

FEC FORM 1

STATEMENT OF ORGANIZATION

(See instructions)

RECEIVED  
FEC MAIL  
OPERATIONS CENTER

JAN 31 1:09

1. NAME OF COMMITTEE (In full)

(Check if name is changed)

Example: If typewritten, type over the lines

12FE4MG

AMERICAN WOOD PRESERVERS INSTITUTE POLITICAL ACTION COMMITTEE

ADDRESS (number and street)

12100 Sunset Hills Rd.

Suite 130

(Check if address is changed)

Reston

VA

20190

CITY

STATE

ZIP CODE

COMMITTEE'S E-MAIL ADDRESS

COMMITTEE'S WEB PAGE ADDRESS (URL)

COMMITTEE'S FAX NUMBER

2. DATE

01 / 28 / 2004

3. FEC IDENTIFICATION NUMBER

C 000151332

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 William J. Baldwin, Assistant Treasurer

Signature of Treasurer

*William J. Baldwin*

Date

01 / 28 / 2004

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. 5495g.

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 202-596-1100

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

\_\_\_\_\_  
 \_\_\_\_\_

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

**AMERICAN WOOD PRESERVERS INSTITUTE POLITICAL ACTION COMMITTEE**

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

Mailing Address

Title or Position ▼

CITY ▲

STATE ▲

ZIP CODE ▲

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:

John Taylor

Mailing Address

12100 Sunset Hills Rd., Ste. 120RestonVA20190

Title or Position ▼

CITY ▲

STATE ▲

ZIP CODE ▲

Treasurer

Telephone number

Full Name of

Designated

Agent

William J. Baldwin

Mailing Address

1956 Lake Park Dr., Ste. 250SnaymsGA30080

Title or Position ▼

CITY ▲

STATE ▲

ZIP CODE ▲

Assistant Treasurer

Telephone number

7708016800

2. **Bank or Other Depository:** List all banks or other depositories in which the candidate deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

Alliance Bank

Mailing Address

11730 Plaza America

Suite 130

Reston

VA

20190

CITY ▲

STATE ▲

ZIP CODE ▲

Federal Election Commission

## ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

The Commission has added this page to the end of this filing to indicate how it was received.

<input checked="" type="checkbox"/>	Hand Delivered	Date of Receipt <i>1-31-04</i>
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