

**FEC
FORM 1**

**STATEMENT OF
ORGANIZATION**

(See instructions)

RECEIVED
FEDERAL ELECTION
COMMISSION
PUBLIC DISCLOSURE
DIVISION

APR 23 11 48 AM '01

1. NAME OF
COMMITTEE (In full)

(Check if name
is changed)

Example: If typing, type
over the lines.

12FE4M5

JOHN DUTTING FOR CONGRESS

ADDRESS (number and street)

1805 RIVER ROAD

(Check if address
is changed)

LEEDS

ME

04263-

CITY ▲

STATE ▲

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

cfdingman@aol.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

2. DATE

04 18 2001

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

Charles F. Dingman

Signature of Treasurer

Charles F. Dingman

Date

04 18 2001

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)

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 JOHN A. MURPHY, III

Candidate Party Affiliation

DEM

Office Sought:

House

Senate

President

State

ME

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.

B. 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

JOHN NUTTING 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

Mailing Address

Title or Position

CITY

STATE

ZIP CODE

TREASURER

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

Charles BINGMAN

Mailing Address

805 RIVER ROAD

LEEDS

ME

04263

Title or Position

CITY

STATE

ZIP CODE

TREASURER

Telephone number

207-623-5300

Full Name of Designated Agent

Katharine McNEAR

Mailing Address

62 CAMPBELL ROAD

Leeds

ME

04263

Title or Position

CITY

STATE

ZIP CODE

ASSISTANT TREASURER

Telephone number

207-524-7821

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.

PEOPLES HERITAGE BANK

Mailing Address

101 WESTERN AVE

AUGUSTA ME 04330-

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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