22037731708

FEC FORM 1

STATEMENT OF ORGANIZATION

(See instructions)

RECEIVED
FEC MAIL
OPERATIONS CENTER

2002 SEP 12 P 3:34

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

KINGHORN FOR CONGRESS

ADDRESS (number and street) PO BOX 193

☐ (Check if address is changed)

KEYSER WV 26726-0193

CITY ▲ STATE ▲ ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

edwardkinghornepe@.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

2. DATE 09 / 10 / 2002

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 RICHARD H. STALLINGS

Signature of Treasurer R.H. Stallings Date 09 / 10 / 2002

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 Only

For further information contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-694-1100

FEC FORM 1
(Revised 1/01)

FE1AN045

5. TYPE OF COMMITTEE (Check One)

(a) [X] 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: EDWARD W KINGHORN

Candidate Party Affiliation: DEM

Office Sought: [X] House [ ] Senate [ ] President

State: LA

District: 02

(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**

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

Kinghorn for Congress

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: LEANNE RIZLE KINGHORN

Mailing Address: 230 APACHE

REXBURG | ID | 83440-

Title or Position▼ | CITY ▲ | STATE ▲ | ZIP CODE ▲

SECRETARY

Telephone number: (208)-357-0893

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: RICHARD STALLINGS

Mailing Address: 2209 ELMORE

POCATELLO | ID | 83201-

Title or Position▼ | CITY ▲ | STATE ▲ | ZIP CODE ▲

TREASURER

Telephone number: (208)-238-8591

Full Name of Designated Agent: LEANNE RIZLE KINGHORN

Mailing Address: 230 APACHE

REXBURG | ID | 83440-

Title or Position▼ | CITY ▲ | STATE ▲ | ZIP CODE ▲

ASSISTANT TREASURER

Telephone number: (208)-357-0893

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

Mailing Address 161 EAST CLARK

POCATELLO ID 83201-

CITY ▲ STATE ▲ ZIP CODE ▲

Name of Bank, Depository, etc.

Mailing Address

CITY ▲ STATE ▲ ZIP CODE ▲

22037731712

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.

☐	Hand Delivered	Date of Receipt
☑	First Class Mail	POSTMARKED 9-17-02
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PREPARER — DATE PREPARED: 9-18-02

(6/2000)