

FEC FORM 1

STATEMENT OF ORGANIZATION

AMERICAN FAITH CENTER

2004 SEP 20 A 9:00

Office Use Only

1. NAME OF COMMITTEE (in full)

(Check if name is changed)

Example: If typing, type over the lines.

127B4MS

American Faith Fund

ADDRESS (number and street)

PO Box 71596

(Check if address is changed)

Richmond

VA

23255

1596

CITY

STATE

ZIP CODE

COMMITTEE'S E-MAIL ADDRESS

john@forestcs.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

N/A

COMMITTEE'S FAX NUMBER

804 421 4153

2. DATE

09 14 2004

3. FEC IDENTIFICATION NUMBER

C

4. IS THIS STATEMENT NEW (N)

X

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

John G. Selph

Signature of Treasurer

[Handwritten Signature]

Date

09 14 2004

NOTE: Suppression of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §487g.

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS

Office Use Only				
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For further information contact Federal Election Commission (toll free 800-424-9539) Local 202-694-1100

FEC FORM 1 (Revised 02/2003)

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

- (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

[none]

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

American Faith Fund

7. Custodian of Records: Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

John G. Seiph

Full Name

Mailing Address

PO Box 71596

Richmond

VA

23255

1598

Title or Position ▼

CITY ▲

STATE ▲

ZIP CODE ▲

Treasurer

Telephone number

804

270

0791

8. Treasurer: List the name and address (phone number -- optional) of the treasurer of this committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name of Treasurer

John G. Seiph

Mailing Address

PO Box 71596

Richmond

VA

23255

1598

Title or Position ▼

CITY ▲

STATE ▲

ZIP CODE ▲

Treasurer

Telephone number

804

270

0791

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.

SouthTrust Bank

Mailing Address

4101 Cox Road

Glen Allen

VA

23060

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Bank, Depository, etc.

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

Federal Election Commission
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 FOR INCOMING DOCUMENTS**

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fel
 PREPARER

(5/2004)

9-20-04
 DATE PREPARED