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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

CALCOT, LTD FEDERAL POLITICAL ACTION COMMITTEE

ADDRESS (number and street)

PO BOX 259

(Check if address
is changed)

BAKERSFIELD

CA

93302-0259

CITY ▲

STATE ▲

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

COMMITTEE'S WEB PAGE ADDRESS (URL)

COMMITTEE'S FAX NUMBER

661-861-9870

2. DATE

04 / 14 / 2005

3. FEC IDENTIFICATION NUMBER ▶

C 00172775

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

LARRY E. NICHOLS

Signature of Treasurer

Date

04 / 14 / 2005

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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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. (Complete the candidate information below.)

Name of Candidate _____

Candidate Party Affiliation Office Sought: House Senate President State District

- (c) This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate _____

- (d) This committee is a (National, State or subordinate) committee of the (Democratic, Republican, 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 segregated fund or party committee.

6. Name of Any Connected Organization or Affiliated Committee

CALCOT, LTD _____

Mailing Address P.O. BOX 259 _____

BAKERSFIELD CA 93302-0259

CITY ▲ STATE ▲ ZIP CODE ▲

Relationship CONNECTED _____

Type of Connected Organization:

- Corporation Corporation w/o Capital Stock Labor Organization
- Membership Organization Trade Association Cooperative

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Write or Type Committee Name

CALCOT, LTD. FEDERAL POLITICAL ACTION COMMITTEE

7. Custodian of Records: Identify by name, address (phone number - optional) and position of the person in possession of committee books and records.

Full Name L A R R Y E N I C H O L S

Mailing Address P O B O X 2 5 9

B A K E R S F I E L D C A 9 3 3 0 2 - 0 2 5 9

Title or Position CITY STATE ZIP CODE

T R E A S U R E R Telephone number 6 6 1 - 3 9 5 - 6 8 1 7

8. Treasurer: List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name of Treasurer L A R R Y E N I C H O L S

Mailing Address P O B O X 2 5 9

B A K E R S F I E L D C A 9 3 3 0 2 - 0 2 5 9

Title or Position CITY STATE ZIP CODE

T R E A S U R E R Telephone number 6 6 1 - 3 9 5 - 6 8 1 7

Full Name of Designated Agent M I G U E L M O R Y

Mailing Address P O B O X 2 5 9

B A K E R S F I E L D C A 9 3 3 0 2 - 0 2 5 9

Title or Position CITY STATE ZIP CODE

A C C O U N T I N G S U P E R V I S O R Telephone number 6 6 1 - 3 9 5 - 6 8 8 8

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9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

WELLS FARGO BANK ATTN JACK SMITH

Mailing Address

5401 CALIFORNIA AVE

BAKERSFIELD CA 93309

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Bank, Depository, etc.

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

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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.

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<input type="checkbox"/> No Postmark	
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	Next Business Day Delivery <input type="checkbox"/>
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

ea 4/27/05
 PREPARER DATE PREPARED

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