

**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

JOAN FITZ-GERALD FOR CONGRESS COMMITTEE

ADDRESS (number and street)

Box 401, 9975 Wadsworth Parkway

☐(Check if address  
is changed)

Unit K-2

Westminster

CO

80021

CITY ▲

STATE ▲

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

fdspreyer@aol.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

http://www.joanfitz-gerald.com

COMMITTEE'S FAX NUMBER

2. DATE

M M  
0 8/ D D  
2 4/ Y Y Y Y  
2 0 0 7

3. FEC IDENTIFICATION NUMBER

C C00433979

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

Stephanie Takis

Signature of Treasurer

Electronically Filed by Stephanie Takis

Date

M M  
0 8/ D D  
2 4/ 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

Joan Fitz-Gerald

Candidate  
Party Affiliation

DEM

Office  
Sought:☒

House

☐

Senate

☐

President

State

CO

District

2

- (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

**JOAN FITZ-GERALD FOR CONGRESS COMMITTEE**

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 **Frank D Spreyer**

Mailing Address **PO Box 18245**

**Denver** **CO** **80218** -

Title or Position ▼ **CITY ▲** **STATE ▲** **ZIP CODE ▲**

**Deputy Treasurer** Telephone number **303** - **365** - **2090**

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 **Stephanie Takis**

Mailing Address **1927 Ironton St.**

**Aurora** **CO** **80010** -

Title or Position ▼ **CITY ▲** **STATE ▲** **ZIP CODE ▲**

**Treasurer** Telephone number **303** - **343** - **8303**

Full Name of Designated Agent **Frank D. Spreyer**

Mailing Address **PO Box 18245**

**Denver** **CO** **80218** -

Title or Position ▼ **CITY ▲** **STATE ▲** **ZIP CODE ▲**

**Deputy Treasurer** Telephone number **303** - **365** - **2090**

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.

CityWide Banks

Mailing Address

P.O. Box 128

Aurora

CO

80040

0128

CITY ▲

STATE ▲

ZIP CODE ▲

**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.

[ ADDITIONAL ]

Mailing Address

**Bank of America**

**1501 Pennsylvania Ave. NW**

**Washington** **DC** **20005** -

CITY ▲ STATE ▲ ZIP CODE ▲

Name of Any Connected Organization or Affiliated Committee

[ ADDITIONAL ]

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship

Type of Connected Organization:

☐

Corporation

☐

Corporation w/o Capital Stock

☐

Labor Organization

☐

Membership Organization

☐

Trade Association

☐

Cooperative

**Designated Agent**

[ ADDITIONAL ]

Full Name

Mailing Address

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Title or Position ▼

CITY A

STATE▲

ZIP CODE ▲

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Telephone number

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