

FEC FORM 1

STATEMENT OF ORGANIZATION

SECRETARY OF THE SENATE

09 APR -3 PM 1:37

Office Use Only

1. NAME OF COMMITTEE (in full)

(Check if name is changed)

Example: If typing, type over the lines.

12FE4M5

TOM GANLEY FOR SENATE

ADDRESS (number and street)

13215 DETROIT AVENUE

(Check if address is changed)

LAKEWOOD

OH

44107

CITY

STATE

ZIP CODE

COMMITTEE'S E-MAIL ADDRESS

CONTACT@TOMGANLEYFORSENATE.COM

COMMITTEE'S WEB PAGE ADDRESS (URL)

COMMITTEE'S FAX NUMBER

216-228-8541

2. DATE

03 30 2009

3. FEC IDENTIFICATION NUMBER

C

4. IS THIS STATEMENT

X

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

Joseph S. Fornat

Signature of Treasurer

[Handwritten Signature]

Date

03 30 2009

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 12/2007)

5. TYPE OF COMMITTEE

Candidate Committee:

- (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 TOM GANLEY

Candidate Party Affiliation REP Office Sought:  House  Senate  President State OH District

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

Name of Candidate \_\_\_\_\_

Party Committee:

- (d)  This committee is a  (National, State 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 connected 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 segregated fund or party committee. (i.e., nonconnected committee)
  - In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)

Joint Fundraising Representative:

- (g)  This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political 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 two or more political committees/organizations, none of which is an authorized committee of a federal candidate.

Committees Participating in Joint Fundraiser

1.	_____	FEC ID number	<u>C</u> _____
2.	_____	FEC ID number	<u>C</u> _____
3.	_____	FEC ID number	<u>C</u> _____
4.	_____	FEC ID number	<u>C</u> _____
5.	_____	FEC ID number	<u>C</u> _____

29020134467

Write or Type Committee Name

TOM GANLEY FOR SENATE COMMITTEE

6. Name of Any Connected Organization, Affiliated Committee, Leadership PAC Sponsor or Joint Fundraising Representative

[Empty grid lines for organization name]

Mailing Address

[Empty grid lines for mailing address]

CITY

STATE

ZIP CODE

Relationship:

- Connected Organization
- Affiliated Committee
- Leadership PAC Sponsor
- Joint Fundraising Representative

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

RUSSELL W HARRIS

Mailing Address

19832 ROSLYN DRIVE

ROCKY RIVER

OH

44116

Title or Position

CITY

STATE

ZIP CODE

CUSTODIAN

Telephone number

440-409

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

JOSEPH S FORNAL

Mailing Address

1796 FARR'S GARDEN PATH

WESTLAKE

OH

44145

Title or Position

CITY

STATE

ZIP CODE

TREASURER

Telephone number

[Empty grid lines for telephone number]

29020134468

Full Name of Designated Agent

LORAIN GAWRY

Mailing Address

10005 AUBURN ROAD

CHARDON

CITY

OH

STATE

44024-8623

ZIP CODE

Title or Position

ASST. TREASURER

Telephone number

- 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.

FIFTH THIRD BANK

Mailing Address

600 SUPERIOR AVENUE EAST

CLEVELAND

CITY

OH

STATE

44114-

ZIP CODE

Name of Bank, Depository, etc.

INDEPENDENCE BANK

Mailing Address

4401 ROCKSIDE ROAD

INDEPENDENCE

CITY

OH

STATE

44131-8048

ZIP CODE

28020134469



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INSPECTION

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Secretary of the Senate 202-226-5000

Office of Public Records

232 Hart Senate Office Bldg.

Washington, D.C. 20510-7112

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SECRETARY OF THE SENATE  
09 APR -3 PM 1:39

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# United States Senate

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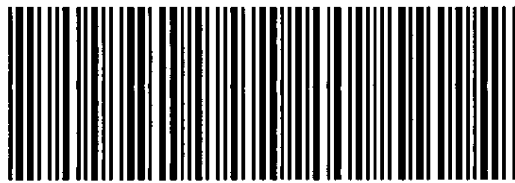
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