

09 OCT -2 AM 10: 54

# FEC FORM 1

# STATEMENT OF ORGANIZATION

(See instructions)

Office use only

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

**Beitler for U.S. Senate**

ADDRESS (number and street) **P.O. Box 38353**

(Check if address is changed)

**Greensboro** **NC** **27438**

CITY ▲ STATE ▲ ZIP CODE ▲

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

(Check if address is changed) **avuchnich@agvcpa.com**

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address is changed) **www.beitlerforussenate.org**

2. DATE **09 / 17 / 2009**

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 **Alexander George Vuchnich**

Signature of Treasurer  Date **09 / 23 / 2009**

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

29020323698



Write or Type Committee Name

**Beitler for U.S. Senate**

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

**NONE**

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

**Alexander George Vuchnich**

Mailing Address

**6801 Red Maple Drive**

**Charlotte**

**NC**

**28277**

Title or Position ▼

**Treasurer**

CITY ▲

STATE ▲

ZIP CODE ▲

Telephone number **704** - **544** - **4883**

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

**Alexander George Vuchnich**

Mailing Address

**6801 Red Maple Drive**

**Charlotte**

**NC**

**28277**

Title or Position ▼

**Treasurer**

CITY ▲

STATE ▲

ZIP CODE ▲

Telephone number **704** - **544** - **4883**

29020323700

Full Name of Designated Agent

Tom Howe

Mailing Address

5046 Tar Hill Drive

Oxford

NC

27565

Title or Position

CITY

STATE

ZIP CODE

Assistant Treasurer

Telephone number

919

690

1423

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.

Wachovia Bank, N.A.

Mailing Address

BRASSFIELD FINANCIAL CENTER

3705 BATTLEGROUND AVENUE, NC2647

Greensboro

NC

27410

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

CITY

STATE

ZIP CODE

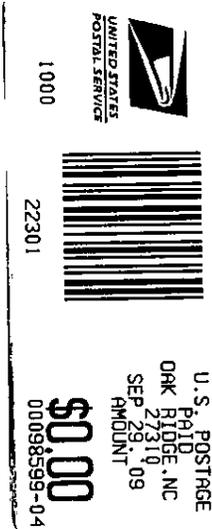
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Alex Vuchnich  
6801 Red Maple Drive  
Charlotte, NC 28277

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SUPERINTENDENT

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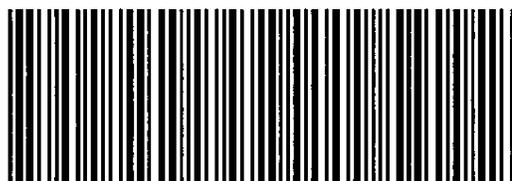
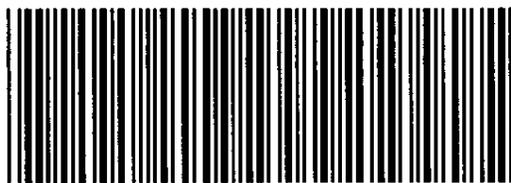
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