

FEC  
FORM 1

# STATEMENT OF ORGANIZATION

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

MARY SMITH FOR CONGRESS

ADDRESS (number and street)  (Check if address  
is changed) P.O. BOX 36287

411 Bunker Ridge  NM 87176-16287

CITY

STATE

ZIP CODE

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

(Check if address  
is changed) MARYSMITH4NM@GMAIL.COM

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address  
is changed) MARYSMITH2012.COM

2. DATE  11/07/2011

3. FEC IDENTIFICATION NUMBER  C

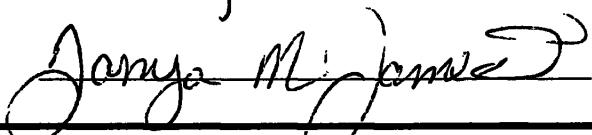
4. IS THIS STATEMENT  NEW (N)  OR  AMENDED (A)

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

Tanya M James

Signature of Treasurer



Date

11/07/2011

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.

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For further information contact:  
Federal Election Commission  
Toll Free 800-424-9530  
Local 202-694-1100

FEC FORM 1  
(Revised 02/2009)

11030690155

## 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

GARY SMITH

Candidate Party Affiliation

REP

Office Sought:

House

Senate

President

State

NM

District

01

(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
2.  FEC ID number
3.  FEC ID number
4.  FEC ID number

**Write or Type Committee Name**

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

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.

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  
Designated  
Agent

Mailing Address

CITY

STATE

ZIP CODE

Title or Position

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.

Bank of Albuquerque

Mailing Address

4901 Central Ave NE

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

CITY

STATE

ZIP CODE

11030690158

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.

	Date of Receipt
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<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input checked="" type="checkbox"/> Overnight Delivery Service (Specify): <i>FEDEX</i>	Shipping Date <i>11/9/11</i>
	Next Business Day Delivery <input checked="" type="checkbox"/>
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<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

*ASL*  
PREPARER  
(3/2005)

*11/10/11*  
DATE PREPARED