

RECLIVED FEDERAL ELECTION COMMISSION REPORTS ANALYSIS DIVISION

2008 A 8: 18

January 31, 2008

To: FEC - Reports Analysis Division (202) 219-3496

From: James Wm. Hurst

Re: Amended FEC Form 1 for C00436857

To Whom It May Concern:

Please find attached an amended FEC Form 1, which makes me treasurer to Nels Ackerson for Congress (IN 4).

Please feel free to reach me at 317-870-1108 with any questions or concerns.

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Treasurer

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STATEMENT OF

FEC FORM 1		ORC	SANIZ	ATIO	ON	200	FEB FEB A JAN 32 A Johns Use Only	8: 18
1. NAME OF COMMITTEE (in	full)	(Chec is cha	k if name inged)		mple:If typing, type r the lines.	12FE4M	15	
Nels Ac	<u>ker</u>	SON FO	K CC	NA	ress		اساستساسا الماسا	<u></u>
ADDRESS (number a	nd street)	49 B	DONE	, V	ILL AGE	#266		لخصيا لنسيا
(Check if address is changed)		ZIONS			أحباء المساسلين	1141	46077	123/
			<u> </u>	CITY	_ 	STATE	ZIP COD	
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DWW . Ne		• •	55 <u>. </u>	M.	المساحل المستحدث	<u></u>	المتامة المتاسلة	لنخط
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COMMITTEE'S FAX 3 1.71-135.2		93:	•					
2. DATE 0	1 3	1 200	8					
8. FEC IDENTIFIC	CATION NO	JMBER	C	04	36857			
. IS THIS STATE	MENT	NEW (N)	OR)	AMENDED (A)			
certify that I have o	xamined t		,		knawladge and belie	f it is true, come	oct and complete.	
Type or Print Name	of Treasure	JAM	<u>ES/</u>	Hur	<u>57 </u>	ومناويد فردي بريواناك الأدار الأدار الأدار والمراد	ر بیده د در می بردند بیشتر اسای دارد	
Signature of Treesure	er <u></u>	/Ut	#D			Date 💍	1 31	800g
NOTE: Submission of					oject the person signin		to the penalties of 2 L	J.S.C. § 437g.
Office Use					For further information Federal Election Commit		FEC FOR	

	Office	1 1	For further information		
•	Use	i i	Federal Election Commiss	y n	
<u> </u>	Only		Toll Free 800-424-9530	(Revised 12/2007)	_
FERMANAS PE)F				_

FEC Form 1 (Revised 12/2007)	Page 2				
TYPE OF COMMITTEE					
Candidate Committee:					
(a) This committee is a principal campaign committee. (Complete the candidate information below	N.)				
(b) This committee is an authorized committee, and is NOT a principal campalgn committee. (Co information below.)					
Name of Candidate WELS ACKERSON	ليستنشنسا				
Candidate Party Affiliation Office Sought: House Senate President	State ! N District 0 4				
(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.					
Name of Candidate .	!!!!!!!!				
Party Committee:	** *** *** *** *** *** *** *** *** ***				
(National, State (d) This committee is a or subordinate) committee of the	(Democratic, Republican, etc.) Party.				
Political Action Committee (PAC):					
(e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its or	onnected organization is a.				
Corporation Corporation w/o Capital Stock	Labor Organization				
Membership Organization Trade Association	Cooperative				
(f) This committee supports/opposes more than one Federal candidate, and is NOT a separate committee. (i.e., nonconnected committee)	segregated fund or party				
In addition, this committee is a Leadership PAC. (Identity sponsor on line 6.)					
Joint Fundraising Representative;					
(g) This committee collects contributions, pays fundraising expenses and disburses not proceeds for 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 committees/organizations, none of which is an authorized committee of a federal candidate.	two or more political				
Committees Participating in Joint Fundraiser					
1. FEC ID number C	randi i da				
2. FEC ID number C	ti an dalah geramatayan ya nigi Santarah dalah dalah dalah dalah				
3. FEC ID number C					
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5. FEC ID number C					

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FEC Form 1 (Revised	12/2007)	Page 3
Write or Type Committee Nam	- ميلنظ بالأنب بيدي المكالب - ميديات أن البيسيط القديم بيها بين المكانب بيري والمكانب بيري ويساو المساوي المساو 	
6. Name of Any Connected (Organization, Affiliated Committee, Leadership PAC Sponsor or Joint Fundrals	sing Representative
Mailing Address		
•		
		لىلىنا-لىلىل
Relationehip:	CITY STATE	ZIP CODE
Connected Organization	Affiliated Committee Leadership PAC Sponsor Joint Fundra	hising Representative
books and records.	attly by name, address (phone number - optional) and position of the person in p	DOSSESSION OF COMMISSES
Mailing Address	<u> </u>	:_iiiiii
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	لنا لناخننسسنسنسنا انا للا	لنخنا-لننا
Title or Position	CITY STATE	ZIP CODE
أحاجا بالماحة الماحة	Telephone number _ i [
8. Treasurer: List the name an any designated agent (e.g., o	d address (phone number optional) of the treasurer of the committee; and the assistant treasurer).	name and address of
Full Name of Treasurer JAME	3, HURST	_ <u></u>
Malling Address	49 BOONE VILLAGE #266	
	L	للسلط فالمنظ
	ZIONSVILLE IIVI HE	017-[183] ZIP CODE
Title or Position	·	870-1108
III CA DIAKEKI	Telephone number 8.171-1	<u>e: (:4-(:1:48)</u> 1
FEBANO42,POF		

FEC Form 1 (Revi	sed 12/2007)		Page 4
Full Name of Designated Agent	EASURER.		
Mailing Address	L	ليتسلوا فيسترا للمساولات	لناحل المناطبات
	<u>Li inti i i Libinti i M</u>	أجلح فالمناب فالمتعاقب	
	CITY	STATE	ZIP CODE
Title or Position	,	,	
<u> </u>		Telephone number	منا - لمنا - لمنا - لمنا -
safety deposit bases or m Name of Bank, Depositor	MORGAN CHASE P		funds, holds accounts, rents 460771-11231
	СПҮ	STATE	ZIP CODE
Name of Bank, Depository	y, etc.		
1	للمن بالمنط المسائل المسائلة ا		
Mailing Address	Li-I-l-i-l-i-l-i-l-i-l-i-l-i-l-i-l-i-l-i-		<u> </u>
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	<u> </u>	لنا لعبيب	السنا-اسنسا
	CITY	STATE	ZIP CODE

FESANO42.PDF

(3/2005)

Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS The FEC added this page to the end of this filing to indicate how it was received. **Date of Receipt Hand Delivered Postmarked USPS First Class Mail** Postmarked (R/C) **USPS** Registered/Certified Postmarked **USPS Priority Mail** Delivery Confirmation™ or Signature Confirmation™ Label Postmarked **USPS Express Mail** Postmark Illegible No Postmark **Shipping Date** Overnight Delivery Service (Specify): **Next Business Day Delivery Date of Receipt** Received from House Records & Registration Office **Date of Receipt** Received from Senate Public Records Office **Date of Receipt** Received from Electronic Filing Office Date of Receipt or Postmarked Other (Specify): 2/1/08 **PREPARER** DATE PREPARED