

Dec 31 01 03:08p

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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.

12724M5

BILL BERNSTEIN FOR CONGRESS

ADDRESS (number and street)

9473 SHERWOOD GLEN

(Check if address is changed)

DALLAS

TX 75228

CITY

STATE

ZIP CODE

COMMITTEE'S MAIL ADDRESS

COMMITTEE'S WEB PAGE ADDRESS (URL)

2. DATE 12 30 01

3. FEC IDENTIFICATION NUMBER

C

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

RUBEN HAMMER

Signature of Treasurer

Date 12/31/01

NOTE: Submission of false, misleading, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §4370

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 30 DAYS

Office				
Line				
City				

For further information contact:  
Federal Election Commission  
Toll Free 800-424-9531  
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 \_\_\_\_\_

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

\_\_\_\_\_  
\_\_\_\_\_

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

BILL BERNSTEIN FOR CONGRESS

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 TREASURER

Mailing Address \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Title or Position ▼ CITY ▲ STATE ▲ ZIP CODE ▲

\_\_\_\_\_ Telephone number \_\_\_\_\_

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 IRVING HAMMER

Mailing Address 161623 BERETICHEN

\_\_\_\_\_

DALLAS TX 75252

Title or Position ▼ CITY ▲ STATE ▲ ZIP CODE ▲

TREASURER Telephone number 972-980-1818

Full Name of Designated Agent ABE ZIMMERMAN

Mailing Address 2521 SPRING BLAKE

\_\_\_\_\_

AUSTIN TX 78703

Title or Position ▼ CITY ▲ STATE ▲ ZIP CODE ▲

ASSISTANT TREASURER Telephone number 512-478-4704

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.

\_\_\_\_\_

Mailing Address \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_ - \_\_\_\_\_

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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