

FEC
FORM 1

STATEMENT OF
ORGANIZATION

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Office Use Only

1. NAME OF
COMMITTEE (in full)

(Check if name
is changed)

Example: If typing, type
over the lines.

12FE4M5

STUDENTS FOR A NEW AMERICAN POLITICS
POLITICAL ACTION COMMITTEE

ADDRESS (number and street)

PO BOX 206886

(Check if address
is changed)

NEW HAVEN CT 06520-6886

CITY

STATE

ZIP CODE

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

✓ (Check if address
is changed)

ANDREW.MAYERSOHN@YALE.EDU

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address
is changed)

WWW.SNAPPAC.ORG

2. DATE

03 ' 07 ' 2011

3. FEC IDENTIFICATION NUMBER

C00412122

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

ANDREW MAYERSOHN

Signature of Treasurer

ALM

Date

03 ' 07 ' 2011

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)

Candidate Committee:

(b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)

A horizontal number line with 20 tick marks, labeled from 0 to 19. The line is used for plotting data points.

District

(Democratic,
Republican, etc.) Party.

FEC ID number C

Write or Type Committee Name

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

BULLDOG DEMOCRATS PAC

Mailing Address

74 HIGH STREET

NEW HAVEN

CITY

CT

STATE

06511-

ZIP CODE

Relationship:

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

ANDREW MAYERSOHN

Mailing Address

204 PARK STREET #2

NEW HAVEN

CITY

CT

STATE

06511-

ZIP CODE

Title or Position

TREASURER

Telephone number

781-801-2019

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

ANDREW MAYERSOHN

Mailing Address

204 PARK ST #2

NEW HAVEN

CITY

CT

STATE

06511-

ZIP CODE

Title or Position

TREASURER

Telephone number

781-801-2019

11030582824

Full Name of
Designated
Agent

Mailing Address

Title or Position

Telephone number

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.

BANK OF AMERICA

Mailing Address

1157 CHURCH STREET

FIRST FLOOR

NEW HAVEN

CT

06510

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

CITIZEN'S BANK

Mailing Address

209 CHURCH STREET

NEW HAVEN

CT

06510

CITY

STATE

ZIP CODE

11030582825

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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☐ Other (Specify): Date of Receipt or Postmarked


PREPARER

3/15/11
DATE PREPARED