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**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

ARIZONA DEMOCRACY GROUP

ADDRESS (number and street)

PO BOX 27636

(Check if address
is changed)

TEMPE

AZ

85285-1636

CITY ▲

STATE ▲

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

INFO@ARIZONADEMOCRACY.COM

COMMITTEE'S WEB PAGE ADDRESS (URL)

HTTP://WWW.ARIZONADEMOCRACY.COM

2. DATE 01 29 2002

3. FEC IDENTIFICATION NUMBER ▶

C00370551

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

MARSHA PRESLEY

Signature of Treasurer

Date

01 30 2002

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 800-424-9630
Local 202-694-1100

FEC FORM 1
(Revised 1/01)

22.03.03 745 2546

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 _____

Candidate Party Affiliation	Office Sought:	House	Senate	President	State District
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- (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

22.03.745.2350

Write or Type Committee Name

ARIZONA DEMOCRACY GROUP

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 BEVERLY FOX-MILLER

Mailing Address 9913 E. APACHE TRAIL W174

MEBA AZ 85207

Title or Position CITY STATE ZIP CODE

CHAIRMAN Telephone number 480-373-8177

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 MARSHA PRESLEY

Mailing Address 6845 S. ROOSEVELT ST.

TEMPE AZ 85283

Title or Position CITY STATE ZIP CODE

TREASURER Telephone number 480-730-2108

Full Name of Designated Agent PETER HERSHFIELD

Mailing Address 8800 N. 10TH AVE. #111

PEORIA AZ 85345

Title or Position CITY STATE ZIP CODE

ASSISTANT TREASURER Telephone number 623-933-3151

8. 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.

WELLS FARGO BANK ARIZONA N.A.

Mailing Address

DOBSON RANCH OFFICE

P.O. BOX 6995

PORTLAND OR 97228-6995

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Bank, Depository, etc.

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

22-03-745-2352

Federal Election Commission

ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

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

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