

FEC  
FORM 1

STATEMENT OF  
ORGANIZATION

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2008 OCT 21 AM 8:49

Office Use Only

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

12FE4M5

BILL HARRIS FOR CONGRESS 08

ADDRESS (number and street)

(Check if address  
is changed)

CITY

STATE

ZIP CODE

COMMITTEE'S E-MAIL ADDRESS

COMMITTEE'S WEB PAGE ADDRESS (URL)

COMMITTEE'S FAX NUMBER

314-361-5915

2. DATE  '08 /  '30 /  '2008

3. FEC IDENTIFICATION NUMBER  C 00443150

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.

ASST  
Type or Print Name of Treasurer

William H. Harris  
Frances E. Lemonds

ASST  
Signature of Treasurer

X William Harris

as of  
 '09 /  '30 /  '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.

<input type="checkbox"/> Office Use Only	<input type="text"/>	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

WILLIAM C. HARRIS

Candidate Party Affiliation

DEM

Office Sought:

House

Senate

President

State

MO  
02

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  (National, State or subordinate) committee of the  (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
2.  FEC ID number
3.  FEC ID number
4.  FEC ID number
5.  FEC ID number

Write or Type Committee Name

Bill Haas For Congress 08

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

Will Haas

Mailing Address

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

WILLIAM C HAAS

Mailing Address

4579 Laclede #141

CITY

STATE

ZIP CODE

Title or Position

Candidate / Ass. Treasurer

Telephone number

314-533-1181

## 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 TreasurerFrancene Lemonds

Mailing Address

Bill Haas For Congress 4579 Laclede #141

CITY

STATE

ZIP CODE

Title or Position

Treasurer

Telephone number

314-533-1181

Full Name of  
Designated  
Agent

WILLIAM CHARTS

Mailing Address

4579 Laclede #141

ST LOUIS

CITY

MO

63108-1

STATE

ZIP CODE

Title or Position

ASST. TREASURER

Telephone number

314-533-1181

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.

BANK Midwest

One North Broadwood BLVD

ST LOUIS

MO

63105-1

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 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 type="checkbox"/> USPS First Class Mail	Postmarked
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<input type="checkbox"/> USPS Express Mail	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input checked="" 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
	10/21/08
PREPARER (3/2005)	DATE PREPARED