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FRIENDS OF KATHY SALVI
P.O. Box 7
Wauconda, IL 60084

2005 OCT 11 A 10:29

TO: Federal Election Commission

RE: Change of Treasurer

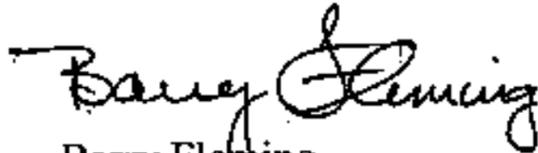
Date: October 3, 2005

This document serves as an official request to change the treasurer for the **Friends of Kathy Salvi committee**. The new treasurer for the committee will be Barry Fleming. The FEC-assigned committee assigned identification number is **C00414037**.

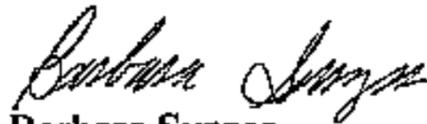
You may contact me at 847-566-1455.

I represent that I am the duly appointed treasurer and have the authority to sign FEC reports for the above named committee.

Sincerely,



Barry Fleming
Treasurer



Barbara Surges
Former Treasurer

2005 OCT 11 A 10:29

FEC
FORM 1

STATEMENT OF ORGANIZATION

RECEIVED
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7005 OCT 11 A 10:29

Office Use Only

1. NAME OF
COMMITTEE (in full)

(Check if name
is changed)

Example: if typing, type
over the lines.

12FE4MS

Friends of Kathy Salvi

ADDRESS (number and street)

PO Box 7

(Check if address
is changed)

Wauconda

IL

60084

CITY ▲

STATE ▲

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

Kathy@kathysalvi2006.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

www.kathysalvi2006.com

COMMITTEE'S FAX NUMBER

847-566-1443

2. DATE

10 03 2005

3. FEC IDENTIFICATION NUMBER ▶

C00414037

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

BARRY FLEMING

Signature of Treasurer

Barry Fleming

Date

10 03 2005

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)

25038901203

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 Kathleen Salvi

Candidate Party Affiliation

Rep

Office Sought:

House

Senate

President

State

IL

District

08

- (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

2503899204

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.

First Midwest Bank

Mailing Address

411 North Seymour Ave

Mundelein

IL

60060

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Bank, Depository, etc.

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

25038903208

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.

<input type="checkbox"/> Hand Delivered	Date of Receipt
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<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

fel
 PREPARER

10/11/05
 DATE PREPARED

25030903207