

STATEMENT OF ORGANIZATION

(See Instructions)

01 MAY -8 AM 8:10

Office Use Only

1. NAME OF COMMITTEE (in full)

(Check if name is changed)

Example: If typing, type over the lines.

12FE4M5

Dunfey For U.S. Senate

ADDRESS (number and street)

26 Brickyard Court

(Check if address is changed)

Suite 6

York

ME

03909

CITY ▲

STATE ▲

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

DunfeyUSSenate@aol.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

2. DATE 05 03 2001

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 Kenneth Stafford

Signature of Treasurer

Date 05 03 2001

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. 5437g.

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)

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 R o b e r t J . D u n f e y , J r .

Candidate Party Affiliation	D E M	Office Sought:	House	<input checked="" type="checkbox"/>	Senate	<input type="checkbox"/>	President	<input type="checkbox"/>	State	ME
									District	

- (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 |

Write or Type Committee Name

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 **Kenneth Stafford**

Mailing Address **107 Exchange Street**

Portland **ME** **04101**

Title or Position ▼ CITY ▲ STATE ▲ ZIP CODE ▲

Treasurer Telephone number **207 772 8600**

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 **Kenneth Stafford**

Mailing Address **107 Exchange Street**

Portland **ME** **04101**

Title or Position ▼ CITY ▲ STATE ▲ ZIP CODE ▲

Treasurer Telephone number **207 772 8600**

Full Name of Designated Agent **Wendy Pierce**

Mailing Address **107 Exchange Street**

Portland **ME** **04101**

Title or Position ▼ CITY ▲ STATE ▲ ZIP CODE ▲

Assistant Treasurer Telephone number **207 772 8600**

D. 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.

Sanford Institution for Savings

Mailing Address

Route 1 & 91

York

ME

03909

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Bank, Depository, etc.

KeyBank

Mailing Address

1 Monument Square

Portland

ME

04101

CITY ▲

STATE ▲

ZIP CODE ▲

