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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

ALLEN COUNTY RIGHT TO LIFE INC POLITICAL ACTION COMMITTEE

ADDRESS (number and street)

3409 CONESTOGA DR SUITE A

(Check if address is changed)

FORT WAYNE IN 46808-

CITY ▲

STATE ▲

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

ANNEWALL@TCAWCORP.COM

COMMITTEE'S WEB PAGE ADDRESS (URL)

COMMITTEE'S FAX NUMBER

260-471-1574

2. DATE

01 08 2007

3. FEC IDENTIFICATION NUMBER ▶

C00235861

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

ANNE M. WALL

Signature of Treasurer

Anne M. Wall

Date

01 08 2007

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

FEC FORM 1
(Revised 02/2003)

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Federal Election Commission
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PREPARER
(3/2005)

1/16/07
DATE PREPARED

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