

FEC FORM 1

STATEMENT OF ORGANIZATION

RECEIVED

2011 SEP 23 AM 11:45
Office Use Only

FEC MAIL CENTER

12FE4M5

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

WORZALA FOR CONGRESS

ADDRESS (number and street) P.O. BOX 2073

(Check if address is changed)

MADISON WI 53701

CITY STATE ZIP CODE

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

(Check if address is changed)

DANIEL@WORZALAFORCONGRESS.COM

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address is changed)

WORZALAFORCONGRESS.COM

2. DATE 09 / 15 / 2011

3. FEC IDENTIFICATION NUMBER C to be assigned

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 LISA VELDRAN

Signature of Treasurer Lisa Veldran Date 09 / 19 / 2011

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)

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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 DAVID W ORZALA

Candidate Party Affiliation DEM Office Sought: House Senate President State WI District 02

- (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

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Write or Type Committee Name

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

[Empty grid lines for organization name]

Mailing Address

[Empty grid lines for mailing address]

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

LISA VELDRAN

Mailing Address

5738 KRONCKE DRIVE

MADISON

WI

53711

Title or Position

CITY

STATE

ZIP CODE

TREASURER

Telephone number

608-271-0722

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

LISA VELDRAN

Mailing Address

5738 KRONCKE DRIVE

MADISON

WI

53711

Title or Position

CITY

STATE

ZIP CODE

TREASURER

Telephone number

608-271-0722

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Full Name of Designated Agent

DAVID EGAN-ROBERTSON

Mailing Address

616 SPRAGUE ST

MADISON

CITY

WI

STATE

53711-

ZIP CODE

Title or Position

DEPUTY TREASURER

Telephone number

608-231-3959

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

1720 MONROE STREET

MADISON

CITY

WI

STATE

53711-

ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

CITY

STATE

ZIP CODE

11030663659

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
 The FEC added this page to the end of this filing to indicate how it was received.

Hand Delivered Date of Receipt

USPS First Class Mail Postmarked

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No Postmark


Overnight Delivery Service (Specify): Shipping Date
Next Business Day Delivery

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Other (Specify): Date of Receipt or Postmarked


 PREPARER
 (3/2005)

9/23/11
 DATE PREPARED

11030663660