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FEC FORM 1 — STATEMENT OF ORGANIZATION

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

CHESTER COUNTY DEMOCRATIC committee

ADDRESS (number and street) 37 So. HIGH STREET

(Check if address is changed)

WEST CHESTER PA 19382

CITY ▲ STATE ▲ ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS
ETCC02@aol.com

COMMITTEE'S WEB PAGE ADDRESS (URL)
chescodems.org

COMMITTEE'S FAX NUMBER
610-692-8474

2. DATE 10/12/04

3. FEC IDENTIFICATION NUMBER ▶ C

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 ANNE R CROWLEY

Signature of Treasurer Anne R Crowley Date 10/12/04

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. 6407g.

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)

Reset Form

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

PA STATE DEMOCRATIC COMMITTEE

510 N. THIRD STREET

Mailing Address

HARRISBURG PA 17101-

CITY ▲ STATE ▲ ZIP CODE ▲

Relationship CHESTER COUNTY DEMOCRATIC COMMITTEE

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: ANNE R CROWLEY

Mailing Address: 37 S HIGH ST
WEST Chester
PA 19382-

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

TREASURER

Telephone number: 610-563-8340

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: ANNE R CROWLEY

Mailing Address: 37 S High ST
WEST Chester PA 19382-

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

TREASURER

Telephone number: 610-563-8340

Full Name of Designated Agent: ANNE R CROWLEY

Mailing Address: 37 S HIGH ST
WEST CHESTER PA 19382-

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

TREASURER

Telephone number: 610-563-8340

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

Name of Bank, Depository, etc.

WACHOVIA

Mailing Address DEVON FINANCIAL CENTER
230 WEST LANCASTER AVE
DEVON PA 19333-

CITY ▲ STATE ▲ ZIP CODE ▲

Name of Bank, Depository, etc.

Mailing Address

CITY ▲ STATE ▲ ZIP CODE ▲

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Federal Election Commission

ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

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

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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

PREPARER

10-19-04
DATE PREPARED

(5/2004)