

FEC FORM 1

STATEMENT OF ORGANIZATION

(See instructions)

RECEIVED FEC MAIL CENTER

2008 APR -3 AM 9: 46

Office use only

1. NAME OF COMMITTEE (in full)

(Check if name is changed)

Example: If typing, type over the lines

12FE4M5

ROMP 2008

ADDRESS (number and street)

228 S. Washington Street, Ste. 115

(Check if address is changed)

Alexandria

VA

22314

CITY

STATE

ZIP CODE

COMMITTEE'S E-MAIL ADDRESS

llisker@hdafec.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

COMMITTEE'S FAX NUMBER

7036840683

2. DATE

MM / DD / YYYY
04 / 02 / 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

Lisa Lisker

Signature of Treasurer

Lisa Lisker
Electronically Filed by Lisa Lisker

Date

MM / DD / YYYY
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. S437g.

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 02/2003)

28039664786

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 _____

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 _____

- (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

BACHMANN FOR CONGRESS _____

Mailing Address PO BOX 25950 _____
 WOODBURY MN 55125 _____
CITY ▲ STATE ▲ ZIP CODE ▲

Relationship Jnt Cmte Participant _____

Type of Connected Organization:

- Corporation Corporation w/o Capital Stock Labor Organization
- Membership Organization Trade Association Cooperative

28039664787

Write or Type Committee Name

ROMP 2008

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 Lisa Lisker

Mailing Address 228 S. Washington St., Ste. 115

Alexandria VA 22314 -

Title or Position ▼ CITY ▲ STATE ▲ ZIP CODE ▲

Treasurer Telephone number 703 - 549 - 7705

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 Lisa Lisker

Mailing Address 228 S. Washington St., Ste. 115

Alexandria VA 22314 -

Title or Position ▼ CITY ▲ STATE ▲ ZIP CODE ▲

Treasurer Telephone number 703 - 549 - 7705

Full Name of Designated Agent Keith Davis

Mailing Address 228 S. Washington St., Ste. 115

Alexandria VA 22314 -

Title or Position ▼ CITY ▲ STATE ▲ ZIP CODE ▲

Assistant Treasurer Telephone number 703 - 549 - 7705

28039664788

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.

BB&T

Mailing Address

1909 K St., NW

Washington

DC

20006

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Bank, Depository, etc.

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

28039664789

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.

[ADDITIONAL]

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Any Connected Organization or Affiliated Committee

[ADDITIONAL]

COMMITTEE TO RE-ELECT VITO FOSSELLA

Mailing Address

34 DUMONT AVENUE		
34 Dumont Ave		
STATEN ISLAND	NY	10305

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship

Jnt Cmte Participant

Type of Connected Organization:

- | | | |
|--|--|---|
| <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 |

28039664790

Designated Agent

[ADDITIONAL]

Full Name

Mailing Address

_____ - _____ - _____

Title or Position ▼

CITY ▲

STATE ▲

ZIP CODE ▲

Telephone number

_____ - _____ - _____

28039664791

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.

[ADDITIONAL]

Mailing Address

_____ - _____

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Any Connected Organization or Affiliated Committee

[ADDITIONAL]

GRAVES FOR CONGRESS

Mailing Address

2345 Grand Suite 2400

Kansas City MO 64108 - _____

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship

Jnt Cmte Participant

Type of Connected Organization:

Corporation

Corporation w/o Capital Stock

Labor Organization

Membership Organization

Trade Association

Cooperative

28039664792

Designated Agent

[ADDITIONAL]

Full Name

Mailing Address

Title or Position ▼ CITY ▲ STATE ▲ ZIP CODE ▲

Telephone number - -

28039664793

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.

[ADDITIONAL]

Mailing Address

_____ - _____

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Any Connected Organization or Affiliated Committee

[ADDITIONAL]

KELLER FOR CONGRESS

Mailing Address

P.O. Box 1453

Orlando FL 32802 - _____

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship

Jnt Cmte Participant

Type of Connected Organization:

Corporation

Corporation w/o Capital Stock

Labor Organization

Membership Organization

Trade Association

Cooperative

28039664794

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.

[ADDITIONAL]

Mailing Address

_____ - _____

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Any Connected Organization or Affiliated Committee

[ADDITIONAL]

NORTHUP FOR CONGRESS

Mailing Address

608 Montgomery Ave.

Elizabethtown KY 42701 - _____

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship

Jnt Cmte Participant

Type of Connected Organization:

Corporation

Corporation w/o Capital Stock

Labor Organization

Membership Organization

Trade Association

Cooperative

28039664796

Designated Agent

[ADDITIONAL]

Full Name

Mailing Address

_____ - _____

Title or Position ▼

CITY ▲

STATE ▲

ZIP CODE ▲

Telephone number

____ - ____ - ____

28039664797

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.

[ADDITIONAL]

Mailing Address

_____ - _____

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Any Connected Organization or Affiliated Committee

[ADDITIONAL]

FRIENDS OF ERIK PAULSEN

Mailing Address

PO BOX 44369

EDEN PRAIRIE

MN

55344

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship

Jnt Cmte Participant

Type of Connected Organization:

Corporation

Corporation w/o Capital Stock

Labor Organization

Membership Organization

Trade Association

Cooperative

28039664798

Designated Agent

[ADDITIONAL]

Full Name

Mailing Address

_____ - _____

Title or Position ▼

CITY ▲

STATE ▲

ZIP CODE ▲

Telephone number _____ - _____ - _____

28039664799

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.

[ADDITIONAL]

Mailing Address

_____ - _____

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Any Connected Organization or Affiliated Committee

[ADDITIONAL]

SALI FOR CONGRESS

Mailing Address

PO Box 71 _____

KUNA _____ ID _____ 83634 - _____

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship

Jnt Cmte Participant _____

Type of Connected Organization:

Corporation

Corporation w/o Capital Stock

Labor Organization

Membership Organization

Trade Association

Cooperative

28039664800

Designated Agent

[ADDITIONAL]

Full Name

Mailing Address

Title or Position ▼ CITY ▲ STATE ▲ ZIP CODE ▲

Telephone number - -

28039664801

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.

[ADDITIONAL]

Mailing Address

_____ - _____

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Any Connected Organization or Affiliated Committee

[ADDITIONAL]

SCHMIDT FOR CONGRESS COMMITTEE

Mailing Address

771 Wards Corner Rd

Loveland

OH

45140

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship

Jnt Cmte Participant

Type of Connected Organization:

Corporation

Corporation w/o Capital Stock

Labor Organization

Membership Organization

Trade Association

Cooperative

28039664802

Designated Agent

[ADDITIONAL]

Full Name

Mailing Address

Title or Position ▼ CITY ▲ STATE ▲ ZIP CODE ▲

Telephone number - -

28039664803

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.

[ADDITIONAL]

Mailing Address

_____ - _____

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Any Connected Organization or Affiliated Committee

[ADDITIONAL]

WALBERG FOR CONGRESS

Mailing Address

6769 Teachout Rd.

Tipton

MI

49287

_____ - _____

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship

Jnt Cmte Participant

Type of Connected Organization:

Corporation

Corporation w/o Capital Stock

Labor Organization

Membership Organization

Trade Association

Cooperative

28039664804

Designated Agent

[ADDITIONAL]

Full Name

Mailing Address

_____ - _____

Title or Position ▼

CITY ▲

STATE ▲

ZIP CODE ▲

Telephone number

_____ - _____ - _____

28039664805

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.

[ADDITIONAL]

Mailing Address

_____ - _____

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Any Connected Organization or Affiliated Committee

[ADDITIONAL]

DARREN WHITE FOR CONGRESS

Mailing Address

PO BOX 16601

ALBUQUERQUE

NM

87191

_____ - _____

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship

Jnt Cmte Participant

Type of Connected Organization:

Corporation

Corporation w/o Capital Stock

Labor Organization

Membership Organization

Trade Association

Cooperative

28039664806

Designated Agent

[ADDITIONAL]

Full Name | _____ |

Mailing Address _____

_____ - _____

Title or Position ▼ CITY ▲ STATE ▲ ZIP CODE ▲

_____ Telephone number _____ - _____ - _____

28039664807

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.

28039664808

<input type="checkbox"/> Hand Delivered	Date of Receipt
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<input type="checkbox"/> USPS Express Mail	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input checked="" type="checkbox"/> Overnight Delivery Service (Specify): <i>fed ex</i>	Shipping Date <i>4/2/08</i>
Next Business Day Delivery <input checked="" 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

SR
 PREPARER
 (3/2005)

4/3/08
 DATE PREPARED