11/17/2004 15 : 21

FEC FORM 1

STATEMENT OF ORGANIZATION

(See Instructions)

Office Use Only

1. NAME OF COMMITTEE (in full) X (Check if name is changed) Example: If typing, type over the lines 12FE4M5

R.J. REYNOLDS POLITICAL ACTION COMMITTEE; REYNOLDS AMERICAN INC.

ADDRESS (Number and Street)

P. O. Box 718

(Check if address is changed)

Winston-Salem | NC | 27102 -

CITY ▲ STATE ▲ ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

albertj@rjrt.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

COMMITTEE'S FAX NUMBER

3367411205

2. DATE 11 17 2004

3. **FEC IDENTIFICATION NUMBER** C C00042002

4. IS THIS STATEMENT X 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 Mr. Randolph Tompson

Signature of Treasurer Electronically Filed by Mr. Randolph Tompson Date 11 17 2004

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

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) X 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

BROWN & WILLIAMSON TOBACCO CORPORATION EMPLOYEE POLITICAL ACTION COMMITTEE AKA EMPAC

Mailing Address P O BOX 718

Winston-Salem NC 27102 -

CITY STATE ZIP CODE

Relationship Affiliated PAC

Type of Connected Organization:

X Corporation Corporation w/o Capital Stock Labor Organization

Membership Organization Trade Association Cooperative

Write or Type Committee Name

R.J. REYNOLDS POLITICAL ACTION COMMITTEE; REYNOLDS AMERICAN INC.

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: Judy Albert

Mailing Address: P. O. Box 718

Winston-Salem | NC | 27102 –

Title or Position ▼ | CITY ▲ | STATE ▲ | ZIP CODE ▲

PAC Asst Treasurer

Telephone number 336 – 741 – 1285

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: Mr. Randolph Tompson

Mailing Address: P. O. Box 718

Winston-Salem | NC | 27102 –

Title or Position ▼ | CITY ▲ | STATE ▲ | ZIP CODE ▲

PAC Treasurer

Telephone number 336 – 741 – 7287

Full Name of Designated Agent

Mailing Address

Title or Position ▼ | CITY ▲ | STATE ▲ | ZIP CODE ▲

Telephone number – –

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.

Mechanics and Farmers Bank

Mailing Address P. O. Box 628

Winston-Salem NC 27102 -

CITY STATE ZIP CODE

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. **[ADDITIONAL]**

National City Bank of Kentucky

Mailing Address P. O. Box 36000

Louisville KY 40233 - 6000

CITY STATE ZIP CODE

Name of Any Connected Organization or Affiliated Committee **[ADDITIONAL]**

REYNOLDS AMERICAN INC

Mailing Address P. O. BOX 2959

WINSTON-SALEM NC 27102

CITY STATE ZIP CODE

Relationship Parent Company

Type of Connected Organization:

X Corporation | Corporation w/o Capital Stock | Labor Organization

Membership Organization | Trade Association | Cooperative

Designated Agent **[ADDITIONAL]**

Full Name

Mailing Address

Title or Position ▼ CITY ▲ STATE ▲ ZIP CODE ▲

Telephone number _____ – _____ – _____