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FEC
FORM 1

STATEMENT OF
ORGANIZATION

Office Use Only

1. NAME OF
COMMITTEE (In full)

(Check if name
is changed)

Example: If typing, type
over the lines.

12 FEB 2005

New Apollo Energy PAC

ADDRESS (number and street)

PO Box 15188

(Check if address
is changed)

Washington

DC

20083

0188

CITY ▲

STATE ▲

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

admin@soundbiz.net

COMMITTEE'S WEB PAGE ADDRESS (URL)

NO URL

COMMITTEE'S FAX NUMBER

206 - 937 - 6203

2. DATE

05 13 2004

3. FEC IDENTIFICATION NUMBER ▶

C 00398893

4. IS THIS STATEMENT

NEW (N)

OR

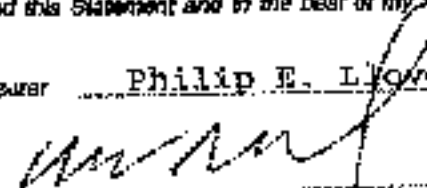
AMENDED (A)

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

Philip E. Lloyd

Signature of Treasurer



Date

05 13 2004

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 800-424-9690
Local 202-694-1100

FEC FORM 1
(Revised 08/2003)

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 (National, State or subordinate) committee of the (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

None _____

Mailing Address _____

 CITY ▲ STATE ▲ ZIP CODE ▲

Relationship _____

Type of Connected Organization:

- Corporation Corporation with Capital Stock Labor Organization
- Membership Organization Trade Association Cooperative

Write or Type Committee Name

New Apollo Energy PAC

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 Philip E. Lloyd

Mailing Address 5236 36th Ave SW

Seattle WA 98126-12808

Title or Position

CITY

STATE

ZIP CODE

Treasurer

Telephone number 206-932-8878

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 Philip E. Lloyd

Mailing Address 5236 36th Ave SW

Seattle WA 98126-12808

Title or Position

CITY

STATE

ZIP CODE

Treasurer

Telephone number 206-932-8878

Full Name of Designated Agent Philip E. Lloyd

Mailing Address 5236 36th Ave SW

Seattle WA 98126-12808

Title or Position

CITY

STATE

ZIP CODE

Treasurer

Telephone number 206-932-8878

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.

Bank of America

PO Box 34414

Seattle WA 98124

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

CITY

STATE

ZIP CODE

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.

<input type="checkbox"/> Hand Delivered	Date of Receipt
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<input type="checkbox"/> USPS Express Mail	Postmarked
<input checked="" type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
<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
<i>ja</i> PREPARER (5/2004)	5-19-04 DATE PREPARED