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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. 12FE4M5

Tom Vilsack for President

ADDRESS (number and street) ▼ PO Box 1377

☐ (Check if address is changed)

Des Moines | IA | 50305 -

CITY ▲ STATE ▲ ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

info@tomvilsack08.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

www.tomvilsack08.com

COMMITTEE'S FAX NUMBER

515 - 277 - 7869

2. DATE 11 - 09 - 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 Theresa L. Kehoe

Signature of Treasurer Theresa L Kehoe Date 11 - 09 - 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.

Office Use Only				

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

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(Revised 02/2003)

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