

FEC
FORM 1

STATEMENT OF
ORGANIZATION

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Office Use Only

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

The Committee to Elect George F Mays

ADDRESS (number and street)

P.O. Box 54

(Check if address is changed)

Norwalk

OH

44857

CITY

STATE

ZIP CODE

COMMITTEE'S E-MAIL ADDRESS

gmayspolitical@yahoo.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

www.georgemays.com

COMMITTEE'S FAX NUMBER

2. DATE

3 / 30 / 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

Robert Clements

Signature of Treasurer

Robert Clements

Date

3 / 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.

Office
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For further information contact:
Federal Election Commission
Toll Free 800-424-6530
Local 202-694-1100

FEC FORM 1
(Revised 12/2007)

FECAN042.PDF

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

George F Mays

Candidate Party Affiliation

Dem

Office Sought:

House

Senate

President

State

OH

District

5

- (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:

Corporation

Corporation w/o Capital Stock

Labor Organization

Membership Organization

Trade Association

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 C
2. FEC ID number C
3. FEC ID number C
4. FEC ID number C
5. FEC ID number C

Write or Type Committee Name

The Committee to Elect George F. Mays

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

none

Mailing Address

CITY

STATE

ZIP CODE

Relationship:

Connected Organization

Affiliated Committee

Leadership PAC Sponsor

Joint Fundraising Representative

X 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

ROBERT K CLEMENTS

Mailing Address

304 PARK ST.WILLARDOH44890-1345

CITY

STATE

ZIP CODE

Title or Position

MR.

Telephone number

419-577-1566

X 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 TreasurerROBERT K CLEMENTS

Mailing Address

304 PARK ST.WILLARDOH44890-1345

CITY

STATE

ZIP CODE

Title or Position

MR.

Telephone number

419-577-1566

X Full Name of Designated Agent _____

Mailing Address _____

 _____ CITY STATE ZIP CODE

Title or Position _____ Telephone number _____-_____-_____

- X 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.

Firelands Federal Credit Union

Mailing Address

175 CLEVELAND RD

NORWALK

OH

44857

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

CITY

STATE

ZIP CODE

28039671825

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.

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Next Business Day Delivery ☐	
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☐ Received from Senate Public Records Office	Date of Receipt
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☐ Other (Specify):	Date of Receipt or Postmarked

ED
PREPARER
(3/2005)

4/8/08
DATE PREPARED

28039671826