

# 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

**Altria Group Inc. Political Action Committee**

ADDRESS (number and street)

**101 Constitution Ave NW**

(Check if address is changed)

**Suite 400W**

**Washington**

**DC**

**20001**

CITY ▲

STATE ▲

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

**Brandie.Davis@Altria.com**

COMMITTEE'S WEB PAGE ADDRESS (URL)

COMMITTEE'S FAX NUMBER

**202-354-1535**

2. DATE

**06 / 15 / 2006**

3. FEC IDENTIFICATION NUMBER

**C C00089136**

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

**A. Shuanise Washington**

Signature of Treasurer

Electronically Filed by

**A. Shuanise Washington**

Date

**06 / 15 / 2006**

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. S437g.

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)  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

**Altria Group Inc.** \_\_\_\_\_

Mailing Address **101 Constitution Avenue NW**  
**Suite 400W**  
**Washington** **DC** **20001**  
CITY ▲ STATE ▲ ZIP CODE ▲

Relationship **Connected** \_\_\_\_\_

Type of Connected Organization:

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

Write or Type Committee Name

**Altria Group Inc. Political Action Committee**

- 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 **Brandie Davis**

Mailing Address **101 Constitution Avenue NW**

**Suite 400W**

**Washington DC 20001**

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

**Custodian of Records** Telephone number **202 354 1500**

- 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 **A. Shuanise Washington**

Mailing Address **101 Constitution Avenue NW**

**Suite 400W**

**Washington DC 20001**

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

**Treasurer** Telephone number **202 354 1500**

Full Name of Designated Agent **Brandie Davis**

Mailing Address **101 Constitution Ave. NW**

**Siote 400W**

**Washington DC 20001**

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

**Assistant Treasurer** 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.

SunTrust Bank

Mailing Address

PO Box 85024

Richmond

VA

23285

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 ]

Mailing Address


CITY ▲

STATE ▲

ZIP CODE ▲

Name of Any Connected Organization or Affiliated Committee

[ ADDITIONAL ]

**Kraft Foods Global Inc. Political Action Committee**

Mailing Address

<b>Three Lakes Drive</b>		
<b>Northfield</b>		<b>IL</b>
		<b>60093</b>

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship

**Affiliated Committee**

Type of Connected Organization:

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  -  -

