HERSHEY FOODS
CITIZENSHIP FUND
100 Crystal A Drive ★ P.O. Box 810 ★ Hershey, PA 17033-0810 ★ Phone: (717) 534-7547

FEDERAL ELECTION COMMISSION
APR 1 1 36 PM '96

CERTIFIED MAIL
RETURN RECEIPT REQUESTED

April 1, 1996

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

RE: Hershey Foods Corporation
Citizenship Fund No. C00200139

Gentlemen:

Enclosed is the FEC Form 1, Statement of Organization, which is amending the Treasurer of the Fund. Effective April 1, 1996, I will be the Treasurer.

If there are any questions, please feel free to contact me.

Sincerely yours,

HERSHEY FOODS CORPORATION
CITIZENSHIP FUND

Richard L. Uhrich
Treasurer

RLU/sb

Enclosure

STATEMENT OF ORGANIZATION

(See reverse side for instructions)

FEDERAL ELECTION COMMISSION
MAIL ROOM
APR 1 1 36 PM '96

1. (a) NAME OF COMMITTEE IN FULL ☐ (Check if name is changed)
Hershey Foods Corporation Citizenship Fund

(b) Number and Street Address ☐ (Check if address is changed)
100 Crystal A Drive

(c) City, State and ZIP Code
Hershey, PA 17033

2. DATE
April 1, 1996

3. FEC IDENTIFICATION NUMBER
C00200139

4. IS THIS STATEMENT AN AMENDMENT?
☒ YES ☐ NO

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	State/District

☐ (c) This committee supports/opposes only one candidate _____ (name of candidate) and is NOT an authorized committee.

☐ (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 a party committee.

Name of Any Connected Organization or Affiliated Committee	Mailing Address and ZIP Code	Relationship

Type of Connected Organization
☐ Corporation ☐ Corporation w/o Capital Stock ☐ Labor Organization ☐ Membership Organization ☐ Trade Association ☐ Cooperative

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	Mailing Address	Title or Position
Richard L. Uhrich	(same as above)	Treasurer

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	Mailing Address	Title or Position
Richard L. Uhrich	(same as above)	Treasurer
Mark C. Mooney	19 E. Chocolate Avenue Hershey, PA 17033	Assistant Treasurer

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.	Mailing Address and ZIP Code

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	SIGNATURE OF TREASURER	DATE
Richard L. Uhrich	[signature]	April 1, 1996

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.

For further information contact:
Federal Election Commission
Toll-free 800 424 9530
Local 202-376-3120

FEC FORM 1
(revised 4/87)

Federal Election Commission

ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

The Commission has added this page to the end of this filing to indicate how it was received.

☐	Hand Delivered	DATE OF RECEIPT
☐	First Class Mail	POSTMARKED
☑	Registered/Certified Mail	POSTMARKED 3-28-96
☐	No Postmark	
☐	Postmark Illegible	
☐	Received from the House Office of Records and Registration	DATE OF RECEIPT
☐	Received from the Senate Office of Public Records	DATE OF RECEIPT
☐	Other (Specify):	POSTMARKED and/or DATE OF RECEIPT

SMH — PREPARER

4-1-96 — DATE PREPARED

FEC FORM 70-2 (12/92)

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