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FEC FORM 1

STATEMENT OF ORGANIZATION

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NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5	
Heçla Mi	ining Company/Hec	cla Limited Politi	cal Action Go	mmittee
		<u> </u>	111111	
ADDRESS (number and street)	6500 N. Minera	l Drive, Suite 200		لتستبينا
(Check if address is changed)	Coeur d'Alene		ID 83	815 9408
COMMITTEE'S E-MAIL ADDRES	SS	CITY ▲	STATE ▲	ZIP CODE ▲
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COMMITTEE'S WEB PAGE ADD	PRESS (URL)			
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COMMITTEE'S FAX NUMBER				t will be
2. DATE 10 30	2007			
3. FEC IDENTIFICATION NU	MBER ▶ C	00124016		
4. IS THIS STATEMENT : ,	NEW (N) OR	X: AMENDED (A)		
I certify that I have examined this	Vicki Veltk		it is true, correct and	complete.
Signature of Treasurer	le fille		Date /	07 8 2007
NOTE: Submission of false, erroned	•	n may subject the person signing		penalties of 2 U.S.C. §437g.
Office Use Only		For further information Federal Election Commis Toll Free 800-424-9530 Local 202-694-1100		FEC FORM 1 (Revised 02/2003)

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ſ	FEC Form 1 (Revised 02/2003)	Page 2
5.	TYPE OF COMMITTEE (Check One)	
	(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. (Completinformation below.)	ete the candidate
	Name of Candidate	
	Candidate Office Party Affiliation Sought: House Senate President	State
	(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.	
	Name of Candidate	
		emocratic, epublican, etc.) Party.
	(e) This committee is a separate segregated fund.	
	(f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segre committee.	egated fund or party
6.	Name of Any Connected Organization or Affiliated Committee	
L		<u> </u>
L		
	Mailing Address	
		<u> </u>
	CITY ▲ STATE ▲	ZIP CODE ▲
	l e e e e e e e e e e e e e e e e e e e	
	Relationship	
	Type of Connected Organization:	
	a Corporation Corporation w/o Capital Stock Labor Organiza	tion
	Membership Organization Trade Association Cooperative	

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	FEC Form 1 (Revised (02/2003)			Page 3
٧	Vrite or Type Committee Name		ol Astisu Com		
		pany/Hecla Limited Politic			
7.	Custodian of Records: Ider books and records.	ntify by name, address (phone number op	otional) and position of	the per	son in possession of committee
	Full Name Jean	nne M. DuPont	 	اللل	
	Mailing Address	6500 N. Mineral Drive,	Suite 200	11	
		Coeur d'Alene	III		83815 - 9408
	Title or Position▼	CITY ▲	STAT	ΈΔ	ZIP CODE ▲
	Secretary		Telephone number	208	3 - 769 - 4177
8.	Treasurer: List the name an any designated agent (e.g.,	nd address (phone number optional) of the assistant treasurer).	e treasurer of the com	mittee;	and the name and address of
	Full Name of Treasurer		 	بللا	
	Mailing Address				11111111
					1111111
				ل	<u> </u>
	Title or Position▼	CITY ▲	STAT	ΈΔ	ZIP CODE ▲
			Telephone number	Lı	
	Full Name of Designated Agent	Chad R. Farrar			
	Mailing Address	6500 N. Mineral Drive,	Suite 200		<u> </u>
	!		<u> </u>		<u> </u>
		Coeur d'Alene	LI LI		83815 9408
	Title or Position▼	CITY ▲	STAT	ΓE ▲	ZIP CODE A
	Assistant Trea	surer	Tolonhono mus-b-s	20	8 769 4164

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