Complete the candidate information below.) tee is an authorized committee, and is NOT a principal campaign committee. (Complete pelow.)	e the candidate		
	Name of Candidate				
	Candidate Party Affiliation	Office Sought: House Senate President	State District		
	(c) This committee	ee supports/opposes only one candidate, and is NOT an authorized committee.			
	Name of Candidate				
		ee is a (National, State (or subordinate) committee of the ee is a separate segregated fund ee supports/opposes more than one Federal candidate, and is NOT a separate segregated	(Democratic, Republican,etc.) Party. ated fund or party		
6.	Name of Any Connected C	organization or Affiliated Committee			
L					
	Mailing Address				
		CITY STATE	ZIP CODE		
	Type of Connected Organization:				
	Corporation	Corporation w/o Capital Stock Labor Org	anization		
	Membership Organ	ization Trade Association Cooperativ	re		

	n 1 (Revised 02/	2003)		Page 3
rite or Type Con	al Action Cor	nmittee		
Custodian of	Records: Ider	ntify by name, address, (phone number o books and records.	ptional), and position of the	ne person in
Full Name	Christin	le Oster ⊢		
Mailing Addres	S	124 North Alfred St.		
		Alexandria	VA	22314 _ 3011
Title or Positior	∀		STATE	ZIP CODE
	Asst. Treas		703 elephone number	5489688
name and ac	Idress of any o	and address (phone number optional) of t designated agent (e.g., assistant treasurer).	he treasurer of the comm	ittee; and the
Full Name of Treasurer Mailing Addres	Idress of any o	and address (phone number optional) of t designated agent (e.g., assistant treasurer). Thompson 124 North Alfred St.	he treasurer of the comm	ittee; and the
name and ac Full Name of Treasurer	Idress of any o	designated agent (e.g., assistant treasurer). Thompson	he treasurer of the comm	ittee; and the
name and ac Full Name of Treasurer	Idress of any o Dianne ⁻ s	designated agent (e.g., assistant treasurer). Thompson 124 North Alfred St.		
name and ac Full Name of Treasurer Mailing Addres	Idress of any o Dianne ⁻ s	Thompson 124 North Alfred St. Alexandria CITY ▲		22314 – <u>3011</u> ZIP CODE ▲
name and ac Full Name of Treasurer Mailing Addres	Idress of any o Dianne ⁻ s	designated agent (e.g., assistant treasurer). Thompson 124 North Alfred St. Alexandria CITY ▲ ompson Treasurer).	<u>VA</u> STATE▲ 	22314 – <u>3011</u> ZIP CODE ▲
Full Name of Treasurer Mailing Addres Title or Position Full Name of Designated	Idress of any o Dianne ⁻ s Dianne Tho Christin	designated agent (e.g., assistant treasurer). Thompson 124 North Alfred St. Alexandria CITY ▲ ompson Treasurer).	<u>VA</u> STATE▲ 	22314 – <u>3011</u> ZIP CODE ▲
name and ad Full Name of Treasurer Mailing Addres Title or Position Full Name of Designated Agent	Idress of any o Dianne ⁻ s Dianne Tho Christin	designated agent (e.g., assistant treasurer). Thompson 124 North Alfred St. Alexandria CITY ▲ mmpson Ti	<u>VA</u> STATE▲ 	22314 – <u>3011</u> ZIP CODE ▲
name and ad Full Name of Treasurer Mailing Addres Title or Position Full Name of Designated Agent	Idress of any o <u>Dianne</u> s Dianne Tho <u>Christin</u> s	designated agent (e.g., assistant treasurer). Thompson 124 North Alfred St. Alexandria CITY ▲ ompson Tome Oster 124 North Alfred St.	<u>VA</u> STATE▲ elephone number <u>703</u>	

9.

FEC Form 1 (Revised 02/2003)		
Banks or Other Depositories:	List all banks or other depositories in which the committee deposits funds, holds accounts	s, rents

safety deposit box	es or maintains funds.		
Name of Bank, De	epository, etc.		
	SunTrust Bank		
Mailing Address	515 King Street		
	Alexandria	VA	22314
	CITY 🛆		ZIP CODE