

FEC FORM 1

STATEMENT OF ORGANIZATION

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2014 SEP 11 AM 8:37

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

12FE4M5 FEC MAIL CENTER

CAROL'S LIST

ADDRESS (number and street) PO BOX 1447

(Check if address is changed)

Helena MT 59624 CITY STATE ZIP CODE

COMMITTEE'S E-MAIL ADDRESS

(Check if address is changed) carolslistmt@gmail.com

Optional Second E-Mail Address

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address is changed) WWW.CAROLSLISTMT.ORG

2. DATE 09/06/2014

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 Christine Kaufmann

Signature of Treasurer [Signature] Date 09/06/2014

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.

FORM 1001-10-10-10



Write or Type Committee Name

Carol's List

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

[Empty grid lines for organization name]

Mailing Address

[Empty grid lines for mailing address]

CITY

STATE

ZIP CODE

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.

Full Name

Treasurer

Mailing Address

[Empty grid lines for mailing address]

Title or Position

CITY

STATE

ZIP CODE

Telephone number

406-439-0256

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

CHRISTINE KAUFMANN

Mailing Address

825 Breckenridge

Helena

CITY

STATE

ZIP CODE

MT

59601

Title or Position

CAROL'S LIST TREASURER

Telephone number

406-439-0256

110111011011011

Full Name of Designated Agent

Carol Williams

Mailing Address

3533 Lincoln Hills Rd.

Missoula

CITY

MT

STATE

59802

ZIP CODE

Title or Position

President of board

Telephone number

406-728-8735

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.

Mailing Address

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

VALLEY BANK

Mailing Address

321 Fuller Ave.

Helena

CITY

MT

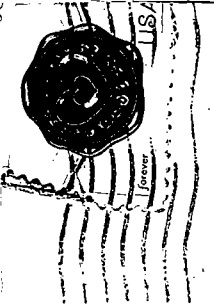
STATE

59601

ZIP CODE

150001 HND 10001

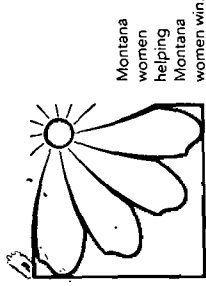
1200001000410001



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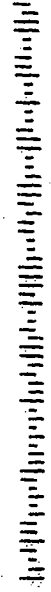


Federal Election Commission  
999 E Street NW  
Washington, DC 20463



**CAROL'S LIST**


P.O. BOX 1447  
HELENA, MT 59624



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.

DONOR INFORMATION

|  |   |
|--|---|
| <input type="checkbox"/> Hand Delivered                                    | Date of Receipt                                     |
| <input checked="" type="checkbox"/> USPS First Class Mail                  | Postmarked<br>9/6/14                                |
| <input type="checkbox"/> USPS Registered/Certified                         | Postmarked (R/C)                                    |
| <input type="checkbox"/> USPS Priority Mail                                | Postmarked  |
| <input type="checkbox"/> USPS Priority Mail Express                        | Postmarked  |
| <input type="checkbox"/> Postmark Illegible                                |   |
| <input type="checkbox"/> No Postmark                                       |   |
| <input type="checkbox"/> Overnight Delivery Service (Specify):             | Shipping Date                                       |
|  | Next Business Day Delivery <input type="checkbox"/> |
| <input type="checkbox"/> Received from House Records & Registration Office | Date of Receipt                                     |
| <input type="checkbox"/> Received from Senate Public Records Office        | Date of Receipt                                     |
| <input type="checkbox"/> Received from Electronic Filing Office            | Date of Receipt                                     |
| <input type="checkbox"/> Other (Specify):                                  | Date of Receipt or Postmarked                       |

  
 PREPARER  
 (8/2013)

9/11/14  
 DATE PREPARED