

**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

Excelsior Committee

ADDRESS (number and street)

461 Park Avenue South☒(Check if address
is changed)**Fl 9****New York****NY****10016**

CITY ▲

STATE ▲

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

agiard@spitzer2010.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

http://www.excelsiorcommittee.com/

COMMITTEE'S FAX NUMBER

2129792607

2. DATE

05**02****2007**

3. FEC IDENTIFICATION NUMBER

C C00433037

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

Jerry Barbanel

Signature of Treasurer

Electronically Filed by **Jerry Barbanel**

Date

05**02****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
OnlyFor further information contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-694-1100**FEC FORM 1**
(Revised 02/2003)

Write or Type Committee Name

Excelsior Committee

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 **Allyson Giard**

Mailing Address **461 Park Avenue South**

FI 9

New York **NY** **10016** -

Title or Position ▼ **CITY ▲** **STATE ▲** **ZIP CODE ▲**

Assistant Treasurer Telephone number **212** - **286** - **2010**

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 **Jerry Barbanel**

Mailing Address **461 Park Avenue South**

FI 9

New York **NY** **10016** -

Title or Position ▼ **CITY ▲** **STATE ▲** **ZIP CODE ▲**

Treasurer Telephone number **212** - **286** - **2010**

Full Name of Designated Agent **Allyson Giard**

Mailing Address **461 Park Avenue South**

FI 9

New York **NY** **10016** -

Title or Position ▼ **CITY ▲** **STATE ▲** **ZIP CODE ▲**

Assistant Treasurer Telephone number **212** - **286** - **2010**

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.

North Fork Bank

Mailing Address

424 Madison Avenue

Fl 2

New York

NY

10017

CITY ▲

STATE ▲

ZIP CODE ▲