

FEC FORM 1

STATEMENT OF ORGANIZATION

(See instructions)

RECEIVED  
FEC MAIL ROOM  
2002 JAN -2 P 1:16

Office Use Only

1. NAME OF COMMITTEE (in full) (Check if name is changed) Example: If typing, type over the lines. 12FE4M5  
PETE DAGHER FOR CONGRESS

ADDRESS (number and street) (Check if address is changed)  
6955 N. ADDISON  
CHICAGO IL 60634  
CITY STATE ZIP CODE

COMMITTEE'S E-MAIL ADDRESS  
PETE@VOTEDAGHER.COM

COMMITTEE'S WEB PAGE ADDRESS (URL)  
WWW.VOTEDAGHER.COM

2. DATE 12 06 2001

3. FEC IDENTIFICATION NUMBER C00369074

4. IS THIS STATEMENT NEW (N) OR A 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 PHILIP R. GOLDBERG  
Signature of Treasurer [Handwritten Signature] Date 12 06 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

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 PETER ALEXANDER DAGHER

Candidate Party Affiliation DEM 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

\_\_\_\_\_

\_\_\_\_\_

Mailing Address \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship \_\_\_\_\_

Type of Connected Organization:

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

Write or Type Committee Name

PETE DAHER FOR CONGRESS

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 PHILIP R GOLDBERG

Mailing Address 4022 N SHERIDAN

CHICAGO IL 60613

Title or Position CITY STATE ZIP CODE

TREASURER Telephone number

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 PHILIP R GOLDBERG

Mailing Address 4022 N SHERIDAN

CHICAGO IL 60613

Title or Position CITY STATE ZIP CODE

TREASURER Telephone number

Full Name of Designated Agent

Mailing Address

Title or Position CITY STATE ZIP CODE

Telephone number

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.

LASALLE BANK

Mailing Address

4242 N HARLEM AVENUE

NORRIDGE IL 60701

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Bank, Depository, etc.

Mailing Address

CITY ▲


STATE ▲

ZIP CODE ▲

Federal Election Commission

**ENVELOPE REPLACEMENT PAGE  
FOR INCOMING DOCUMENTS**

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