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FEC FORM 1

STATEMENT OF ORGANIZATION

Office Use Only

1. NAME OF COMMITTEE (in full) ☐ (Check if name is changed) Example: If typing, type over the lines. 12FE4M5

CHANGE TO WIN

ADDRESS (number and street) ▼ ☐ (Check if address is changed)

1900 L STREET NW
SUITE 900

CITY ▲ WASHINGTON STATE ▲ DC ZIP CODE ▲ 20036-

COMMITTEE'S E-MAIL ADDRESS

CORMEKKI.WHITLEY@CHANGETOWIN.ORG

COMMITTEE'S WEB PAGE ADDRESS (URL)

CHANGETOWIN.ORG

COMMITTEE'S FAX NUMBER

202-721-0661

2. DATE MM / DD / YYYYY

3. FEC IDENTIFICATION NUMBER ▶ C70004510

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 Edgar O. Romney

Signature of Treasurer Edgar Romney Date 01 12 2007

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g.

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)

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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**

n/a

Mailing Address

CITY ▲ STATE ▲ ZIP CODE ▲

Relationship

Type of Connected Organization:

☐ Corporation ☐ Corporation w/o Capital Stock ☑ Labor Organization

☐ Membership Organization ☐ Trade Association ☐ Cooperative

Write or Type Committee Name

Change to Win

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: CORMEKKI WHITLEY

Mailing Address: 1900 L ST NW
SUITE 900
WASHINGTON DC 20036-

Title or Position ▼: ADMIN & FINANCE MNGR

CITY ▲ STATE ▲ ZIP CODE ▲

Telephone number: 202-721-0660

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: EDGAR ROMNEY

Mailing Address: 1900 L ST NW
Suite 900
Washington DC 20036-

Title or Position ▼: SECRETARY TREASURER

CITY ▲ STATE ▲ ZIP CODE ▲

Telephone number: -

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.

Amalgamated Bank

Mailing Address 1825 K Street NW

Washington DC 20009-

CITY ▲ STATE ▲ ZIP CODE ▲

Name of Bank, Depository, etc.

Mailing Address

CITY ▲ STATE ▲ ZIP CODE ▲

Federal Election Commission
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