

**FEC
FORM 1**

**STATEMENT OF
ORGANIZATION**

(See Instructions)

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FEC MAIL ROOM

2007 JAN - 9 P 12:34
Office Use Only

1. NAME OF
COMMITTEE (in full)



(Check if name
is changed)

Example: If typing, type
over the lines.

12FE4M5

ROMO FOR CONGRESS COMMITTEE

ADDRESS (number and street)

1177 N CHURCH AVENUE SUITE 605



(Check if address
is changed)

TUCSON

AZ

857011-

CITY ▲

STATE ▲

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

HEADQUARTERS @ ROMO FOR CONGRESS . COM

COMMITTEE'S WEB PAGE ADDRESS (URL)

WWW.ROMO FOR CONGRESS . COM

2. DATE

12

11

2001

3. FEC IDENTIFICATION NUMBER ►

CTUB.E.A.S.S.E

4. IS THIS STATEMENT



NEW (N)

OR



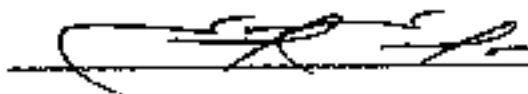
AMENDED (A)

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

ERNESTO ELIAS

Signature of Treasurer



Date

12

12

2001

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g.

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

Jesus Romo

Candidate
Party Affiliation

DEM

Office
Sought☒

House

☐

Senate

☐

President

State

AZ

District

07

- (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

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 ERNESTO ELIAS

Mailing Address 1119 E. LAUREL DR.
CASA GRANDE AZ 85222

Title or Position TREASURER CITY STATE ZIP CODE

Telephone number 520-834-3354

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 Ernesto Elias

Mailing Address 1119 E. LAUREL DR.
CASA GRANDE AZ 85222

Title or Position CITY STATE ZIP CODE

Treasurer Telephone number 520-834-3356

Full Name of Designated Agent

Mailing Address

Title or Position CITY STATE ZIP CODE

Telephone number

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.

Mailing Address 11501 N. L. ST. IN. 46101-1150
INDIANAPOLIS, IN 46101-1150
INDIANAPOLIS, IN 46101-1150
 CITY ▲ STATE ▲ ZIP CODE ▲

Name of Bank, Depository, etc.

Mailing Address 11501 N. L. ST. IN. 46101-1150
INDIANAPOLIS, IN 46101-1150
INDIANAPOLIS, IN 46101-1150
 CITY ▲ STATE ▲ ZIP CODE ▲

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.

☐ Hand Delivered	Date of Receipt
☒ First Class Mail	POSTMARKED 12-18-01
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☐ Received from the Senate Office of Public Records	Date of Receipt
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IMP PREPARER	1-9-02 DATE PREPARED