

FEC  
FORM 1

STATEMENT OF  
ORGANIZATION

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FEC MAIL CENTER

2007 MAY -4 AM 9:27

Office Use Only

1. NAME OF  
COMMITTEE (in full)

(Check if name  
is changed)

Example: If typing, type  
over the lines.

12FE4M5

ANNIE LOYD FOR CONGRESS

ADDRESS (number and street)

2762 E VILLA RITA

(Check if address  
is changed)

PHOENIX

AZ

85032

CITY ▲

STATE ▲

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

info@annieloyd.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

annieloyd.com

COMMITTEE'S FAX NUMBER

602-412-3129

2. DATE 05 02 2007

3. FEC IDENTIFICATION NUMBER ► C

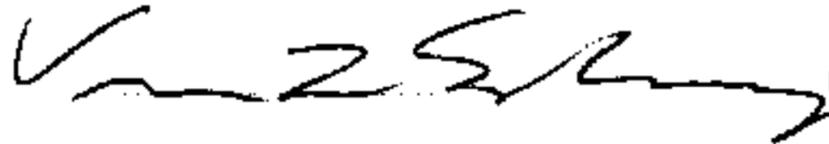
4. IS THIS STATEMENT  NEW (N) OR  AMENDED (A)

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

VEVA L. EICKELBERG

Signature of Treasurer



Date

05 02 2007

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					
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For further information contact:  
Federal Election Commission  
Toll Free 800-424-9530  
Local 202-694-1100

FEC FORM 1  
(Revised 02/2003)

27039434861

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 ANNIE LOYD

Candidate Party Affiliation IND Office Sought:  House  Senate  President State 03  
 District 03

- (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

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

Mailing Address \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

CITY ▲ STATE ▲ ZIP CODE ▲

Relationship \_\_\_\_\_

Type of Connected Organization:

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

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Write or Type Committee Name

ANNIE LOYD 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

VEVA LEE EICKELBERG

Mailing Address

6316 E ARABIAN WAY

PARADISE VALLEY

AZ

85253

Title or Position

CITY

STATE

ZIP CODE

TREASURER

Telephone number

480 215 8989

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

VEVA LEE EICKELBERG

Mailing Address

6316 E ARABIAN WAY

PARADISE VALLEY

AZ

85253

Title or Position

CITY

STATE

ZIP CODE

TREASURER

Telephone number

480 215 8989

Full Name of Designated Agent

JENNIFER JOY WILKEN

Mailing Address

4210 N 35TH ST

PHOENIX

AZ

85018

Title or Position

CITY

STATE

ZIP CODE

OFFICE STAFF

Telephone number

602 617 9456

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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.

BANK OF AMERICA

Mailing Address

3178 E CAMELBACK RD

PHOENIX

AZ

85016

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Bank, Depository, etc.

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

27039434864

**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
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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>5/3/07</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

*[Signature]* *5/4/07*  
**PREPARER** **DATE PREPARED**  
 (3/2005)

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