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OF COUNSEL
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JAMES BOFF, JR.
NOT ADMITTED TO BAR

April 4, 2002

BY HAND DELIVERY

Federal Election Commission
999 E Street, NW
Washington, DC 20463

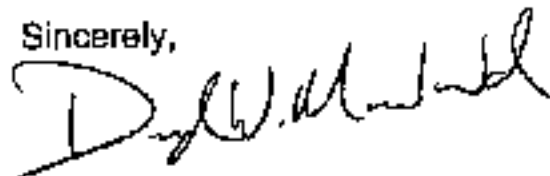
RE: Concerned Women for America Legislative
Action Committee Political Action Committee

Dear Sir/Madam:

Please accept the enclosed Statement of Organization for the above-identified corporation. Also, please date-stamp the enclosed copy of this letter and return it to me via the awaiting messenger for my files.

Thank you for your assistance and please call me if you have any questions.

Sincerely,



Douglas W. Macdonald

Enclosures

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FEC
FORM 1

STATEMENT OF ORGANIZATION

(See instructions)

Office Use Only

1. NAME OF COMMITTEE (in full) (Check if name is changed) Example: If typing, type over the lines. 12FE4M5

CONCERNED WOMEN FOR AMERICA LEGISLATIVE ACTION COMMITTEE POLITICAL ACTION COMMITTEE

ADDRESS (number and street) 1015 Fifteenth Street NW
(Check if address is changed) Suite 1100
Washington DC 20005
CITY STATE ZIP CODE

COMMITTEE'S E-MAIL ADDRESS

COMMITTEE'S WEB PAGE ADDRESS (URL)

2. DATE 03 28 2002

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 Lee LaHaye
Signature of Treasurer [Handwritten Signature] Date 04 03 2002

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 _____

Candidate Party Affiliation	Office Sought:	House	Senate	President	State
					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

CONCERNED WOMEN FOR AMERICA, LEGISLATIVE ACTION COMMITTEE

Mailing Address 11015 Fifteenth Street, NW
 Suite 1000
 Washington, DC 20005-1

CITY ▲ STATE ▲ ZIP CODE ▲

Relationship CONNECTED

Type of Connected Organization:

- | | | |
|---|-------------------------------|--------------------|
| Corporation | Corporation w/o Capital Stock | Labor Organization |
| <input checked="" type="checkbox"/> Membership Organization | Trade Association | Cooperative |

Write or Type Committee Name

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 Lee LaHaye

Mailing Address 11015 Fifteenth Street, NW
Suite 1100
Washington, DC 20005

Title or Position ▼ CITY ▲ STATE ▲ ZIP CODE ▲

Treasurer Telephone number 202-488-7000

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 Lee LaHaye

Mailing Address 11015 Fifteenth Street
Suite 1100
Washington, DC 20005

Title or Position ▼ CITY ▲ STATE ▲ ZIP CODE ▲

Treasurer Telephone number 202-488-7000

Full Name of Designated Agent _____

Mailing Address _____

Title or Position ▼ CITY ▲ STATE ▲ ZIP CODE ▲

_____ 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.

Syn Trust Bank

Mailing Address

1445 New York Avenue NW

Washington

DC

20005-1

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Bank, Depository, etc.

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

Federal Election Commission

**ENVELOPE REPLACEMENT PAGE
FOR INCOMING DOCUMENTS**

The Commission has added this page to the end of this filing to indicate how it was received.

<input checked="" type="checkbox"/> Hand Delivered	Date of Receipt <i>4/5/02</i>
<input type="checkbox"/> First Class Mail	POSTMARKED
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<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House office of Records and Registration	Date of Receipt
<input type="checkbox"/> Received from the Senate Office of Public Records	Date of Receipt
<input type="checkbox"/> Other (Specify):	Postmarked _____ and/or Date of Receipt
<input type="checkbox"/> Electronic Filing	

EW
PREPARER

4/5/02
DATE PREPARED