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For help completing Form 1, please double-click the

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FEC FORM 1		STATEMENT OF ORGANIZATION				FEC MAIL CENTER Office Use Only		
NAME OF COMMITTEE (in	n full)		theck if name changed)		mple:If typing, type the lines.	12FE4M	15	
The Comm	nittee t	o Elec	t Dan W	/ _{Roz}	elle Preside	ent		
				111	 	1111		
ADDRESS (number a	nd street)	POF	30x 5310	γ				
(Check if address is changed)		India	napolis			<u>lŅ</u>	46253	
				CITY		STATE	ZIP CODE	
COMMITTEE'S E-MA (Check if is change	address		orovide only one		•	<u> </u>		
COMMITTEE'S WEB (Check if is change)	address		u) @daņwr ¢	ozelle	e.com			
2. DATE 11	[⊭] ′ 1 3	° ′ 2 0	10					
3. FEC IDENTIFIC	CATION NU	JMBER	C O	0490	0060			
4. IS THIS STATE	MENT	NEW ((N) OR	X	, AMENDED (A)			
I certify that I have o	examined th	is Statemer	nt and to the be	st of my	knowledge and belief	it is true, corre	ect and complete.	
Type or Print Name		Dar	W Roze			Date 1	1" ′ 13° ′ 2010 °	
NOTE: Submission of	· ·	•	•	•	oject the person signing		to the penalties of 2 U.S.C. §437g.	
Office Use					For further information Federal Election Commiss		FEC FORM 1	

FEC Fo	orm 1 (Revised 02/2009)	Page 2
	COMMITTEE	raye Z
	e Committee:	
(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. (Cor information below.)	nplete the candidate
Name of Candidate	Dan W Rozelle	1. 1
Candidate Party Affiliat	on IND Office Sought: House Senate X President	State IN
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate		
Party Cor		-
(d)	(National, State This committee is a or subordinate) committee of the	(Democratic, Republican, etc.) Party
Political A	ction Committee (PAC):	
(e)	This committee is a separate segregated fund. (Identify connected organization on fine 6.) Its co	nnected organization is
	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 s committee. (i.e., nonconnected committee)	egregated fund or part
	In addition, this committee is a Lobbyist/Registrant PAC.	
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Joint Fund	Iraising Representative:	
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for the 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 t committees/organizations, none of which is an authorized committee of a federal candidate.	
Corr	mittees Participating in Joint Fundraiser	
1.	FEC ID number C	
2.	FEC ID number C	· · · · ·
3.	FEC ID number C	
4.		

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Write	or Type Committee Name	e					
Th	The Committee to Elect Dan W Rozelle President						
6. N	6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor						
1	!						
	 						
	-111-a Addung		1				
IVI	ailing Address						
			11				
		CITY STATE 2	ZIP CODE				
D	-l-Namekia		dership PAC Sponsor				
H	elationship: Connecte	d Organization Affiliated Committee Joint Fundraising Representative Lead	dersnip PAC Sponsor				
	ustodian of Records: Ide ooks and records.	ntify by name, address (phone number optional) and position of the person in poss	ession of committee				
r.	_i Dan V	V Rozelle					
	ni Name L.I.I.I	PO Box 531001					
IVI	ailing Address						
		ılndianapolis 146253					
_							
Ti	tle or Position	CITY STATE 2	IP CODE				
Ĺ	Candidate	Telephone number 317 - 62	77220				
	easurer: List the name ar y designated agent (e.g.,	nd address (phone number optional) of the treasurer of the committee; and the name assistant treasurer).	ne and address of				
	Ill Name Treasurer Dan	W Rozelle					
Ma	ailing Address	PO Box 531001					
		Indianapolis 46253	<u>- </u>				
Tit	tle or Position	CITY STATE Z	IP CODE				
. [Candidate	Telephone number [317] - [62]	77220				
			1				

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Full Name of Designated Agent					
Mailing Address					
	СПУ	STATE	ZIP CODE		
Title or Position		hone number			
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	y, atc.				
[H <mark>ˌu</mark> nt	ington Bank, , , , , , , , , , , , , , , , ,	1 1 1 1 1 1 1 1 1 1			
Mailing Address	[3460] High School Rd , , , ,	111111111			
	[Indianapolis, , , , , , , , , , , , ,	[IŅ 462	53 -		
	CITY	STATE	ZIP CODE		
Name of Bank, Depository	y, etc.				
OL	DINATIONAL BAN	K #.41	ليبييط		
Mailing Address	1330 M SOUTHPO	DRIT RD			
	INDIANAPONS	, IN 46	2171-[
	CITY	STATE	ZIP CODE		
To print and file	e this form, select "Print" from the "File	" menu ahove In the	"Print"		

window, select "Document" from the drop down menu labeled "Comments and Forms"

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FEDERAL ELECTION COMMISSION WASHINGTON, D.C. 20463

RQ-1

October 21, 2010

DAN W. ROZELLE, TREASURER
THE COMMITTEE TO ELECT DAN W. ROZELLE
PRESIDENT
PO BOX 531001
INDIANAPOLIS, IN 46253

Response Due Date

11/26/2010

IDENTIFICATION NUMBER: C00490060

REFERENCE: STATEMENT OF ORGANIZATION, RECEIVED 10/12/10

Dear Treasurer:

This letter is prompted by the Commission's preliminary review of the Statement of Organization referenced above. This notice requests information essential to full public disclosure of your federal election campaign finances. An adequate response must be received by the response date noted above. Additional information is needed for the following 1 item(s):

- Your Statement of Organization (FEC FORM 1) reports information about a Principal Campaign Committee; however, your filing fails to disclose information about the candidate. Commission Regulations require that the Statement of Organization disclose the name of the candidate, the office sought (including State and Congressional district, when applicable) and party affiliation of the candidate. (11 CFR § 102.2(a)(v)). Please amend your Statement of Organization to include the party affiliation.

Please note you will not receive an additional notice from the Commission on this matter. Adequate responses received on or before this date will be taken into consideration in determining whether audit action will be initiated. Requests for extensions of time in which to respond will not be considered. Failure to provide an adequate response by this date may result in an audit of the committee. Failure to comply with the provisions of the Act may also result in an enforcement action against the committee. Any response submitted by your committee will be placed on the public record and will be considered by the Commission prior to taking enforcement action.

A copy of FEC FORM 1 can be downloaded from the FEC website at http://www.fec.gov, or requested through the FEC Faxline at (202) 501-3413. If you should have any questions regarding this matter or wish to verify the adequacy of your response, please contact me on our toll free number (800) 424 9530 (at the prompt press 5 to reach the Reports Analysis Division) or my local number (202) 694-1165.

COMMITTEE TO ELECT DAN W ROZELLE PRESIDENT

Page 2 of 2

Sincerely,

Rebecca Hough

Senior Campaign Finance Analyst

Reports Analysis Division

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(3/2005)

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. Date of Receipt Hand Delivered Postmarked **USPS First Class Mail** Postmarked (R/C) USPS Registered/Certified Postmarked **USPS Priority Mail** Delivery Confirmation[™] or Signature Confirmation[™] Label Postmarked **USPS Express Mail** Postmark Illegible No Postmark **Shipping Date** Overnight Delivery Service (Specify): **Next Business Day Delivery** Date of Receipt Received from House Records & Registration Office Date of Receipt Received from Senate Public Records Office Date of Receipt Received from Electronic Filing Office Date of Receipt or Postmarked Other (Specify): DATE PREPARED