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PO Box 91, Newark OH 43058

FEC # 00436725

Change of Treasurer

January 21, 2015

FEC Reporting
FEC Campaign Reporting
999 E Street NW
Washington, DC 20463

Attn: Change of Treasurer Designation

Enclosed with this letter is an amended State of Organization signed indicating the new treasurer for the Licking County Democratic Women's Caucus.

Please note this change for all records.

Pam Wilson, Treasurer
Licking County Democratic Women's Caucus

The Licking County Democratic Women's Caucus is dedicated to bringing Women into the Political Process By Educating, Engaging, Mobilizing and Empowering Women Voters and Supporting issues and candidates that improve the lives of women and their families.

1-800-4-A-COUNTY

FEC FORM 1

STATEMENT OF ORGANIZATION

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Office Use Only

1. NAME OF COMMITTEE (in full)

(Check if name is changed)

Example: If typing, type over the lines.

12FE4M5

FEC MAIL CENTER

LICKING COUNTY DEMOCRATIC WOMEN'S CAUCUS

ADDRESS (number and street)

20 Boy St

(Check if address is changed)

NE WAKIL

CITY

OH

STATE

43055-0091

ZIP CODE

COMMITTEE'S E-MAIL ADDRESS

(Check if address is changed)

PAMSWIL@yahoo.com

Optional Second E-Mail Address

lickingcountygovmail.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address is changed)

lickingcountygov.org

2. DATE

01 26 2015

3. FEC IDENTIFICATION NUMBER

C00436725

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

Pamela G. Wilson

Signature of Treasurer

Pamela G. Wilson

Date

01 26 2015

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 52 U.S.C. §30109.

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 06/2012)

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5. TYPE OF COMMITTEE

Candidate 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. (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 _____

Party Committee:

- (d) This committee is a (National, State or subordinate) committee of the (Democratic, Republican, etc.) Party.

Political Action Committee (PAC):

- (e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected 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) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)
 - In addition, this committee is a Lobbyist/Registrant PAC.
 - In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)

Joint Fundraising Representative:

- (g) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two 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 two or more political committees/organizations, none of which is an authorized committee of a federal candidate.

Committees Participating in Joint Fundraiser

1. _____ FEC ID number C _____

2. _____ FEC ID number C _____

3. _____ FEC ID number C _____

4. _____ FEC ID number C _____

110014 110014 110014 110014

Write or Type Committee Name

Licking County Democratic Women's Caucus

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

Mailing Address

__

__-__

CITY

STATE

ZIP CODE

Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor

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 PAM WILSON

Mailing Address 137 PEMBROKE

GRANVILLE

OH

43023

Title or Position

CITY

STATE

ZIP CODE

TREASURER

Telephone number 740-321-1156

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 PAM WILSON

Mailing Address 137 PEMBROKE

GRANVILLE

OH

43023

Title or Position

CITY

STATE

ZIP CODE

TREASURER

Telephone number 740-321-1156

11000004000100010001

Full Name of Designated Agent

PAM WILSON

Mailing Address

137 PEMBROKE

BRANVILLE OH 43023

CITY

STATE

ZIP CODE

Title or Position

TREASURER

Telephone number

740-321-1158

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.

PARK NATIONAL BANK

Mailing Address

50 N 3rd street

NEWARK OH 43055

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

CITY

STATE

ZIP CODE

2008-11-01 14:00:00

1-10001-11100-1-11000

WILSON
1 PEM BROKE LN
NORTH OAK
43083

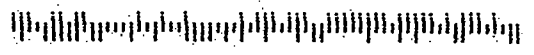
COLUMBUS OH 431
NOV 11 2015



FEC CAMPAIGN REPORT
999 E Street NW
Washington DC 20463

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2015 NOV 12 AM 9:56
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20463



Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
 The FEC added this page to the end of this filing to indicate how it was received.

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<input type="checkbox"/> USPS Priority Mail Express	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
	Next Business Day Delivery <input type="checkbox"/>
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked


 PREPARER

2/2/15
 DATE PREPARED

FEC-1010-1-1010-1