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FEC FORM 1		TATEMEN PRGANIZA (See instruction					Offic	ce use only	
1. NAME OF COMMITTEE (in	full)	(Check if name is changed)		mple: If typyin the lines	ng, type	12FE4	M5		
Meuser For Co	ongress			1 1 1 1	1 1 1 1		111		
ADDRESS (number and s	street)	#3 Box 124- A							
 (Check if address is changed)]
lis changed)	Wyal	using 						18853 _	
COMMITTEE'S E-MAI			CITY	1		STATE		ZIP COD	DE 🔺
justice073@hc									1
COMMITTEE'S WEB	PAGE ADDRESS (U	RL)							·····
]
COMMITTEE'S FAX N 570-746-9036	COMMITTEE'S FAX NUMBER 570-746-9036								
2. DATE 04		2008 [°]							
3. FEC IDENTIFICA		C)439448]			
4. IS THIS STATEN	IENT NEW	(N) OR	X	AMEN	DED (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 Dee Ann Watts									
Signature of Treasurer Electronically Filed by Dee Ann Watts Date Date Date Date									
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. S437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS									
Office Use					information c			FEC FOF	RM 1

	FECForm 1 (Re	evised 02/2003)	Page 2						
5.	TYPE OF COMMITTE	E (Check One)							
(a) X This committee is a principal campaign committee. (Complete the candidate information below.)									
	(-)	ommittee is an authorized committee, and is NOT a principal campaign committee. (Complet ation below.)	te the candidate						
	Name of Candidate	Daniel P. Meuser							
	Candidate Party Affiliation	REP Office X House Senate President	t District PA						
	(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.								
	Name of Candidate								
	(d) This co	ommittee is a (National, State (or subordinate) committee of the	(Democratic, Republican,etc.) Party.						
	(e) This co	ommittee is a separate segregated fund							
	(f) This constant	ommittee supports/opposes more than one Federal candidate, and is NOT a separate segreg ttee.	ated fund or party						
6.	Name of Any Connec	cted Organization or Affiliated Committee							
	Mailing Address								
		CITY STATE STATE	ZIP CODE 🛦						
	Relationship								
	Type of Connected Organization:								
	Corporation	Corporation w/o Capital Stock Labor Org	ganization						
	Membership (Organization Trade Association Cooperati	ve						

FEC Form	1 (Revised 02/200	3)			Pa	age 3
rite or Type Comr						
Meuser For	-					
	ecords: Identify Committee bool	v by name, address, (phone number ks and records.	- optional), and posi	tion of the	e person in	
Full Name	Dee Ann W	'atts 		1		1
Mailing Address		R.R. #3 Box 124- A				
		Wyalusing	PA		18853	
Title or Position	•	CITY 🛦	STATE		ZIP CODE 🛦	
	Treasurer		Telephone number	570	746 	7779
			,			
name and add Full Name of Treasurer Mailing Address	Dee Ann W	atts R.R.#3 Box 124-A				
Full Name of Treasurer	Dee Ann W		PA		18853	
Full Name of Treasurer		R.R.#3 Box 124-A	<u>PA</u>		<u>18853</u> ZIP CO	
Full Name of Treasurer Mailing Address		R.R.#3 Box 124-A Wyalusing				
Full Name of Treasurer Mailing Address		R.R.#3 Box 124-A Wyalusing	STAT	E A	ZIP CO	
Full Name of Treasurer Mailing Address Title or Position Full Name of Designated		R.R.#3 Box 124-A Wyalusing	STAT	E A	ZIP CO	
Full Name of Treasurer Mailing Address Title or Position Full Name of Designated Agent		R.R.#3 Box 124-A Wyalusing	STAT	E A	ZIP CO	
Full Name of Treasurer Mailing Address Title or Position Full Name of Designated Agent	▼ Treasurer	R.R.#3 Box 124-A Wyalusing	STAT	E▲ 	ZIP CO	
Full Name of Treasurer Mailing Address Title or Position Full Name of Designated Agent Mailing Address	▼ Treasurer	R.R.#3 Box 124-A Wyalusing CITY A	STAT Telephone number	E▲ 	ZIP CO 746	

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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.

M & T E	8ank				
Mailing Address	3 South Main Str	reet			
	Pittston			PA 18	8640
			STA	TE⊿ Z	
Name of Bank, Depository, etc.					
Mailing Address					
			STA	TE _ 2	