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FEC
FORM 1

STATEMENT OF
ORGANIZATION

Office Use Only

1 NAME OF
COMMITTEE (In full)

(Check if name
is changed)

Example: If typing, type
over the lines.

12F284MS

BROOMFIELD FIRE ENGINEERS COMMITTEE

ADDRESS (number and street)

1710 NE 68TH ST.

(Check if address
is changed)

GLAASPOURIE

MO 64118

CITY A

STATE A

ZIP CODE A

COMMITTEE'S E-MAIL ADDRESS

CB.Broomfield@KC.RR.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

COMMITTEE'S FAX NUMBER

816-453-6435 - 6435

2. DATE

11 10 2003

3. FEC IDENTIFICATION NUMBER ▶

0

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

WALTER J. VAN ASSELT

Signature of Treasurer

Walter J. Van Asselt

11 10 2003

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 18 U.S.C. 9709.

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

Office Use Only				
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For further information contact:
Federal Election Commission
 toll free 800-424-9530
 Local 202-694-1300

FEC FORM 1
(Revised 02/2003)

FEC Form 1 (Revised 02/2003)

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

CHARLES S. BROOMFIELD

Candidate Party Affiliation

DEM

Office Sought

House

Senate

President

State

MO

District

106

- (c) This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate

CHARLES S. BROOMFIELD

(a)

This committee is a

(National, State or subcommittee) committee of the

(Democratic, Republican, etc.) Party

(b)

This committee is a separate segregated fund.

(c)

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 with Capital Stock

Labor Organization

Membership Organization

Trade Association

Cooperative

Prepared for

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Title or Type Committee Name

BROOMFIELD FOR CONGRESS COMMITTEE

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 **WALTER J. VAN ASSELT**

Mailing Address **1710 NE 68TH ST.**
GLADSTONE, MO 64118

Title or Position **TREASURER** CITY STATE ZIP CODE

Telephone number **(816)-436-6389**

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 **WALTER J. VAN ASSELT**

Mailing Address **1710 NE 68TH ST.**
GLADSTONE, MO 64118

Title or Position **TREASURER** CITY STATE ZIP CODE

Telephone number **(816)-436-6389**

Full Name of Designated Agent **WALTER J. VAN ASSELT**

Mailing Address **1710 NE 68TH ST.**
GLADSTONE, MO 64118

Title or Position **TREASURER** CITY STATE ZIP CODE

Telephone number **(816)-436-6389**

FEC Form 1 (Revised 02/2003)

8. Banks or Other Depositories: List all banks or other depositories in which the candidate deposits funds, notes accounts, rents, safety deposit boxes or securities funds.

Name of Bank, Depository, etc.

W. ORBANK

Mailing Address

101 ARMOUR RD

NORTH KANSAS CITY

MO

64116

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Bank, Depository, etc.

Mailing Address

CITY ▲


STATE ▲

ZIP CODE ▲

Federal Election Commission

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