

**FEC
FORM 1**

**STATEMENT OF
ORGANIZATION**

(See instructions)

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FEC MAIL
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2006 DEC 19 P 1:06

Office use only

1. NAME OF COMMITTEE (in full) (Check if name is changed) Example: If typing, type over the lines 12FE4M5
Kucinich for President 2008, Inc.

ADDRESS (number and street) 3886 North High Street
(Check if address is changed)
Columbus OH 43214
CITY STATE ZIP CODE

COMMITTEE'S E-MAIL ADDRESS
mcfiguelaw@rrohlo.com

COMMITTEE'S WEB PAGE ADDRESS (URL)
www.kucinich.us

COMMITTEE'S FAX NUMBER
6142637078

2. DATE M M D D Y Y Y Y
12 15 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 _____

Signature of Treasurer Lawrence J. Kucinich Electronically Filed by _____ Date 12 12 2006

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. 5437g.

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS

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 **Dennis J Kucnich**

Candidate Party Affiliation **DEM** 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

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship

Type of Connected Organization:

Corporation

Corporation w/o Capital Stock

Labor Organization

Membership Organization

Trade Association

Cooperative

515515032

Write or Type Committee Name

Kucinich for President 2008, Inc.

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 Donald J McTigue

Mailing Address 3886 North High Street

Columbus OH 43214

Title or Position ▼ CITY ▲ STATE ▲ ZIP CODE ▲

Telephone number 614 263 7000

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 Gary J Kucinich

Mailing Address 14518 Drake Road

Strongsville OH 44136

Title or Position ▼ CITY ▲ STATE ▲ ZIP CODE ▲

Treasurer Telephone number 440 759 9985

Full Name of Designated Agent _____

Mailing Address _____

Title or Position ▼ CITY ▲ STATE ▲ ZIP CODE ▲

Telephone number _____

2008031316

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.

Fifth Third Bank

Mailing Address

3580 North High Street

Columbus

OH

43214

CITY Δ

STATE Δ

ZIP CODE Δ

1280399313317

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.

Hand Delivered Date of Receipt
12/19/06

USPS First Class Mail Postmarked

USPS Registered/Certified Postmarked (R/C)

USPS Priority Mail Postmarked
 Delivery Confirmation™ or Signature Confirmation™ Label

USPS Express Mail Postmarked

Postmark Illegible

No Postmark

Overnight Delivery Service (Specify): Shipping Date
 Next Business Day Delivery

Received from House Records & Registration Office Date of Receipt

Received from Senate Public Records Office Date of Receipt

Received from Electronic Filing Office Date of Receipt

Other (Specify): Date of Receipt or Postmarked

 12/20/06
PREPARER **DATE PREPARED**

18 11 15 14 13 12 11 10 9 8 7 6 5 4 3 2 1