

**Socialist Workers National Campaign Committee**  
**P. O. Box 31322**  
**San Francisco, CA 94131**

October 9, 2007

Federal Election Commission  
Attention: Electronic Filing Office, Room 503

Dear Commission,

Please find attached our amended form 1- Statement of Organization. The Socialist Workers Campaign Committee has been relocated to San Francisco.

I am the treasurer and will need a new password. Please see the attached request.

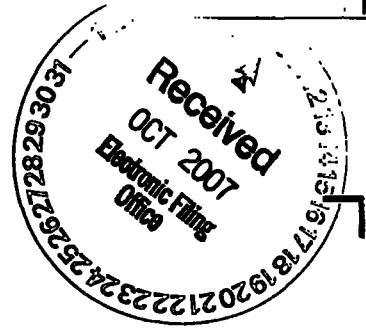
Sincerely,



Lea Sherman, Treasurer



27039534080

FEC  
FORM 1STATEMENT OF  
ORGANIZATION

Office Use Only

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

12FE4M5

S.O.C.I.A.L.I.S.T. W.O.R.K.E.R.S. N.A.T.I.O.N.A.L. C.A.M.P.A.I.G.N. C.O.M.M.I.T.T.E.E.

ADDRESS (number and street)

P.O. BOX 31322

☒(Check if address  
is changed)

S.A.N. F.R.A.N.C.I.S.C.O.

C.A.

94131-0322

CITY ▲

STATE ▲

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

S.O.C.W.O.R.K.U.A.T.L.C.A.M.P@S.B.C.B.L.O.B.A.L.N.E.T.

COMMITTEE'S WEB PAGE ADDRESS (URL)

COMMITTEE'S FAX NUMBER

2. DATE

10 / 09 / 2007

3. FEC IDENTIFICATION NUMBER ►

C00111476

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

Lea Sherman

Signature of Treasurer

Lea Sherman

Date

10 / 09 / 2007

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)
-----------------------	--	--	--	--	---	---------------------------------

FEC3AND42.PDF

27039534081

FEC Form 1 (Revised 02/2003)

Page 2

No Change

## 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

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship

Type of Connected Organization:

☐

Corporation

☐

Corporation w/o Capital Stock

☐

Labor Organization

☐

Membership Organization

☐

Trade Association

☐

Cooperative

27039534082

FEC Form 1 (Revised 02/2003)

Page 3

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 NORTON SANDLERMailing Address P.O. BOX 31322SAN FRANCISCO CA 94131-0322

Title or Position ▼

CITY ▲

STATE ▲

ZIP CODE ▲

ChairpersonTelephone number 415-584-2135  
584 2135

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 LEA SHERMANMailing Address P.O. BOX 31322SAN FRANCISCO CA 94131-0322

Title or Position ▼

CITY ▲

STATE ▲

ZIP CODE ▲

TREASURERTelephone number 415-584-2135  
584-2135

Full Name of Designated Agent

Mailing Address

Title or Position ▼

CITY ▲

STATE ▲

ZIP CODE ▲

Telephone number

FEC Form 1 (Revised 02/2003)

Page 4

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.

BANK OF AMERICA

Mailing Address

2701 MISSISSIPPI ST

SAN FRANCISCO CA 94101-3103

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Bank, Depository, etc.

Mailing Address


CITY ▲

STATE ▲

ZIP CODE ▲

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.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> USPS First Class Mail	Postmarked
<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
<input type="checkbox"/> USPS Priority Mail	Postmarked
Delivery Confirmation™ or Signature Confirmation™ Label <input type="checkbox"/>	
<input type="checkbox"/> USPS Express Mail	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
Next Business Day Delivery <input type="checkbox"/>	
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input checked="" type="checkbox"/> Received from Electronic Filing Office	Date of Receipt 10/10/07
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

  
**PREPARER**  
(3/2005)

10/10/07  
**DATE PREPARED**

27039534085