

**FEC  
FORM 1****STATEMENT OF  
ORGANIZATION**

(See instructions)

Office use only

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

12FE4M5

Committee to Elect Phil Heimlich

ADDRESS (number and street)

5909 Stewart Road

☐(Check if address  
is changed)

Suite 1

Cincinnati

OH

45227

CITY ▲

STATE ▲

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

luchfwm@fuse.net

COMMITTEE'S WEB PAGE ADDRESS (URL)

www.philheimlich.net

COMMITTEE'S FAX NUMBER

5132723344

2. DATE

M M  
0 5/ D D  
0 4/ Y Y Y Y  
2 0 0 7

3. FEC IDENTIFICATION NUMBER

C C00434951

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

Mr. F. William Luchsinger, CPA

Signature of Treasurer

Electronically Filed by Mr. F. William Luchsinger, CPA

Date

M M  
0 8/ D D  
2 6/ Y Y Y Y  
2 0 0 7

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  
OnlyFor further information contact:  
Federal Election Commission  
Toll Free 800-424-9530  
Local 202-694-1100**FEC FORM 1**  
(Revised 02/2003)

## 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 **Mr. Philip Murray Heimlich**

Candidate  
Party Affiliation

**REP**

Office  
Sought:

☒

House

☐

Senate

☐

President

State

**OH**

District

**02**

- (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

**None**

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship

Type of Connected Organization:

☐

Corporation

☐

Corporation w/o Capital Stock

☐

Labor Organization

☐

Membership Organization

☐

Trade Association

☐

Cooperative

Write or Type Committee Name

**Committee to Elect Phil Heimlich**

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 **Mr. F. William Luchsinger, CPA**

Mailing Address **5909 Stewart Road**

**Suite 1**

**Cincinnati OH 45227 - 1257**

Title or Position ▼ CITY ▲ STATE ▲ ZIP CODE ▲

**Treasurer** Telephone number **513 - 272 - 3100**

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 **Mr. F. William Luchsinger, CPA**

Mailing Address **5909 Stewart Road**

**Suite 1**

**Cincinnati OH 45227 - 1257**

Title or Position ▼ CITY ▲ STATE ▲ ZIP CODE ▲

**Treasurer** Telephone number **513 - 272 - 3100**

Full Name of Designated Agent **Mrs. Susan L. West**

Mailing Address **5909 Stewart Road**

**Suite 1**

**Cincinnati OH 45227 - 1257**

Title or Position ▼ CITY ▲ STATE ▲ ZIP CODE ▲

**Assistant Treasurer** Telephone number **513 - 314 - 3550**

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.

**Fifth Third Bank**

Mailing Address

**7708 Montgomery Road**

**Cincinnati**

**OH**

**45236**

CITY ▲

STATE ▲

ZIP CODE ▲