

FEC  
FORM 1

STATEMENT OF  
ORGANIZATION

(See Instructions)

RECEIVED  
FEC MAIL ROOM

2002 FEB 12 P 1:51

Office Use Only

1. NAME OF  
COMMITTEE (in full)

(Check if name  
is changed)

Example: If typing, type  
over the lines.

12FE4M5

ELECT FRANCISCO EXPLORATORY COMMITTEE

ADDRESS (number and street)

P.O. BOX 115

X (Check if address  
is changed)

SHALEMAR

FL

32579-0162

CITY ▲

STATE ▲

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

VOTEFRANCISCOE.AOL.COM

COMMITTEE'S WEB PAGE ADDRESS (URL)

Not setup yet

2. DATE

01 19 2002

3. FEC IDENTIFICATION NUMBER ▶

C

4. IS THIS STATEMENT

X

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

GEORGE M. COLTON

Signature of Treasurer

*George M. Colton*

Date

01 19 2002

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. 5437g.  
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)

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 MIKE C FRANCISCO

Candidate Party Affiliation REP Office Sought  House  Senate  President State \_\_\_\_\_ District \_\_\_\_\_

- (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

MIKE FRANCISCO FOR CONGRESS COMMITTEE

Mailing Address P.O. Box 115

J. HALEMAN FL 32579-0115

CITY ▲ STATE ▲ ZIP CODE ▲

Relationship AFFILIATED

Type of Connected Organization:

- Corporation
- Corporation w/o Capital Stock
- Labor Organization
- Membership Organization
- Trade Association
- Cooperative

Write or Type Committee Name

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 GEORGE MARSHALL COLTON

Mailing Address 21 PEBBLE BEACH DR

SHALIMAR FL 32579

Title or Position

CITY

STATE

ZIP CODE

TREASURER

Telephone number 850-651-4501

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 GEORGE MARSHALL COLTON

Mailing Address 21 PEBBLE BEACH DR

SHALIMAR FL 32579

Title or Position

CITY

STATE

ZIP CODE

TREASURER

Telephone number 850-651-4591

Full Name of Designated Agent

Mailing Address

Title or Position

CITY

STATE

ZIP CODE

Telephone number

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.

BANK OF AMERICA

Mailing Address

189 EGLIN PARKWAY

EX WALTON BEACH

FL

32568

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Bank, Depository, etc.

Mailing Address

CITY ▲


STATE ▲

ZIP CODE ▲

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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