29030093086

FEC FORM 1

STATEMENT OF ORGANIZATION

RECEIVED FEC MAIL CENTER

2009 MAY 27 A 4 43

1.	NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5		
В	LACKS IN GO	V, E, R, N, M, E, N, T	POLITICAL ADVANCE	мент, соџист	<u> </u>	
L		<u> </u>	<u> </u>	<u> </u>		
ADI	DRESS (number and street)	4: 2: 4: SOUTH DEC	ATUR STREET			
	(Check if address	<u> </u>	 <u> </u>	11111	<u> </u>	
	is changed)	M _I O _I N _I TGOME	R :Y : : : : .	A L 3	6,1,0,4-	
			CITY	STATE	ZIP CODE	
COI	MMITTEE'S E-MAIL ADDRES	S (Please provide only one e-	-mail address)			
	(Check if address	gregg@alaedu.org	/ tamikar@alaedu.	org ; ; ;		
	is changed)			1 1 1 1 1		
СО	MMITTEE'S WEB PAGE ADD	- RESS (URL)				
	(Check if address	www.alabamademoc	raticconference.or	g , , , , , ,		
	is changed)		<u> </u>	<u> </u>	1 1 1 1 1 1 1 1	
2. DATE						
3. FEC IDENTIFICATION NUMBER C 0 0 3 1 9 5 1 7						
4.	4. IS THIS STATEMENT NEW (N) OR X AMENDED (A)					
l ce	ertify that I have examined this	s Statement and to the best	of my knowledge and belief it	is true, correct ar	nd complete.	
Type or Print Name of Treasurer Joe L. Reed						
Sigi	nature of Treasurer	Je te		Date 0 5	í 1° 2° 0° 9°	
NO		•	may subject the person signing of the control of th		penalties of 2 U.S.C. §437g.	
_	Office Use Only		For further information c Federal Election Commissi Toll Free 800-424-9530 Local 202-694-1100		FEC FORM 1 (Revised 02/2009)	

5.

FEC FC	orm 1 (Revised 02/2009)		Page 2					
	COMMITTEE							
Candidat	e Committee:							
(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 Affiliat	Office Sought:	House Senate	State President District					
(c)	This committee supports/opposes ont	y one candidate, and is NOT an authorized						
Name of Candidate								
Party Co			· · · · · · · · · · · · · · · · · · ·					
(d)	This committee is a	(National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.					
Political A	Action Committee (PAC):							
(e)	This committee is a separate segrega	ated fund. (Identify connected organization on	line 6.) Its connected organization is a					
	Corporation	Corporation w/o Capital Stock	Labor Organization					
	Membership Organization	Trade Association	Cooperative					
	In addition, this commit	ttee is a Lobbyist/Registrant PAC.						
(f) X	This committee supports/opposes mo committee. (i.e., nonconnected commit	ere than one Federal candidate, and is NOT tee)	a separate segregated fund or party					
	In addition, this committee is a	Lobbyist/Registrant PAC.						
	In addition, this committee is a	Leadership PAC. (Identify sponsor on line 6.)						
Joint Fund	fraising Representative:							
(g)		pays fundraising expenses and disburses net pays fundraising expenses and disburses net pays for which is an authorized committee of a fede						
(h) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more committees/organizations, none of which is an authorized committee of a federal candidate.								
Committees Participating in Joint Fundraiser								
1.		FEC ID number	er C					
2.		FEC ID number	er C					
3.		FEC ID number	er C					
4.			er C					

		(11041000	32.2007					
Write or Type Committee Name								
BLACKS IN GOVERNMENT POLITICAL ADVANCEMENT COUNCIL								
6.	Name of Any Co	onnected (Organization, A	ffiliated Comm	nittee, Joint	Fundralsing F	lepresentative,	or Leadership PAC Sponsor
L			!		!			
L				<u> </u>				
	Mailing Address						1	
				1111	<u> </u>			
					<u> </u>			
				CITY	•		STATE	ZIP CODE
	Relationship:	Connecte	d Organization	Affiliated Co	ommittee	Joint Fundrais	sing Representa	tive Leadership PAC Sponso
							···	
7.	Custodian of Rec books and records		ntify by name, a	ddress (phone	number	optional) and p	osition of the pe	erson in possession of committee
	Full Name	J O E	L., R E E	D			<u> </u>	
	Mailing Address		4 2 4 S	OUTH, DEC	AŢUŖ ST	REET ;		
			MONTGOME	RY	<u> </u>	- ! - - -	AL	3, 6, 1, 0, 4-
	Title or Position			CITY			STATE	ZIP CODE
	TREASURER	1 1	1:11	<u> </u>	ப	Telephone	number 3	3,4-2,6:3-4,0,4
3.	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	Joe L.	Reed	1 1 1 1 1		<u>. </u>		
	Mailing Address		4 2 4 SO	UTH DECAT	rur stri	EET		
			MONTGOME	RY	1 ' 1 '	i!!	A L STATE	3 6 1: 0 4-
	Title or Position			On I		_		
[TREASURER	<u> </u>		<u></u>		Telephone	number 3	<u> 314 - 1216131 - 14:04</u>

		TREASURER
29030093089	9.	Banks or Other D safety deposit boxe Name of Bank, De Mailing Address
		Name of Book Day

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Full Name of Designated Agent	JOE · L. REED						
Mailing Address	4 2 4 SOUTH DECATUR STREET	! ! ! ! ! ;					
	<u> </u>	1 ! !					
	MONTGOMERY	A I.	8_6_:1_:0:4] ZIP CODE				
Title or Position	Telephone	number <u>i</u>					
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.							
	WACHOVIA BANK ! ! ! ! ! ! ! ! ! ! ! !	<u> </u>					
Mailing Address	8 0 0 MADISON AVENUE : ' :	111111					
		1.1.4.1.1					
	MONTGOMERY	AL_	3, 6, 1, 0 4-				
	CITY	STATE	ZIP CODE				
Name of Bank, Depository, etc.							
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	<u> </u>	<u> </u>					
Mailing Address		<u> </u>	<u> </u>				
	 						
		لبال					
	CITY	STATE	ZIP CODE				

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(3/2005)

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. **Date of Receipt Hand Delivered** Postmarked 5/20/09 **USPS First Class Mail** Postmarked (R/C) **USPS** Registered/Certified **Postmarked USPS Priority Mail** ⁻Delivery Confirmation[™] or Signature Confirmation Label Postmarked **USPS Express Mail** Postmark Illegible No Postmark **Shipping Date Overnight Delivery Service (Specify): Next Business Day Delivery Date of Receipt** Received from House Records & Registration Office **Date of Receipt** Received from Senate Public Records Office **Date of Receipt** Received from Electronic Filing Office Date of Receipt or Postmarked Other (Specify): 5/27/09 DATE PREPARED