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FEC FORM 1

STATEMENT OF ORGANIZATION

Office Use Only

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

BRINKMAN FOR CONGRESS COMMITTEE

ADDRESS (number and street) ▼ P O BOX 9714

☐ (Check if address is changed)

CINCINNATI | OH | 45208 - 0714

CITY ▲ STATE ▲ ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

TOM@GOBRINKMAN.COM

COMMITTEE'S WEB PAGE ADDRESS (URL)

www.gobrinkman.com

COMMITTEE'S FAX NUMBER

513 - 769 - 0925

2. DATE 04 / 27 / 2005

3. FEC IDENTIFICATION NUMBER ▶ C

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 F. William Luchsinger, CPA

Signature of Treasurer F William Luchsinger CPA Date 04 / 27 / 2005

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

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(Revised 02/2003)

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