

STATEMENT OF ORGANIZATION

(See reverse side for instructions)

1. (a) NAME OF COMMITTEE IN FULL <input type="checkbox"/> (Check if name is changed) Friends of Bill Redmond P. O. Box 1226 Los Alamos, NM 87544	2. DATE <p style="text-align: center; font-size: 1.2em;">Jan. 23, 2001</p> 3. FEC Identification Number <p style="text-align: center; font-size: 1.2em;">C00344192</p> 4. Is This Report An Amendment? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
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 SECRETARY OF THE SENATE
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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 | Candidate Party Affiliation | Office Sought | State/District |
|-------------------|-----------------------------|---------------|----------------|
- (c) This committee supports/opposes only one candidate _____ and is NOT an authorized committee.
(name of candidate)
- (d) This committee is a _____ committee of the _____ Party.
(National, State or subordinate) (Democratic, Republican, etc.)
- (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 a party committee.

6. Name of Any Connected Organization or Affiliated Committee	Mailing Address and ZIP Code	Relationship

Type of Connected Organization

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

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 Lois Margaret Wilson	Mailing Address 4048A Sycamore, Los Alamos, NM 87544	Title or Position Assistant Treasurer
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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 See attached	Mailing Address See attached	Title or Position See attached
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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. See attached	Mailing Address and ZIP Code See attached
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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 Lois Wilson, Assistant Treasurer	SIGNATURE OF TREASURER 	DATE Jan 23, 2001
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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.

For further information contact:
 Federal Election Commission
 Toll-free 800-424-9530
 Local 202-219-3420

FEBAN044

FEC FORM 1

(revised 4/87)

Attachment to January 23, 2001 Amended Statement of Organization for
Friends of Bill Redmond C00344192

8. Medardo Sanchez, Jr. P.O. Box 96, Los Ojos, NM 87551 Treasurer
Lois Margaret Wilson, 4048A Sycamore, Los Alamos, NM 87544
9. Community Bank, 1475 Central Ave., Los Alamos, NM 87544
First National Bank of Santa Fe, P.O. Box 609, Santa Fe, NM 87504-0609
Wachovia Bank, 100 N. Main St., Winston-Salem, NC 27150

