RECEIVED
2012 MAY - 1 AM 11: 33
FEC MAIL CENTER

New York for Liberty				
C00516195				
Today's Date:				
4/27/2012				

Federal Election Commission 999 E Street, N.W. Washington, D.C. 20463

Re: Form 1, Statement of Organization—Unlimited Contributions

To Whom It May Concern:

This committee intends to make independent expenditures, and consistent with the U.S. Court of Appeals for the District of Columbia Circuit decision in SpeechNow v. FEC, it therefore intends to raise funds in unlimited amounts. This committee will not use those funds to make contributions, whether direct, in-kind, or via coordinated communications, to federal candidates or committees.

Respectfully submitted,

Stedends

Treasurer's Name:

Douglas J Edwards

Treasurer

STATEMENT OF

RECEIVED T

FORM 1		ORGANIZATION			FEC MAIL CENTER		
1. NAME OF COMMITTEE (in	n full)	(Check if name is changed)	Example:If ty over the lines		FE4M5		
New York	for Lib	erty					
ADDRESS (number a	nd street)	945 Fairway	Trails Ct			لىسىسىسا	
(Check if ac is changed)		Brighton		1 1	<u>/ </u>	8116	
			CITY	STA	<u> </u>	ZIP CODE	
COMMITTEE'S E-MA	AL ADDRES	SS (Please provide only one databankus1	`	o com		1	
(Check if is change							
COMMITTEE'S WEB	PAGE ADD	DRESS (URL)					
(Check if is change	address d)						
2. date Ö 4	l [™] ′ 2 7	°′ Ž0 1Ž					
3. FEC IDENTIFIC	CATION NU	IMBER C	00516195				
4. IS THIS STATE	MENT	NEW (N) OR	X AMI	ENDED (A)			
I certify that I have e	examined th	is Statement and to the be	est of my knowledg	e and belief it is tru	ie, correct an	nd complete.	
Type or Print Name	of Treasurer	Douglas J E	dwards				
Signature of Treasure	er(Djester	nds	Date	Ö4 [™]	′ 27 ° ′ 2012 `	
NOTE: Submission of		ous, or incomplete information				penalties of 2 U.S.C. §437g.	
Office Use			Federal E	er information contact: lection Commission 800-424-9530	:	FEC FORM 1 (Revised 02/2009)	

FEC Form 1 (Revised 02/2009)	Page 3
Write or Type Committee Name	
New York for Liberty	
6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leade	rship PAC Sponsor
None	
None	
Mailing Address	
CITY STATE	ZIP CODE
Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative	Leadership PAC Sponsor
Custodian of Records: Identify by name, address (phone number optional) and position of the person in p books and records.	ossession of committee
Full Name	
Mailing Address	
Title or Position CITY STATE	ZIP CODE
 Treasurer: List the name and address (phone number optional) of the treasurer of the committee; and the any designated agent (e.g., assistant treasurer). 	name and address of
Full Name of Treasurer	
Mailing Address	
	لــــا-لــــا
CITY STATE	ZIP CODE
Title or Position Telephone number	

FEC Form 1 (Re	evised 0.0 (0000)	Page 4
PEO POINT (No	6VISGU 02/2009)	raye •
Full Name of Designated Agent		
Mailing Address		
	CITY STATE	ZIP CODE
Title or Position		
	Telephone number	
Banks or Other Denos	sitories: List all banks or other depositories in which the committee deposit	ts funds, holds accounts, rents
safety deposit boxes or Name of Bank, Deposit	r maintains funds. tory, etc.	
safety deposit boxes or	r maintains funds. tory, etc.	
safety deposit boxes or Name of Bank, Deposit	r maintains funds. tory, etc.	
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Federal Election Comm ENVELOPE REPLACEMENT PAGE FOR The FEC added this page to the end of this filing	INCOMING DOCUMENTS
Hand Delivered	Date of Receipt
USPS First Class Mail	Postmarked
USPS Registered/Certified	Postmarked (R/C)
USPS Priority Mail	Postmarked 4/2-1/12
Delivery Confirmation™ or Signa	ature Confirmation™ Label
USPS Express Mail	Postmarked
Postmark Illegible	
No Postmark	•
Overnight Delivery Service (Specify):	Shipping Date
No	ext Business Day Delivery
Received from House Records & Registration	Date of Receipt Office
Received from Senate Public Records Office	Date of Receipt
Received from Electronic Filing Office	Date of Receipt
Other (Specify):	Date of Receipt or Postmarked
&L	5/1/12
PREPARER	DATE PREPARED

(3/2005)