

FEC
FORM 1STATEMENT OF
ORGANIZATIONRECEIVED
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OMB No. 3206-0047

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

128184M5

KERRY EDWARDS COMMUNIST

ADDRESS (number and street)

121 W LAKE STREET

(Check if address
is changed)

PEPPER

MI

49720-1310

CITY *

STATE *

ZIP CODE *

COMMITTEE'S E-MAIL ADDRESS

albourhood@chartermin.net

COMMITTEE'S WEB PAGE ADDRESS (URL)

COMMITTEE'S FAX NUMBER

231-1439-2243

2. DATE

10/11/2004

3. FEC IDENTIFICATION NUMBER

C 000000

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

Carolyn L. Bourland

Signature of Treasurer

Carolyn L. Bourland

Date 10/10/2004

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
OnlyFor further information contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-694-1100FEC FORM 1
(Revised 07/2003)

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

JOHN KERRY

(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

NONE

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship

Type of Connected Organization:

☐ Corporation☐ Corporation with Capital Stock☐ Labor Organization☐ Membership Organization☐ Trade Association☐ Cooperative

Write or Type Committee Name

7. Custodian of Records: Identify by name, address (phone number - optional) and address of the person in possession of committee books and records.

Full Name CAROLYN L. BURLAND
 Mailing Address 121 W. LAKE STREET
PETOSKEY MI 49770 2310
 Title or Position TREASURER CITY ▲ STATE ▲ ZIP CODE ▲
 Telephone number 231-439-0263

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 CAROLYN L. BURLAND
 Mailing Address 121 W. LAKE STREET
PETOSKEY MI 49770 2310
 Title or Position TREASURER CITY ▲ STATE ▲ ZIP CODE ▲
 Telephone number 231-439-0263

Full Name of Designated Agent GORDON EDWIN BURLAND
 Mailing Address 121 W. LAKE STREET
PETOSKEY MI 49770 2310
 Title or Position CHAIRPERSON CITY ▲ STATE ▲ ZIP CODE ▲
 Telephone number 231-439-0263

9. Banks or Other Depositories: List all banks or other depositories in which the candidate deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

ST. FRANCIS X. FEDERAL CREDIT UNION

Mailing Address

2140 Mill St.

PETASKEY MI 49774-2310

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 FEC added this page to the end of this filing to indicate how it was received.

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☐ Received from Electronic Filing Office	Date of Receipt
☐ Other (Specify):	Date of Receipt or Postmarked

Ja
 PREPARER
 (5/2004)

10-20-04
 DATE PREPARED