

FEC
FORM 1

STATEMENT OF
ORGANIZATION

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2006 JUN 23 P 12:33

Office Use Only

1. NAME OF
COMMITTEE (in full)



(Check if name
is changed)

Example: If typing, type
over the lines.

12FE4M5

CHARLIE HARRISON FOR CONGRESS

ADDRESS (number and street)

1776 LONE EAGLE ST



(Check if address
is changed)

COLUMBUS

OH

43228-3655

CITY ▲

STATE ▲

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

COMMITTEE@GETTHEFEDOUT.COM

COMMITTEE'S WEB PAGE ADDRESS (URL)

WWW.GETTHEFEDOUT.COM

COMMITTEE'S FAX NUMBER

614-851-1121

2. DATE

06

22

2006

3. FEC IDENTIFICATION NUMBER ►

C00365866

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

TOM PLUMMER

Signature of Treasurer

Tom Plummer

Date

06

22

2006

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)

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

CHARLES MORRISON

Candidate Party Affiliation

IND

Office Sought

☒

House

☐

Senate

☐

President

State

OH

District

15

- (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

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 TOM PLUMMER

Mailing Address 3093 HIGHCLIFF COURT
COLUMBUS OH 43231-2340

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 TOM PLUMMER

Mailing Address 3093 HIGHCLIFF COURT
COLUMBUS OH 43231-2340

Title or Position ▼ CITY ▲ STATE ▲ ZIP CODE ▲

TREASURER Telephone number 614 - 882 - 2684

Full Name of Designated Agent CHARLES MORRISON

Mailing Address 1776 LONE EAGLE STREET
COLUMBUS OH 43228-3655

Title or Position ▼ CITY ▲ STATE ▲ ZIP CODE ▲

ASSISTANT TREASURER Telephone number 614 - 851 - 1100

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.

HUNTINGTON NATIONAL BANK

Mailing Address

PO Box 1558 EALW37

COLUMBUS

OH

43214-1558

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Bank, Depository, etc.

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

Federal Election Commission
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☐ Received from Senate Public Records Office	Date of Receipt
☐ Received from Electronic Filing Office	Date of Receipt
☐ Other (Specify):	Date of Receipt or Postmarked

See
PREPARER

6/23/06
DATE PREPARED