

03 AUG 19 PM 1:37

FEC  
FORM 1

STATEMENT OF  
ORGANIZATION

(See instructions)

Office Use Only

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

Strickland for US Senate

ADDRESS (number and street) 30151 Tomas  
(Check if address is changed) Rancho Santa Margarita CA 92688  
CITY STATE ZIP CODE

COMMITTEE'S E-MAIL ADDRESS  
bpbloop@aol.com

COMMITTEE'S WEB PAGE ADDRESS (URL)  
www.strickland4senate.com

COMMITTEE'S FAX NUMBER  
949 - 858 - 6807

2. DATE 8 14 2003

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 Betty Presley

Signature of Treasurer [Signature] Date 8 14 2003

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. 5497g.  
ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

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 Tony Strickland

Candidate Party Affiliation	<u>R E P</u>	Office Sought:	House	<input checked="" type="checkbox"/>	Senate	President	State	<u>CA</u>
							District	<u>0</u>

- (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

Strickland for US Senate

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

Mailing Address   
   -

Title or Position  CITY  STATE  ZIP CODE

Telephone number  -  -

B. 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

Mailing Address   
   -

Title or Position  CITY  STATE  ZIP CODE

Telephone number  -  -

Full Name of Designated Agent

Mailing Address

Title or Position  CITY  STATE  ZIP CODE

Telephone number  -  -

8. 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 of America

Mailing Address

204 East 6th Street

Corona CA 92879

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

CITY

STATE

ZIP CODE

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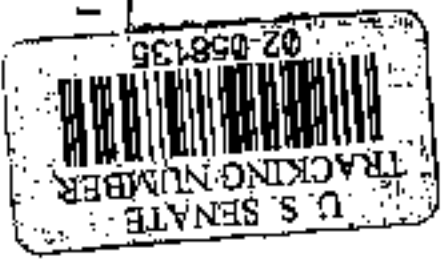
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EMILY J. REYNOLDS  
SECRETARY

PAMELA B. GAVIN  
SUPERINTENDENT  
HAAT BUILDING  
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WASHINGTON, DC 20510-7116  
PHONE: 202-224-0322

# United States Senate

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