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FEC
FORM 1

STATEMENT OF
ORGANIZATION

(See Instructions)

Office Use Only

1. NAME OF
COMMITTEE (in full)

(Check if name
is changed)

Example: If typing, type
over the lines.

12PR4M5

PAT WALK FOR CONGRESS

ADDRESS (number and street)

P.O. Box 776

X (Check if address
is changed)

ET. LEPTON

CO

80621-0776

CITY ▲

STATE ▲

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

pwalk@juno.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

2. DATE

03 29 2002

3. FEC IDENTIFICATION NUMBER ▶

000372649

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

FAYE MAGUIRE

Signature of Treasurer

Date

03 29 2002

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §435g.

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

Office
Use
Only

For further information contact:
Federal Election Commission
202 FIVE 500-424-6000
Local 202-694-1100

FEC FORM 1
(Revised 1/01)

2002-03-29 15:03:23

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 PATTI WAAK

Candidate Party Affiliation DEM 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

Pat Waak for Congress

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 FAYE MAGUIRE

Mailing Address 14625 FILLMORE CT

BRIGHTON CO 80602

Title or Position CITY STATE ZIP CODE

TREASURER Telephone number 303-450-9591

8. Treasurer: List the name and address (phone number -- optional) of the treasurer of the committee, and the names and address of any designated agent (e.g., assistant treasurer)

Full Name of Treasurer FAYE MAGUIRE

Mailing Address 14625 FILLMORE CT

BRIGHTON CO 80602

Title or Position CITY STATE ZIP CODE

TREASURER Telephone number 303-450-9591

Full Name of Designated Agent

Mailing Address

Title or Position CITY STATE ZIP CODE

Telephone number

2025-03-27 15:57:50

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

1ST BANK OF LONGMONT

Mailing Address

572 BRIGGS ST

ERIE CO 80516

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Bank, Depository, etc

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

02-03-753-3055

Federal Election Commission

**ENVELOPE REPLACEMENT PAGE
FOR INCOMING DOCUMENTS**

The Commission has added this page to the end of this filing to indicate how it was received.

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