

FEC
FORM 1

STATEMENT OF ORGANIZATION

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OPERATIONS CENTER

2006 FEB - 1 A 8:05

Office Use Only

1. NAME OF
COMMITTEE (In full)

☐

(Check if name
is changed)

Example: If typing, type
over the lines.

12FE4M5

Jim Hurysz for Congress Campaign Committee

ADDRESS (number and street)

2863 South Abingdon St

☐

(Check if address
is changed)

Arlington

VA

22206

1313

CITY ▲

STATE ▲

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

JH4congress@aol.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

www.jh4congress.us

COMMITTEE'S FAX NUMBER

2. DATE

01

26

2006

3. FEC IDENTIFICATION NUMBER ►

C 00396937

4. IS THIS STATEMENT

☒

NEW (N)

OR

☐

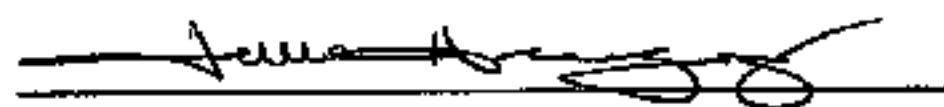
AMENDED (A)

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

James Hurysz

Signature of Treasurer



Date

01

26

2006

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)

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

James Thomas Hurysz

Candidate Party Affiliation

IND

Office Sought

☒

House

☐

Senate

☐

President

State

VA

District

08

- (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

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship

Type of Connected Organization:

☐

Corporation

☐

Corporation w/o Capital Stock

☐

Labor Organization

☐

Membership Organization

☐

Trade Association

☐

Cooperative

Write or Type Committee Name

Jim Hurysz for Congress Campaign 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 James Thomas Hurysz

Mailing Address PO Box 5191

Arlington VA 22205

Title or Position ▼

CITY ▲

STATE ▲

ZIP CODE ▲

Candidate Telephone number 571-214-2084

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 James Thomas Hurysz

Mailing Address PO Box 5191

Arlington VA 22205

Title or Position ▼

CITY ▲

STATE ▲

ZIP CODE ▲

Candidate Telephone number 571-214-2084

Full Name of Designated Agent

Mailing Address

Title or Position ▼

CITY ▲

STATE ▲

ZIP CODE ▲

Telephone number

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.

Suntrust Bank

Mailing Address

3610-H King St

Alexandria

VA

22303

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Bank, Depository, etc.

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

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.

☐ Hand Delivered	Date of Receipt
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☒ Postmark Illegible	
☐ No Postmark	
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Next Business Day Delivery ☐	
☐ 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
☐ Other (Specify):	Date of Receipt or Postmarked

Jm 13
PREPARER
(3/2005)

2-1-05
DATE PREPARED