



EDDY COUNTY REPUBLICAN PARTY

P.O. Box 2424 • Carlsbad, New Mexico 88221-2424

RECEIVED
FEDERAL CENTER
2008 APR 10 AM 8:18

March 30, 2008

Federal Election Commission

999 E Street, NW

Washington, D.C. 20463

To the FEC

Please find enclosed FEC Form 1, which the Republican Party of Eddy County is hereby tendering on a provisional basis. We have received conflicting information about whether or not we are required to file this form, and we thus ask the Federal Election Commission for a determination.

The pertinent facts are as follows:

1. The Republican Party of Eddy County is a political party situate in Eddy County, New Mexico.
2. The Republican Party of Eddy County is a county affiliate of the Republican Party of New Mexico.
3. The Republican Party of Eddy County has raised five thousand dollars (\$5000.00) in donations as of March 30, 2008.
4. The Republican Party of Eddy County is a local party that might or might not contribute funds to the campaigns of candidates for United States President, United States Senate, and United States House of Representatives.
5. The Republican Party of Eddy County is not operated at the behest of any candidate for federal office.

Thank you in advance for your assistance in answering this question.

Sincerely,

Cathryn Novich Brown

Cathrynn Novich Brown
Chairman

28039673738

FEC FORM 1

STATEMENT OF ORGANIZATION

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Office Use Only

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

12FE4M5

REPUBLICAN PARTY OF EDDY COUNTY

ADDRESS (number and street)

1814 NORTH GUADALUPE ST

(Check if address is changed)

CARLSBAD

NM

88220

CITY

STATE

ZIP CODE

COMMITTEE'S E-MAIL ADDRESS

cnbrownes9@plateautel.net

COMMITTEE'S WEB PAGE ADDRESS (URL)

COMMITTEE'S FAX NUMBER

575-885-0624

2. DATE

03 / 28 / 2008

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

Jimmie Cisneros

Signature of Treasurer

Jimmie Cisneros

Date

4 / 2 / 2008

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 12/2007)

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5. TYPE OF COMMITTEE

Candidate Committee:

- (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

- (c) This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate _____

Party Committee:

- (d) This committee is a SUB (National, State or subordinate) committee of the REP (Democratic, Republican, etc.) Party.

Political Action Committee (PAC):

- (e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:

<input type="checkbox"/> Corporation	<input type="checkbox"/> Corporation w/o Capital Stock	<input type="checkbox"/> Labor Organization
<input type="checkbox"/> Membership Organization	<input type="checkbox"/> Trade Association	<input type="checkbox"/> Cooperative

- (f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)

In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)

Joint Fundraising Representative:

- (g) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.
- (h) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.

Committees Participating in Joint Fundraiser

1. _____ FEC ID number C
2. _____ FEC ID number C
3. _____ FEC ID number C
4. _____ FEC ID number C
5. _____ FEC ID number C

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Write or Type Committee Name

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

REPUBLICAN PARTY OF NEW MEXICO

Mailing Address

5150-A SAN FRANCISCO NE

ALBUQUERQUE NM 87109-

CITY

STATE

ZIP CODE

Relationship:

Connected Organization

Affiliated Committee

Leadership PAC Sponsor

Joint Fundraising Representative

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

CATHRYN NOVICH-BROWN

Mailing Address

1814 NORTH GUADALUPE ST

CARLSBAD NM 88220-

CITY

STATE

ZIP CODE

Title or Position

CHAIRMAN

Telephone number

575-885-0624

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

JIMMIE CISNEROS

Mailing Address

401 SOUTH MESA

CARLSBAD NM 88220-

CITY

STATE

ZIP CODE

Title or Position

TREASURER

Telephone number

575-887-2309

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Full Name of Designated Agent

MARK SCHINNERER

Mailing Address

1606 MOUNTAIN SHADOW

CARLSBAD

CITY

WA

STATE

92008

ZIP CODE

Title or Position

FINANCE CHAIRMAN

Telephone number

575-887-6155

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.

WESTERN COMMERCE BANK

Mailing Address

P.O. BOX 1358

CARLSBAD

CITY

WA

STATE

92008-1358

ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

CITY

STATE

ZIP CODE

28039673742

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.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input checked="" type="checkbox"/> USPS First Class Mail	Postmarked
<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
<input type="checkbox"/> USPS Priority Mail	Postmarked
Delivery Confirmation™ or Signature Confirmation™ Label <input type="checkbox"/>	
<input type="checkbox"/> USPS Express Mail	Postmarked
<input checked="" type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
Next Business Day Delivery <input type="checkbox"/>	
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

<i>EA</i>	<i>4/10/08</i>
PREPARER	DATE PREPARED
(3/2005)	

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