

**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

THE DIRECTV GROUP, INC. FUND -- FEDERAL

ADDRESS (Home or street)

520 S. GRAND AVE., #700

(Check if address is changed)

LOS ANGELES

CA

90071

CITY ▲

STATE ▲

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

cary@politicallaw.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

COMMITTEE'S FAX NUMBER

2. DATE

08 / 05 / 2004

3. FEC IDENTIFICATION NUMBER

C C00331991

4. IS THIS STATEMENT

NEW (N)

OR

X

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

CARY DAVIDSON

Signature of Treasurer

Electronically Filed by CARY DAVIDSON

Date

08 / 05 / 2004

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 202-694-1100

**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
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- (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

THE DIRECTV GROUP, INC. \_\_\_\_\_

Mailing Address \_\_\_\_\_ 2250 E. IMPERIAL HWY. RE/R11/A108 \_\_\_\_\_

\_\_\_\_\_

EL SEGUNDO \_\_\_\_\_ CA \_\_\_\_\_ 90245 - \_\_\_\_\_

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship | **CONNECTED** \_\_\_\_\_

Type of Connected Organization:

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

Write or Type Committee Name

THE DIRECTV GROUP, INC. FUND - FEDERAL

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 CARY DAVIDSON

Mailing Address 520 S. GRAND AVE., #700

Title or Position CITY STATE ZIP CODE Telephone number
CST LOS ANGELES CA 90071 213 624 6200

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 CARY DAVIDSON

Mailing Address 520 S. GRAND AVE., #700

Title or Position CITY STATE ZIP CODE Telephone number
Treasurer LOS ANGELES CA 90071 213 624 6200

Full Name of Designated Agent

Mailing Address

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.

KINECTA FEDERAL CREDIT UNION

Mailing Address

P.O. BOX 10003

MANHATTAN BEACH

CA

90267

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 ]

NEWS AMERICA HOLDINGS INC-FOX POL ACTION COMMITTEE

Mailing Address

444 N. CAPITOL ST., SUITE 740

WASHINGTON

DC

20001

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship

AFFILIATED

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 \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

\_\_\_\_\_