RECEIVED FEC MAIL COEPITIONS CENTER

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FEC FORM 1		STATEMEN ORGANIZA	Office Use Only									
1. NAME OF COMMITTEE (in	full)	(Check if name is changed)	Example: If typing, type over the lines.	yping, type								
6000E F	OR	CONGIRIESIS	111111111	<u> </u>								
1 1 1 1 1 1	<u> </u>		<u> </u>	1:11								
ADDRESS (number a	nd street)	PO: BOX 24	0. 5 . ; ; ; ; ; ; ;	<u> </u>								
(Check if a	ddress		<u> </u>									
is changed)		TERRE HAU	TE	IN	4.7.8:0.2 -							
			CITY A	STATE ▲	ZIP CODE ▲							
BRIANCE				<u>i </u>								
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COMMITTEE'S WEB	PAGE AD	DDRESS (URL)										
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		<u> </u>			1							
COMMITTEE'S FAX [6.1.2] - 2.3.2 2. DATE	J-13.2	3:2 6/2007										
3. FEC IDENTIFIC	•											
4. IS THIS STATEM		OR OR	. AMENDED (A)									
I certify that I have e	xamined l	his Statement and to the best	of my knowiedge and belief	it is true, correc	t and complete.							
Type or Print Name of	of Treasure	Brian	Matthew	Baner								
Signature of Treasure	r <u>.</u>	130/	1	Date O	8 06 2007							
NOTE: Submission of (alse. erron	eous, or incomplete information of ANY CHANGE IN INFORMATION			the penalties of 2 U.S.C. §437g.							
Office Use Only			For further information Federal Election Commis Toli Free 800-424-9530 Local 202-694-1100		FEC FORM 1 (Revised 02/2003)							

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	FEC FOI	The Vised 02/2003)	raye Z
5.	TYPE OF CO	COMMITTEE (Check One)	
(This committee is a principal campaign committee. (Complete the candidate information below.)	
	(p) .	This committee is an authorized committee, and is NOT a principal campaign committee. (Complete information below.)	the candidate
	Name of Candidate	GREG. GODDE	<u> </u>
	Candidate Party Affiliation	ion Kepublican Sought: House Senate President	State
	(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
	Name of Candidate		: 1 : 1 1
	(d)	·	nocratic, ublican, 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 segreg committee.	ated fund or party
5.	Name of Any	ny Connected Organization or Affiliated Committee	
L	<u>; ; </u>		<u> </u>
L	<u> </u>		<u> </u>
	Mailing Addre	ress <u> </u>	<u> </u>
		<u> </u>	<u>: </u>
		CITY ▲ STATE ▲ Z	P CODE ▲
	Relationship	<u> </u>	<u> </u>
	٧.	nected Organization:	
	Corp	poration Corporation w/o Capital Stock Labor Organization	ก

Trade Association

Cooperative

Membership Organization

V	/rite or Type Committee Name	!												
7.	Custodian of Records: Ider books and records.	Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of committee books and records.												
	Full Name BRI:	Full Name BRIAN: M:A:T:T:H:E:W: B:A:UER: ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ;												
	Mailing Address	2719 WILSON D	RIVE											
		TELRE HAUTE	III IN	<u>4.7.8.0.3</u>										
	Title or Position▼	CITY A	STATE ▲	ZIP CODE ▲										
	TREASURER		Telephone number	11-12-08-6452										
8.	Treasurer: List the name an any designated agent (e.g.,	d address (phone number optional) of assistant treasurer).	the treasurer of the committee;	and the name and address of										
	Full Name of Treasurer BRIA	IN MATTHEW BAU	: ER :::::::	· · · · · · · · · · · · · · · · · · ·										
	Mailing Address	1719 WILSON D	RIVE											
			1											
		TERRE HAUTE	I IN	47803										
	Title or Position▼	CiTY ▲	STATE ▲	ZIP CODE ▲										
	TREASURER	<u> </u>	Telephone number	2-203-6452										
	Full Name of Designated Agent C.H.D:L	1:-:I.L. : L.E.E. : :	<u> </u>											
	Mailing Address	3:756 MAGNOLIA	COURT											
			<u> </u>											
		TERRE HAUTE	<u> </u>	47.8:0:2 -										
	Title or Position▼	CITY A	STATE ▲	ZIP CODE ▲										
	AISIS: LISIT:A:NIT	TREASURER	Telephone number (8,1	2-24,9-91,29										

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.

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Name of Bank, D	epos	itory,	etc.																-									•			_
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Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING The FEC added this page to the end of this filing to indicate	
Hand Delivered	Date of Receipt
USPS First Class Mail	Postmarked
USPS Registered/Certified	Postmarked (R/C)
USPS Priority Mail	Postmarked
Delivery Confirmation™ or Signature Confirm	mation™ Label
USPS Express Mail	Postmarked
Postmark Illegible	
No Postmark	
Overnight Delivery Service (Specify):	Shipping Date
Next Business	s Day Delivery
Received from House Records & Registration Office	Date of Receipt
Received from Senate Public Records Office	Date of Receipt
Received from Electronic Filing Office	Date of Receipt
Other (Specify):	eceipt or Postmarked
En	8/1467
PREPARER (3/2005)	DATE PREPARED