

FEC FORM 1

STATEMENT OF ORGANIZATION

(See instructions)

RECEIVED
FEC MAIL ROOM

2002 MAR -1 A 10 41

Office Use Only

1. NAME OF COMMITTEE (in full)

(Check if name is changed)

Example: If typing, type over the lines.

12FB4M5

MARRIAGE EQUALIZATION

ADDRESS (number and street)

P.O. Box 11016

(Check if address is changed)

TUCSON

AZ

85702

CITY

STATE

ZIP CODE

COMMITTEE'S E-MAIL ADDRESS

MARRIAGE EQUALIZATION (F.COSTANZO@ATT.NET)

COMMITTEE'S WEB PAGE ADDRESS (URL)

MARRIAGE EQUALIZATION

2. DATE

02 / 02 / 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

FRANK T. COSTANZO

Signature of Treasurer

Frank T. Costanzo, Treasurer

Date

02 / 02 / 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 800-424-9690
Local 202-694-1100

FEC FORM 1
(Revised 1/01)

6. 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 MARK FLEISHER

Candidate Party Affiliation

DEM

Office Sought:

House

Senate

President

State

AZ

District

07

- (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

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 TREASURER

Mailing Address _____

_____ - _____

Title or Position ▼ CITY ▲ STATE ▲ ZIP CODE ▲

_____ Telephone number _____ - _____ - _____

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 FRANK T. COSTANZO

Mailing Address 1651 W. MOUNTAIN VISTA DRIVE

PHOENIX AZ 85045 - _____

Title or Position ▼ CITY ▲ STATE ▲ ZIP CODE ▲

TREASURER Telephone number 480 - 460 - 6054

Full Name of Designated Agent RECK MCGUIRE

Mailing Address 16249 N. 78TH WAY

SCOTTSDALE AZ 85254 - _____

Title or Position ▼ CITY ▲ STATE ▲ ZIP CODE ▲

ASSISTANT TREASURER Telephone number 602 - 493 - 6656

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.

BANK ONE MA

Mailing Address

PO BOX 71

MAIL CODE AZ 1-1175

PHOENIX AZ 85001-0071

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Bank, Depository, etc.

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

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.

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<i>John W</i> PREPARER	<i>3-1-02</i> DATE PREPARED