

FEC
FORM 1

STATEMENT OF
ORGANIZATION

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Office Use Only

1. NAME OF
COMMITTEE (in full)

(Check if name
is changed)

Example: If typing, type
over the lines.

12FE4M5

LEE FOR CONGRESS 2008

ADDRESS (number and street)

720 CLARK STREET

(Check if address
is changed)

NORTH UTICA

IL

61373

CITY ▲

STATE ▲

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

info@leeformcongress2008.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

www.leeformcongress2008.com

COMMITTEE'S FAX NUMBER

-

2. DATE

11 / 17 / 2007

3. FEC IDENTIFICATION NUMBER ►

C00439877

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

Gerald Bauman

Signature of Treasurer

Gerald Bauman

Date

11 / 16 / 2007

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
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For further information contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-694-1100

FEC FORM 1
(Revised 02/2003)

27039564311

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 JIMMY D LEE

Candidate Party Affiliation

REP

Office Sought:

House

Senate

President

State

IL

District

11

- (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

Mailing Address

_____ - _____

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship

Type of Connected Organization:

Corporation

Corporation w/o Capital Stock

Labor Organization

Membership Organization

Trade Association

Cooperative

27039564312

Write or Type Committee Name

LEE FOR CONGRESS 2008

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 GERALD BAUMAN

Mailing Address 77 W WASHINGTON STREET SUITE 1605 CHICAGO IL 60602

Title or Position CITY STATE ZIP CODE

TREASURER Telephone number 312-368-8400

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 GERALD BAUMAN

Mailing Address 77 W WASHINGTON STREET SUITE # 1605 CHICAGO IL 60602

Title or Position CITY STATE ZIP CODE

TREASURER Telephone number 312-368-8400

Full Name of Designated Agent

Mailing Address

Title or Position CITY STATE ZIP CODE

Telephone number

27039564313

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.

TCF BANK

Mailing Address

4930 N MILWAUKEE AVE

CHICAGO IL 60630-

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Bank, Depository, etc.

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

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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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11/19/07

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Other (Specify): Date of Receipt or Postmarked

Jms
 PREPARER

11/20/07
 DATE PREPARED

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