

FEC FORM 1

STATEMENT OF ORGANIZATION

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Office Use Only

1. NAME OF COMMITTEE (in full)

(Check if name is changed)

Example: If typing, type over the lines.

12FE4M5

GREENSPON FOR PRESIDENT 2008

ADDRESS (number and street)

15984 OLIVE #3

(Check if address is changed)

HESPERIA

CA

92345

CITY ▲

STATE ▲

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

CAMPAIN@GREENSPON2008.COM

COMMITTEE'S WEB PAGE ADDRESS (URL)

WWW.GREENSPON2008.COM

COMMITTEE'S FAX NUMBER

208-493-1281

2. DATE

07 25 2007

3. FEC IDENTIFICATION NUMBER ▶

C

4. IS THIS STATEMENT

X

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

WENDY K KIRWAN

Signature of Treasurer

Wendy Kirwan

Date

07 25 2007

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 02/2003)

27039493938

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 JON R. GREENSPON

Candidate Party Affiliation IND Office Sought: House Senate President State IND District 1

- (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

27039493939

Write or Type Committee Name

GREENSPON FOR PRESIDENT 2008

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 WENDY K KIRWAN

Mailing Address 15984 OLIVE #3

HESPERIA CA 92345

Title or Position CITY STATE ZIP CODE

TREASURER 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).

Full Name of Treasurer WENDY K KIRWAN

Mailing Address 15984 OLIVE #3

HESPERIA CA 92345

Title or Position CITY STATE ZIP CODE

TREASURER Telephone number

Full Name of Designated Agent

Mailing Address

Title or Position CITY STATE ZIP CODE

Telephone number

27039493940

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.

CITIBANK

Mailing Address

[Empty address line]

[Empty address line]

FONTANA CA [Empty zip code]

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Bank, Depository, etc.

[Empty name line]

Mailing Address

[Empty address line]

[Empty address line]

[Empty address line]

CITY ▲

STATE ▲

ZIP CODE ▲

27039493941

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
 The FEC added this page to the end of this filing to indicate how it was received.

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USPS First Class Mail Postmarked
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Other (Specify): Date of Receipt or Postmarked

Jmp

PREPARER

8/1/07

DATE PREPARED

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