

FEC
FORM 1

STATEMENT OF
ORGANIZATION

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2008 FEB 19 AM 9:10

Office Use Only

1. NAME OF COMMITTEE (in full) (Check if name is changed) Example: If typing, type over the lines. 12FE4M5

BROADWATER FOR CONGRESS

ADDRESS (number and street) P.O. Box 320721

(Check if address is changed)

FLOWOOD MS 39232-0721

CITY ▲

STATE ▲

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

admin@jamesbroadwater.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

http://www-jamesbroadwater.com

COMMITTEE'S FAX NUMBER

2. DATE 02/06/2008

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

Diane Hill

Signature of Treasurer

Diane Hill

Date 02/08/2008

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.

Office Use Only						For further information contact: Federal Election Commission Toll Free 800-424-9530 Local 202-694-1100	FEC FORM 1 (Revised 02/2003)
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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 boxes or maintains funds.

Name of Bank, Depository, etc.

BankPlus

Mailing Address

102 Johnston Pl. / P.O. Box 348

Clinton

MS 39060

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Bank, Depository, etc.

Wachovia Bank

Mailing Address

100 N. Main St.

Winston-Salem

NC 27150

CITY ▲

STATE ▲

ZIP CODE ▲

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

James Broadwater

Candidate Party Affiliation

REP

Office Sought:

House

Senate

President

State
DistrictMS
03

(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:

<input type="checkbox"/> Corporation	<input type="checkbox"/> Corporation w/o Capital Stock	<input type="checkbox"/> Labor Organization
<input type="checkbox"/> Membership Organization	<input type="checkbox"/> Trade Association	<input type="checkbox"/> Cooperative

Write or Type Committee Name

Broadwater 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

JAMES BROADWATER

Mailing Address

P. O. BOX 320721**FLOWOOD****MS 39232**

Title or Position ▼

CANDIDATE

CITY ▲

STATE ▲

ZIP CODE ▲

Telephone number

601-1234

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**DIANE HILL**

Mailing Address

P. O. BOX 320721**FLOWOOD****MS 39232**

Title or Position ▼

TREASURER

CITY ▲

STATE ▲

ZIP CODE ▲

Telephone number

601-1234Full Name of
Designated
Agent

Mailing Address

Title or Position ▼

CITY ▲

STATE ▲

ZIP CODE ▲

Telephone number

601-1234

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.

<input type="checkbox"/> Hand Delivered	Date of Receipt
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<input type="checkbox"/> USPS Express Mail	Postmarked
<input checked="" type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
Next Business Day Delivery <input type="checkbox"/>	
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked
	2/11/08
PREPARER (3/2005)	DATE PREPARED

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