

# DURKEE & ASSOCIATES

861 SOUTH GLENDALE BOULEVARD • SUITE 203 • BURBANK, CALIFORNIA 91502  
Phone 818/260-0888 • Fax 818/260-0857 • E-Mail: kind@durkee.com

Facsimile

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FEC MAIL ROOM  
2000 DEC 13 A 11:07

DATE: 12/12/00

TO: Lisa J. Simpson  
FROM: Kinde Durkee

RE: Statement of Organization (schipska for congress)

MEMO:  
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# STATEMENT OF ORGANIZATION RECEIVED

(SEE REVERSE SIDE FOR INSTRUCTIONS) FEC MAIL ROOM

1. (a) NAME OF COMMITTEE IN FULL  (Check if name is changed) **Schipske for Congress** 2. DATE **2000 DEC 13 AM 11:12 1003**

(b) Number and Street Address  (Check if address is changed) **601 S. Elenwaks Blvd., Ste. 208** 3. FEC IDENTIFICATION NUMBER **0003418136**

(c) City, State and ZIP Code **Burbank, CA 91502** 4. IS THIS STATEMENT AN AMENDMENT?  YES  NO

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<br><b>Evelyn A. Schipske</b> | Candidate's Party Affiliation<br><b>Democratic</b> | Office Sought<br><b>Congress</b> | State/District<br><b>CA 1334</b> |
|------------------------------------------------|----------------------------------------------------|----------------------------------|----------------------------------|
- (c) This committee supports/opposes only one candidate \_\_\_\_\_ and is NOT an authorized committee (name of candidate)
- (d) This committee is a \_\_\_\_\_ committee of the \_\_\_\_\_ Party (National, State or subordinate) (Democratic, Republican, etc.)
- (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 a party committee.

Name of Any Connected Organization or Affiliated Committee	Meeting Address and ZIP Code	Relationship

Type of Connected Organization

- Corporation  Corporation with Capital Stock  Labor Organization  Membership Organization  Trade Association  Cooperative

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: **Kinde Durkee** Meeting Address: **601 S. Elenwaks Blvd., Ste. 208 Burbank, CA 91502** Title or Position: **Bookkeeper**

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: **Kinde Durkee** Meeting Address: **601 S. Elenwaks Blvd., Ste. 208 Burbank, CA 91502** Title or Position: **Treasurer**

9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, holds safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.: **City National Bank** Meeting Address and ZIP Code: **400 N. Roxbury Dr. 4th Fl Beverly Hills, CA 90210**

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: **Kinde Durkee** SIGNATURE OF TREASURER: *[Signature]* DATE: **12/12/00**

NOTE: Submission of false information or incomplete information may subject the person signing this Statement to the penalties of 18 U.S.C. 437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS

Federal Election Commission

**ENVELOPE REPLACEMENT PAGE  
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 <b>J. A. Q.</b> PREPARER	 <b>12/13/08</b> DATE PREPARED

1004-899-70-02