

FEC  
FORM 1

# STATEMENT OF ORGANIZATION

(See Instructions)

RECEIVED  
FEDERAL ELECTION  
COMMISSION  
PUBLIC DISCLOSURE  
DIVISION

APR 18 2 27 PM '02

Office Use Only

1. NAME OF COMMITTEE (in full) (Check if name is changed) Example: If typing, type over the lines. 12FE4M5  
Capitol Hill Prayer Alert Committee Election Fund (CHPAC Election Fund)

ADDRESS (number and street) P.O. Box 179  
(Check if address is changed) Catharpin VA 20143  
CITY ▲ STATE ▲ ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS  
N/A

COMMITTEE'S WEB PAGE ADDRESS (URL)  
www.electionfund.org

2. DATE 04 12 2002

3. FEC IDENTIFICATION NUMBER ▶ C: 00362061

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 Gretchen W. Trump

Signature of Treasurer  Date 04 12 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
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- (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

Capitol Hill Prayer Alert Committee \_\_\_\_\_

Mailing Address \_\_\_\_\_  
 4406 Sanders Lane \_\_\_\_\_

Catharpin \_\_\_\_\_ VA \_\_\_\_\_ 20143 \_\_\_\_\_

CITY ▲ STATE ▲ ZIP CODE ▲

Relationship \_\_\_\_\_ Connected organization \_\_\_\_\_

Type of Connected Organization:

- |   |                                     |                               |                    |
|---|-------------------------------------|-------------------------------|--------------------|
| Corporation   | <input checked="" type="checkbox"/> | Corporation w/o Capital Stock | Labor Organization |
| <input checked="" type="checkbox"/> Membership Organization |                                     | Trade Association             | Cooperative        |

Write or Type Committee Name

Capitol Hill Prayer Alert Committee Election Fund (CHPAC Election Fund)

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 Gretchen W. Trump  
 Mailing Address 4406 Sanders Lane  
Catharpin VA 20143  
 Title or Position Treasurer CITY STATE ZIP CODE  
 Telephone number

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 Gretchen W. Trump  
 Mailing Address 4406 Sanders Lane  
Catharpin VA 20143  
 Title or Position Treasurer CITY STATE ZIP CODE  
 Telephone number

Full Name of Designated Agent Pierre Bynum  
 Mailing Address Box 98  
Faulkner MD 20632  
 Title or Position Assistant Treasurer CITY STATE ZIP CODE  
 Telephone number

B. 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.

Branch Banking and Trust Company

Mailing Address

P.O. Box 819

Wilson

NC

27894

0819

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 type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> First Class Mail	POSTMARKED
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<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	
 PREPARER	4-18-02 DATE PREPARED