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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

IOWA CONSTRUCTION INDUSTRY PAC

ASSOCIATED GENERAL CONTRACTORS OF IOWA

ADDRESS (number and street)

PO BOX 757

(Check if address  
is changed)

701 EAST COURT AVENUE SUITE B

DES MOINES

IA

50303-0757

CITY ▲

STATE ▲

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

SNEWHARD@AGCIA-ORG

COMMITTEE'S WEB PAGE ADDRESS (URL)

COMMITTEE'S FAX NUMBER

515-244-6289

2. DATE

12

19

2006

3. FEC IDENTIFICATION NUMBER ▶

C00068452

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

Scott D. Newhard

Signature of Treasurer

Scott D. Newhard

Date

12

19

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 \_\_\_\_\_

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

~~ASSOCIATED GENERAL CONTRACTORS OF IOWA~~

ASSOCIATED GENERAL CONTRACTORS OF IOWA

Mailing Address 1701 EAST COURT AVENUE SUITE B

DES MOINES IA 50309

CITY ▲ STATE ▲ ZIP CODE ▲

Relationship \_\_\_\_\_

Type of Connected Organization:

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

20050322017

Write or Type Committee Name

EDWA CONSTRUCTION INDUSTRY PAC

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 SCOTT D NEWHARD

Mailing Address PO BOX 757  
701 EAST COURT AVENUE SUITE B  
DES MOINES IA 50303-0757

Title or Position CITY STATE ZIP CODE

TREASURER Telephone number 515-283-2424

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 SCOTT D NEWHARD

Mailing Address PO BOX 757  
701 EAST COURT AVENUE SUITE B  
DES MOINES IA 50303-0757

Title or Position CITY STATE ZIP CODE

TREASURER Telephone number 515-283-2424

Full Name of Designated Agent NONE

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.

U.S. BANK

Mailing Address

P.O. Box 1800

~~ST. PAUL~~

ST. PAUL MN 55101-0800

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Bank, Depository, etc.

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

20030322019

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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<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
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*Jk1*  
 PREPARER  
 (3/2005)

*12/27/06*  
 DATE PREPARED

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