* AMENDED - SEE PAGE 2

FORM 1

FEC

STATEMENT OF **ORGANIZATION**

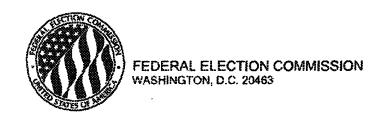
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FIEGS MAIL CENTER

NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5	
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The state of the s		S REACH CI		
ADDRESS (number and street)	1			1
(Check if address is changed)				
	ALPHARETT	A: A :	6-A 3	0022-
		CITY	STATE	ZIP CODE
COMMITTEE'S E-MAIL ADDRES	SS (Please provide only one e	-mail address)		
	MONTIGELF	ORCONGRESS	Q 6M A12	· · · · · · · · · · · · · · · · · · ·
(Check if address is changed)				
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COMMITTEE'S WEB PAGE ADI	DRESS (URL)	<i></i>	•	•
	MONTIGELF	ORCONGRESS	COM	<u> </u>
(Check if address is changed)			: 1 . 1	
2. DATE 04 0	2012			
3. FEC IDENTIFICATION NU	JMBER C			
4. IS THIS STATEMENT X	NEW (N) OR	AMENDED (A)		
I certify that I have examined th	is Statement and to the best	of my knowledge and belief	it is true, correct an	d complete.
Type or Print Name of Treasure	Stathew 5	- Montisel		
Signature of Treasurer	1110		Date 04	02 2012
NOTE: Submission of false, errone		may subject the person signing ON SHOULD BE REPORTED V		e penalties of 2 U.S.C. §437g.
Office Use		For further information of Federal Election Commiss Toll Free 800-424-9530		FEC FORM 1 (Revised 02/2009)

FEC For	m 1 (Revised 02/2009)	· · · · · · · · · · · · · · · · · · ·	Page 2
TYPE OF Co	OMMITTEE Committee:		
(a) X	This committee is a principal campa	aign committee. (Complete the candidate info	ormation below.)
(b)	This committee is an authorized coinformation below.)	mmittee, and is NOT a principal campaign c	ommittee. (Complete the candidate
Name of Candidate	ROBERT & MC	ONTI GEL	
Candidate Party Affiliation	on DEM Office Sought:	X House Senate	President State 6A District 6
(c)	This committee supports/opposes o	nly one candidate, and is NOT an authorized	d committee.
Name of Candidate			·
Party Com	mittee:	(National State	(Damasantia
(d)	This committee is a	(National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party
Political A	ction Committee (PAC):	Andrews and the Control of the Contr	- 1 - 100°-25 Al-Legislation and Assessment . 1 - 11 - Marien Manager
(e)	This committee is a separate segre	gated fund. (Identify connected organization o	on line 6.) Its connected organization is
	Corporation	Corporation w/o Capital Stock	k Labor Organization
	Membership Organization	Trade Association	Cooperative
	In addition, this comr	nittee is a Lobbyist/Registrant PAC.	
(f)	This committee supports/opposes n committee. (i.e., nonconnected comm	nore than one Federal candidate, and is NO nittee)	T a separate segregated fund or party
	In addition, this committee is	a Lobbyist/Registrant PAC.	
	In addition, this committee is	a Leadership PAC. (Identify sponsor on line 6	.)
Joint Fund	raising Representative:		· · · · · · · · · · · · · · · · · · ·
(g)		, pays fundraising expenses and disburses ne le of wbich is an authorized committee of a fec	
(h)		pays fundraising expenses and disburses net nich is an authorized committee of a federal ca	
Com	mittees Participating in Joint Fund	draiser	
1.	United Bullet	FEC ID num	ber C
2.		FEC ID num	ber C
3.		FEC ID num	iber C
4		· FEC ID numi	per C



RQ-1

April 18, 2012

MATTHEW J. MONTIGEL, TREASURER MONTIGEL FOR CONGRESS 930 WATERS REACH CT ALPHARETTA, GA 30022

Response Due Date

05/23/2012

IDENTIFICATION NUMBER: C00517946

REFERENCE: STATEMENT OF ORGANIZATION

Dear Treasurer:

This letter is prompted by the Commission's preliminary review of the Statement of Organization referenced above. This notice requests information essential to full public disclosure of your federal election campaign finances. An adequate response must be received by the response date noted above. Additional information is needed for the following 1 item(s):

- Your Statement of Organization (FEC Form 1) reports information about a Principal Campaign Committee; however, your filing fails to disclose information about the candidate. Commission Regulations require that the Statement of Organization disclose the name of the candidate, the office sought (including State and Congressional district, when applicable), and party affiliation of the candidate. (11 CFR 102.2(a)(v)). Please amend your Statement of Organization to include the State and Congressional district.

Please note you will not receive an additional notice from the Commission on this matter. Adequate responses received on or before this date will be taken into consideration in determining whether audit action will be initiated. Requests for extensions of time in which to respond will not be considered. Failure to provide an adequate response by this date may result in an audit of the committee. Failure to comply with the provisions of the Act may also result in an enforcement action against the committee. Any response submitted by your committee will be placed on the public record and will be considered by the Commission prior to taking enforcement action.

A copy of FEC FORM 1 can be downloaded from the FEC website at http://www.fec.gov, or requested through the FEC Faxline at (202) 501-3413. If you should have any questions regarding this matter or wish to verify the adequacy of your response, please contact me on our toll free number (800) 424-9530 (at the prompt press 5 to reach the Reports Analysis Division) or my local number (202) 694-1170.

MONTIGEL FOR CONGRESS

Page 2 of 2

Sincerely,

Rober C. Kelly

Robin Kelly Senior Campaign Finance Analyst Reports Analysis Division

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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** 4/26/12 Postmarked (R/C) **USPS** Registered/Certified **Postmarked USPS Priority Mail** Delivery Confirmation™ or Signature Confirmation™ Label Postmarked **USPS Express Mail** Postmark Illegible No Postmark **Shipping Date** Overnight Delivery Service (Specify): **Next Business Day Delivery 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):