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FEC
FORM 1

STATEMENT OF
ORGANIZATION

Changes Only

1. NAME OF
COMMITTEE (in full)

(Check if name
is changed)

Example: If typing, type
over the lines.

127E4M5

THE LIFE OF THE PARTY

ADDRESS (number and street)

404 OAKLAND AVE

(Check if address
is changed)

STATEN ISLAND

NY

10310

CITY

STATE

ZIP CODE

COMMITTEE'S E-MAIL ADDRESS

NONE

COMMITTEE'S WEB PAGE ADDRESS (URL)

NONE

COMMITTEE'S FAX NUMBER

NONE

2. DATE 08 31 2004

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 PHILIP BLITZ

Signature of Treasurer Philip Blitz

Date 08 31 2004

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.

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|-----------------|--|--|--|--|
| Office Use Only | | | | |
|-----------------|--|--|--|--|

For further information contact
Federal Election Commission
Toll Free 800-426-9830
Local 202-694-1100

FEC FORM 1
(Revised 1/22/03)

REMARKS PAGE

Write or Type Committee Name

THE LIFE OF THE PARTY

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 PHILIP BLITE

Mailing Address 404 OAKLAND AVE

STATEN ISLAND NY 10310

Title or Position CITY STATE ZIP CODE

TREASURER Telephone number 718-273-1935

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 Philip Blite

Mailing Address 404 OAKLAND AVE

STATEN ISLAND NY 10310

Title or Position CITY STATE ZIP CODE

TREASURER Telephone number 718-273-1935

Full Name of Designated Agent NONE

Mailing Address

Title or Position CITY STATE ZIP CODE

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.

NORTHFIELD SAVINGS BANK

Mailing Address

711 CASTLETON AVENUE

STATEN ISLAND

NY

10310

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Bank, Depository, etc.

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

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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| <input type="checkbox"/> USPS Priority Mail | Delivery Confirmation™ Label <input type="checkbox"/> |
| <input type="checkbox"/> USPS Express Mail | Postmarked |
| <input type="checkbox"/> Postmark Illegible | |
| <input type="checkbox"/> No Postmark | |
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| <input type="checkbox"/> Other (Specify): | Date of Receipt or Postmarked |
| <i>See</i> PREPARER (5/2004) | 9-7-04 DATE PREPARED |