FEC FORM 1

STATEMENT OF ORGANIZATION

SECRETARY OF THE SENATE
06 MAR 10 PM 1:58
Office Use Only

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

STUDENTS MOTHERS And Concerned Citizens INC PAC

SMACC PAC

ADDRESS (number and street) 825 ROANOKE

✓ (Check if address is changed)

Memphis, TN 38106-

CITY ▲ STATE ▲ ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS DANCY195@MSN.COM (TEMP.)

COMMITTEE'S WEB PAGE ADDRESS (URL) NEW (URL) UNDER Construction

COMMITTEE'S FAX NUMBER 901-465-8168

2. DATE 02 25 2006

3. FEC IDENTIFICATION NUMBER ▶ C

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 Griselda B. Posey

Signature of Treasurer Griselda B Posey Date 02 25 2006

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**

Students Mothers And Concerned Citizens

SMALL

Mailing Address 4988 Eighth Road

Memphis TN 38109-7004

CITY ▲ STATE ▲ ZIP CODE ▲

Relationship Connected

Type of Connected Organization:

✓ Corporation Corporation w/o Capital Stock Labor Organization

Membership Organization Trade Association Cooperative

26039912806

Write or Type Committee Name
Students, Mothers And Concerned Citizens INC-PAC

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: GRISELDA B. POSEY

Mailing Address: 825 ROANOKE

MEMPHIS TN 38106-

Title or Position ▼ | CITY ▲ | STATE ▲ | ZIP CODE ▲

TREASURER

Telephone number 901-275-0583

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: BEVERLY JONES FARMER

Mailing Address: 21 WEST BYSCANE

MEMPHIS TN 38109-

Title or Position ▼ | CITY ▲ | STATE ▲ | ZIP CODE ▲

Assistant Treasurer

Telephone number 901-357-8388

Full Name of Designated Agent: Gloria Carter-Bise

Mailing Address: 1027 ALICE

MEMPHIS TN 38106-

Title or Position ▼ | CITY ▲ | STATE ▲ | ZIP CODE ▲

Register Asst. Treasurer

Telephone number 901-481-9936

26039912891

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.

SUN TRUST

Mailing Address

MR. FRANKLIN
4500 KNIGHT ARNOLD
MEMPHIS TN 38118-

CITY ▲ STATE ▲ ZIP CODE ▲

Name of Bank, Depository, etc.

Mailing Address

CITY ▲ STATE ▲ ZIP CODE ▲

26039912382

Federal Election Commission

ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

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

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