

SECRETARY OF THE FEED
05 FEB 22 PM 4:03

FEC
FORM 1

STATEMENT OF
ORGANIZATION

Office Use Only

HP

1. NAME OF COMMITTEE (In full) (Check if name is changed) Example: If typing, type over the lines. 12FB4M5

Kennedy/Cantwell Committee

ADDRESS (number and street) 301 4th Street, NE
 (Check if address is changed) Suite 202
Washington DC 20002
CITY STATE ZIP CODE

COMMITTEE'S E-MAIL ADDRESS

COMMITTEE'S WEB PAGE ADDRESS (URL)

COMMITTEE'S FAX NUMBER
202-546-2285

2. DATE 02 22 2005

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 William C. Gwader

Signature of Treasurer *William C. Gwader* Date 02 22 2005

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.

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 Edward M Kennedy and Maria Cantwell

Candidate Party Affiliation

DEM

Office Sought

House

Senate

President

State

MA and WA

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 (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

Please see attached

Mailing Address

_____ - _____

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship

Joint Fundraising Committee

Type of Connected Organization:

Corporation

Corporation w/o Capital Stock

Labor Organization

Membership Organization

Trade Association

Cooperative

Name of Connected Organization or Affiliated Committee:

Kennedy For Senate
301 4th Street, NE
Suite 202
Washington, DC 20002

Cantwell 2006
10 G Street, NE
Suite 470
Washington, DC 20002

Write or Type Committee Name

Kennedy/Cantwell 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 Thomas Keith Lopach

Mailing Address 301 4th Street NE

Suite 202

Washington DC 20002

Title or Position CITY STATE ZIP CODE

Finance Director Telephone number 202-646-9494

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 G. Oldaker

Mailing Address 818 Connecticut Ave NW

Suite 1100

Washington DC 20006

Title or Position CITY STATE ZIP CODE

Treasurer Telephone number 202-728-1010

Full Name of Designated Agent William G. Oldaker

Mailing Address 818 Connecticut Ave NW

Suite 1100

Washington DC 20006

Title or Position CITY STATE ZIP CODE

Treasurer Telephone number 202-728-1010

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.

Citizens Bank

Mailing Address

720 South Main Street

Sharon MA 02067

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Bank, Depository, etc.

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

EMILY J. REYNOLDS
SECRETARY

PAMELA B. GAVIN
SUPERINTENDENT

U.S. SENATE OFFICE BUILDING
SUITE 232
WASHINGTON, DC 20510-7118
PHONE: (202) 724-0322

United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

HAND DELIVERED 02-22-05
Date of Receipt

REGISTERED/CERTIFIED MAIL _____
Postmarked

RECEIVED FROM THE FEDERAL ELECTION
COMMISSION _____
Date of Receipt

DELIVERY CONFIRMATION/ON LINE TRACKING SYSTEM
 PRIORITY MAIL (WITH CONFIRMATION SHEET)
 EXPRESS MAIL
 FEDERAL EXPRESS
 UPS
 DHL
 AIRBORNE EXPRESS _____
Postmark

PRIORITY MAIL (NO CONFIRMATION) _____
Date of Receipt

FIRST CLASS MAIL _____
Date of Receipt

FAX _____
Date of Receipt

NO POSTMARK POSTMARK ILLEGIBLE

OTHER _____
Date of Receipt

RD 02-22-05
Prepared Date Prepared

25020093523
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