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FEC MAIL ROOM
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October 15, 2001

Federal Election Commission
Attn: Erik W. Koeppen
999 E Street NW
Washington, D.C. 20463

Re: Statement of Organization

Dear Mr. Koeppen:

Please accept the enclosed documents from the Alabama Republican Party.

1. Document number one, FEC Form 1, is to file a statement of organization for a newly formed joint fundraising committee, Sessions/ALGOP.
2. Document number two, FEC Form 1, is to amend the statement of organization for the Alabama Republican Party to reflect the affiliation of the Sessions/ALGOP Committee.

Sincerely,

Tim Baer
Treasurer

Enclosures

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2001 OCT 16 A 9 39

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

Sessions/ALGOP Committee

ADDRESS (number and street)

P.O. Box 361784

(Check if address
is changed)

Birmingham

AL

35236

1784

CITY ▲

STATE ▲

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

awiersma@algop.org

COMMITTEE'S WEB PAGE ADDRESS (URL)

2. DATE

10

12

2001

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

Tim Baer

Signature of Treasurer

Timothy R Baer

Date

10

12

2001

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 contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-694-1100

FEC FORM 1
(Revised 1/01)

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

Friends of Sessions, Senate Committee, Inc.

Mailing Address P.O. Box 4278

Montgomery AL 36103

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship joint fundraising participant

Type of Connected Organization:

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

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

Alabama Republican Party _____

Mailing Address P. O. Box 361784 _____

Birmingham AL 35236 _____

CITY ▲ STATE ▲ ZIP CODE ▲

Relationship joint fundraising participant _____

Type of Connected Organization:

- | | | |
|-------------------------|-------------------------------|--------------------|
| Corporation | Corporation w/o 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 position of the person in possession of committee books and records.

Full Name Abbie Wiersma
 Mailing Address P.O. Box 361784
Birmingham AL 35236
 Title or Position Assistant Treasurer CITY STATE ZIP CODE
 Telephone number 205-978-2500

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 Tim Baer
 Mailing Address P.O. Box 361784
Birmingham AL 35236
 Title or Position _____ CITY STATE ZIP CODE
 Telephone number 205-978-2500

Full Name of Designated Agent Abbie Wiersma
 Mailing Address P.O. Box 361784
Birmingham AL 35236
 Title or Position _____ CITY STATE ZIP CODE
 Telephone number 205-978-2500

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.

SouthTrust Bank

Mailing Address

P.O. Box 2554

Birmingham AL 35290

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Bank, Depository, etc.

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

**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 <u>10/16/01</u>
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<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	
<u>07AC</u> PREPARER	<u>10/16/01</u> DATE PREPARED