



JOHN HOSTETTLER

FRIENDS OF JOHN HOSTETTLER COMMITTEE
P.O. BOX 3676
EVANSVILLE, INDIANA 47736
TELEPHONE (812) 422-4227 • FAX (812) 422-9089
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Restoring trust in government

September 8, 2000

Mr. Jonathan Horton
Reports Analysis Division
Federal Election Commission
999 E Street, N.W.
Washington DC 20463

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2000 SEP 13 A 11:17

Dear Mr. Horton:

In reply to your letter of August 29, 2000 regarding the Commission's preliminary review of this campaign's July Quarterly Report (ID Number C00300970), please find enclosed the following:

- An amended Statement of Organization (FEC Form 1) disclosing the names of both of our present campaign depositories.

The remaining item for amendment is a contribution disclosure for Mr. James Lightner (see page 8 of 15 for line number 11 [a] [i]). This entry was incorrectly marked as a contribution designated to the Primary Election. It has been corrected to read as a General Election contribution (see attached).

Thank you for your assistance in this matter.

Sincerely,

Timothy R. Deisher, Treasurer
Friends of John Hostettler

Enc:

HOSTETTLER
FOR CONGRESS

STATEMENT OF ORGANIZATION

(See reverse side for instructions)

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1. (a) NAME OF COMMITTEE IN FULL: <input type="checkbox"/> (Check if name is changed) <p style="text-align: center; font-size: 1.2em;">Friends of John Hostettler</p>	2. DATE <p style="text-align: center; font-size: 1.2em;">09/08/2000</p>
(b) Number and Exact Address: <input type="checkbox"/> (Check if address is changed) P. O. Box 3676	3. FEC Identification Number <p style="text-align: center; font-size: 1.2em;">C00300970</p>
(c) City, State and ZIP Code Evansville IN 47735	4. Is This Report An Amendment? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO

6. 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 | State/District |
|------------------------|-----------------------------|---------------|----------------|
| John Nathan Hostettler | Republican | U.S. Rep. | IN 8 |
- (c) This committee supports/opposes only one candidate _____ and is NOT an authorized committee.
(name of candidate)
- (d) This committee is a _____ committee of the _____ Party.
(National, State or subordinate) (Democratic, Republican, etc.)
- (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 a party committee.

6. Name of Any Connected Organization or Affiliated Committee	Mailing Address and ZIP Code	Relationship

Type of Connected Organization

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

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 Jeffrey Lin Knight	Mailing Address 330 Largo Ct.; Evansville IN 47712	Title or Position Chairman
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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 Timothy Ralph Deisher	Mailing Address P. O. Box 3526; Evansville IN 47734	Title or Position Treasurer
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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.	Mailing Address and ZIP Code
Old National Bank	P. O. Box 718; Evansville IN 47705
Fifth Third Bank	20 N. W. Third Street; Evansville IN 47708

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 <p style="font-size: 1.5em; font-family: cursive;">TIMOTHY R. DEISHER</p>	SIGNATURE OF TREASURER 	DATE <p style="font-size: 1.5em; font-family: cursive;">9/8/00</p>
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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.

For further information contact:
Federal Election Commission
Toll-free 800-424-9530
Local 202-219-3420

FEGAN121

FEC FORM 1

(revised 4/97)

