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FEC
FORM 1

STATEMENT OF ORGANIZATION

Office Use Only

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

~~3005-1115~~

FRIENDS OF PHIL WYMAN COMMITTEE

ADDRESS (number and street)

PO Box 665

(Check if address is changed)

TEHACHAPI CA 93581-0665

CITY ▲

STATE ▲

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

rwyman@as.net

COMMITTEE'S WEB PAGE ADDRESS (URL)

NONE

COMMITTEE'S FAX NUMBER

2. DATE

JAN 04 2007

3. FEC IDENTIFICATION NUMBER ▶

C00257915

4. IS THIS STATEMENT NEW (N) OR

AMENDED (A)

[To I.D. Email address]

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

ROBERT F KOVACH

Signature of Treasurer

Robert F. Kovach

Date

JAN 04 2007

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 02/2003)

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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

PHILLIP D. WYMAN

Candidate Party Affiliation

REP

Office Sought:

House

Senate

President

State

District

Debt Reduction

- (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

27039340127

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 PHILLIP D. WYMAN

Mailing Address P.O. Box 665

TEHACHA CA 93581-0665

Title or Position CITY STATE ZIP CODE

FORWIER CANDIDATE Telephone number 661-444-6713

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 ROBERT F. KOVACH

Mailing Address P.O. Box 665

TEHACHA CA 93581-0665

Title or Position CITY STATE ZIP CODE

TREASURER Telephone number

Full Name of Designated Agent N/A

Mailing Address

Title or Position CITY STATE ZIP CODE

Telephone number

27039340128

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.

WELLS FARGO BANK, N.A.

Mailing Address

802 WEST LANCASTER BLVD

LANCASTER CA 93534

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Bank, Depository, etc.

SEE ABOVE

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

27039340129

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.

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 PREPARER

1/16/07
 DATE PREPARED

27039340130