

FEC  
FORM 1

# STATEMENT OF ORGANIZATION

SECRETARY OF THE SENATE  
10 SEP 24 AM 11:04

Office Use Only

1. NAME OF  
COMMITTEE (in full)

(Check if name  
is changed)

Example: If typing, type  
over the lines.

12FE4M5

Boozman for Arkansas

ADDRESS (number and street)

322 North Bloomington, Suite A-B

(Check if address  
is changed)

Lowell

AR

72745

CITY

STATE

ZIP CODE

COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address)

(Check if address  
is changed)

boozmanforarkansas2010@gmail.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address  
is changed)

boozmanforarkansas.com

2. DATE

09

20

2010

3. FEC IDENTIFICATION NUMBER

C 00476317

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

Sal Purpura

Signature of Treasurer

Date

09

20

2010

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 02/2009)

10020663579

5. TYPE OF COMMITTEE

Candidate Committee:

- (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: John Boozman

Candidate Party Affiliation: REP      Office Sought:  House  Senate  President      State: AR      District: 00

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

Name of Candidate: \_\_\_\_\_

Party Committee:

(d)  This committee is a \_\_\_\_\_ (National, State or subordinate) committee of the \_\_\_\_\_ (Democratic, Republican, etc.) Party.

Political Action Committee (PAC):

- (e)  This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:

Corporation       Corporation w/o Capital Stock       Labor Organization  
 Membership Organization       Trade Association       Cooperative  
 In addition, this committee is a Lobbyist/Registrant PAC.

- (f)  This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)

In addition, this committee is a Lobbyist/Registrant PAC.  
 In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)

Joint Fundraising Representative:

- (g)  This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.
- (h)  This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.

Committees Participating in Joint Fundraiser

1. \_\_\_\_\_ FEC ID number: C \_\_\_\_\_  
 2. \_\_\_\_\_ FEC ID number: C \_\_\_\_\_  
 3. \_\_\_\_\_ FEC ID number: C \_\_\_\_\_  
 4. \_\_\_\_\_ FEC ID number: C \_\_\_\_\_

10020663580

Write or Type Committee Name

Boozman for Arkansas

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

The Leader's Project

Mailing Address

c/o NRSC 425 2nd St NE

Washington

DC

20002

CITY

STATE

ZIP CODE

Relationship:  Connected Organization  Affiliated Committee  Joint Fundraising Representative  Leadership PAC Sponsor

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 Sal Purpura

Mailing Address

c/o 2651 N Rock Island Rd, #206

Margate

FL

33063

Title or Position

CITY

STATE

ZIP CODE

Treasurer

Telephone number

703

650

5624

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 Sal Purpura

Mailing Address

c/o 2561 N Rock Island Rd, #206

Margate

FL

33063

Title or Position

CITY

STATE

ZIP CODE

Treasurer

Telephone number

703

650

5624

10020663581

Full Name of Designated Agent

Sofia Amaya

Mailing Address

c/o 322 North Bloomington Suite A-B

Lowell AR 72745

CITY

STATE

ZIP CODE

Title or Position

Assistant Treasurer

Telephone number 703 - 650 - 5624

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.

Arvest Bank

Mailing Address

PO Box 809

Rogers AR 72757

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

Chain Bridge Bank

Mailing Address

1445-A Laughlin Ave

McLean VA 22101

CITY

STATE

ZIP CODE

10020663582



OPENED



OPENED



977580-90  
 TRACKING NUMBER  
 U.S. SENATE

From: Origin ID: TMTA (202) 498-5258  
 SAL PURPURA  
 Carry for California  
 2651 N ROCK ISLAND RD  
 APT 206  
 MARGATE, FL 33063



SHIP TO: (202) 224-0758  
**Mr. Raymond Davis**  
 Sec. of the Senate-Public Records  
 232 Hart Senate Building

Washington, DC 20510

Ext

Insert  
 airbill  
 here

Ship Date: 20SEP10  
 ActWgt: 1.0 LB  
 CAD: 10111341/INET3090

Delivery Address Bar Code



Ref #  
 Invoice #  
 PO #  
 Dept #

RT 0  
 ST 0

3940  
 09.22

THU - 23 SEP A2  
 EXPRESS SAVER

TRK# 7939 2706 3940  
 [0201]

20510  
 DC-05  
 DCA

SA YKNA



FOR MORE INFORMATION, GO TO [csr.fedex.com](http://csr.fedex.com)

# United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

HAND DELIVERED \_\_\_\_\_  
Date of Receipt

USPS FIRST CLASS MAIL \_\_\_\_\_  
Postmark

USPS REGISTERED/CERTIFIED \_\_\_\_\_  
Postmark

USPS PRIORITY MAIL \_\_\_\_\_  
Postmark

DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL

USPS EXPRESS MAIL \_\_\_\_\_  
Postmark

OVERNIGHT DELIVERY SERVICE:

	SHIPPING DATE	NEXT BUSINESS DAY DELIVERY
FEDERAL EXPRESS	<u>9-23-10</u>	<input type="checkbox"/>
UPS	_____	<input type="checkbox"/>
DHL	_____	<input type="checkbox"/>
AIRBORNE EXPRESS	_____	<input type="checkbox"/>

RECEIVED FROM FEDERAL ELECTION COMMISSION \_\_\_\_\_  
Date of Receipt

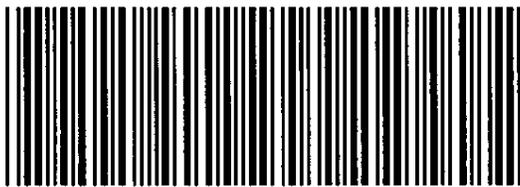
POSTMARK ILLEGIBLE  NO POSTMARK

FAX \_\_\_\_\_  
Date of Receipt

OTHER \_\_\_\_\_  
Date of Receipt or Postmark

PREPARER DH DATE PREPARED 9-24-10

16020663584



10020663585