04/22/2003 17 : 15

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

Friends of Bennie Thompson

ADDRESS (number and street)

P.O. Box 100

(Check if address is changed)

Bolton MS 39041 -

CITY ▲ STATE ▲ ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

BennieThompson@aol.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

BennieThompson.org

COMMITTEE'S FAX NUMBER

601-866-4200

2. DATE M M / D D / Y Y Y Y 04 09 1993

3. **FEC IDENTIFICATION NUMBER** C C00279851

4. IS THIS STATEMENT X 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 Reuben V. Anderson

Signature of Treasurer Electronically Filed by Reuben V. Anderson Date M M / D D / Y Y Y Y 04 11 2003

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 202-694-110

FEC FORM 1
(Revised 02/2003)