01/03/2006 16 : 56

FEC FORM 1

STATEMENT OF ORGANIZATION

(See Instructions)

Office Use Only

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

Vectren Corporation Employees Federal PAC

ADDRESS (Number and Street)

(Check if address is changed)

Vectren Corporation Treasury Depar

One Vectren Square

Evansville | IN | 47708 -

CITY ▲ STATE ▲ ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

COMMITTEE'S WEB PAGE ADDRESS (URL)

COMMITTEE'S FAX NUMBER

812-491-4349

2. DATE 12 28 2005

3. **FEC IDENTIFICATION NUMBER** C C00240069

4. IS THIS STATEMENT NEW (N) OR X 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 Ms. Leslie Blenner

Signature of Treasurer Electronically Filed by Ms. Leslie Blenner Date 01 03 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

FEC FORM 1
(Revised 02/2003)

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) X 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

Vectren Corporation

Mailing Address 20 N.W. Fourth Street

Evansville IN 47741 -

CITY STATE ZIP CODE

Relationship

Type of Connected Organization:

X Corporation Corporation w/o Capital Stock Labor Organization

Membership Organization Trade Association Cooperative

Write or Type Committee Name

Vectren Corporation Employees Federal 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: Ronald E. Christian

Mailing Address: Vectren Corporation
One Vectren Square
Evansville IN 47708 –

Title or Position ▼ | CITY ▲ | STATE ▲ | ZIP CODE ▲

VP and Secretary

Telephone number: 812 – 491 – 4202

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: Ms. Leslie Blenner

Mailing Address: Vectren Corporation Treasury Depar
One Vectren Square
Evansville IN 47708 –

Title or Position ▼ | CITY ▲ | STATE ▲ | ZIP CODE ▲

Treasurer

Telephone number: 812 – 491 – 4302

Full Name of Designated Agent: Laura Pamplin

Mailing Address: Vectren Corporation Legal Dept.
One Vectren Square
Evansville IN 47708 –

Title or Position ▼ | CITY ▲ | STATE ▲ | ZIP CODE ▲

Assistant Treasurer

Telephone number: 812 – 491 – 4217

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

20 NW 3rd Street

Evansville IN 47708 –

CITY STATE ZIP CODE