

PETE ENWALL FOR CONGRESS COMMITTEE  
P.O. BOX 357387  
Gainesville, Florida 32635-7837

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FEDERAL ELECTION  
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1999 OCT 15 P 2:42

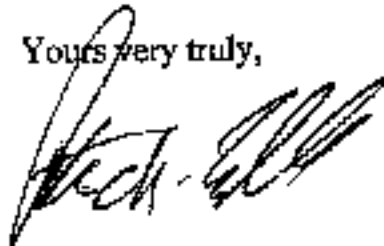
Federal Election Commission  
999 " E " Street  
Washington, D.C. 20463

RE: Statement of Organization, Fla.  
Cong. Dist. 5

To Whom It May Concern:

Enclosed please find an original Statement of Organization, whereby candidate Peter C. K. Enwall has designated the Pete Enwall for Congress Committee as the principal campaign committee. Would you file same as appropriate. Thank you for your consideration.

Yours very truly,



PETER C.K. ENWALL

PE/CK  
Encl.

# STATEMENT OF ORGANIZATION

(See reverse side for instructions)

(a) NAME OF COMMITTEE IN FULL <b>PETE ENWALL FOR CONGRESS COMMITTEE</b>	<input type="checkbox"/> (Check if name is changed)	2. DATE <b>10/07/99</b>
(b) Number and Street Address <b>P.O. Box 357387</b>	<input type="checkbox"/> (Check if address is changed)	3. FEC Identification Number
(c) City, State and ZIP Code <b>Gainesville, FL 32635-7387</b>		4. Is This Report An Amendment? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO

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**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<br><b>Peter C. K. Enwall</b> | Candidate Party Affiliation<br><b>Republican</b> | Office Sought<br><b>U.S. House of Rep.</b> | State/District<br><b>FL-Dist. 5</b> |
|--|--|--|-------------------------------------|
- (c) This committee supports/opposes only one candidate \_\_\_\_\_ and is NOT an authorized committee. (name of candidate)
  - (d) This committee is a \_\_\_\_\_ committee of the \_\_\_\_\_ Party. (National, State or subordinate) (Democratic, Republican, etc.)
  - (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 a party committee.

6. Name of Any Connected Organization or Affiliated Committee	Mailing Address and ZIP Code	Relationship
none		

Type of Connected Organization  
 Corporation  Corporation w/o Capital Stock  Labor Organization  Membership Organization  Trade Association  Cooperative

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 <b>Janet W. Enwall</b>	Mailing Address <b>2626 NW 58th Blvd, Gainesville, FL</b>	32606			Title or Position <b>Treasurer</b>
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8. Treasurer: List the name and address (phone number - optional) of the treasurer of the committee, and the name and address of any designate agent (e.g., assistant treasurer).

Full Name <b>Janet W. Enwall</b>	Mailing Address <b>2626 NW 58th Blvd., Gainesville, FL</b>	32606			Title or Position <b>Treasurer</b>
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9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit box or maintains funds.

Name of Bank, Depository, etc. <b>Suntrust</b>	Mailing Address and ZIP Code <b>411 North Main Street Gainesville, FL 32601</b>
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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  
**JANET W. ENWALL**

SIGNATURE OF TREASURER

DATE  
**9/24/99**

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.

For further information contact:  
 Federal Election Commission  
 Toll-free 800-424-9530  
 Local 202-419-3420

FEBAN053

**FEC FORM**  
(revised 4/99)

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.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input checked="" type="checkbox"/> First Class Mail	POSTMARKED 10-7-99
<input type="checkbox"/> Registered/Certified Mail	POSTMARKED
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House office of Records and Registration	Date of Receipt
<input type="checkbox"/> Received from the Senate Office of Public Records	Date of Receipt
<input type="checkbox"/> Other ( Specify):	Postmarked and/or Date of Receipt
<input type="checkbox"/> Electronic Filing	
 <i>SL</i>	 10-15-99
PREPARER	DATE PREPARED