

FEC  
FORM 1

# STATEMENT OF ORGANIZATION

SECRETARY OF THE SENATE  
10 MAY 17 PM 12:04

Office Use Only

1. NAME OF  
COMMITTEE (in full)

(Check if name  
is changed)

Example: If typing, type  
over the lines.

12FE4M5

CHARLES ALLEN FOR SENATE

ADDRESS (number and street)

2755 SW SYLVAN HEIGHTS DR

(Check if address  
is changed)

SEATTLE

WA

98106-1751

CITY

STATE

ZIP CODE

COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address)

(Check if address  
is changed)

WAGON11@GMAIL.COM

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address  
is changed)

HTTP://WWW.CHARLESALLEN2010.COM

2. DATE

05

10

2010

3. FEC IDENTIFICATION NUMBER

C

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

CHARLES E. ALLEN

Signature of Treasurer

Date

05

10

2010

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 02/2009)

10020370019

5. TYPE OF COMMITTEE

Candidate 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. (Complete the candidate information below.)

Name of Candidate CHARLES EDWARD ALLEN

Candidate Party Affiliation DEM Office Sought:  House  Senate  President State WA District

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

Name of Candidate \_\_\_\_\_

Party Committee:

- (d)  This committee is a \_\_\_\_\_ (National, State or subordinate) committee of the \_\_\_\_\_ (Democratic, Republican, etc.) Party.

Political Action Committee (PAC):

- (e)  This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected 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)  This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)
  - In addition, this committee is a Lobbyist/Registrant PAC.
  - In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)

Joint Fundraising Representative:

- (g)  This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.
- (h)  This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.

Committees Participating in Joint Fundraiser

1.	_____	FEC ID number	<u>C</u> _____
2.	_____	FEC ID number	<u>C</u> _____
3.	_____	FEC ID number	<u>C</u> _____
4.	_____	FEC ID number	<u>C</u> _____

10020370020

Write or Type Committee Name

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

Empty grid lines for organization name

Mailing Address

Empty grid lines for mailing address

CITY

STATE

ZIP CODE

Relationship:  Connected Organization  Affiliated Committee  Joint Fundraising Representative  Leadership PAC Sponsor

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 CHARLES EDWARD ALLEN

Mailing Address 2755 SW SYLVAN HEIGHTS DR

SEATTLE WA 98106-1751

Title or Position CITY STATE ZIP CODE

CANDIDATE Telephone number 206-291-3576

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 CHARLES EDWARD ALLEN

Mailing Address 2755 SW SYLVAN HEIGHTS DR

SEATTLE WA 98106-1751

Title or Position CITY STATE ZIP CODE

CANDIDATE Telephone number 206-291-3576

10020370021

Full Name of Designated Agent

[Empty grid for Full Name of Designated Agent]

Mailing Address

[Empty grid for Mailing Address line 1]

[Empty grid for Mailing Address line 2]

[Empty grid for Mailing Address line 3]

CITY

STATE

ZIP CODE

Title or Position

[Empty grid for Title or Position]

Telephone number

[Empty grid for 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.A. FEDERAL SAVINGS BANK

Mailing Address

10750 MCDERMOTT FREEWAY

[Empty grid for Mailing Address line 2]

SAN ANTONIO TX 78288-9876

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

[Empty grid for Name of Bank, Depository, etc.]

Mailing Address

[Empty grid for Mailing Address line 1]

[Empty grid for Mailing Address line 2]

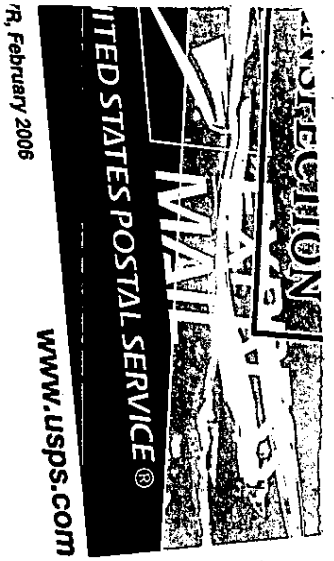
[Empty grid for Mailing Address line 3]

CITY

STATE

ZIP CODE

10020370022



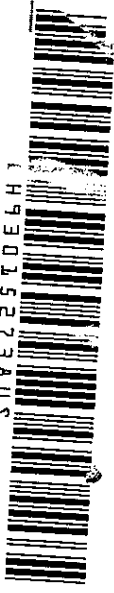
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United States Senate  
Post Office



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Addresssee Copy  
Label 11-B, March 2004

**ORIGIN (POSTAL SERVICE USE ONLY)**

PO Zip Code

Day of Delivery  
 Next  2nd  3rd Del. Day

Date Accepted  
 Mo. Day Year  
 Time Accepted:  AM  PM

Scheduled Date of Delivery  
 Month Day  
 Scheduled Time of Delivery  
 Noon  3 PM

Postage \$  
 Return Receipt Fee \$  
 Insurance Fee \$  
 Total Postage & Fees \$  
 Acceptance Emp. Initials

Flat Rate  or Weight lbs. ozs.  
 2nd Day  3rd Day  
 Int'l Alpha Country Code

FROM: (PLEASE PRINT) PHONE ( )

**DELIVERY (POSTAL SERVICE USE ONLY)**

Delivery Attempt  
 Mo. Day Time  
 AM  PM  
 Employee Signature

Delivery Attempt  
 Mo. Day Time  
 AM  PM  
 Employee Signature

Delivery Date  
 Mo. Day Year  
 Time  
 AM  PM  
 Employee Signature

**CUSTOMER USE ONLY**

**WAIVER OF SIGNATURE** (Domestic Mail Only)  
 Addressee must be over 18 years of age. If customer is not a merchant, insurance is void. If I wish delivery to be made without obtaining signature of addressee or addressee is not available, I authorize the carrier to leave the mail. (If delivery employee judges that article can be left in safe condition and I have provided a signature, the carrier's signature constitutes valid proof of delivery.)

**NO DELIVERY**  Weekend  Holiday  Mailer Signature

TO: (PLEASE PRINT) PHONE ( )

FOR PICKUP OR TRACKING  
Visit [www.usps.com](http://www.usps.com)  
Call 1-800-222-1811

ZIP + 4 (U.S. ADDRESSES ONLY. DO NOT USE FOR FOREIGN POSTAL CODES.)  
 FOR INTERNATIONAL DESTINATIONS, WRITE COUNTRY NAME BELOW:

U.S. SENATE  
TRACKING NUMBER  
09-080482

When used internationally,  
affix customs declarations  
(PS Form 2976, or 2976A).

Please recycle.



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NANCY ERICKSON  
SECRETARY

DANA K. MCCALLUM  
SUPERINTENDENT

HART SENATE OFFICE BUILDING  
SUITE 232  
WASHINGTON, DC 20510-7118  
PHONE: (202) 224-0322

# United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

HAND DELIVERED \_\_\_\_\_  
Date of Receipt

USPS FIRST CLASS MAIL \_\_\_\_\_  
Postmark

USPS REGISTERED/CERTIFIED \_\_\_\_\_  
Postmark

USPS PRIORITY MAIL \_\_\_\_\_  
Postmark

DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL

USPS EXPRESS MAIL 05-13-10 \_\_\_\_\_  
Postmark

OVERNIGHT DELIVERY SERVICE:

SHIPPING DATE

NEXT BUSINESS DAY DELIVERY

FEDERAL EXPRESS \_\_\_\_\_

UPS \_\_\_\_\_

DHL \_\_\_\_\_

AIRBORNE EXPRESS \_\_\_\_\_

RECEIVED FROM FEDERAL ELECTION COMMISSION \_\_\_\_\_  
Date of Receipt

POSTMARK ILLEGIBLE

NO POSTMARK

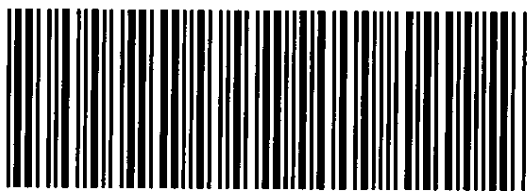
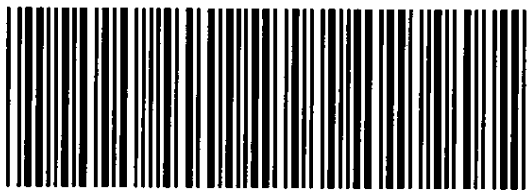
FAX \_\_\_\_\_  
Date of Receipt

OTHER \_\_\_\_\_  
Date of Receipt or Postmark

PREPARER RD

DATE PREPARED 05-17-10

10020370024



10020370025