24038441666

# FEC FORM 1

# STATEMENT OF ORGANIZATION

Office Use Only

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

**BOYLE FOR CONGRESS**

ADDRESS (number and street) ▼   **2051 W. WISCONSIN AVE.**

☐ (Check if address is changed)

**MILWAUKEE**  **WI**  **53233**

CITY ▲   STATE ▲   ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

**Terry@boyleforcongress.com**

COMMITTEE'S WEB PAGE ADDRESS (URL)
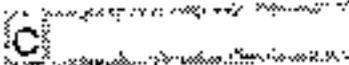
**www.boyleforcongress.com**

COMMITTEE'S FAX NUMBER

**(414)-343-3310**

2. DATE  **02 08 2004**

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  **Pauline C. Edwards**

Signature of Treasurer  _[signature]_   Date  **02 08 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 Only | | | |
|---|---|---|---|

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

**FEC FORM 1**
(Revised 02/2002)

FE6AN042.PDF

5. TYPE OF COMMITTEE (Check One)

(a) [X] 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    Gerald M. Boyle

Candidate Party Affiliation  REP    Office Sought:  [X] House   [ ] Senate   [ ] President    State  WI    District  04

(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

24038441668

FEC Form 1 (Revised 02/2003)
Page 3

Write or Type Committee Name

# BOYLE 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** TREASURER

**Mailing Address**

**Title or Position ▼**            CITY ▲            STATE ▲            ZIP CODE ▲

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** PAULINE G EDWARDS

**Mailing Address** 2051 W WISCONSIN AVE

MILWAUKEE            WI            53233-

**Title or Position ▼**            CITY ▲            STATE ▲            ZIP CODE ▲

TREASURER            Telephone number 414-343-3300

**Full Name of Designated Agent**

**Mailing Address**

**Title or Position ▼**            CITY ▲            STATE ▲            ZIP CODE ▲

Telephone number

FEC Form 1 (Revised 02/2003)

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.

LINCOLN STATE BANK

Mailing Address

1000 N. WATER STREET

MILWAUKEE

| CITY ▲ | STATE ▲ | ZIP CODE ▲ |
|--------|---------|------------|
| MILWAUKEE | WI | 53202 |

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.

Date of Receipt

☐ Hand Delivered

Postmarked

☐ USPS First Class Mail

Postmarked (R/C)

☐ USPS Registered/Certified

Postmarked

☐ USPS Priority Mail

Delivery Confirmation ™ Label ☐

Postmarked

☐ USPS Express Mail

☐ Postmark Illegible ·

☐ No Postmark

Shipping Date
7-8-04
☑ Overnight Delivery Service (Specify): Fed. Express

Date of Receipt

☐ Received from House Records & Registration Office

Date of Receipt

☐ Received from Senate Public Records Office

Date of Receipt

☐ Received from Electronic Filing Office

Date of Receipt or Postmarked

☐ Other (Specify):

7-5-04

Jm υ
PREPARER
(5/2004)

DATE PREPARED