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FEC MAIL ROOM
2002 MAY 15 P 1:30

FEC FORM 1

STATEMENT OF ORGANIZATION

(See instructions)

Office Use Only

1. NAME OF COMMITTEE (in full) — (Check if name is changed) X — Example: If typing, type over the lines. 12FE4M5

MARK BAISLEY FOR CONGRESS

ADDRESS (number and street) 10398 TOTEM RUN

(Check if address is changed) X

LITTLETON CO 80125-9010

CITY ▲ STATE ▲ ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

INFO@BAISLEYFORCONGRESS.COM

COMMITTEE'S WEB PAGE ADDRESS (URL)

WWW.BAISLEYFORCONGRESS.COM

2. DATE 05 13 2002

3. FEC IDENTIFICATION NUMBER ▶ C00372813

4. IS THIS STATEMENT ☐ NEW (N) OR X 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 MARK A. BAISLEY

Signature of Treasurer [signature] Date 05 13 2002

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 1/01)

FE1AN048.PDF

5. TYPE OF COMMITTEE (Check One)

(a) [X] 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: MARK BAISLEY

Candidate Party Affiliation: REP

Office Sought: [X] House [ ] Senate [ ] President

State: CO

District: 7

(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

NONE

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

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: MARK BAILEY

Mailing Address: 10398 TOTEM RUN

LITTLETON | CO | 80125-9010

Title or Position ▼ | CITY ▲ | STATE ▲ | ZIP CODE ▲

TREASURER/CANDIDATE | Telephone number 303-978-1352

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: MARK BAILEY

Mailing Address: 10398 TOTEM RUN

LITTLETON | CO | 80125-9010

Title or Position ▼ | CITY ▲ | STATE ▲ | ZIP CODE ▲

TREASURER | Telephone number 303-978-1352

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.

UMB BANK COLORADO

Mailing Address 8190 SOUTH UNIVERSITY BLVD

LITTLETON CO 80122-

CITY ▲ STATE ▲ ZIP CODE ▲

Name of Bank, Depository, etc.

Mailing Address

CITY ▲ STATE ▲ ZIP CODE ▲

Federal Election Commission

ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

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PREPARER — DATE PREPARED 5-15-02

(6/2000)