Image# 29992850774

FEC FORM 1	STATEMENT OF ORGANIZATION

(See instructions)

Office use only

1. NAME OF COMMITTEE (in full)   [X] (Check if name is changed)   Example: If typyling, type over the lines   `12FE4M5`

AMERICAN FEDERATION OF MUSICIANS OF THE UNITED STATES AND CANADA - LEG-ISLATIVE ACTION FUND

ADDRESS (number and street)

[ ] (Check if address is changed)

1501 BROADWAY SUITE 600

PARAMOUNT BUILDING

NEW YORK   **NY**   **10036** –

CITY▲   STATE▲   ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address)

[ ] (Check if address is changed)   **mledgister@afm.org**

COMMITTEE'S WEB PAGE ADDRESS (URL)

[ ] (Check if address is changed)   **afm.org**

2. DATE   M M **1 2** / D D **1 8** / Y Y Y Y **2 0 0 6**

3. FEC IDENTIFICATION NUMBER   **C** **C00073627**

4. IS THIS STATEMENT   [ ] NEW (N)   **OR**   [X] 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   **Mr. SAM FOLIO**

Signature of Treasurer   Electronically Filed by   **Mr. SAM FOLIO**   Date   M M **0 9** / D D **2 9** / Y Y Y Y **2 0 0 9**

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 02/2009) |

5.   TYPE OF COMMITTEE (Check One)

Candidate Committee:

(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 [   ]

Party Committee:

(d) ☐   This committee is a [   ] (National, State (or subordinate) committee of the [   ] (Democratic, Republican,etc.) Party.

Political Action Committee (PAC):

(e) ☒   This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:

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

☐ Membership Organization   ☐ Trade Association   ☐ Cooperative

☐ In addition, this committee is a Lobbyist/Registrant PAC.

(f) ☐   This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)

☐ In addition, this committee is a Lobbyist/Registrant PAC.

☐ In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)

Joint Fundraising Representative:

(g) ☐   This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.

(h) ☐   This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.

Committees Participating in Joint Fundraiser

1. [   ]   FEC ID number   C [   ]

2. [   ]   FEC ID number   C [   ]

3. [   ]   FEC ID number   C [   ]

4. [   ]   FEC ID number   C [   ]

Write or Type Committee Name

AMERICAN FEDERATION OF MUSICIANS OF THE UNITED STATES AND CANADA - LEGISLATIVE ACTION FUND

6. **Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor**

AMERICAN FEDERATION OF MUSICIANS OF THE UNITED STATES AND CANADA

Mailing Address   **1501 BROAD WAY**

STE 600

NEW YORK   **NY**   **10036** –

CITY▲   STATE▲   ZIP CODE ▲

Relationship:

[X] Connected Organization   [ ] Affiliated Committee   [ ] Joint Fundraising Representative   [ ] Leadership PAC Sponsor

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   **MICHELLE LEDGISTER**

Mailing Address   **1501 BROADWAY**

STE 600

NEW YORK   **NY**   **10036** _

Title or Position ▼   CITY ▲   STATE▲   ZIP CODE ▲

STAFF ACCOUNTANT   Telephone number   **212** – **869** – **1330**

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   **Mr. SAM FOLIO**

Mailing Address   **1501 BROADWAY**

SUITE 600

NEW YORK   **NY**   **10036** –

Title or Position ▼   CITY ▲   STATE▲   ZIP CODE ▲

SECRETARY-TREASURER   Telephone number   **212** _ **869** _ **1330**

Full Name of
Designated
Agent   **LORRAINE BARTLETT**

Mailing Address   **1501 BROADWAY**

                                   SUITE 600

                                   NEW YORK   **NY**   **10036** – _____

Title or Position ▼   CITY ▲   STATE ▲   ZIP CODE ▲

          CONTROLLER   Telephone number   **212** – **869** – **1330**

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.

              JP MORGAN CHASE BANK

Mailing Address   **1166 AVENUE OF THE AMERICAS**

                         FL 15

                         NEW YORK   **NY**   **10036** –

                              CITY ▲   STATE ▲   ZIP CODE ▲

Name of Bank, Depository, etc.

Mailing Address

                              CITY ▲   STATE ▲   ZIP CODE ▲

A. Form/Schedule : **F1A**

Transaction ID :

The American Federation of Musicians of the United States and Canada is a Labor Organization. The system was not accepting this designation when selected.