

10 OCT 28 AM 10: SECRETARY OF THE SENATE

10 FEB -3 PM 1:57

Office Use Only

FEC FORM 1

STATEMENT OF ORGANIZATION

1. NAME OF COMMITTEE (in full)



(Check if name is changed)

Example: If typing, type over the lines.

12FE4M5

WILL BOYD FOR US SENATE

ADDRESS (number and street)

11206 KILLARNEY DR



(Check if address is changed)

GREENVILLE FL 32246-1

CITY

STATE

ZIP CODE

COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address)



(Check if address is changed)

thecandidate@willboydforus.com

COMMITTEE'S WEB PAGE ADDRESS (URL)



(Check if address is changed)

www.willboydforus.com

2. DATE

01

22

2010

3. FEC IDENTIFICATION NUMBER

000001733

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

Dr. Willie "Will" Boyd, Jr.

Signature of Treasurer

Will Boyd

Date

01

22

2010

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. 5437g.

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

Office Use Only

For further information contact: Federal Election Commission Toll Free 800-424-9630 Local 202-694-1100

FEC FORM 1 (Revised 02/2003)

10026929436

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 Willie "Will" Boyd Jr.

Candidate Party Affiliation D R I O G N P S L F C B N A K Q Z J H M E T A C V W X Y Other Office Sought: House Senate President State IL District 13

(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 B.) Its connected organization is a:

- Corporation Corporation w/o Capital Stock Labor Organization
 Membership Organization Trade Association Cooperative

In addition, this committee is a Lobbyist/Registrant PAC.

(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 Lobbyist/Registrant PAC.
 In addition, this committee is a Leadership PAC. (Identify sponsor on line B.)

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

Table with 4 rows and 2 columns: Row number, FEC ID number. All entries are blank.

8247970860PT

Title or Type Committee Name

WILL BOYD FOR U.S. SENATE

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

Grid lines for organization name

Mailing Address

Grid lines for mailing address

CITY

STATE

ZIP CODE

Relationship:

Connected Organization

Affiliated Committee

Joint Fundraising Representative

Leadership PAC Sponsor

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

William "Willie" Boyd, Jr.

Mailing Address

11216 Killbuck Dr

Greenville

SC

29616

Title or Position

CITY

STATE

ZIP CODE

Telephone number

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

William "Willie" Boyd, Jr.

Mailing Address

11216 Killbuck Dr

Greenville

SC

29616

Title or Position

CITY

STATE

ZIP CODE

Telephone number

1000200702730

Full Name of Designated Agent

[Empty grid for Full Name of Designated Agent]

Mailing Address

[Empty grid for Mailing Address]

[Empty grid for Mailing Address]

[Empty grid for Mailing Address]

CITY

STATE

ZIP CODE

Title or Position

[Empty grid for Title or Position]

Telephone number

[Empty grid for 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.

First Bank

Mailing Address

200 West Main St

[Empty grid for Mailing Address]

Greenville NE 68244-1

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

Payroll

Mailing Address

P.O. Box 459510

[Empty grid for Mailing Address]

Omaha NE 68145-1095

CITY

STATE

ZIP CODE

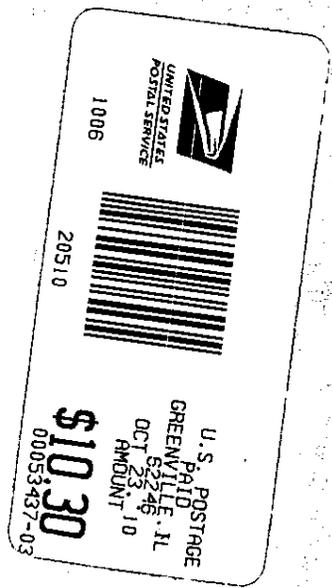
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Washington, DC 20510-7116



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United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

HAND DELIVERED _____

Date of Receipt

USPS FIRST CLASS MAIL _____

Postmark

USPS REGISTERED/CERTIFIED _____

10-23-10

Postmark

USPS PRIORITY MAIL _____

Postmark

DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL

USPS EXPRESS MAIL _____

Postmark

OVERNIGHT DELIVERY SERVICE:

	SHIPPING DATE	NEXT BUSINESS DAY DELIVERY
FEDERAL EXPRESS	_____	<input type="checkbox"/>
UPS	_____	<input type="checkbox"/>
DHL	_____	<input type="checkbox"/>
AIRBORNE EXPRESS	_____	<input type="checkbox"/>

RECEIVED FROM FEDERAL ELECTION COMMISSION _____

Date of Receipt

POSTMARK ILLEGIBLE

NO POSTMARK

FAX _____

Date of Receipt

OTHER _____

Date of Receipt or Postmark

PREPARER

RD

DATE PREPARED

10-28-10

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