

HD

**FEC
FORM 1**

**STATEMENT OF
ORGANIZATION**

(See instructions)

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JAN 31 PM 1:54
Office use only

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

12FE4M5

NATIONAL REPUBLICAN SENATORIAL COMMITTEE

ADDRESS (number and street)

425 SECOND STREET NE

(Check if address is changed)

WASHINGTON

DC

20002

CITY ▲

STATE ▲

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

rjentgens@nrsc.org

COMMITTEE'S WEB PAGE ADDRESS (URL)

COMMITTEE'S FAX NUMBER

2026754730

2. DATE 01 / 30 / 2008

3. FEC IDENTIFICATION NUMBER

C C00027466

4. IS THIS STATEMENT NEW (N) OR X 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 ROBERT JENTGENS

Signature of Treasurer ASSISTANT

Date 01 / 31 / 2008

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 02/2003)

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 **NAT** (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

New Mexico Majority Committee

Mailing Address

PO Box 75103

Washington

DC

20013

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship

JF Representative

Type of Connected Organization:

☐ Corporation

☐ Corporation w/o Capital Stock

☐ Labor Organization

☐ Membership Organization

☐ Trade Association

☐ Cooperative

Write or Type Committee Name

NATIONAL REPUBLICAN SENATORIAL COMMITTEE

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 **Robert Jentgens**

Mailing Address **PO Box 75103**

Washington **DC** **20013**

Title or Position ▼ CITY ▲ STATE ▲ ZIP CODE ▲

Assistant Treasurer Telephone number **202** **675** **6000**

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 **Stan Huckaby**

Mailing Address **PO Box 75103**

Washington **DC** **20013**

Title or Position ▼ CITY ▲ STATE ▲ ZIP CODE ▲

Treasurer Telephone number **202** **675** **6000**

Full Name of Designated Agent

Mailing Address

Washington **DC** **20013**

Title or Position ▼ CITY ▲ STATE ▲ ZIP CODE ▲

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.

Wachovia

Mailing Address

1753 Pinnacle Drive

McLean

VA

22102

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Bank, Depository, etc.

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

NANCY ERICKSON
SECRETARY

PAMELA B. GAVIN
SUPERINTENDENT

HART SENATE OFFICE BUILDING
SUITE 232
WASHINGTON, DC 20510-2116
PHONE: (202) 224-0322

United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

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USPS EXPRESS MAIL

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NEXT BUSINESS DAY DELIVERY

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☐

UPS

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DHL

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AIRBORNE EXPRESS

☐

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FAX

_____ Date of Receipt

OTHER

_____ Date of Receipt or Postmark

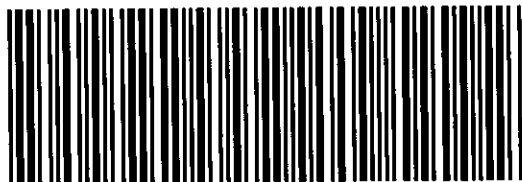
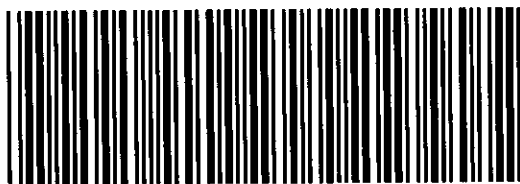
PREPARER

RD

DATE PREPARED

01-31-08

28020042174



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