

FEC
FORM 1

STATEMENT OF
ORGANIZATION

SECRETARY OF THE SENATE

10 MAR 31 PM 3:16

Office Use Only

1. NAME OF
COMMITTEE (in full)

(Check if name
is changed)

Example: If typing, type
over the lines.

12FE4M5

Akers for US Senate

ADDRESS (number and street)

PO Box 30652

(Check if address
is changed)

Bellingham

WA

98228-2652

CITY

STATE

ZIP CODE

COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address)

(Check if address
is changed)

paul@akersforussenate.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address
is changed)

www.akersforussenate.com

2. DATE

03 ' 23 ' 2010

3. FEC IDENTIFICATION NUMBER

C 004 76333

4. IS THIS STATEMENT

NEW (N)

OR

X

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

Carrie Bennett

Signature of Treasurer

Carrie Bennett

Date

03 ' 23 ' 2010

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 02/2009)

10020183150

5. TYPE OF COMMITTEE

Candidate Committee:

- (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 Paul Akers

Candidate Party Affiliation Rep Office Sought: House Senate President State WA District _____

- (c) This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate _____

Party Committee:

- (d) This committee is a _____ (National, State or subordinate) committee of the _____ (Democratic, Republican, etc.) Party.

Political Action Committee (PAC):

- (e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:

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

In addition, this committee is a Lobbyist/Registrant PAC.

- (f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)

In addition, this committee is a Lobbyist/Registrant PAC.

In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)

Joint Fundraising Representative:

- (g) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.
- (h) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.

Committees Participating in Joint Fundraiser

1. _____ FEC ID number C
2. _____ FEC ID number C
3. _____ FEC ID number C
4. _____ FEC ID number C

10020183151

Write or Type Committee Name

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

[Empty grid lines for organization name]

Mailing Address

[Empty grid lines for mailing address]

CITY

STATE

ZIP CODE

Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor

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

Carrie A Bennett

Mailing Address

P.O. Box 30652

Bellingham

WA

98228-2652

Title or Position

CITY

STATE

ZIP CODE

Treasurer

Telephone number

360-371-4161

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

Carrie A Bennett

Mailing Address

P.O. Box 30652

Bellingham

WA

98228-2652

Title or Position

CITY

STATE

ZIP CODE

Treasurer

Telephone number

360-371-4161

10020183152

Full Name of Designated Agent

[Empty grid line]

Mailing Address

[Empty grid line]

[Empty grid line]

[Empty grid line]

CITY

STATE

ZIP CODE

Title or Position

[Empty grid line]

Telephone number

[Empty grid line]

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.

Skagit State Bank

Mailing Address

1295 E. Sunset Drive

PO Box 29210

Bellingham WA 98226

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

[Empty grid line]

Mailing Address

[Empty grid line]

[Empty grid line]

[Empty grid line]

CITY

STATE

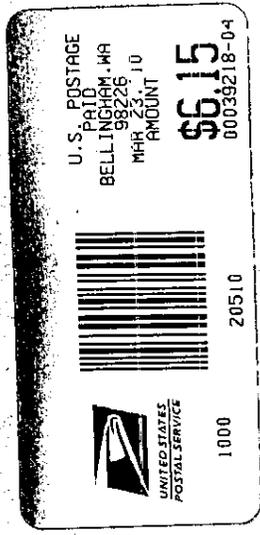
ZIP CODE

10020183153

10020183154

Paul Akers
FOR U.S. SENATE
REPUBLICAN
PO BOX 30652
BELLINGHAM, WA 98228-2652

**RETURN RECEIPT
REQUESTED**



Senate Office of Public Records
232 Hart Senate Office Building
Washington, DC 20510



United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

HAND DELIVERED _____

Date of Receipt

USPS FIRST CLASS MAIL _____

Postmark

USPS REGISTERED/CERTIFIED _____

Postmark

3-23-10

USPS PRIORITY MAIL _____

Postmark

DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL

USPS EXPRESS MAIL _____

Postmark

OVERNIGHT DELIVERY SERVICE:

SHIPPING DATE

NEXT BUSINESS DAY DELIVERY

FEDERAL EXPRESS _____

UPS _____

DHL _____

AIRBORNE EXPRESS _____

RECEIVED FROM FEDERAL ELECTION COMMISSION _____

Date of Receipt

POSTMARK ILLEGIBLE

NO POSTMARK

FAX _____

Date of Receipt

OTHER _____

Date of Receipt or Postmark

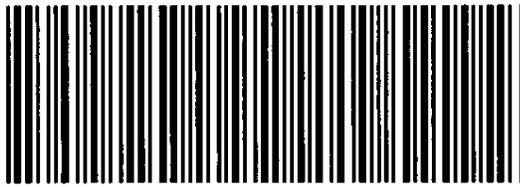
PREPARER

DH

DATE PREPARED

3-31-10

10020183155



10020183156