## **ALAN P. WOODRUFF**

106 Tangency Drive Gray, Tennessee 37615

(423) 207-0688

RECEIV

erisa1974@comcast.net

2011 NOV -8 AM 11: 14

FEC MAIL CENTER

October 31, 2011

Federal Election Commission 999 E Street, NW Washington, DC 20463

In re: Campaign Filings.

Gentlemen:

Enclosed please find:

- (1) FEC Form 1: Statement of Organization for the "Alan Woodruff for Congress."
- (2) FEC Form 2: Statement of Candidacy for Alan P. Woodruff.

As well as I can decipher the FEC statute and regulations, these are the only documents you require at this time. If I have missed anything, I am sure you will let me know.

Yours,

Alan Woodruff

## 11050684958

FEC FORM 1

## STATEMENT OF ORGANIZATION

RECEIVED.

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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.

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(Check if address is changed)			1111111			
	Gray	1-1-1-1		74	37615	ـــــا-ا
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COMMITTEE'S FAX NUMBER						
2. DATE / 0 \$	0 2017	* / ·				
3. FEC IDENTIFICATION N	JMBER	С				
4. IS THIS STATEMENT 🔀	NEW (N)	OR	AMENDED (A)			
I certify that I have examined the Type or Print Name of Treasure  Signature of Treasurer	A	wood		it is true, com	w / b o /	1 Y Y Y Y X A D 1 /
NOTE: Submission of false, errone	•	•	subject the person signing		•	<sup>2</sup> 2 U.S.C. §437g.
Office Use Only			For further information Federal Election Commiss Toll Free 800-424-9530 Local 202-694-1100		FEC FO	

FEC For	m 1 (Revised 12/2007)						Page 2	
TYPE OF CO	OMMITTEE Committee:							
(a) X	This committee is a princ	ipal campaign co	mmittee. (Co	mplete the o	candidate info	ormation below	<i>ı</i> .)	
(b)	This committee is an auti	norized committe	e, and is NO	Γa principal	l campaign c	ommittee. (Co	mplete the candid	late
Name of Candidate	Alap Wa	admosfin			, 		11111	
Candidate Party Affiliation	on Dem	Office Sought:	/ House	Se	enate	President	State District	TH
(c)	This committee supports/	opposes only on	e candidate, a	and is NOT	an authorize	d committee.		
Name of Candidate								
Party Com	mittee:		National Obse	_			/D	
(d)	This committee is a	Ö	National, State r subordinate	committee	of the		(Democratic, Republican, etc.	.) Party.
Political A	ction Committee (PAC	C):			<del></del>			
(e)	This committee is a sepa	rate segregated	fund. (Identify	connected of	organization o	on line 6.) Its co	onnected organiza	ition is a:
	Corporation		Corp	poration w/o	Capital Stoc	k	Labor Organiz	zation
	Membership Org	anization	Trad	e Associatio	'n		Cooperative	
(f)	This committee supports/ committee. (i.e., nonconne	ected committee)				-	segregated fund o	or party
	In addition, this co	mmittee is a Lead	dership PAC. (	Identify spo	nsor on line 6	.)		
Joint Fund	raising Representath	/e:						
(g)	This committee collects co committees/organizations,							cal
(h)	This committee collects co committees/organizations,						two or more politic	al
Com	mittees Participating in	Joint Fundraise	er		•			
1.					FEC ID num	nber C		
2.				لللا	FEC ID num	nber C		
<b>3</b> .				لللا	FEC ID num	nber C		
4.				111	FEC ID num	ber C		
5.					FEC ID num	ber C		

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FEC Form 1 (Revised	12/2007) Page <b>3</b>	
Write or Type Committee Name	e ·	
6. Name of Any Connected C	Organization, Affiliated Committee, Leadership PAC Sponsor or Joint Fundraising Representative	
NOWE	<u> </u>	
		Ш
Mailing Address		Ш
		Ш
		لــــــــــــــــــــــــــــــــــــــ
	CITY STATE ZIP CODE	
Relationship:		
Connected Organization	Affiliated Committee Leadership PAC Sponsor Joint Fundraising Representative	
<ol> <li>Custodian of Records: Identification</li> <li>books and records.</li> </ol>	ntify by name, address (phone number optional) and position of the person in possession of commi	ttee
Full Name ALAN	M WOODRUFE	لـــ
Mailing Address	106 TRMOEMCY DRIVE	لــا
		Ш
	GRAY 1711 1711 1976/15-	لــــ
Title or Position	CITY STATE ZIP CODE	
CLANDID ATE	Telephone number 429 - 202 - 68	ا ج
CAPUIDIAILE	Telephone number 429-207-68	உ
8. Treasurer: List the name and any designated agent (e.g., a	nd address (phone number optional) of the treasurer of the committee; and the name and address of assistant treasurer).	т Т
Full Name of Treasurer	N. WOODUWF F	لــا
Mailing Address	VIOLE MANIGENIAY DININE	لــا
		لــا
	CRAY STATE ZIP CODE	لــا
Title or Position		اص
Measumen		<u>اء</u> ا
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CITY

STATE

ZIP CODE

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FEC Form 1 (Revised 12/2007)

ALAN WOODRUFF

Full Name of Designated

Agent

(3/2005)

## **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. **Date of Receipt Hand Delivered** Postmarked **USPS First Class Mail** Postmarked (R/C) **USPS** Registered/Certified Postmarked **USPS Priority Mail** Delivery Confirmation<sup>™</sup> or Signature Confirmation<sup>™</sup> Label Postmarked **USPS Express Mail** Postmark Illegible No Postmark **Shipping Date** Overnight Delivery Service (Specify): **Next Business Day Delivery** Date of Receipt Received from House Records & Registration Office Date of Receipt Received from Senate Public Records Office Date of Receipt Received from Electronic Filing Office Date of Receipt or Postmarked Other (Specify): PREPARER DATE PREPARED