

FEC:

12:14 PM 12/14/08

The FEC mailings have been going to AN ADDRESS THAT DOES NOT EXIST.

Note change of address and treasure. Late Form 3 will be sent in a few days. Having problem with download of Form 3I. Have contacted your web-master.

BRIAN BOQUIST

FEC
FORM 1

STATEMENT OF ORGANIZATION

(See instructions)

RECEIVED
FEC MAIL ROOM
20 SEP -6 P 1:51

Office Use Only

1. NAME OF
COMMITTEE (In full)

(Check if name
is changed)

Example: If typing, type
over the lines.

12FE4M5

Boquist 2000.com

ADDRESS (number and street)

17080 BUTLER HILL ROAD

(Check if address
is changed)

DALLAS

TX 97338

CITY ▲

STATE ▲

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

NONE

COMMITTEE'S WEB PAGE ADDRESS (URL)

2. DATE

8 30 2001

3. FEC IDENTIFICATION NUMBER ▶

C355354

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

Brian J. Boquist

Signature of Treasurer

B. J. Boquist

Date

8 30 2001

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

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

FEC FORM 1
(Revised 1/01)

FETUN08.PDF

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 Brian J. Boquist

Candidate Party Affiliation GOP Office Sought: House Senate President State OR District 05

- (c) This committee supports/opposes only one candidate, and is NOT an authorized committee. (2000 ELECTION)

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

NONE

Mailing Address _____

CITY ▲ STATE ▲ ZIP CODE ▲

Relationship _____

Type of Connected Organization:

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

Write or Type Committee Name

Boquist2000.com

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 BRIAN J. BOQUIST

Mailing Address 17080 BUTLER HILL RD.

DALLAS OR 97338

Title or Position Candidate CITY STATE ZIP CODE

Telephone number 503-589-1437

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 BRIAN J. BOQUIST

Mailing Address 17080 BUTLER HILL RD

DALLAS OR 97338

Title or Position TREASURE-CANDIDATE CITY STATE ZIP CODE

Telephone number 503-589-1437

Full Name of Designated Agent PEGGY L. BOQUIST

Mailing Address 17080 BUTLER HILL

DALLAS OR 97338

Title or Position ASST. TREASURE CITY STATE ZIP CODE

Telephone number

8. 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.

WEST COAST BANK

Mailing Address

SALEM DOWNTOWN BRANCH

301 CHURCH STREET NE

SALEM OR 97301

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Bank, Depository, etc.

Mailing Address


CITY ▲

STATE ▲

ZIP CODE ▲

ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

The Commission has added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input checked="" type="checkbox"/> First Class Mail	POSTMARKED 9-4-01
<input type="checkbox"/> Registered/Certified Mail	POSTMARKED (R/C)
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House office of Records and Registration	Date of Receipt
<input type="checkbox"/> Received from the Senate Office of Public Records	Date of Receipt
<input type="checkbox"/> Other (Specify):	Postmarked and/or Date of Receipt
<input type="checkbox"/> Electronic Filing	
 PREPARER	9-6-01 DATE PREPARED