

STATEMENT OF ORGANIZATION

(See reverse side for instructions)

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

APR 18 10 49 AM '98

1. (a) NAME OF COMMITTEE IN FULL <input type="checkbox"/> (Check if name is changed) <i>Rita Thompson for Congress</i>	2. DATE <i>4.15.98</i>
(b) Number and Street Address <input checked="" type="checkbox"/> (Check if address is changed) <i>7104 Freshmore Dr Springfield, VA</i>	3. FEC Identification Number <i>C00332627</i>
(c) City, State and ZIP Code <i>Springfield, VA 22153</i>	4. Is This Report An Amendment? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO

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 | State/District |
|-------------------|-----------------------------|---------------|----------------|
| | | | |
- (c) This committee supports/opposes only one candidate _____ and is NOT an authorized committee.
(name of candidate)
- (d) This committee is a _____ committee of the _____ Party.
(National, State or subordinate) (Democratic, Republican, etc.)
- (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 a party committee.

6. Name of Any Connected Organization or Affiliated Committee	Mailing Address and ZIP Code	Relationship
<i>N/A</i>		

- Type of Connected Organization:
 Corporation Corporation w/o Capital Stock Labor Organization Membership Organization Trade Association Cooperative

7. Custodian of Records: Identify by name, address (phone number - optional) and position of the person in possession of committee books and records.

<small>Full Name</small> <i>Rita Thompson</i>	<small>Mailing Address</small> <i>7104 Freshmore Dr Springfield VA 22153</i>	<small>Title or Position</small> <i>Candidate</i>
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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).

<small>Full Name</small> <i>Rita Thompson</i>	<small>Mailing Address</small> <i>7104 Freshmore Dr, Springfield, VA 22153</i>	<small>Title or Position</small> <i>Treasurer</i>
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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.

<small>Name of Bank, Depository, etc.</small> <i>First Union National Bank</i>	<small>Mailing Address and ZIP Code</small> <i>610 Fraconia Rd Alexandria, VA 22310</i>
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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 <i>Rita Thompson</i>	SIGNATURE OF TREASURER <i>Rita Thompson</i>	DATE <i>4/15/98</i>
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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.

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 type="checkbox"/> First Class Mail	POSTMARKED
<input checked="" type="checkbox"/> Registered/Certified Mail	POSTMARKED 4/15/98
<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	
	4/18/98
PREPARER	DATE PREPARED