

FEC FORM 1

STATEMENT OF ORGANIZATION

Office Use Only

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

WASINGER FOR CONGRESS

ADDRESS (number and street)

10638 Timberidge Rd

[ ] (Check if address is changed)

Fairfax Station

VA

22039

CITY

STATE

ZIP CODE

COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address)

[ ] (Check if address is changed)

mwasinger@yahoo.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

[ ] (Check if address is changed)

2. DATE 02 14 2014

3. FEC IDENTIFICATION NUMBER C

4. IS THIS STATEMENT [X] 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 MARILYN WASINGER

Signature of Treasurer [Handwritten Signature]

Date 02 14 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.

Office Use Only

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

FEC FORM 1 (Revised 02/2009)

mailed 2-15-2014

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5. TYPE OF COMMITTEE

Candidate Committee:

- (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 **ROBERT K WASINGER**

Candidate Party Affiliation **REP** Office Sought:  House  Senate  President State **VA** District **10**

- (c)  This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate

Party Committee:

- (d)  This committee is a (National, State or subordinate) committee of the (Democratic, Republican, etc.) Party.

Political Action Committee (PAC):

- (e)  This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:
  - Corporation  Corporation w/o Capital Stock  Labor Organization
  - Membership Organization  Trade Association  Cooperative
  - In addition, this committee is a Lobbyist/Registrant PAC.
- (f)  This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)
  - In addition, this committee is a Lobbyist/Registrant PAC.
  - In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)

Joint Fundraising Representative:

- (g)  This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.
- (h)  This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.

Committees Participating in Joint Fundraiser

1. \_\_\_\_\_ FEC ID number C
2. \_\_\_\_\_ FEC ID number C
3. \_\_\_\_\_ FEC ID number C
4. \_\_\_\_\_ FEC ID number C

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Write or Type Committee Name

WASINGER FOR CONGRESS

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

[Empty fields for organization name]

Mailing Address

[Empty fields 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

MARILYN WASINGER

Mailing Address

2412 PERSHING DRIVE

HAYS

KS

67601

Title or Position

CITY

STATE

ZIP CODE

TREASURER

Telephone number

785

623

3808

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

MARILYN WASINGER

Mailing Address

2412 PERSHING DRIVE

HAYS

KS

67601

Title or Position

CITY

STATE

ZIP CODE

TREASURER

Telephone number

785

623

3808

14031190327

Full Name of Designated Agent

Mailing Address

[Address line]

[Address line]

CITY

STATE

ZIP CODE

Title or Position Telephone number

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.

BANK OF AMERICA

Mailing Address 1200 E. 27TH STREET

[Address line]

HAYS KS 67601

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

[Address line]

[Address line]

CITY

STATE

ZIP CODE

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**Federal Election Commission  
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FOR INCOMING DOCUMENTS**

The FEC added this page to the end of this filing to indicate how it was received.

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PREPARER

N/A  
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(8/2013)

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