

FEC
FORM 1

STATEMENT OF ORGANIZATION

RECEIVED
FEDERAL ELECTION CENTER
2007 JUN -6 PM 13:04
Office Use Only

1. NAME OF
COMMITTEE (In full)

(Check if name
is changed)

Example: If typing, type
over the lines.

12FE4M5

WEST WINDS

ADDRESS (number and street)

(Check if address
is changed)

~~PO BOX 6734~~ P O BOX 6734

HEINRICHSVILLE

IN

47293

CITY ▲

STATE ▲

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

LarryFord@westwinds.org

COMMITTEE'S WEB PAGE ADDRESS (URL)

www.westwinds.org

COMMITTEE'S FAX NUMBER

428-698-5390

2. DATE

04 05 2006

3. FEC IDENTIFICATION NUMBER ▶

C

4. IS THIS STATEMENT

NEW (N)

OR

X

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

DAVID LARRY FORD

Signature of Treasurer

Date

04 05 2007

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 02/2003)

27039413718

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.

- (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

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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 DAVID LARRY FORD

Mailing Address PO BOX 6734 HENDERSONVILLE NC 28793

Title or Position Title or Position CITY STATE ZIP CODE TREASURER / EXECUTIVE DIRECTOR

Telephone number 828 698 5590

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 DAVID LARRY FORD

Mailing Address PO BOX 6734 HENDERSONVILLE NC 28793

Title or Position Title or Position CITY STATE ZIP CODE TREASURER / EXECUTIVE DIRECTOR

Telephone number 828 698 5590

Full Name of Designated Agent

Mailing Address

Title or Position Title or Position CITY STATE ZIP CODE

Telephone number

27039413720

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.

CAROLINA FIRST

Mailing Address

535 GREENVILLE HIGHWAY

~~HENDERSONVILLE~~

HENDERSONVILLE NC 28793

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Bank, Depository, etc.

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

27039413721



FEDERAL ELECTION COMMISSION
WASHINGTON, D.C. 20463

RQ-1

March 7, 2007

David Larry Ford, Treasurer
West Wins
P.O. Box 6734
Hendersonville, NC 28793

**Response Due Date:
April 6, 2007**

Identification Number: C00432302

Reference: Statement of Organization, received 2/20/07

Dear Mr. Ford:

This letter is prompted by the Commission's preliminary review of the report(s) referenced above. This notice requests information essential to full public disclosure of your federal election campaign finances. **An adequate response must be received at the Commission by the response date noted above.** An itemization of the information needed follows:

-Any affiliated or connected organization must be identified on your Statement of Organization. For further guidance on affiliated committees and connected organizations, please refer to 11 CFR §§100.5(g) and 100.6. If there are no other committees or organizations with which you share control or financing, please indicate "None" on Line 6. If you do share control or financing with other committees or organizations, please list their names, addresses, and relationships on Line 6. 11 CFR §102.2

-Your committee has not completed Line 8 of your Statement of Organization. It also appears that your Statement of Organization was signed by the Custodian of Records. Please be advised that you must disclose the name and address of the treasurer of the committee and that the treasurer must sign the original Statement of Organization filed by a committee. Please amend your Statement of Organization to clarify these discrepancies.

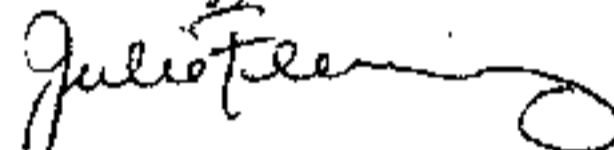
Note, you may refer to 2 U.S.C. §433, 11 CFR §102.2, and the instructions for the Statement of Organization (FEC FORM 1) for more detailed information of the registration requirements of political committees.

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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.

Electronic filers must file amendments (to include statements, designations and reports) in an electronic format and must submit an amended report in its entirety, rather than just those portions of the report that are being amended. 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) 694-1206.

Sincerely,



Julie A. Fleming
Campaign Finance Analyst
Reports Analysis Division

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.

Hand Delivered Date of Receipt

USPS First Class Mail Postmarked

USPS Registered/Certified Postmarked (R/C)

USPS Priority Mail Postmarked
 Delivery Confirmation™ or Signature Confirmation™ Label

USPS Express Mail Postmarked

Postmark Illegible

No Postmark

Overnight Delivery Service (Specify): Shipping Date
DHL *4/5/07*
 Next Business Day Delivery

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

Other (Specify): Date of Receipt or Postmarked

JG
 PREPARER

4/6/07
 DATE PREPARED

27039413724