Image# 27940086429

FEC FORM 1

STATEMENT OF ORGANIZATION

FORM 1	(See instructions)				Office use only		
NAME OF COMMITTEE (in f	rull) (C	heck if name changed)	Example: If typover the lines	oying, type	12FE4M5		
Value In Electi	ng Women Political	Action Com	nittee	<u> </u>	1111		
				<u> </u>	1111		
ADDRESS (number and s	itreet) 1155 21	st Street NW					
(Check if address is changed)	Suite 30 Washin				DC	20036	
COMMITTEE'S E-MAI	I ADDRESS		CITY▲		STATE▲	ZIP CODE ▲	
mgkelley@wm							
					1111		
COMMITTEE'S WEB I	PAGE ADDRESS (URL))					
		1 1 1 1 1	<u> </u>		1111	1 1 1 1 1 1 1 1 1	
		1 1 1 1	1 1 1 1 1	1 1 1 1			
COMMITTEE'S FAX N	UMBER						
نيا لينا							
2. DATE 0.1	/ D D / Y 26	2007					
3. FEC IDENTIFICATION	TION NUMBER		C C00327189				
4. IS THIS STATEM	ENT X NEW (N	N) OR	AME	ENDED (A)			
I certify that I have examin	ned this Statement and to t	the best of my know	wledge and belief it i	s true, correct and	d complete		
Type or Print Name of ⁷	Treasurer Me	redith G. Kelle	Э				
Signature of Treasurer	Electronically Filed by	y Meredith (G. Kelley		Date 0 1	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
NOTE: Submission of fals	se, erroneous, or incomple	•	subject the person		•	_	
Office Use Only			Federal E Toll Free	er information c lection Commiss 800-424-9530 2-694-1100		FEC FORM 1 (Revised 02/2003)	

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5.	TYPE OF COMMITTEE (Check One)					
	(a) This committee is a principal campaign committee. (Complete the candidate information below.)					
	This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)					
	Name of Candidate					
	Candidate Office House Senate President	State District				
	(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.					
	Name of Candidate					
		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 for committee.	fund or party				
ô.	Name of Any Connected Organization or Affiliated Committee					
l	NONE	.				
I						
_						
	Mailing Address					
	CITY▲ STATE ▲	ZIP CODE				
	Relationship					
	Type of Connected Organization:					
	Corporation Corporation w/o Capital Stock Labor Organiza	ation				
	Membership Organization Trade Association Cooperative					

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٧	rite or Type Committe	e Name						
	Value In Electin	g Women	Political Action Committee					
7.			entify by name, address, (phone number optional), and position of the person in books and records.					
	Full Name	Meredith	G. Kelley					
	Mailing Address		1155 21st Street, NW					
		_	Suite 300					
		_	Washington	DC	20036			
	Title or Position ♥		CITY A	STATE▲	ZIP CODE ▲			
	Tr	easurer		Telephone number				
	Full Name of Treasurer Mailing Address	Meredith	G. Kelley 1155 21st Street, NW	asurer).				
	3		Suite 300					
		_	Washington	DC	20036			
	Title or Position ♥		CITY A	STATE	ZIP CODE ▲			
	Tr	easurer		Telephone number 202				
	Full Name of Designated Agent							
	Mailing Address	_						
		_						
	Title or Position ♥		CITY A	STATE A	ZIP CODE A			

Telephone number

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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.				
	Mailing Address	Wachovia 20th & L Streets, NW			
		Washington	20036		
		CITY A STATE A	ZIP CODE △		