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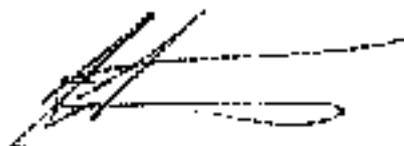
MAY 20 AM 11:50

May 19, 2003

Federal Election Committee
999 E Street, N.W.
Washington, D.C. 20463

Enclosed is FEC Form 1 and 2 for the "Phillips for Congress" committee. Please call me or my assistant, Jerri Gutierrez at 503-224-6858 when you have assigned an FEC Identification number.

Best regards,



James Smith
Treasurer

2003-05-19 11:50 AM

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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

Phillips for Congress

ADDRESS (number and street) 220 NW 2nd Ave #950-A

(Check if address is changed)

Portland OR 97209

CITY STATE ZIP CODE

COMMITTEE'S E-MAIL ADDRESS

COMMITTEE'S WEB PAGE ADDRESS (URL)

COMMITTEE'S FAX NUMBER

503 224-8207

2. DATE 05 19 2003

3. FEC IDENTIFICATION NUMBER C

4. IS THIS STATEMENT X 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 James Smith

Signature of Treasurer [Signature] Date 05 19 2003

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. 5437c. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

2003-05-19 11:50 AM

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:	House	Senate	President	State District
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- (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.
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- (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 with Capital Stock | Labor Organization |
| Membership Organization | Trade Association | Cooperative |

Write or Type Committee Name

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 James Todd Smith

Mailing Address 220 NW 2nd Ave #950-A

Portland OR 97209

Title or Position Treasurer CITY Portland STATE OR ZIP CODE 97209

Telephone number 503 224 0858

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 James Todd Smith

Mailing Address 220 NW 2nd Ave #950-A

Portland OR 97209

Title or Position Treasurer CITY Portland STATE OR ZIP CODE 97209

Telephone number 503 224 0858

Full Name of Designated Agent

Mailing Address

Title or Position CITY STATE ZIP CODE

Telephone number

44-38861-1000

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.

Wells Fargo Bank

Mailing Address

11084 SW Barnes Rd

Portland

OR

97225

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Bank, Depository, etc.

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

Federal Election Commission

ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

The Commission has added this page to the end of this filing to indicate how it was received.

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(5/20/03)

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