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FEC  
FORM 1

# STATEMENT OF ORGANIZATION

1. NAME OF COMMITTEE (in full)

(Check if name is changed)

Example: If typing, type over the lines.

12FE4M5

ORGANIC CONSUMERS ASSOCIATION PAC

ADDRESS (number and street)

1858 MINTWOOD PLACE NW #4

(Check if address is changed)

WASHINGTON

DC

20009

CITY ▲

STATE ▲

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

ALEXIS@ORGANICCONSUMERS.ORG

COMMITTEE'S WEB PAGE ADDRESS (URL)

COMMITTEE'S FAX NUMBER

202-232-8340

2. DATE

04 / 05 / 2006

3. FEC IDENTIFICATION NUMBER ▶

C

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

ALEXIS BADEN-MAYER

Signature of Treasurer

Date

07 / 10 / 2006

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.

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For further information contact:  
Federal Election Commission  
Toll Free 800-424-9530  
Local 202-694-1100

FEC FORM 1  
(Revised 02/2003)

26039120245

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 w/o Capital Stock  Labor Organization
  - Membership Organization  Trade Association  Cooperative

26039120246

Write or Type Committee Name

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 ALEXIS BADEN-MAYER

Mailing Address 118158 MINTWOOD PLACE NW #4

WASHINGTON DC 20009

Title or Position CITY STATE ZIP CODE

TREASURER Telephone number 202-744-0853

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 ALEXIS BADEN-MAYER

Mailing Address 118158 MINTWOOD PLACE NW #4

WASHINGTON DC 20009

Title or Position CITY STATE ZIP CODE

TREASURER Telephone number 202-744-0853

Full Name of Designated Agent RONNIE CUMMINS

Mailing Address 6771 SOUTH SILVER HILL DR

FINLAND MN 55602

Title or Position CITY STATE ZIP CODE

CHAIRPERSON Telephone number 218-349-3836

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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 N.A.

Mailing Address

PO BOX 125118

TAMPA FL 33622-5118

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Bank, Depository, etc.

VENTURE BANK

Mailing Address

5601 GREEN VALLEY DRIVE SUITE 120

BLOOMINGTON MN 55437-

CITY ▲

STATE ▲

ZIP CODE ▲

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**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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Other (Specify): Date of Receipt or Postmarked

*fel*  
 PREPARER

7/14/06  
 DATE PREPARED

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