STATEMENT OF ORGANIZATION OF POLITICAL COMMITTEE			OFFICE	USE ONLY	200			
(PLEASE TYPE)					2009 MAR 1			
1. Full Name of Committee				Telephone	о р	100 1000 1000		
Charlotte County Government Policy Council, PAC				941-661-36	65	ters west		
Mailing Address (include city, state and zip code)					~			
51 Amazon Drive Punta Gorda, FL 33983								
Street Address (include city, state and zip code) 51 Amazon Drive Punta Gorda, FL 33983								
2. Affiliated or Connected Organizations (includes other committees of continuous existence and political committees)								
Name of Affiliated or Connected Organization	Mailing Address			Relationship				
N/A								
3. Area, Scope and Jurisdiction of the Committee Charlotte County and Southwest Florida								
4. Nature of Organization or Organization's Special Interest (e.g., medical, legal, education, etc.) Government Policy and Efficiency								
5. Identify by Name, Address and Position, the Custodian of Books and Accounts (include treasurer's name)								
Full Name	Mailing Address		Committee Title or Position					
William M. Weller	51 Amazon Drive Punta Gorda, FL 33983		Chair m Executive Senior Fe	Director and	1			

(continued on reverse side)

List by Name, Address and Position, Other Principal Officers, Including Officers and Members of the Finance Committee, If Any (include chairman's name)								
Full Name	Mailing Addr	ress Co	Committee Title or Position					
N/A	Office Sought and Party Affilia	ation Each Candidate or Oth	per Individual that this					
Committee is Supporting	(if none, please indicate)							
Full Name	Mailing Address	Office Sought	Party					
NONE								
8. List Any Issues this Committee is Supporting: _{N/A}								
List Any Issues this Committee is Opposing: N/A								
9. If this Committee is Supporting the Entire Ticket of a Party, Give Name of Party N/A								
10. In the Event of Dissolution, What Disposition will be Made of Residual Funds? Donate residual funds to local non-profit charities.								
11. List all Banks, Safety De	eposit Boxes, or Other Depos	sitories Used for Committee	Funds					
Name of Bank or Depos	sitory & Account Number	Mailing Address						
Calusa National Bank		1850 Tamiami Trail, Port Charlotte, FL 33948						
Account # <u>入</u> の入 <i>の</i> の 4	1533							
12. List all Reports Required to be Filed by this Committee with Federal Officials and the Names, Addresses and Positions of Such Officials, If Any								
Report Title	Dates Required to be Filed	Name & Position of Official	Mailing Address					
N/A								
STATE OF Florida		Charlotte	COUNTY					
I, William M. Weller		_ , certify that the information in this Statement of						
Organization is complete, true and correct. X M M Signature of Chairman of Political Committee Date								