

**FEC
FORM 1**

**STATEMENT OF
ORGANIZATION**

(See Instructions)

Office Use Only

1. NAME OF COMMITTEE (in full)

(Check if name is changed)

Example: If typing, type over the lines

12FE4M5

PAC to the Future

ADDRESS (Number and street)

PMB 3230

(Check if address is changed)

268 Bush Street

San Francisco

CA

94104

CITY ▲

STATE ▲

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

COMMITTEE'S WEB PAGE ADDRESS (URL)

COMMITTEE'S FAX NUMBER

2. DATE 10 / 31 / 2003

3. FEC IDENTIFICATION NUMBER

C C00344234

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 Leo McCarthy

Signature of Treasurer Electronically Filed by Leo McCarthy

Date 10 / 31 / 2003

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. 5437g.

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 202-894-1100

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	Office				State
Party Affiliation	Sought:	House	Senate	President	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

TEAM MAJORITY _____

Mailing Address _____ 921 Front Street _____

San Francisco CA 94104 - _____

CITY ▲ STATE ▲ ZIP CODE ▲

Relationship _____ Affiliated Committee _____

Type of Connected Organization:

- | | | |
|-------------------------|-------------------------------|--------------------|
| Corporation | Corporation w/o Capital Stock | Labor Organization |
| Membership Organization | Trade Association | Cooperative |

Write or Type Committee Name

PAC to the Future

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 **Leo T. McCarthy**

Mailing Address **243 Kearny Street**

San Francisco CA 94104

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

President Telephone number _____ - _____ - _____

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 **Leo T. McCarthy**

Mailing Address **243 Kearny Street**

San Francisco CA 94104

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

President Telephone number _____ - _____ - _____

Full Name of Designated Agent _____

Mailing Address _____

San Francisco CA 94104

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.

Union Bank of California (P)

Mailing Address

400 California

San Francisco

CA

94104 -

CITY Δ

STATE Δ

ZIP CODE Δ