

STATEMENT OF ORGANIZATION

(See reverse side for instructions) 201

1. (a) NAME OF COMMITTEE IN FULL Phillips/Ball Committee	☐ (Check if name is changed)	COMMISSION 4411 ROOM	2. DATE 9/3/96
(b) Number and Street Address Indianapolis, IN 46226	☐ (Check if address is changed)	SEP 13 11 35 AM '96	3. FEC IDENTIFICATION NUMBER To: Be Assigned
(c) City, State and ZIP Code 5225 Nob Lane			4. IS THIS STATEMENT AN AMENDMENT? ☐ YES ☒ NO

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 William H. Ball Jr	Candidate Party Affiliation U.S. Taxpayers Party	Office Sought Vice President	State/District National Office
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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 _____ 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.

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	Mailing Address	Title or Position
Jan Conner Wahls	314 W. 107th St. Carmel, IN 46032	

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	Mailing Address	Title or Position
Jan Conner Wahls	314 W. 107th St. Carmel, IN 46032	

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 and ZIP Code
Crestar Bank	515 Maple Ave. East, Vienna, VA 22180

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

SIGNATURE OF TREASURER

DATE

Jan Conner Wahls

Jan Conner Wahls

9/9/96

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 800-424-9630
Local 202-376-3120

FEC FORM 1
(revised 4/87)

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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and Registration

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☐ Received from the Senate Office of Public
Records

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☐ Other (Specify):

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JMH
PREPARER

9/13/96
DATE PREPARED