

RECEIVED  
FEC MAIL ROOM

2002 MAR 14 P 12:58

FEC  
FORM 1

# STATEMENT OF ORGANIZATION

(See instructions)

Office Use Only

1. NAME OF COMMITTEE (in full) (Check if name is changed) Example: If typing, type over the lines. 12FE4M5

WINNING MARGINS PAC

ADDRESS (number and street) (Check if address is changed)

ATTN: MIKE SMITH  
1800 CONNECTICUT AVE NW #400  
WASHINGTON DC 20006

CITY STATE ZIP CODE

COMMITTEE'S E-MAIL ADDRESS

RSVP@WINNINGMARGINS.COM

COMMITTEE'S WEB PAGE ADDRESS (URL)

WWW.WINNINGMARGINS.COM

2. DATE 03 17 2002

3. FEC IDENTIFICATION NUMBER C00373506

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 MICHAEL D. SMITH

Signature of Treasurer *Michael D. Smith* Date 03 17 2002

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.

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 \_\_\_\_\_

Candidate Party Affiliation	Office Sought:	House	Senate	President	State District
-----------------------------	----------------	-------	--------	-----------	----------------

- (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

NONE \_\_\_\_\_

\_\_\_\_\_

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 JOHN ROBINSON  
 Mailing Address 3600 16TH ST NW  
WASHINGTON DC 20010  
 Title or Position AST. TREASURER CITY DC STATE DC ZIP CODE 20010  
 Telephone number 202-425-5413

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 MICHAEL D. SMITH  
 Mailing Address 800 CONNECTICUT AVE NW #400  
WASHINGTON DC 20006  
 Title or Position TREASURER CITY DC STATE DC ZIP CODE 20006  
 Telephone number 202-331-3198

Full Name of Designated Agent JOHN ROBINSON  
 Mailing Address 3600 16TH ST NW  
WASHINGTON DC 20010  
 Title or Position AST. TREASURER CITY DC STATE DC ZIP CODE 20010  
 Telephone number 202-425-5413

8. **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 AMERICA

Mailing Address

2631 CONNELL AVENUE NW

WASHINGTON DC 20008

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Bank, Depository, etc.

Mailing Address

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.

<input checked="" type="checkbox"/> Hand Delivered	Date of Receipt <i>3-14-02</i>
<input type="checkbox"/> First Class Mail	POSTMARKED
<input type="checkbox"/> Registered/Certified Mail	POSTMARKED (R/C)
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House office of Records and Registration	Date of Receipt
<input type="checkbox"/> Received from the Senate Office of Public Records	Date of Receipt
<input type="checkbox"/> Other ( Specify):	Postmarked _____ and/or Date of Receipt
<input type="checkbox"/> Electronic Filing	
<i>AEI</i>	<i>3-14-02</i>
PREPARER	DATE PREPARED