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FEC  
FORM 1

STATEMENT OF  
ORGANIZATION

Office Use Only

1. NAME OF COMMITTEE (in full) (Check if name is changed) Example: If typing, type over the lines. 12FE4M5

Craig Schelske for Congress

ADDRESS (number and street) P.O. Box 11252

(Check if address is changed)

Jefferson OR 97352-1

CITY ▲

STATE ▲

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

info@schelskeforcongress.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

Schelskeforcongress.com

COMMITTEE'S FAX NUMBER

2. DATE 02 01 2004

3. FEC IDENTIFICATION NUMBER ▶ 000371120

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 Sandra Howard

Signature of Treasurer *Sandra Howard* Date 02 01 2004

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 Tel: Toll 800-424-9600 Local 202-694-1100	FEC FORM 1 (Revised 02/2003)
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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

Craig Schelske

Candidate Party Affiliation

REP

Office Sought:

House

Senate

President

State OR  
District 05

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

Name of Candidate

- (a)  This committee is a (National, State or subordinate) committee of the (Democratic, Republican, etc.) Party.
- (b)  This committee is a separate segregated fund.
- (c)  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

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

CITY ▲                                  STATE ▲                                  ZIP CODE ▲

Relationship

Type of Connected Organization:

Corporation

Corporation with Capital Stock

Labor Organization

Membership Organization

Trade Association

Cooperative

Write or Type Committee Name:

Craig Schelske 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 Sandra Howard

Mailing Address P.O. Box 1083  
Salem OR 97308

Title or Position Treasurer Telephone number 503-566-3161

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 (i.e., assistant treasurer).

Full Name of Treasurer Sandra Howard

Mailing Address P.O. Box 1083  
Salem OR 97308

Title or Position Treasurer Telephone number 503-566-3161

Full Name of Designated Agent

Mailing Address

Title or Position Telephone number

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.

U.S. Bank

Mailing Address

P.O. Box: 1077 799

Saint Paul MN 55116-1077

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Bank, Depository, etc.

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

Federal Election Commission  
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