2010 APR - 1 AM 9: 09

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STATEMENT OF **ORGANIZATION**

| FORM 1 | <u> </u> | | | Office Use Only | |
|----------------------------------|------------------------------|--|--------------------|-------------------------------------|--|
| NAME OF COMMITTEE (in full) | (Check if name is changed) | Example:If typing, type over the lines. | 12FE4M | | |
| TEA PARTY | PAC DF US | <u>A </u> | | | |
| | | | | | |
| ADDRESS (number and street) | 1132131 BUN | GIAKOIY IAIVIEI I | | | |
| (Check if address | | | | | |
| is changed) | DURHAM | | المالك | 27703- | |
| | | СПУ | STATE | ZIP CODE | |
| COMMITTEE'S E-MAIL ADDRI | ESS (Please provide only one | e-mail address) | | | |
| (Check if address is changed) | [| | | | |
| | | | | | |
| COMMITTEE'S WEB PAGE AL | 200ESS (1101) | | | | |
| COMMINITEE O STED STATE THE | WWW.TEAPARTYPAC.NING.COM. | | | | |
| (Check if address is changed) | | | | | |
| | | | | | |
| 2. DATE 03 2 | 1 2010 | | | | |
| 3. FEC IDENTIFICATION N | IUMBER C (| 00475962 | | | |
| 4. IS THIS STATEMENT | NEW (N) OR | AMENDED (A) | | | |
| I certify that I have examined | this Statement and to the bo | est of my knowledge and belief | it is true, corre | ect and complete. | |
| Type or Print Name of Treasure | er Kimberly | J. CURTIS | | | |
| Signature of Treasurer | mby Costs | | Date \mathcal{O} | 3 27 2010 | |
| NOTE: Submission of false, error | | on may subject the person signing | | to the penalties of 2 U.S.C. §437g. | |
| Office Use Only | | For further information Federal Election Commis Toll Free 800-424-9530 | | FEC FORM 1 (Revised 02/2009) | |

| FEC F | orm 1 (Revised 02/2009) | Page 2 |
|----------------------------|---|--|
| | 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. (Compinformation below.) | plete the candidate |
| Name of Candidate | | |
| Candidate Party Affilia | Office tion Sought: House Senate President | State |
| (c) | This committee supports/opposes only one candidate, and is NOT an authorized committee. | 2.03.01 |
| Name of Candidate | | |
| Party Co | | |
| (d) . | · · · · · · · · · · · · · · · · · · · | (Democratic, Republican, etc.) Party. |
| Political A | Action Committee (PAC): | officials 1 = 11 The last block determination (a. 1 to 1 a), consequent block of the |
| (e) | This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con | nected 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) \sqrt{1} | This committee supports/opposes more than one Federal candidate, and is NOT a separate se committee. (i.e., nonconnected committee) | gregated fund or party |
| | In addition, this committee is a Lobbyist/Registrant PAC. | |
| | In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.) | |
| Joint Fun | draising Representative: | |
| (g) | This committee collects contributions, pays fundraising expenses and disburses net proceeds for tw | o or more political |
| /b\ | committees/organizations, at least one of which is an authorized committee of a federal candidate. This committee collects contributions, pays fundraising expenses and disburses net proceeds for two | o or more political |
| (h) | committees/organizations, none of which is an authorized committee of a federal candidate. | b or more political |
| Cor | nmittees Participating in Joint Fundraiser | |
| 1. | NONE FEC ID number C | en de la companya de La companya de la co |
| 2. | FEC ID number C | |
| 3. | FEC ID number C | · · · · · · · · · · · · · · · · · · · |
| 4. | | |

CITY

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

Page 3

ZIP CODE

6301-1847-151431

FEC Form 1 (Revised 02/2009)

Write or Type Committee Name

Title or Position

ITIREASURE

| FEC Form 1 (Revise | d 02/2009) | | Page 4 |
|---|------------|------------------|----------------------|
| | | | |
| Full Name of Designated Agent | | | |
| Mailing Address | | | |
| | | | |
| | CITY | STATE | ZIP CODE |
| Title or Position | | | |
| | | Telephone number | |
| safety deposit boxes or mair Name of Bank, Depository, | | _ <u></u> | |
| | | | 13.36.2.71-15.1.1.81 |
| | CITY | STATE | ZIP CODE |
| Name of Bank, Depository, | etc. | | |
| | | | |
| Mailing Address | | | |
| | | 11111111 | |
| | | | السال-السلا |
| | CITY | STATE | ZIP CODE |

(3/2005)

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** 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): **PREPARER** DATE PREPARED