

**FEC
FORM 1**

**STATEMENT OF
ORGANIZATION**

(See instructions)

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FEC MAIL ROOM

2001 JUL 17 P 1:37

Office Use Only

1. NAME OF
COMMITTEE (in full)



(Check if name
is changed)

Example: If typing, type
over the lines.

12FE4M5

Redwine Congressional Committee

ADDRESS (number and street)

33533 So., Ridge Road



(Check if address
is changed)

Sioux City

IA

51108

8505

CITY ▲

STATE ▲

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

KC51105 @ AOL

COMMITTEE'S WEB PAGE ADDRESS (URL)

N/A

2. DATE

07

05

2001

3. FEC IDENTIFICATION NUMBER ▶

C

4. IS THIS STATEMENT



NEW (N)

OR

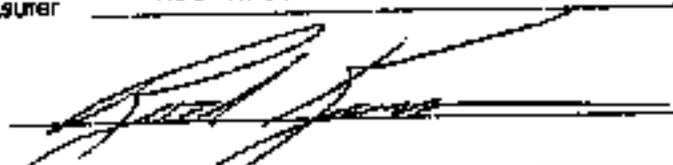


AMENDED (A)

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 Rod Kass

Signature of Treasurer



Date

07

11

2001

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. 5437g.

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)

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 John Redwine

Candidate Party Affiliation REP

Office Sought

House

Senate

President

State

IA

District

5

- (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

Redwine 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 Barbara A. Redwine

Mailing Address 33533 So. Ridge Road

Sioux City IA 51108 - 18505

CITY ▲ STATE ▲ ZIP CODE ▲

Title or Position ▼ Assistant Treasurer Telephone number 712 - 239 - 5664

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 Roger M. Kass

Mailing Address 1717 Pierce Street, Suite 100

Sioux City IA 51105 - 1170

CITY ▲ STATE ▲ ZIP CODE ▲

Title or Position ▼ Treasurer Telephone number 712 - 252 - 1819

Full Name of Designated Agent Barbara A. Redwine

Mailing Address 33533 So. Ridge Road

Sioux City IA 51108 - 18505

CITY ▲ STATE ▲ ZIP CODE ▲

Title or Position ▼ Assistant Treasurer Telephone number 712 - 239 - 5664

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.

Security National Bank

Mailing Address

601 Pierce Street

Sioux City, IA 51101

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Bank, Depository, etc.

Mailing Address

CITY ▲

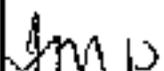
STATE ▲

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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.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input checked="" type="checkbox"/> First Class Mail	POSTMARKED 7-13-01
<input type="checkbox"/> Registered/Certified Mail	POSTMARKED (R/C)
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House office of Records and Registration	Date of Receipt
<input type="checkbox"/> Received from the Senate Office of Public Records	Date of Receipt
<input type="checkbox"/> Other (Specify):	Postmarked and/or Date of Receipt
<input type="checkbox"/> Electronic Filing	
 PREPARER	7-17-01 DATE PREPARED