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FEC  
FORM 1

STATEMENT OF  
ORGANIZATION

Office Use Only

1. NAME OF COMMITTEE (in full)  (Check if name is changed) Example: If typing, type over this line. 12FE4M5  
Thompson for Congress, Inc.

ADDRESS (number and street) 5523 Grand Avenue  
 (Check if address is changed) Des Moines IA 50312  
CITY STATE ZIP CODE

COMMITTEE'S E-MAIL ADDRESS  
stan@stanthompson.org

COMMITTEE'S WEB PAGE ADDRESS (URL)  
www.stanthompson.org

COMMITTEE'S FAX NUMBER

2. DATE 09 16 2003

3. FEC IDENTIFICATION NUMBER C 00366443

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 H. Wootten  
Signature of Treasurer *Robert H. Wootten* Date 09 16 2003

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §137p.  
ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

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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: Stanley J. Thompson

Candidate Party Affiliation:  Rep  Dem  Ind  Other

Office Sought:  House  Senate  President

State:  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

Name of Connected Organization or Affiliated Committee:

Physical Address:

CITY STATE ZIP CODE

Relationship:

- Type of Connected Organization:
- Corporation
  - Corporation with Capital Stock
  - Labor Organization
  - Membership Organization
  - Trade Association
  - Cooperative

Write or Type Committee Name

Thompson for Congress, Inc.

7. Custodian of Records: Identify by name, address (phone number - optional) and position of the person in possession of committee books and records.

Robert H. Wootten

Full Name

5428 Woodland Avenue

Mailing Address

Des Moines

IA

50312

Title or Position

CITY

STATE

ZIP CODE

Treasurer

515 277 5236

Telephone number

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).

Robert H. Wootten

Full Name of Treasurer

5428 Woodland Avenue

Mailing Address

Des Moines

IA

50312

Title or Position

CITY

STATE

ZIP CODE

Treasurer

515 277 5236

Telephone number

Full Name of Designated Agent

Dave Arens

Mailing Address

1806 69th Street

Windsor Heights

IA

50322

Title or Position

CITY

STATE

ZIP CODE

Assistant Treasurer

515 254 0905

Telephone number

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.

I o w a S t a t e B a n k

Mailing Address

627 East Locust

Des Moines

IA

50309

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Bank, Depository, etc.

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

Federal Election Commission

### ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

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

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