

FEC
FORM 1

STATEMENT OF ORGANIZATION

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Office Use Only

1. NAME OF
COMMITTEE (in full)



(Check if name
is changed)

Example: If typing, type
over the lines.

12FE4M5

RAY MCKEE CONGRESSIONAL COMMITTEE

ADDRESS (number and street)

119 WELLINGTON DRIVE



(Check if address
is changed)

MADISON

AL

35758

CITY ▲

STATE ▲

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

campaign@raymckeeforcongress.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

www.raymckeeforcongress.com

COMMITTEE'S FAX NUMBER

256-551-0321

2. DATE

09

26

2007

3. FEC IDENTIFICATION NUMBER ►

C00434258

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

Ambre R. Brown

Signature of Treasurer

Ambre R. Brown

Date

09

26

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)

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

RAY MCKEE

Candidate Party Affiliation

REP

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

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

Ray McKee Congressional 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 AMBIRE RAE BROWN

Mailing Address 1119 WELLINGTON DRIVE

MADISON AL 35758

Title or Position ▼

CITY ▲

STATE ▲

ZIP CODE ▲

TREASURER

Telephone number 256-679-0554

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 AMBIRE RAE BROWN

Mailing Address 1119 WELLINGTON DRIVE

MADISON AL 35758

Title or Position ▼

CITY ▲

STATE ▲

ZIP CODE ▲

TREASURER

Telephone number 256-679-0554

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.

REGIONS BANK

Mailing Address

508 MADISON STREET SE

HUNTSVILLE

AL

35801

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Bank, Depository, etc.

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

Federal Election Commission
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LN

PREPARER

(3/2005)

10/2/07

DATE PREPARED

27039532026