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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

BUCK MCKEON FOR CONGRESS

ADDRESS (number and street) ▼ 24265 SAN FERNANDO ROAD

☐ (Check if address is changed)

SANTA CLARITA CA 91321-

CITY ▲ STATE ▲ ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

patriciamckeon@hotmail.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

www.buckmckeon.com

COMMITTEE'S FAX NUMBER

661-255-5765

2. DATE 12 / 08 / 2006

3. FEC IDENTIFICATION NUMBER ▶ C00258244

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 PATRICIA MCKEON

Signature of Treasurer Patricia McKeon Date 12 / 08 / 2006

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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