7039540502

FEC FORM 1

STATEMENT OF ORGANIZATION

FEC MAIL CENTER

2007 OCT 15 Office Use Only AM 8: 36

| | · | | <u> </u> | Office Use Only All 8: 36 | | |
|---|----------------------------|--|----------|---------------------------------|--|--|
| NAME OF COMMITTEE (in full) | (Check if name is changed) | Example: If typing, type over the lines. | 12FE4M5 | | | |
| KAT SWUFT | KAT SWIFT FOR PRESIDENT | | | | | |
| | | 11111111 | 111111 | | | |
| ADDRESS (number and street) | 1522 W & L | smere rl | <u> </u> | | | |
| (Check if address is changed) | | | 11111 | | | |
| is changed) | SIGNAL ANTOIN | | الكتكاا | 18201-4544 | | |
| COMMITTEE'S E-MAIL ADDRE | ess | CITY ▲ | STATE ▲ | ZIP CODE ▲ | | |
| PICEZKAITEGIM | AILL COM | | <u> </u> | | | |
| | | <u> </u> | <u> </u> | | | |
| COMMITTEE'S WEB PAGE AD | DRESS (URL) | | | | | |
| WWW.Voiteswi | 1f.t.019 | | | | | |
| | | | <u> </u> | | | |
| COMMITTEE'S FAX NUMBER | | - | | | | |
| <u> </u> | | | | | | |
| 2. DATE 09 22 2007 | | | | | | |
| 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 Rhonda Swift | | | | | | |
| Signature of Treasurer | Honla (| Swiff | Date Ö. | 3.0 2007 | | |
| 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 Federal Election Commis Toll Free 800-424-9530 Local 202-694-1100 | | FEC FORM 1 (Revised 02/2003) | | |

| (c) This committee supports/opposes only one candidate, and is NOT an authorized committee. Name of Candidate (National, State (Democratic, | FEC Form 1 (Revised 02/2003) | Page 2 |
|--|---|--|
| (b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.) Name of Candidate Party Affiliation GLW Office Sought: House Senate President District (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 Republican, etc.) Pa (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 pa committee. 8. Name of Any Connected Organization or Affiliated Committee CITY A STATE A ZIP CODE A Relationship Type of Connected Organization: Corporation Corporation w/o Capital Stock Labor Organization | 5. TYPE OF COMMITTEE (Check One) | |
| information below.) Name of Candidate Party Affiliation (c) This committee supports/opposes only one candidate, and is NOT an authorized committee. Name of Candidate (d) This committee is a possible of Supports of Suppo | (a) This committee is a principal campaign committee. (Complete the candidate information below | w.) |
| Candidate Party Affiliation Candidate Party Affiliation Candidate Party Affiliation Candidate (National, State or subordinate) committee of the Candidate (Poemocratic, Republican, etc.) Pa (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 pa committee. 6. Name of Any Connected Organization or Affiliated Committee City A STATE A ZIP CODE A Relationship Type of Connected Organization: Corporation Corporation w/o Capital Stock Labor Organization | N" Prodi | omplete the candidate |
| Party Affiliation GNN Sought: House Senate President District (c) This committee supports/opposes only one candidate, and is NOT an authorized committee. Name of Candidate (d) This committee is a Committee is a Committee of the Candidate or subordinate) committee of the Candidate, and is NOT a separate segregated fund or particle. (h) This committee is a separate segregated fund. (h) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or particle. 6. Name of Any Connected Organization or Affiliated Committee City A STATE A ZIP CODE A Relationship Type of Connected Organization: Corporation Corporation w/o Capital Stock Labor Organization | Name of Candidate KAT SWIFTI | |
| Name of Candidate (d) This committee is a or subordinate) committee of the Republican, etc.) Pa (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 pa committee. 6. Name of Any Connected Organization or Affiliated Committee Mailing Address CITY A STATE A ZIP CODE A Relationship Type of Connected Organization: Corporation Wo Capital Stock Labor Organization | Candidate Office Sought: House Senate President | |
| (d) This committee is a consumption or subordinate) committee of the Republican, etc.) Pa (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 pacommittee. 6. Name of Any Connected Organization or Affiliated Committee CITY ▲ STATE ▲ ZIP CODE ▲ Relationship Type of Connected Organization: Corporation Corporation w/o Capital Stock Labor Organization | (c) This committee supports/opposes only one candidate, and is NOT an authorized committee. | |
| (d) This committee is a or subordinate) committee of the Republican, etc.) Pa (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 pa committee. 6. Name of Any Connected Organization or Affiliated Committee CITY ▲ STATE ▲ ZIP CODE ▲ Relationship Type of Connected Organization: Corporation Corporation w/o Capital Stock Labor Organization | | |
| (f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or particle. 6. Name of Any Connected Organization or Affiliated Committee Mailing Address CITY ▲ STATE ▲ ZIP CODE ▲ Relationship Type of Connected Organization: Corporation Co | (d) This committee is a graph or subordinate) committee of the | (Democratic, Republican, etc.) Party. |
| CITY A STATE A ZIP CODE A Relationship Type of Connected Organization: Corporation Corporati | (e) This committee is a separate segregated fund. | |
| Mailing Address CITY ▲ STATE ▲ ZIP CODE ▲ Relationship Type of Connected Organization: Corporation Corporation w/o Capital Stock Labor Organization | | segregated fund or party |
| CITY ▲ STATE ▲ ZIP CODE ▲ Relationship Type of Connected Organization: Corporation Corporation Corporation Corporation Corporation Corporation Corporation | 6. Name of Any Connectèd Organization or Affiliated Committee | |
| CITY ▲ STATE ▲ ZIP CODE ▲ Relationship Type of Connected Organization: Corporation Corporation Corporation Corporation Corporation Corporation Corporation | <u> </u> | |
| CITY ▲ STATE ▲ ZIP CODE ▲ Relationship Type of Connected Organization: Corporation Corporation Corporation Corporation Corporation Corporation Corporation | | |
| Relationship Type of Connected Organization: Corporation Corporation Corporation Corporation Corporation Corporation Corporation Corporation | Mailing Address | |
| Relationship Type of Connected Organization: Corporation Corporation Corporation Corporation Corporation Corporation Corporation Corporation | | |
| Relationship Type of Connected Organization: Corporation Corporation Corporation Corporation Corporation Corporation Corporation Corporation | | |
| Type of Connected Organization: Corporation | CITY ▲ STATE ▲ | ZIP CODE ▲ |
| Corporation Corporation w/o Capital Stock Labor Organization | Relationship | |
| | Type of Connected Organization: | |
| Membership Organization Trade Association Cooperative | Corporation Corporation w/o Capital Stock Labor Org | anization |
| | Membership Organization Trade Association Cooperation | ve |

| | FEC Form 1 (Revised (| 02/2003) | | | Page 3 |
|----|--|---|----------------------------|--|--------------------------------|
| W | /rite or Type Committee Name | | | | |
| | KAT SWI | FT FOR PRESIDENT | | _ | |
| 7. | Custodian of Records: Idea books and records. | ntify by name, address (phone number o | ptional) and position of t | the per | son in possession of committee |
| | Full Name \(\begin{aligned} \ | 4 Keinth Lyons 7 | | | |
| | Mailing Address | 1522 W ELSMER | <u> </u> | | |
| | | | | | |
| | | BIAIN IAIN TOINLIO | | X | 7-8201-4544 |
| | Title or Position▼ | CITY A | STATE | E 🛦 | ZIP CODE ▲ |
| | Keeper NA | DATA | Telephone number | 21 | 01-14711-1756 |
| 8. | Treasurer: List the name an any designated agent (e.g., | nd address (phone number – optional) of the assistant treasurer). | ne treasurer of the comn | nittee; a | and the name and address of |
| | Full Name of Treasurer | NDA SIMILFITI | <u> </u> | | |
| | Mailing Address | 1104 Peg Sue C | (| | |
| | | | | | |
| | | SAN ANTONIO | | XI | F.82131-L |
| | Title or Position▼ | CITY ▲ | STATI | E▲ | ZIP CODE ▲ |
| | IT reasurer | | Telephone number | 21 | 01-4141-7687 |
| | Full Name of Designated Agent | | 1111 | | |
| | Mailing Address | | 1 1 1 1 1 1 | ــــــــــــــــــــــــــــــــــــــ | |
| | | | | | |
| | | | | | <u> </u> |
| | Title or Position▼ | CITY ▲ | STAT | E▲ | ZIP CODE ▲ |
| | 1,,,,,,,,, | | Telephone number | ١, | , |

27039540504

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.

| Se | curity Service | Fleberraic | Cirieidii | t Unition | | | |
|------------------------|--------------------------------|---|-------------|------------|--|--|--|
| Mailing Address | 116211 La Cant | | | | | | |
| | | | 1 1 1 1 1 1 | | | | |
| | -XI 178 | 256-124191 | | | | | |
| | CITY ▲ | STA | ATE A | ZIP CODE A | | | |
| Name of Bank, Deposito | Name of Bank, Depository, etc. | | | | | | |
| | | | 1 1 1 1 1 1 | | | | |
| Mailing Address | | | 1 1 1 1 1 | | | | |
| | | | <u> </u> | | | | |
| | | ا لىنىنى | ىيا لى | | | | |
| | CITY ▲ | STA | ATE ▲ | ZIP CODE ▲ | | | |

(3/2005)

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. **Date of Receipt Hand Delivered** Postmarked USPS First Class Mail Postmarked (R/C) **USPS** Registered/Certified Postmarked **USPS Priority Mail** Delivery Confirmation[™] or Signature Confirmation[™] Label **Postmarked USPS Express Mail** Postmark Illegible No Postmark Shipping Date Overnight Delivery Service (Specify): **Next Business Day Delivery Date of Receipt** Received from House Records & Registration Office **Date of Receipt** Received from Senate Public Records Office **Date of Receipt** Received from Electronic Filing Office Date of Receipt or Postmarked Other (Specify): PREPARER DATE PREPARED