

07 SEP -7 PM 1:27

# 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

Tarrant For Senate, Inc.

ADDRESS (number and street)

1009 Southview Drive

(Check if address is changed)

Richmond

VT

05477

CITY ▲

STATE ▲

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

sbursell@gmavt.net

COMMITTEE'S WEB PAGE ADDRESS (URL)

COMMITTEE'S FAX NUMBER

8024343314

2. DATE

MM / DD / YYYY  
08 / 28 / 2007

3. FEC IDENTIFICATION NUMBER

C C00412825

4. IS THIS STATEMENT

NEW (N)

OR

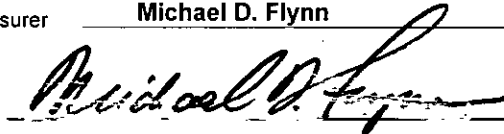
AMENDED (A)

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

Michael D. Flynn

Signature of Treasurer



Date

MM / DD / YYYY  
08 / 30 / 2007

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. 5437g.

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 02/2003)

27020293623

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 Richard E. Tarrant

Candidate Party Affiliation  REP  OFFICE SOUGHT:  House  Senate  President State  VT  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

\_\_\_\_\_  
\_\_\_\_\_

Mailing Address \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_ - \_\_\_\_\_  
 CITY ▲ STATE ▲ ZIP CODE ▲

Relationship \_\_\_\_\_

Type of Connected Organization:

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

27020293624

Write or Type Committee Name

**Tarrant For Senate, Inc.**

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 Michael D. Flynn

Mailing Address 545 S. Prospect #40

Burlington VT 05401 -

Title or Position ▼ CITY ▲ STATE ▲ ZIP CODE ▲

Treasurer Telephone number 802 - 651 - 7222

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 Michael D. Flynn

Mailing Address 545 S. Prospect #40

Burlington VT 05401 -

Title or Position ▼ CITY ▲ STATE ▲ ZIP CODE ▲

Treasurer Telephone number 802 - 651 - 7222

Full Name of Designated Agent Linda Bursell

Mailing Address 1009 Southview Drive

Richmond VT 05477 -

Title or Position ▼ CITY ▲ STATE ▲ ZIP CODE ▲

Assistant Treasurer Telephone number 802 - 434 - 3314

27020293625

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.

**Merchants Bank**

Mailing Address

**164 College Street**

**Burlington** **VT** **05401** -

CITY Δ

STATE Δ

ZIP CODE Δ

27020293626



NANCY ERICKSON  
SECRETARY

PAMELA B. GAVIN  
SUPERINTENDENT

HART SENATE OFFICE BUILDING  
SUITE 232  
WASHINGTON, DC 20510-7118  
PHONE: (202) 224-0322

# United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

HAND DELIVERED \_\_\_\_\_  
Date of Receipt

USPS FIRST CLASS MAIL \_\_\_\_\_  
Postmark

USPS REGISTERED/CERTIFIED \_\_\_\_\_  
Postmark

USPS PRIORITY MAIL \_\_\_\_\_  
Postmark

DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL

USPS EXPRESS MAIL \_\_\_\_\_  
Postmark

OVERNIGHT DELIVERY SERVICE:

	SHIPPING DATE	NEXT BUSINESS DAY DELIVERY
FEDERAL EXPRESS	<u>08.31.07</u>	<input checked="" type="checkbox"/>
UPS	_____	<input type="checkbox"/>
DHL	_____	<input type="checkbox"/>
AIRBORNE EXPRESS	_____	<input type="checkbox"/>

RECEIVED FROM FEDERAL ELECTION COMMISSION \_\_\_\_\_  
Date of Receipt

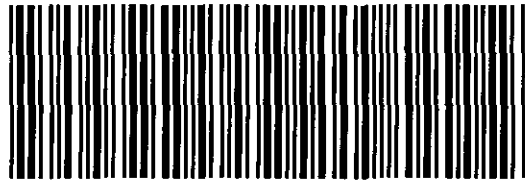
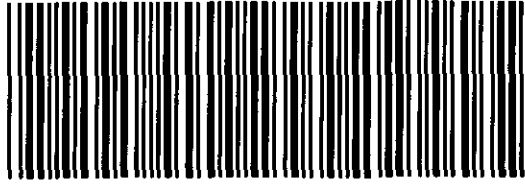
POSTMARK ILLEGIBLE  NO POSTMARK

FAX \_\_\_\_\_  
Date of Receipt

OTHER \_\_\_\_\_  
Date of Receipt or Postmark

PREPARER RD DATE PREPARED 09-07-07

27020293628



27020293629