

FEDERAL ELECTION COMMISSION
PUBLIC DISCLOSURE
DIVISION



FEDERAL ELECTION COMMISSION
WASHINGTON, D.C. 20463

2012 MAY -4 AM 11:42

RQ-1

March 26, 2012

MARY C. FEJERAN, TREASURER
FRANK F BLAS JR FOR CONGRESS
PO BOX 74
HAGATNA, GU 96932-0074

Response Due Date
04/30/2012

IDENTIFICATION NUMBER: C00514612

REFERENCE: STATEMENT OF ORGANIZATION

Dear Treasurer:

This letter is prompted by the Commission's preliminary review of the Statement of Organization referenced above. This notice requests information essential to full public disclosure of your federal election campaign finances. **An adequate response must be received by the response date noted above.** Additional information is needed for the following 2 item(s):

1. On your Statement of Organization (FEC FORM 1), you appear to have selected multiple committee types. Please be advised that your committee may only select one Type of Committee. The Statement of Organization must provide the name, address and type of committee. (11 CFR § 102.2(a)(1)(i))

Please clarify your committee type by amending your Statement of Organization to disclose the correct committee type. This can be done in Section 5 "Type of Committee" on the FEC Form 1 by checking one of the boxes labeled (a) - (h) and providing any additional information requested for the selected committee type.

2. Commission Regulations require that the Statement of Organization (FEC Form 1) disclose the name and address of the treasurer of the committee. (11 CFR § 102.2(a)(iv)). Please amend your Statement of Organization to clarify the title or position of the individuals listed in Sections 7 and 8.

Please note you will not receive an additional notice from the Commission on this matter. Adequate responses received on or before this date will be taken into consideration in determining whether audit action will be initiated. **Requests for extensions of time in which to respond will not be considered.** Failure to provide an adequate response by this date may result in an audit of the committee. Failure to comply with the provisions of the Act may also result in an enforcement action against the committee. Any response submitted by your committee will be placed on the

COPY

120380002020581-3413

FRANK F BLAS JR FOR CONGRESS

Page 2 of 2

public record and will be considered by the Commission prior to taking enforcement action.

A copy of FEC FORM 1 can be downloaded from the FEC website at <http://www.fec.gov>, or requested through the FEC Faxline at (202) 501-3413. If you should have any questions regarding this matter or wish to verify the adequacy of your response, please contact me on our toll free number (800) 424-9530 (at the prompt press 5 to reach the Reports Analysis Division) or my local number (202) 694-1174.

Sincerely,



Caroline DeBerry
Campaign Finance Analyst
Reports Analysis Division

424

COPY

12030802395

FEC
FORM 1

STATEMENT OF
ORGANIZATION

RECEIVED
2012 MAY -4 AM 11:33
FEDERAL MAIL CENTER

1. NAME OF
COMMITTEE (in full)

(Check if name
is changed)

Example: If typing, type
over the lines.

12FE4M5

FRANK F. BLAS JR. FOR CONGRESS

ADDRESS (number and street)

P O BOX 74

(Check if address
is changed)

HAGATNA

GU

96932-0074

CITY

STATE

ZIP CODE

COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address)

(Check if address
is changed)

committee@frankblasjr.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address
is changed)

www.frankblasjr.com

2. DATE

04 / 05 / 2012

3. FEC IDENTIFICATION NUMBER

C 00514612

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

TINA ROSE ALICTO

Signature of Treasurer

Jim P. Alicto

Date

04 / 05 / 2012

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

FEC FORM 1
(Revised 02/2009)

12030802396

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	<input type="checkbox"/>
2.	_____	FEC ID number	<input type="checkbox"/>
3.	_____	FEC ID number	<input type="checkbox"/>
4.	_____	FEC ID number	<input type="checkbox"/>

12030802397

Write or Type Committee Name

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

[Empty grid lines for organization name]

Mailing Address

[Empty grid lines for 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

MARY C FEJERAN

Mailing Address

P O BOX 621

HAGATNA

GU

96932-0021

Title or Position

CITY

STATE

ZIP CODE

ASST TREASURER

Telephone number

671-688-6598

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

TINA ROSE ALICHO

Mailing Address

P O BOX 22632 GMF

BARRIGADA

GU

96921-

Title or Position

CITY

STATE

ZIP CODE

TREASURER

Telephone number

671-686-5988

12030802398

Full Name of Designated Agent

MARY C. FEJERAN

Mailing Address

P O BOX 621

HAGATNA

CITY

GU

STATE

96932-0621

ZIP CODE

Title or Position

ASST. TREASURER

Telephone number

671-688-6598

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 GUAM

Mailing Address

P O BOX BW

HAGATNA

CITY

GU

STATE

96932-

ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

CITY

STATE

ZIP CODE

12030802399

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

USPS First Class Mail Postmarked

USPS Registered/Certified Postmarked (R/C)
4/26/12

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


PREPARER
(3/2005)

5/4/12
DATE PREPARED

12030802400