FEC FORM 1

STATEMENT OF ORGANIZATION

FORM 1		See instructions)	_		Office use only
1. NAME OF COMMITTEE (in		ck if name anged)	Example: If typying, type over the lines	12FE4M5	Olice use only
ı , Verizon Çomn	nunication Inc Good C	Govt,Club,			
		_			
ADDRESS (number and	street)				
X (Check if addr	ress				
is changed)	Ewing			NJ	08618 -
		С	ITY▲	STATE	ZIP CODE 📥
COMMITTEE'S E-MA	IL ADDRESS w@verizon.com				
karen.e.andre					
COMMITTEE'S WEB	PAGE ADDRESS (URL)				
				11111	
COMMITTEE'S FAX N 609-406-7171	NUMBER				
2. DATE M 0 4	17 Y Y 20) 0 7 Y			
3. FEC IDENTIFICA	ATION NUMBER	С	C00186288		
4. IS THIS STATEM	MENT NEW (N)	OR	X AMENDED (A)		
I certify that I have exam	ined this Statement and to the	best of my knowle	edge and belief it is true, correct	and complete	
Type or Print Name of	Treasurer Joan	Simpson			
Type of Tillit Name of					
Signature of Treasurer	Electronically Filed by	Joan Simps	on	Date 0 4	17 Y 2007
NOTE: Submission of fa			ubject the person signing this SI		es of 2 U.S.C. S437g.
Office Use Only			For further information Federal Election Common Toll Free 800-424-9530 Local 2002 694 11100	ission	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 car information below.)	ndidate					
	Name of Candidate						
	Party Affiliation 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 (or subordinate) committee of the Repu	nocratic, ublican,etc.) Party.					
	(e) X This committee is a separate segregated fund						
	(f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated function committee.	d or party					
 6.	Name of Any Connected Organization or Affiliated Committee						
l	Verizon Communication Inc.	.					
	Mailing Address 1717 Arch Street 23S						
	1	.					
	Philadelphia PA 191	03 _ []					
	CITY STATE Z	P CODE					
	Relationship Connected Organization						
	Type of Connected Organization:						
	X Corporation Corporation w/o Capital Stock Labor Organization	1					
	Membership Organization Trade Association Cooperative						

Write or Type Committee Na			Page 3					
	ame							
Verizon Communic	cation Inc Good Govt Club							
	Custodian of Records: Identify by name, address, (phone number optional), and position of the person in cossession of Committee books and records.							
Full Name	aureen York							
Mailing Address	771 Parkway Ave							
	Ewing		08618					
Title or Position ▼	CITY A	STATE ▲	ZIP CODE A					
Custo	odian of Records	Telephone number	406 7130					
Full Name of Treasurer Mailing Address	an Simpson 1717 Arch Street 23S							
	Philadelphia	PA	19103					
Title or Position ♥	Philadelphia CITY A		19103 ZIP CODE &					
Title or Position ♥ Treas	CITY A							
Treas Full Name of Designated	CITY A	STATE ≜	ZIP CODE A					
Full Name of Designated	CITY A	STATE ≜	ZIP CODE A					
Full Name of Designated Agent Ka	urer aren Andrew	STATE ≜	ZIP CODE A					
Full Name of Designated Agent Ka	urer aren Andrew 771 Parkway Ave	STATE A Telephone number 215	ZIP CODE A					

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9.	Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rent safety deposit boxes or maintains funds.							
	Name of Bank, Depository, etc							
	Wacho	ovia Bank NA 						
	Mailing Address	P.O. Box 563966						
		Charlotte NC 28	8262					

STATE ∠

ZIP CODE △

CITY 🗷