

FEC FORM 1

STATEMENT OF ORGANIZATION

RECEIVED PAGE 1/4 SECRETARY OF THE SENATE PUBLIC RECORDS

13 JAN -2 PM 3:45

Office Use Only

1. NAME OF COMMITTEE (in full)

(Check if name is changed)

Example: If typing, type over the lines.

12FE4M5

A Lot of People Who Support Jeff Bingaman

ADDRESS (number and street)

4516 Larchmont Dr., NE

(Check if address is changed)

Albuquerque

CITY ▲

NM

STATE ▲

87111-

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

(Check if address is changed)

Bingaman4Senate@aol.com

Optional Second E-Mail Address

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address is changed)

2. DATE

12 / 27 / 2012

3. FEC IDENTIFICATION NUMBER ▶

C C00305110

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 Diane Dal Santo

Signature of Treasurer

Diane Dal Santo Date

12 / 27 / 2012

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 06/2012)

120200101010

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 Jeff Bingaman

Candidate Party Affiliation DEM REP LIB IND OTH

Office Sought: House Senate President

State AL AK AR AZ CA CO CT DC DE FL GA HI IA IL IN KS KY LA MA MD ME MI MN MO MS MT NC ND NH NJ NM NV NY OH OK OR PA RI SC SD TN TX UT VT WA WI WY

District 1 2 3 4 5 6 7 8 9 10 11 12

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

Name of Candidate _____

Party Committee:

- (d) This committee is a NAT STATE LOCAL (National, State or subordinate) committee of the DEM REP OTH (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 _____

17020010357

Write or Type Committee Name

A Lot of People Who Support Jeff Bingaman

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

[Empty grid lines for organization name]

Mailing Address

[Empty grid lines 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.

*address
Diane
Change*

Lori Peterkin

Full Name

[Grid line for full name]

Mailing Address

45116 LARCHMONT, NE

[Grid line for mailing address]

Albuquerque

NM

871111-

Title or Position

CITY

STATE

ZIP CODE

Asst. Treasurer

[Grid line for position]

Telephone number

505

604-3976

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).

*13020010
address
change*

Diane Dal Santo

Full Name
of Treasurer

[Grid line for full name]

Mailing Address

45116 LARCHMONT, NE

[Grid line for mailing address]

Albuquerque

NM

871111-

Title or Position
Treasurer

CITY

STATE

ZIP CODE

[Grid line for position]

Telephone number

505

266

0663

[Grid line for telephone number]

address & phone change

Full Name of Designated Agent | Lori Peterkin

Mailing Address | 4516 LARCIMONT NE
Albuquerque NM 87111
CITY STATE ZIP CODE

Title or Position | Assistant Treasurer
Telephone number | 505-604-1397

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 | 11201 Montgomery NE
Albuquerque NM 87111
CITY STATE ZIP CODE

Name of Bank, Depository, etc.

Mailing Address
CITY STATE ZIP CODE

12020010359

RECEIVED
SECRETARY OF THE SENATE
PUBLIC RECORDS

13 JAN -2 PM 3:45

4516 Macdonald Dr. NE
Albany NM 87111

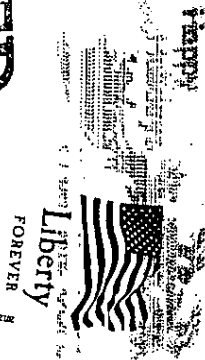
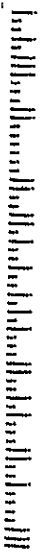
JEFF BINGAMAN

~~PO BOX 702107 ALBUQUERQUE, NM 87120-0217~~

OFFICE OF PUBLIC RECORDS
P.O. BOX 77578
WASHINGTON, DC 20013-7578

**SCREENED
BY THE SENATE
POST OFFICE**

20013857878



00E01002021

United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

HAND DELIVERED _____
Date of Receipt

USPS FIRST CLASS MAIL _____
Postmark

USPS REGISTERED/CERTIFIED _____
Postmark

USPS PRIORITY MAIL _____
Postmark
DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL

USPS EXPRESS MAIL _____
Postmark

OVERNIGHT DELIVERY SERVICE:

	SHIPPING DATE	NEXT BUSINESS DAY DELIVERY
FEDERAL EXPRESS	_____	<input type="checkbox"/>
UPS	_____	<input type="checkbox"/>
DHL	_____	<input type="checkbox"/>
AIRBORNE EXPRESS	_____	<input type="checkbox"/>

RECEIVED FROM FEDERAL ELECTION COMMISSION _____
Date of Receipt

POSTMARK ILLEGIBLE NO POSTMARK

FAX _____
Date of Receipt

OTHER _____
Date of Receipt or Postmark

PREPARER RA DATE PREPARED 01-02-13

13020010701

. 13020010362

