FEC FORM 1

STATEMENT OF ORGANIZATION

FORM 1 (See instructions)		Office use only	
NAME OF COMMITTEE (in formal committee)	(Check if name is changed)	Example: If typying, type over the lines	12FE4M5
Green Mountai	n PAC		
ADDRESS (number and st	PO Box 1142		
(Check if addre is changed)	Montpelier		VT
		CITY▲	STATE▲ ZIP CODE ▲
COMMITTEE'S E-MAIL dwyer329@veri			
1			
COMMITTEE'S WEB F	PAGE ADDRESS (URL)		
www.greenmo	untainpac.com		
COMMITTEE'S FAX NI 8022249176	UMBER		
2. DATE 0.7	$\begin{array}{c ccccccccccccccccccccccccccccccccccc$		
3. FEC IDENTIFICAT	TION NUMBER	C C00409110	
4. IS THIS STATEME	ENT X NEW (N) OR	AMENDED (A)	
I certify that I have examin	ed this Statement and to the best of my kn	owledge and belief it is true, correct a	and complete
Type or Print Name of T	reasurer Richard Cassid	у	
Signature of Treasurer	Electronically Filed by Richard (Cassidy	Date 07 / 09 / YYY06
NOTE: Submission of fals	·	ay subject the person signing this Sta	tement to the penalties of 2 U.S.C. S437g. WITHIN 10 DAYS
Office Use Only		For further information Federal Election Commis Toll Free 800-424-9530	

	FEOForm 1 (Revised 02/2003)	Page 2					
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						
		emocratic, publican,etc.) Party.					
	(e) This committee is a separate segregated fund						
	(f) X This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fur committee.	nd or party					
6.	Name of Any Connected Organization or Affiliated Committee Leahy Green Mountain Victory Fund	1					
_	Mailing Address 10 G Street, NE						
	Suite 440						
		002 _					
	CITY STATE A	ZIP CODE A					
	Relationship Joint Fundraising Participant	ı					
Tiedate in page 1							
Type of Connected Organization:							
	Corporation Corporation w/o Capital Stock Labor Organization	on					
	Membership Organization Trade Association Cooperative						

(2003)		Page 3					
Custodian of Records: Identify by name, address, (phone number optional), and position of the person in possession of Committee books and records.							
Dwyer							
PO Box 1142							
Montpelier	VT	<u> 05601</u> _					
CITY A	STATE	ZIP CODE A					
_	Telephone number	802 229 6874					
100 Main Street							
PO Box 1124							
Burlington		05402					
CITY A	STATE	E▲ ZIP CODE ▲					
	Telephone number						
O'Neill							
159 Bank Street							
PO Box 5359							
Burlington		05401_ –					
CITY A	STATE	ZIP CODE A					
	PO Box 1142 Montpelier CITY A CITY A Cassidy 100 Main Street PO Box 1124 Burlington CITY A O'Neill 159 Bank Street PO Box 5359 Burlington	PO Box 1142 Montpelier CITY A STATI Telephone number Cassidy 100 Main Street PO Box 1124 Burlington VT CITY A STATI Telephone number VT CITY A STATI Telephone number					

	FEC Form 1 (Revised 02	2/2003)	Page 4							
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.	of America								
		730 15th Street, NW								
	Mailing Address									
		Washington DC 2	20006 _ [_							

STATE ∠

 $\textbf{ZIP CODE} \quad \triangle$

CITY 🗷