

# FEC FORM 1

# STATEMENT OF ORGANIZATION

(See instructions)

Office use only

1. NAME OF COMMITTEE (in full)

(Check if name is changed)

Example: If typing, type over the lines

12FE4M5

WOMEN IMPACTING THE NATION

ADDRESS (number and street)

PO BOX 75103

(Check if address is changed)

WASHINGTON

DC

20013

CITY ▲

STATE ▲

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

rjentgens@nrsc.org

COMMITTEE'S WEB PAGE ADDRESS (URL)

COMMITTEE'S FAX NUMBER

2026754730

2. DATE

08 / 30 / 2007

3. FEC IDENTIFICATION NUMBER

C C00435537

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 Jentgens

Signature of Treasurer

Electronically Filed by Robert Jentgens

Date

08 / 31 / 2007

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. S437g.

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 02/2003)

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 \_\_\_\_\_

Candidate Party Affiliation  Office Sought:  House  Senate  President State  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

**NATIONAL REPUBLICAN SENATORIAL COMMITTEE**  
 \_\_\_\_\_  
 \_\_\_\_\_

Mailing Address **425 SECOND STREET NE**  
 \_\_\_\_\_  
**WASHINGTON DC 20002**  
 \_\_\_\_\_  
 CITY ▲ STATE ▲ ZIP CODE ▲

Relationship **JF Participant** \_\_\_\_\_

Type of Connected Organization:

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

Write or Type Committee Name

**WOMEN IMPACTING THE NATION**

- 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 **Robert Jentgens**

Mailing Address **P.O. Box 75103**

**Washington** **DC** **20013**

Title or Position ▼ **CITY ▲** **STATE ▲** **ZIP CODE ▲**

**Treasurer** Telephone number **202** - **675** - **6000**

- 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 **Robert Jentgens**

Mailing Address **P.O. Box 75103**

**Washington** **DC** **20013**

Title or Position ▼ **CITY ▲** **STATE ▲** **ZIP CODE ▲**

**Treasurer** Telephone number **202** - **675** - **6000**

Full Name of Designated Agent **Tim Beall**

Mailing Address **P.O. Box 75103**

**Washington** **DC** **20013**

Title or Position ▼ **CITY ▲** **STATE ▲** **ZIP CODE ▲**

**Assistant Treasurer** Telephone number **202** - **675** - **6000**

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.

Wachovia

Mailing Address

1753 Pinnacle Drive

3rd Floor

McLean

VA

22102

CITY ▲

STATE ▲

ZIP CODE ▲

**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.

[ ADDITIONAL ]

Mailing Address

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

CITY ▲ STATE ▲ ZIP CODE ▲

Name of Any Connected Organization or Affiliated Committee

[ ADDITIONAL ]

NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Mailing Address

320 FIRST STREET

WASHINGTON

DC

20003

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship

JF Participant

Type of Connected Organization:

Corporation

Corporation w/o Capital Stock

Labor Organization

Membership Organization

Trade Association

Cooperative

**Designated Agent**

**[ ADDITIONAL ]**

Full Name

Mailing Address

Title or Position ▼

CITY ▲

STATE ▲

ZIP CODE ▲

Telephone number  -  -



Form/Schedule: **F1N**

Transaction ID:

Because this is the first electronic filing of the Form 1 for this committee, the printed version of the amended form continues to show the New box marked. This electronic filing of Form 1 amends the initial paper version filed at the committee's inception. In section 6, a software error causes the box for Membership Organization to be marked when, in fact, no box should be marked since there is no connected organization as the term is defined in 11 CFR.