

23038040841

Council of School Supervisors & Administrators, New York City

New York State Federation of School Administrators
Local 1 American Federation of School Administrators, AFL-CIO



RECEIVED
FED MAIL
OPERATIONS CENTER
2003 APR 14 P 02:31

April 3, 2003

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


Attention: Brandy Phillips, Campaign Finance Analyst
Reports Analyst Division

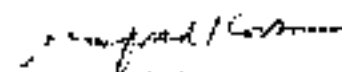
- President
Bill S. Levy
- Executive Vice-President
Ernest A. Lugin
- First Vice-President
Peter J. McNally
- Secretary
Mark Brodsky
- Treasurer
Steven Rosen
- Vice-Presidents
Rhonda Baum
Alexander Castillo
Judith Grabin
Lena Medley
Richard Oppenheimer
- Executive Director
Anita Gomez-Palacio

Dear Ms. Phillips,

As per your instruction, we are enclosing an **Amended Statement of Organization for identification number C00355818**. Kindly correct your records so that our filer id number reflects our correct name.

If there are any questions, please contact us at (718)852-3000, ext 285.

Thank you

 Ms. Pamela Pittman
 Disclosure Analyst


 Manfred Korman
 Treasurer

16 Court Street
Brooklyn, NY 11241-1003

718/ 852-3000 Tel
718/ 403-0276 Fax

www.csa-nyc.org

2003 APR 14 P 02:31

RECEIVED
FEC MAIL
OPERATIONS CENTER
2003 APR 14 P 12:37

FEC
FORM 1

STATEMENT OF
ORGANIZATION

Office Use Only

1. NAME OF COMMITTEE (if full) (Check if name is changed) Example: If typing, type over the lines. 12FR4125

COUNCIL OF SCHOOL SUPERVISORS AND ADMINISTRATORS LOCAL AFSAAFCIO Political Action Committee

ADDRESS (number and street) 116 COURT STREET NY NEW YORK

(Check if address is changed)

BROOKLYN NY 11241-1003

CITY ▲

STATE ▲

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

pamelaa@csa-nyc.org

COMMITTEE'S WEB PAGE ADDRESS (URL)

COMMITTEE'S FAX NUMBER

918 403 0278

2. DATE 04 03 2003

3. FEC IDENTIFICATION NUMBER ▶ C 00355818

4. IS THIS STATEMENT NEW (N) OR AMENDED (A)

I certify that I have completed this Statement and to the best of my knowledge and belief it is true, correct and complete

Type or Print Name of Treasurer MANFRED KORYAKA

Signature of Treasurer *[Handwritten Signature]*

Date 04 03 2003

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 15 DAYS

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

For further information contact:
Federal Election Commission
Toll Free 800-424-9630
Local 202-556-1100

FEC FORM 1
(Revised 02/2003)

2003 APR 14 P 12:37

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 sub(ordinate) 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.

F. Name of Any Connected Organization or Affiliated Committee

Council of School Supervisors and Administrators, Local 1, ASEA AFL-CIO

Mailing Address 116 COURT STREET 4th FLOOR

BROOKLYN NY 11240-1003

CITY STATE ZIP CODE

Relationship Connected

Type of Connected Organization:

- Corporation Corporation w/o Capital Stock Labor Organization
- Membership Organization Trade Association Cooperative

Write or type Committee name

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

CITY

STATE

ZIP CODE

Telephone number

Telephone number

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: MANFRED KORMAN

Mailing Address: 116 COURT STREET 4TH FLOOR

Title or Position

CITY

STATE

ZIP CODE

Director-Treasurer

Telephone number 718 852 3000

Full Name of Designated Agent: ERNEST LOGAN

Mailing Address: 116 COURT STREET 4TH FLOOR

Title or Position

CITY

STATE

ZIP CODE

Assistant Treasurer

Telephone number 718 852 3000

3 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.

HSBC, Montague Street Office

Mailing Address

300 MONTAGUE STREET

BROOKLYN

BROOKLYN NY 11201

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

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input checked="" type="checkbox"/> First Class Mail	POSTMARKED 4/8/03
<input type="checkbox"/> Registered/Certified Mail	POSTMARKED (R/C)
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House office of Records and Registration	Date of Receipt
<input type="checkbox"/> Received from the Senate Office of Public Records	Date of Receipt
<input type="checkbox"/> Other (Specify):	Postmarked and/or Date of Receipt
<input type="checkbox"/> Electronic Filing	
 PREPARER	4/14/03 DATE PREPARED