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COMMUNICATIONS CENTER

2002 OCT -2 A 10:24

September 26, 2002

Federal Elections Commission
999 E Street, NW
Washington, DC 20463

To Whom It May Concern:

The 6th District Democratic Party of Wisconsin (FEC ID C00274407) is sending an amended Statement of Organization and Report of Receipts and Disbursements. The FEC recently sent a letter indicating that our name was incorrectly listed on our paperwork (see attached letter). The FEC created a new FEC ID C00380311. This FEC ID is not valid for our PAC and the results posted under FEC ID C00380311 should be posted under our existing FEC ID C00274407.

Sincerely,


J. Squire
Treasurer



FEDERAL ELECTION COMMISSION
WASHINGTON, D.C. 20541

6th District
Democratic Party of
Wisconsin
RQ-1
FECID - C00274407

Lm
Jane Parks
9/24/02

Jeffrey C. Squier, Treasurer
6th Democratic Party of Wisconsin
2636 N. 28th Street
Sheboygan, WI 53081

AUG 21 2002

Identification Number: C00380311

Reference: Statement of Organization, dated 7/19/02

Dear Mr. Squier:

This letter is prompted by the Commission's preliminary review of your Statement of Organization. The review raised questions concerning certain information contained in the Statement. An itemization follows:

Incorrect

-Be advised that you have used an incorrect committee identification number on the Summary Page of your report(s). Please file all future reports and correspondence using your correct identification number, **C00380311**, to avoid potential errors in entering your reports onto the public record.

Mark Local Cmte =>

-Line 5(d) of your Statement of Organization indicates that that you are a state party committee for the Democratic Party in Wisconsin, however, there is already a Wisconsin Democratic state party committee registered with the Commission. If you are an account of the Wisconsin Democratic Party, you need not register with the Commission. Please amend your Statement of Organization to provide further clarification. => ~~state~~

Should be Dem. Party of Wis.

-Please clarify your relationship, if any, with the Democratic Party of Wisconsin which appears to be an affiliated committee, as well as provide a mailing address. For further guidance on the question of affiliation, please refer to 11 CFR §100.5(g) and §110.3. If your committee is affiliated with the Democratic Party of Wisconsin, you should amend your Statement of Organization to reflect this relationship as "affiliated" on Line 5.

Structure of organization should

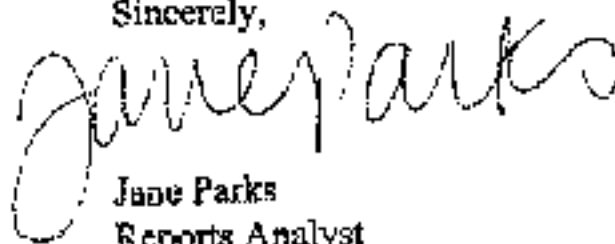
be amended
Marked as

"affiliated" on Line 5.

2002 AUG 21 10 57 AM

A response or amendment to your original report(s) correcting the above problem(s) should be filed with the Federal Election Commission within fifteen (15) days of the date of this letter. Electronic filers must file amendments (to include statements, designations and reports) in an electronic format and must submit an amended report in its entirety, rather than just those portions of the report that are being amended. If you need assistance, please feel free to contact me on our toll-free number, (800) 424-9530 (at the prompt press 1, then press 2 to reach the Reports Analysis Division). My local number is (202) 694-1130.

Sincerely,



Jade Parks
Reports Analyst
Reports Analysis Division

FEC FORM 1

STATEMENT OF ORGANIZATION

(See instructions)

RECEIVED
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ELECTION CENTER

7007 001 -2 A 8-24

Office Use Only

1. NAME OF COMMITTEE (or full) (Check if name is changed) Example: If typing, type over the line. 12PE4M5

6th District Democratic Party of Wisconsin

ADDRESS (number and street) 2636 N. 28th Street

(Check if address is changed)

Sheboygan WI 53081

CITY STATE ZIP CODE

COMMITTEE'S E-MAIL ADDRESS

COMMITTEE'S WEB PAGE ADDRESS (URL)

2. DATE 07 19 2002

3. FEC IDENTIFICATION NUMBER C 00274407

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 Jeffrey C Squier

Signature of Treasurer [Handwritten Signature]

Date 07 19 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.

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
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- (c) This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate _____

- (d) This committee is a Local (National, or subordinate) committee of the 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

Democratic Party of Wisconsin

Mailing Address 222 State St Suite 400

MADISON WI 53703

CITY ▲ STATE ▲ ZIP CODE ▲

Relationship affiliated

Type of Connected Organization:

- | | | |
|-------------------------|--------------------------------|--------------------|
| Corporation | Corporation with Capital Stock | Labor Organization |
| Membership Organization | Trade Association | Cooperative |

Write or Type Committee Name

6th District Democratic Party of Wisconsin

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

Mailing Address

William Stephen

2636 N 28th Street

Sheboygan

WI

53081

Title or Position

CITY

STATE

ZIP CODE

Chair

Telephone number

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

Jeffrey C Souier

Mailing Address

326 Indian Oaks Lane

Sheboygan

Sheboygan

WI

53081

Title or Position

CITY

STATE

ZIP CODE

Treasurer

Telephone number

Full Name of Designated Agent

Mailing Address

Title or Position

CITY

STATE

ZIP CODE

Telephone number

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.

Associated Bank

Mailing Address

200 N Adams St

P.O. Box 19006

Green Bay

WI

54307-19006

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Bank, Depository, etc.

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

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.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input checked="" type="checkbox"/> First Class Mail	POSTMARKED 9-26-02
<input type="checkbox"/> Registered/Certified Mail	POSTMARKED (R/C)
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House office of Records and Registration	Date of Receipt
<input type="checkbox"/> Received from the Senate Office of Public Records	Date of Receipt
<input type="checkbox"/> Other (Specify)	Postmarked and/or Date of Receipt
<input type="checkbox"/> Electronic Filing	
<i>Set</i> PREPARER	10-2-02 DATE PREPARED

2002-09-26 14:25:33