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**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.

12FE4M5

Myers 4 Congress

ADDRESS (number and street)

394 N Daystar Mountain Drive



(Check if address
is changed)

Tucson

AZ

85745

CITY

STATE

ZIP CODE

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



(Check if address
is changed)

terry@myers4congress.com

COMMITTEE'S WEB PAGE ADDRESS (URL)



(Check if address
is changed)

www.myers4congress.com

2. DATE

08 / 01 / 2010

3. FEC IDENTIFICATION NUMBER

C00481069

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

Sarah Anne LoRang

Signature of Treasurer

Sarah Anne LoRang

Date

08 / 01 / 2010

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)

10030404348

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 T e r r y L o n M y e r s

Candidate Party Affiliation R E P Office Sought: ☒ House ☐ Senate ☐ President State A Z District 0 7

- (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

10030404349

Write or Type Committee Name

Myers 4 Congress

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

[illegible]**Mailing Address**[illegible]

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

S a r a h A n n e L o R a n g

Mailing Address

394 N Daystar Mountain Drive
Tucson AZ 85745-

T u c s o n A Z 8 5 7 4 5 -

Title or Position

CITY

STATE

ZIP CODE

Treasurer

Telephone number

$$|5, 2, 0| - |4, 6, 5| - |0, 1, 3, 3|$$

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

S a r a h A n n e L o R a n g

Mailing Address

394 N. Daystar Mountain Drive
Tucson, AZ 85745

T u c s o n A Z 8 5 7 4 5 -

Title or PositionTreasurer:

Telephone number

| 5 | 2 | 0 | - | 4 | 6 | 5 | - | 0 | 1 | 3 | 3 |

Full Name of
Designated
Agent

Terry Lon Myers

Mailing Address

394 N. Daystar Mountain Drive

Tucson

CITY

AZ

STATE

85745-

ZIP CODE

Title or Position

Candidate

Telephone number

520-207-7004

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.

National Bank of Arizona

Mailing Address

136 N Stone Ave

Tucson

CITY

AZ

STATE

85701-

ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

CITY

STATE

ZIP CODE

10030404351

Federal Election Commission
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☐ Other (Specify):	Date of Receipt or Postmarked


PREPARER

8/11/10
DATE PREPARED

(3/2005)

10030404352