

RECEIVED  
FEC MAIL CENTER  
2010 MAR 31 PM 12: 52



501 S. 18<sup>th</sup> Street  
P.O. Box 8304  
Ft. Smith, AR 72902  
(479) 434-5780

Federal Election Commission  
Reports Analysis Division  
999 E. St., NW  
Washington, DC 20463

To Whom It May Concern:

Enclosed you will find an amended Form 1, including all appropriate candidate information.  
Please do not hesitate to contact our Treasurer, Michael Collins, with any questions or concerns.

Regards,

A handwritten signature in black ink, appearing to be "Patrick Carlson", written over a horizontal line.

Patrick Carlson  
Campaign Manager

Paid for by DeLay for Congress. Not printed at Government expense.

10030274679

2010 MAR 31 PM 12:53

FEC  
FORM 1STATEMENT OF  
ORGANIZATION

Office Use Only

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

12FE4M5

Deleg For Congress

ADDRESS (number and street)

501 S. 18th St.

(Check if address  
is changed)

P.O. Box 8304

FORT SMITH

AR

72902-1

CITY

STATE

ZIP CODE

COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address)

(Check if address  
is changed)

info@guinnerforcongress.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address  
is changed)

www.guinnerforcongress.com

2. DATE

03 ' 26 ' 2010

3. FEC IDENTIFICATION NUMBER

C00497943

4. IS THIS STATEMENT

NEW (N)

OR

X

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. Collins

Signature of Treasurer

Michael D. Collins

Date

03 ' 25 ' 2010

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  
OnlyFor further information contact:  
Federal Election Commission  
Toll Free 800-424-9530  
Local 202-694-1100FEC FORM 1  
(Revised 02/2009)

10030274680

## 5. TYPE OF COMMITTEE

**Candidate Committee:**

- (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

Robert T. Guinnick Diehl

Candidate Party Affiliation

REP

Office Sought:

☒

House

Senate

President

State

AR

District

03

- (c) ☐ This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate

**Party Committee:**

- (d) ☐ This committee is a \_\_\_\_\_ (National, State or subordinate) committee of the \_\_\_\_\_ (Democratic, Republican, etc.) Party.

**Political Action Committee (PAC):**

- (e) ☐ This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:

Corporation

Corporation w/o Capital Stock

Labor Organization

Membership Organization

Trade Association

Cooperative

In addition, this committee is a Lobbyist/Registrant PAC.

- (f) ☐ This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)

In addition, this committee is a Lobbyist/Registrant PAC.

In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)

**Joint Fundraising Representative:**

- (g) ☐ This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.
- (h) ☐ This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.

**Committees Participating in Joint Fundraiser**

1. \_\_\_\_\_ FEC ID number C
2. \_\_\_\_\_ FEC ID number C
3. \_\_\_\_\_ FEC ID number C
4. \_\_\_\_\_ FEC ID number C

10030274681

Write or Type Committee Name

## 6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

Mailing Address

CITY

STATE

ZIP CODE

Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor

## 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

CITY

STATE

ZIP CODE

FINANCE

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

Mailing Address

Title or Position

CPA

Telephone number

10030274682

Full Name of  
Designated  
Agent

PATRICK E CARLSON

Mailing Address

SOL S. LIBBY ST

FORT SMITH

CITY

AR

STATE

72902-

ZIP CODE

Title or Position

CAMPAIGN MANAGER

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.

ARVEST BANK

Mailing Address

PO BOX 11110

FORT SMITH

CITY

AR

STATE

72907-

ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

CITY

STATE

ZIP CODE

10030274683

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.

☐ Hand Delivered Date of Receipt

☐ USPS First Class Mail Postmarked

☒ USPS Registered/Certified Postmarked (R/C)  
3/25/10

☐ USPS Priority Mail Postmarked  
Delivery Confirmation™ or Signature Confirmation™ Label ☐

☐ USPS Express Mail Postmarked

☐ Postmark Illegible

☐ No Postmark

☐ Overnight Delivery Service (Specify): Shipping Date  
Next Business Day Delivery ☐

☐ 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

☐ Other (Specify): Date of Receipt or Postmarked

 3/31/10  
PREPARER DATE PREPARED