22037701490

# Hamilton County Republican Party

MICHAEL R. BARRETT
*Chairman*

CHARLES H. GREENBERG, III
*Vice-Chairman*

700 Walnut Street, Suite 309
Cincinnati, Ohio 45202-2073
513/381-5454
FAX: 513/977-2595
Web Address: www.rp-hamilton.com

August 8, 2002

RECEIVED
FEC MAIL ROOM
2002 AUG 15 A 9 33

Federal Elections Commission
Reports Analyst Department
999 E Street, NW
Washington, D.C. 20463

Re: Republican Finance Committee of Hamilton County
FEC Identification Number C 00222000

Attn: Jim Krebs

Dear Jim:

Enclosed is our amended Statement of Organization (FEC Form 1). Please don't hesitate of call me at 513-381-5454 if you have any questions.

Thank you for your help in filling out this form.

Sincerely,

Phyllis Goetzinger
Deputy Treasurer
Republican Finance Committee
of Hamilton County

enclosure

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# FEC FORM 1

# STATEMENT OF ORGANIZATION

(See instructions)

RECEIVED
FEC MAIL ROOM
2002 AUG 15 AM 9:39

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

Republican Finance Committee of Hamilton County

ADDRESS (number and street) 700 Walnut Street, Suite 309

☐ (Check if address is changed)

Cincinnati OH 45202

CITY ▲ STATE ▲ ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

info@rp-hamilton.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

www.rp-hamilton.com

2. DATE 08 08 2002

3. FEC IDENTIFICATION NUMBER ▶ C 00222000

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 Bruce A. Taylor

Signature of Treasurer Bruce A. Taylor Date 08 08 2002

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 1/01)

PB1AN040

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 S.U.B (National, State or subordinate) committee of the R.E.P (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

Hamilton County Republican Party

Mailing Address 700 Walnut Street, Suite 309

Cincinnati OH 45202 -

CITY ▲ STATE ▲ ZIP CODE ▲

Relationship Affiliated

Type of Connected Organization:

☐ Corporation ☐ Corporation w/o Capital Stock ☐ Labor Organization

☐ Membership Organization ☐ Trade Association ☐ Cooperative

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An authorized party 2 committee are also affiliated with the Ohio Republican Party. PG.



5. TYPE OF COMMITTEE (Check One)

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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

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(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

Ohio Republican Party

Mailing Address 211 South Fifth Street

Columbus | O H | 43215 -

CITY ▲ STATE ▲ ZIP CODE ▲

Relationship Affiliated

Type of Connected Organization:

☐ Corporation ☐ Corporation w/o Capital Stock ☐ Labor Organization

☐ Membership Organization ☐ Trade Association ☐ Cooperative

Write or Type Committee Name

Republican Finance Committee of Hamilton County.

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: Phyllis J. Goetzinger

Mailing Address: 700 Walnut Street, Suite 309

CITY ▲: Cincinnati STATE ▲: OH ZIP CODE ▲: 45202 -

Title or Position ▼: Deputy Treasurer

Telephone number: 513 - 381 - 5454

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: Bruce A. Taylor

Mailing Address: 700 Walnut Street, Suite 309

CITY ▲: Cincinnati STATE ▲: OH ZIP CODE ▲: 45202 -

Title or Position ▼: Treasurer

Telephone number: 513 - 381 - 5454

Full Name of Designated Agent: Phyllis J. Goetzinger

Mailing Address: 700 Walnut Street, Suite 309

CITY ▲: Cincinnati STATE ▲: OH ZIP CODE ▲: 45202 -

Title or Position ▼: Deputy Treasuret

Telephone number: 513 - 381 - 5454

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.

The Fifth Third Bank

Mailing Address 38 Fountain Square Plaza

Cincinnati OH 45263

CITY ▲ STATE ▲ ZIP CODE ▲

Name of Bank, Depository, etc.

Mailing Address

CITY ▲ STATE ▲ ZIP CODE ▲

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Federal Election Commission

# ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

The Commission has added this page to the end of this filing to indicate how it was received.

| | | |
|---|---|---|
| ☐ | Hand Delivered | Date of Receipt |
| ☑ | First Class Mail | POSTMARKED 8-8-07 |
| ☐ | Registered/Certified Mail | POSTMARKED (R/C) |
| ☐ | No Postmark | |
| ☐ | Postmark Illegible | |
| ☐ | Received from the House office of Records and Registration | Date of Receipt |
| ☐ | Received from the Senate Office of Public Records | Date of Receipt |
| ☐ | Other ( Specify): | Postmarked _____ and/or Date of Receipt |
| ☐ | Electronic Filing | |

[signature] 8-15-07

PREPARER DATE PREPARED

(6/2000)

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