

FEC
FORM 1

STATEMENT OF ORGANIZATION

RECEIVED
FEDERAL ELECTION CENTER
WASHINGTON, DC 20543
Office Use Only

1. NAME OF COMMITTEE (in full) (Check if name is changed) Example: If typing, type over the lines. 12FE4MB

100 % PRO LIFE PAC

ADDRESS (include apt. and street) PO BOX 1601

(Check if address is changed)

HAVERTOWN

PA 19083 6201

CITY ▲

STATE ▲

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

KATHYCOLL@FACTSOFLIFE.ORG

COMMITTEE'S WEB PAGE ADDRESS (URL)

WWW.PROLIFEPAC.COM

COMMITTEE'S FAX NUMBER

NONE

2. DATE 03 13 2007

3. FEC IDENTIFICATION NUMBER ▶ C00358796

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 ALICE CARR

Signature of Treasurer *Alice Carr*

Date 03 13 2007

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. 4371.

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

Office
Use
Only

For further information contact:
Federal Election Commission
Toll Free 800-424-9531
Local 202-694-1100

FEC FORM 1
(Revised 02-2003)

27099404067

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

Candidate Party Affiliation	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

NONE

Mailing Address

CITY ▲ STATE ▲ ZIP CODE ▲

Relationship NONE

Type of Connected Organization:

- | | | |
|-------------------------|-------------------------------|--------------------|
| Corporation | Corporation w/o Capital Stock | Labor Organization |
| Membership Organization | Trade Association | Cooperative |

27039404023

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 ALICE CARR
 Mailing Address 3838 MARSHALL RD
 DREXEL HILL PA 19026 2825
 Title or Position Title or Position CITY STATE ZIP CODE
 TREASURER Telephone number 610 622 5772

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 ALICE CARR
 Mailing Address 3838 MARSHALL RD
 DREXEL HILL PA 19026 2825
 Title or Position Title or Position CITY STATE ZIP CODE
 TREASURER Telephone number 610 622 5772

Full Name of Designated Agent KATHLEEN COLL
 Mailing Address 256 GOLF HILLS RD
 HAVERTOWN PA 19083 2601
 Title or Position Title or Position CITY STATE ZIP CODE
 CHAIR Telephone number 610 789 9224

27029404069

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.

BENEFICIAL SAVINGS BANK

Mailing Address

530 WALNUT ST

PHILA

PA 19106 3696

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Bank, Depository, etc.

NONE

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

27039404070

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.

Hand Delivered Date of Receipt

USPS First Class Mail Postmarked

USPS Registered/Certified Postmarked (R/C)

USPS Priority Mail Postmarked
 Delivery Confirmation™ or Signature Confirmation™ Label

USPS Express Mail Postmarked

Postmark Illegible

No Postmark

Overnight Delivery Service (Specify): Shipping Date
 Next Business Day Delivery

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

Other (Specify): Date of Receipt or Postmarked


 PREPARER

3/19/07
 DATE PREPARED

27039404071