

FEC FORM 1

SECRETARY OF THE SENATE

RECEIVED  
FEC MAIL CENTER

10 SEP -8 AM 11:40

2010 SEP -7 AM 9:40

STATEMENT OF ORGANIZATION

(See instructions)

Office use only

SECRETARY OF THE SENATE  
10 SEP -8 AM 11:40

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

BLAKEMAN 2010 INC

ADDRESS (number and street) 108 SOUTH FRANKLIN AVE SUITE 1

(Check if address is changed) VALLEY STREAM NY 11580

CITY STATE ZIP CODE

COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address)

(Check if address is changed) bruce@blakeman2010.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address is changed) www.blakeman2010.com

2. DATE 08 / 31 / 2010

3. FEC IDENTIFICATION NUMBER C C00474510

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 Mr. Alan Kappel

Signature of Treasurer *Alan Kappel* Electronically Filed by Mr. Alan Kappel Date 08 / 31 / 2010

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

10020643901

5. TYPE OF COMMITTEE (Check One)

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 Bruce Blakeman

Candidate Party Affiliation REP Office Sought:  House  Senate  President State NY 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:

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

- (f)  In addition, this committee is a Lobbyist/Registrant PAC.
- (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 Lobbyist/Registrant PAC.  
 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	<u>C</u>
2.	_____	FEC ID number	<u>C</u>
3.	_____	FEC ID number	<u>C</u>
4.	_____	FEC ID number	<u>C</u>

10020643902

Write or Type Committee Name

**BLAKEMAN 2010 INC**

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

**NONE**

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship:

Connected Organization

Affiliated Committee

Joint Fundraising Representative

Leadership PAC Sponsor

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

**Judy Czak**

Mailing Address

**22 Everett Street**

**Valley Stream**

**NY**

**11580 -**

Title or Position ▼

CITY ▲

STATE ▲

ZIP CODE ▲

**Secretary**

Telephone number

**516 -**

**592 -**

**5858**

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

**Mr. Alan Kappel**

Mailing Address

**21 Morris Avenue, Rockville Centre**

**New York**

**NY**

**11590 -**

Title or Position ▼

CITY ▲

STATE ▲

ZIP CODE ▲

**Treasurer**

Telephone number

**516 -**

**345 -**

**0335**

10020643903

Full Name of Designated Agent **Chris Marston**

Mailing Address **PO Box 26141**

**Alexandria**

**VA**

**22311 -**

Title or Position ▼

CITY ▲

STATE ▲

ZIP CODE ▲

**Assistant Treasurer**

Telephone number **703 - 627 - 4679**

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.

**TD Bank**

Mailing Address

**855 Franklin Ave**

**Garden City**

**NY**

**11530 -**

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Bank, Depository, etc.

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

10020643904

# FedEx®

For FedEx Express RT 843  
845

4725  
00-101

Contents should be checked in the container and packed securely. For \_\_\_\_\_

Page 1 of 1

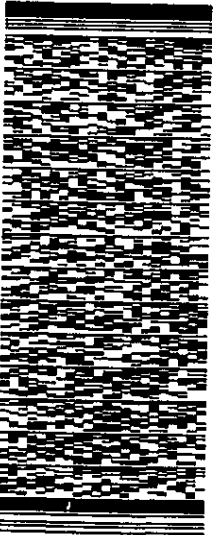
## Extrem

From: Origin ID: DGNA (540) 341-8808  
Jill Vogel  
Holzman Vogel Law PLLC  
45 North Hill Drive  
Suite 100  
Warrenton, VA 20186



SHIP TO: (540) 341-8808 BILL SENDER  
Public Records  
Federal Election Commission  
999 E ST NW

WASHINGTON, DC 20463



Ship Date: 03SEP10  
ActWgt: 1.0 LB  
CAD: 8046184/NET3060

Delivery Address Bar Code



Ref # Blakeman2010(NRR)  
Invoice #  
PO #  
Dept #

TRK# 7962 1425 4724  
0201

TUE - 07 SEP A2  
PRIORITY OVERNIGHT

XC RDVA

20463  
DC-US  
DCA



50657902001

# United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

HAND DELIVERED \_\_\_\_\_

Date of Receipt

USPS FIRST CLASS MAIL \_\_\_\_\_

Postmark

USPS REGISTERED/CERTIFIED \_\_\_\_\_

Postmark

USPS PRIORITY MAIL \_\_\_\_\_

Postmark

DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL

USPS EXPRESS MAIL \_\_\_\_\_

Postmark

OVERNIGHT DELIVERY SERVICE:

SHIPPING DATE

NEXT BUSINESS DAY DELIVERY

FEDERAL EXPRESS \_\_\_\_\_

UPS \_\_\_\_\_

DHL \_\_\_\_\_

AIRBORNE EXPRESS \_\_\_\_\_

RECEIVED FROM FEDERAL ELECTION COMMISSION

**09-08-10**

Date of Receipt

POSTMARK ILLEGIBLE

NO POSTMARK

FAX \_\_\_\_\_

Date of Receipt

OTHER \_\_\_\_\_

Date of Receipt or Postmark

PREPARER

**RD**

DATE PREPARED

**09-08-10**

10020643906

10020643907

