

FEC
FORM 1

STATEMENT OF
ORGANIZATION

(See instructions)

RECEIVED
FED MAIL
OPERATIONS CENTER

2003 FEB -1 P 12:11
Office Use Only

SECRETARY OF THE SENATE
03 FEB -03
M 10:40

1. NAME OF COMMITTEE (in full)

(Check if name is changed)

Example: If typing, type over the lines.

12 FEB 4MS

Draft Darrell Issa Committee

ADDRESS (number and street)

P.O. Box 262910

(Check if address is changed)

Santa Ana

CA

92799

CITY ▲

STATE ▲

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

COMMITTEE'S WEB PAGE ADDRESS (URL)

2. DATE

01 23 2003

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

Philip E. Paule

Signature of Treasurer

Date

01 23 2003

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §497g.

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 202-684-1100

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 _____

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 Daniel H. Tising for Senate _____

(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

Draft Darrell Issa

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

Philip E. Paule

Mailing Address

23232 Hillhurst # 69

Laguna Niguel

CA

92677

Title or Position

CITY

STATE

ZIP CODE

Treasurer

Telephone number

949-510-1807

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

Philip E. Paule

Mailing Address

23232 Hillhurst # 69

Laguna Niguel

CA

92677

Title or Position

CITY

STATE

ZIP CODE

Telephone number

949-510-1807

Full Name of Designated Agent

James V. Lacy

Mailing Address

3001 Juy Glenn # 223

Laguna Niguel

CA

92677

Title or Position

CITY

STATE

ZIP CODE

Asst. Treasurer

Telephone number

949-495-3314

Draft Issa Committee
P.O. Box 26290
Santa Ana 92709

RETURN RECEIPT
REQUESTED

CERTIFIED MAIL



7002 2410 0000 4362 3352



Federal Elections Commission
999 E St NW
Washington DC 20543

10/11/08 10:00 AM

23020052984
23020052984

