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**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

GEORGIA FREEDOM PARTY

ADDRESS (number and street)

2754 PLANTATION DRIVE

(Check if address  
is changed)

JONESBORO

GA

30236

CITY ▲

STATE ▲

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

COMMITTEE'S WEB PAGE ADDRESS (URL)

HTTP://COMMUNITIES.MSN.COM/GeorgiaFreedomParty

2. DATE

05 21 2002

3. FEC IDENTIFICATION NUMBER ▶

C 00364489

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

PHILLIP G. ANDERSON

Signature of Treasurer

*Phillip G. Anderson*

Date

05 21 2002

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 202-694-1180

**FEC FORM 1**  
(Revised 1/01)

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

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_ NONE \_\_\_\_\_

Mailing Address

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship

\_\_\_\_\_

Type of Connected Organization:

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> Corporation             | <input type="checkbox"/> Corporation with Capital Stock | <input type="checkbox"/> Labor Organization |
| <input type="checkbox"/> Membership Organization | <input type="checkbox"/> Trade Association              | <input type="checkbox"/> Cooperative        |

Write or Type Committee Name

GEORGIA FREEDOM 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 PHILLIP G ANDERSON

Mailing Address 151 GARNABY ST

WARNER ROBINS GA 31088

Title or Position SECRETARY CITY STATE ZIP CODE

Telephone number 478-1953-0302

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 PHILLIP G ANDERSON

Mailing Address 151 GARNABY ST

WARNER ROBINS GA 31088

Title or Position ACTING TREASURER CITY STATE ZIP CODE

Telephone number 478-1953-0302

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.

SUNTRUST BANK SAVANNAH

Mailing Address

P.O. BOX 622227

ORLANDO

FL

328621-2227

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

BANK OF AMERICA NA

Mailing Address

P.O. BOX 25118

TAMPA

FL

33622-15118

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.

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<i>See</i> PREPARER	6-4-07 DATE PREPARED