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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.

12FE4M5

EAST COAST CONSERVATIVE PAC

ADDRESS (number and street)

49 E MAIN ST BOX 191

(Check if address
is changed)

MARLBORO

MA

01752

CITY ▲

STATE ▲

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

tedtemple@TJMO.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

COMMITTEE'S FAX NUMBER

508-485-0296

2. DATE

12 12 2006

3. FEC IDENTIFICATION NUMBER ▶

C00205120

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

Theodore C. Temple

Signature of Treasurer

Date

12 12 2006

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)

26029312167

5. TYPE OF COMMITTEE (Check One)

N/A

- (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

N/A

Mailing Address _____

CITY ▲ STATE ▲ ZIP CODE ▲

Relationship _____

Type of Connected Organization:

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

2007091210

Write or Type Committee Name

EAST COURT CONSERVATIVE PAC

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 Theodore G Temple

Mailing Address Po Box 191

MARLBORO MA 01752

Title or Position CITY STATE ZIP CODE

TREAS

Telephone number 508-485-0296

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 Theodora G Temple

Mailing Address Box 191

MARLBORO MA 01752

Title or Position CITY STATE ZIP CODE

TRES

Telephone number 508-485-0296

Full Name of Designated Agent NA

Mailing Address

Title or Position CITY STATE ZIP CODE

Telephone number

2009012109

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.

Hudson Savings Bank

Mailing Address

256 Maple St

MAALBoro MA 01757

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Bank, Depository, etc.

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

0711156002

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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Other (Specify): Date of Receipt or Postmarked

ER 12/18/06
PREPARER **DATE PREPARED**
 (3/2005)

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