RECEIVED 2010 NOV - 1 AM 10: 20 FEC MAIL CENTER

October 25, 2010

Mr. Seth L. Kaye Campaign Finance Analyst Federal Election Commission 999 E Street NW Washington, DC 20463

Re: C00289140

Dear Mr. Kay:

Pursuant to your letter of October 21, 2010. I filed an amended Statement of Organization, which contains the items requested.

The amended statement was accepted under the number FEC511264.

I have also enclosed a copy highlighting the items.

I believe this answers your request.

Thank you for your attention.

Sincerely,

Donna Foley Winterson

Treasurer

AND MERCHANISM STREET

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FEC

FORM 1

RECEIVED

STATEMENT OF ORGANIZATION

2010 NOV - 1 AM 10: 20

FEC MAIL CENTER

				(See Instruct	ions)					Office use	only		
1.	NAME OF COMMITTEE (in t	full)		(Check if name is changed)	Exar	nple: If typying, type the lines	• [2FĘ4	M5	1 1			
L	Friends of Mar	k Foley fo	r Gong	ress				11	11		لـــــا		لــــــــــــــــــــــــــــــــــــــ
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					CITY		s [.]	ΓΑΤΕ ⊿			ZIP C	DDE 🔺	
· co	COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address)												
П	(Check if address		foley	/wint@aol.com	بلب				1.		<u> </u>	11	لــــــــــــــــــــــــــــــــــــــ
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2. 3. 4.	DATE M_M_M 1.0 FEC IDENTIFICA IS THIS STATEM	ATION NUM	BER	20,10, Y (N) OR	C C00	289140 AMENDED (A)							
	TO THE OTHER PARTY OF THE PARTY												
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 Donna Foley Winterson													
Type or Print Name of Treasurer Donna Foley Winterson													
Sịg	n a ture of Treasure	r Electron	ically Fil	ed by . Donna F	oley Win	terson	Da	ite	M M	/ D	В /	Υ.	, 1 - 1 - 1
NO	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 informatic Federal Election Common Toll Free 800-424-953	mission	act:			C FO		

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5.	. TYPE OF COMMITTEE (Check One)							
	Candidate Committee:							
	(a) X	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	Mark Foley						
	Candidate Party Affiliat							
	(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.							
	Name of Candidate							
	Party Comn							
	(d)	(National, State (Democratic, Republican,etc.) Party.						
	—	tion 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						
		Mambership Organization Trade Association Cooperative						
	<i>(</i> 2)	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.						
	Com	mittees Participating in Joint Fundraiser						
		1 FEC ID mumber						
		2. FEC ID number C						
		3.						
		4. FEC ID number C						

FEC Form 1 (Revised	02/2009)		Page3					
Write or Type Committee Name	е							
Friends of Mark Foley	for Congress							
6. Name of Any Connected (Organization, Affiliated Committee, Joint Fundrais	ing Representative, or Lea	dership PAC Sponsor					
NONE		<u> </u>						
1 1 1 1 1 1 1 1 1		1 1 1 1 1 1 1 1 1	<u> </u>					
Mailing Address								
·								
		ا ليا لي						
	CITYA	STATE	ZIP CODE					
Relationship:								
Connected Organization	on Affiliated Committee Joint Fund	fraising Representative	Leadership PAC Sponsor					
	dentify by name, address, (phone number op	tional), and position of the	person in					
·	possession of Committee books and records.							
Full Name Donn	Full Name Donna Foley Winterson							
Mailing Address	1316 Lake Victoria Drive							
	Lake Worth	FL	33461					
Title or Position ♥	CITY A	STATE	ZIP CODE A					
Treasure	Pr Te	lephone number561	- 582 - 4056					
	e and address (phone number optional) of the	e treasurer of the committee	ee; and the					
name and address of ar	name and address of any designated agent (e.g., assistant treasurer).							
Full Name of Treasurer Donr	na Foley Winterson							
Mailing Address	1316 Lake Victoria Drive							
	Lake Worth	FL	33461					
Title or Position ♥	CITY A	STATE A	ZIP CODE A					
Treasure	er Te	lephone number 561	582 4056					

Full Name of Designated Agent	Donna Foley Winterson				
Mailing Address	1316 Lake Victoria Drive				
	Lake Worth	FL	33461 _		
Title or Position ♥	CITY	STATE 🛦	ZIP CODE A		
Treasu	rer Telep	phone number	5824056		
Name of Bank, Deposito	ory, etc. dian Private Bank				
	dian Private Bank 420 Royal Palm Way		33480 _		
Ly	dian Private Bank	FL STATE A	33480 ZIP CODE		
	dian Private Bank 420 Royal Palm Way Palm Beach CITY △				
Mailing Address Name of Bank, Depositor	dian Private Bank 420 Royal Palm Way Palm Beach CITY △				
Mailing Address Name of Bank, Depositor	Palm Beach CITY A				
Mailing Address Name of Bank, Deposito	Palm Beach CITY A ory, etc. achovia Bank				
Mailing Address Name of Bank, Deposito	Palm Beach CITY A ory, etc. achovia Bank				

- ·	naintains funds.	r	ADDITIONAL
Name of Bank, Depositor		ι	ADDITIONAL]
, Fid	delity Investments		11111111
Mailing Address	230 Royal Palm Way	1.	
	Palm Beach	ı FL	33480 -
•	CITY A	STATE	ZIP CODE A
Name of Any Connecte	d Organization, Affiliated Committee, Joint Fundraising	g Representative, or Lead	[ADDITIONAL] ership PAC Sponsor
Mailing Address			
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		با ليا لي	
elationship:	CITY▲	STATE	ZIP CODE
Connected Organization	Affiliated Committee Joint Fundraising	Representative Lead	ership PAC Sponsor
Designated Agent			[ADDITIONAL]
	lark Foley		
Mailing Address	PO Box 93		
	Palm Beach	FL	33480
Title or Position ♥	CITY A	STATE &	ZIP CODE &
D ери	uty Treasurer Tele	561 ephone number	582 4056
			[ADDITIONAL]
Joint Fundraiser Partic	ipant		-

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... **Date of Receipt Hand Delivered** Postmarked **USPS First Class Mail** 10/26/10 Postmarked (R/C) **USPS** Registered/Certified Postmarked **USPS Priority Mail** Delivery Confirmation™ or Signature Confirmation™ Label Postmarked **USPS Express Mail** Postmark Illegible No Postmark **Shipping Date** Overnight Delivery Service (Specify): **Next Business Day Delivery Date of Receipt** Received from House Records & Registration Office **Date of Receipt** Received from Senate Public Records Office **Date of Receipt** Received from Electronic Filing Office Date of Receipt or Postmarked Other (Specify):