

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

FEB 4 1 45 PM '97



DARALYN REED
COMPANY
POLITICAL FINANCIAL SERVICES

JAN 31 1997

Federal Election Commission
Public Records Office
999 E Street, N.W.
Washington, D.C. 20463

Dear Filing Officer:

Enclosed is the original of the following for:

Moorhead for Congress Committee ID #: C00006320

for the period n/a through n/a

FORM FEC 1

AMENDMENT TO ABOVE

REPORT SENT BY CERTIFIED MAIL

OTHER

Please endorse this transmittal letter as acknowledgement of receipt and return it in the self-addressed, stamped envelope provided.

Sincerely,

DARALYN REED COMPANY

cc: Secretary of State in:
CA

STATEMENT OF ORGANIZATION

(See reverse side for instructions)

1. (a) NAME OF COMMITTEE IN FULL MCCRHEAD FOR CONGRESS COMMITTEE	<input type="checkbox"/> (Check if name is changed)	RECEIVED FEDERAL ELECTION COMMISSION MAIL ROOM	Date January 22, 1997
(b) Number and Street Address 420 North Brand Blvd., #500	<input type="checkbox"/> (Check if address is changed)	COMMISSION MAIL ROOM	FEDERATION NUMBER 011998/C000063207
(c) City, State and ZIP Code Glendale, CA 91203		FEB 4 1 45 PM '97	IS THIS STATEMENT AN AMENDMENT? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO

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 | State/District |
|-------------------|-----------------------------|---------------|----------------|
| | | | |
- (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 with 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	Mailing Address	Title or Position

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	Mailing Address	Title or Position

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
Wells Fargo Bank	420 North Brand Blvd., Glendale, CA 91203

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 Eric A. Ashton	SIGNATURE OF TREASURER <i>Eric Ashton</i>	DATE 1/23/97
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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.

