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2009 AUG -4 AM 11: 19

Richard W. Goldsmith  
4 Adrienne Drive  
Old Bethpage, NY 11804

August 3, 2009

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Dear Sir or Madam:

Please expedite the filing of the enclosed FEC Form 1.

Form 2 was sent by the candidate, Stuart Brody, via overnight mail on August 3, 2009.

Thank you.

Sincerely,

  
Richard Goldsmith

29030141152

**FEC  
FORM 1**

**STATEMENT OF  
ORGANIZATION**

(See instructions)

Office use only

1. NAME OF COMMITTEE (in full)

(Check if name is changed)

Example: If typing, type over the lines

12FE4M5

FREINDS OF STU BRODY

ADDRESS (number and street)

P.O. BOX 127

(Check if address is changed)

ESSEX

NY

12836

CITY

STATE

ZIP CODE

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

(Check if address is changed)

stu.brody1@gmail.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address is changed)

2. DATE

07 / 28 / 2009

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

Richard Goldsmith

Signature of Treasurer

Date

08 / 02 / 2009

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				
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For further information contact:  
Federal Election Commission  
Toll Free 800-424-9690  
Local 202-694-1100

**FEC FORM 1**  
(Revised 02/2009)

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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 STUART BRODY

Candidate Party Affiliation DEM Office Sought:  House  Senate  President State NY District 23

(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

(f)  In addition, this committee is a Lobbyist/Registrant PAC.

(g)  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:

(i)  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.

(ii)  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 \_\_\_\_\_

29030141154

Write or Type Committee Name

FRIENDS OF STU BRODY

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

NONE

Mailing Address

[Empty address lines]

CITY A

STATE A

ZIP CODE A

Relationship:

Connected Organization  Affiliated Committee  Joint Fundraising Representative  Leadership PAC Sponsor

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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

RICHARD GOLDSMITH

Mailing Address

4 ADRIENNE DRIVE

OLD BETHPAGE NY 11804-1204

Title or Position

CITY A

STATE A

ZIP CODE A

TREASURER

Telephone number 516-993-8600

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

RICHARD GOLDSMITH

Mailing Address

4 ADRIENNE DRIVE

OLD BETHPAGE NY 11804-1204

Title or Position

CITY A

STATE A

ZIP CODE A

TREASURER

Telephone number 516-993-8600

Full Name of Designated Agent

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.

N & T BANK

Mailing Address

327 GREAT OAKS BLVD

ALBANY

NY

12203

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

CITY

STATE

ZIP CODE

29030141155

**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.

Hand Delivered Date of Receipt

USPS First Class Mail Postmarked

USPS Registered/Certified Postmarked (R/C)

USPS Priority Mail Postmarked  
 Delivery Confirmation™ or Signature Confirmation™ Label

USPS Express Mail Postmarked  
8/3/09

Postmark Illegible

No Postmark

Overnight Delivery Service (Specify): Shipping Date  
 Next Business Day Delivery

Received from House Records & Registration Office Date of Receipt

Received from Senate Public Records Office Date of Receipt

Received from Electronic Filing Office Date of Receipt

Other (Specify): Date of Receipt or Postmarked

  
 PREPARER

  
 DATE PREPARED

29030141157