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2009 NOV -5 AM 10: 00 -

FEC

STATEMENT OF ORGANIZATION

			Offic	Use Only
NAME OF COMMITTEE (in full)	(Check if name is changed)	Example:If typing, type over the lines.	12FE4M5	-0.00
CLINE FO	r president	, 		
 				
DRESS (number and stre	POB 34		<u> </u>	
(Check if address is changed)	Gipsy		ma 63	<i>750</i>
		CITY	STATE	ZIP CODE
(Check if address is changed)			 	
(Check if addre	1		 	
Figure-Afficia	29 2009			
FEC IDENTIFICATION	ON NUMBER C	0467597		
	 - स्व	0467597 MAMENDED (A)		
FEC IDENTIFICATION		AMENDED (A)	t is true, correct and c	omplete.
FEC IDENTIFICATION IS THIS STATEMENT Pertify that I have examine	NEW (N) OR	AMENDED (A)	t is true, correct and o	omplete.
FEC IDENTIFICATION IS THIS STATEMENT Sertify that I have examine one or Print Name of Tre	NEW (N) OR	AMENDED (A)		
FEC IDENTIFICATION IS THIS STATEMENT Certify that I have examinate of Treesurer	NEW (N) OR ned this Statement and to the best asurer Richard erroneous, or incomplete information	AMENDED (A) It of my knowledge and belief in	Date ZO	29 <u>2009</u>

		COMMITTEE
l	uluali	e 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 Candi		Richard Kline
Candi Party	idate Affiliat	ion REP Office Sought: House Senate X President District
(c)	· ·	This committee supports/opposes only one candidate, and is NOT an authorized committee.
Name Candi		
Part	y Cor	nmittee:
(d)	•	(National, State or subordinate) committee of the REP (Democratic, Republican, etc.) Party.
Polit	ical A	action Committee (PAC):
(e)	1.5	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	·	draising 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.
	Com	nmittees Participating in Joint Fundraiser
	1.	FEC ID number C
	2.	FEC ID number C
	3.	FEC ID number C
	4.	FEC ID number 'C

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_	FEC Form 1 (Revised	02/2009)	Page 3
	Write or Type Committee Name		
- 6.	Name of Any Connected (Organization, Affiliated Committee, Joint Fundralsing Representative, or Lea	dership PAC Sponsor
Ĺ	11111111		
L		<u> </u>	
	Malling Address '-		
	! !		
	<u>;</u> 	CITY STATE	ZIP CODE
	Relationship: Connected	d Organization Affiliated Committee Joint Fundraising Representative	Leadership PAC Sponsor
7.	Custodian of Records: Idea books and records.	ntify by name, address (phone number optional) and position of the person in	n possession of committee
	Full Name	hard Allen Kline	
	Mailing Address	POBJA	
		GIPSY MO 6	3.250
i	Title or Position	CITY STATE	ZIP CODE
	Gustodian	Telephone number 5.73	- <u>4,75</u> 1 - <u>2302</u> 1
8.	Treasurer: List the name an any designated agent (e.g.,	d address (phone number optional) of the treasurer of the committee; and thassistant treasurer).	e name and address of
į	Full Name of Treasurer	and Allew Kline	
	Mailing Address	POB34	
i			
-		CITY STATE	3.750 ZIP CODE
	Title or Position Theaskine	Telephone number 573	495-2302

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Full Name of Designated Agent				
Mailing Address		 	 	
}			1111	
	CITY	لتبييا	STATE	ZIP CODE
¦ Title or Position	OHI		JIAIL	ZIF VVDL
		Telephone n	umber	لــــا-لـــا
safety deposit boxes or mai Name of Bank, Depository,		Bauk		637.30 -
	CITY		STATE	ZIP CODE
Name of Bank, Depository,	etc.			
ا ا				
Mailing Address		1111111	11111	
				
			ليا	لــــا-لـــــا
	CITY	.4	STATE	ZIP CODE

	Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INC. The FEC added this page to the end of this filing to	COMING DOCUMENTS
	Hand Delivered	Date of Receipt
V	USPS First Class Mail	Postmarked 15 31 07
	USPS Registered/Certified	Postmarked (R/C)
	USPS Priority Mail	Postmarked
	Delivery Confirmation [™] or Signatu	re Confirmation™ Label
	USPS Express Mail	Postmarked
	Postmark Illegible	
	No Postmark	
	Overnight Delivery Service (Specify):	Shipping Date
	Next	t Business Day Delivery
	Received from House Records & Registration Of	Date of Receipt fice
	Received from Senate Public Records Office	Date of Receipt
	Received from Electronic Filing Office	Date of Receipt
	Other (Specify):	Date of Receipt or Postmarked
1	mi	11/5/07
	EPARER 2005)	DATE PREPARED