

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

FUTURE DEMOCRATS OF AMERICA

ADDRESS (number and street)

15 COUNTRY LANE

(Check if address is changed)

DENVILLE

WJ

27534-3028

CITY ▲

STATE ▲

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

webmaster@futuredemocrats.sk.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

www.futuredemocrats.sk.com

COMMITTEE'S FAX NUMBER

- -

2. DATE

12 / 11 / 2007

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

Chirag Shah

Signature of Treasurer

Chirag Shah

Date

12 / 11 / 2007

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: 800-424-9530
Local: 202-694-1100

FEC FORM 1
(Revised 02/2003)

27039573206

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

Mailing Address _____

_____ - _____

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship _____

Type of Connected Organization:

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

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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 KISHABHADRA DAS

Mailing Address 19 FOX RUN
DENVILLE NJ 07834-3028

Title or Position SECRETARY CITY DENVILLE STATE NJ ZIP CODE 07834-3028

Telephone number 973-983-1875

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 KHINAG SHAH

Mailing Address 19 NORTHELD ROAD
PARSLIPANY NJ 07054-

Title or Position TREASURER CITY PARSLIPANY STATE NJ ZIP CODE 07054-

Telephone number 973-884-4005

Full Name of Designated Agent KORCY WINKLER

Mailing Address 115 COUNTRY LN
DENVILLE NJ 07834-3028

Title or Position PRESIDENT CITY DENVILLE STATE NJ ZIP CODE 07834-3028

Telephone number 973-586-3430

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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.

VALLEY NATIONAL BANK

Mailing Address

51 GIBRALTER RD

MORRIS PLAINS NJ 07950

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Bank, Depository, etc.

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

27039573209

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

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 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

J. H.
 PREPARER

12/17/07
 DATE PREPARED

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