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FEC FORM 1

STATEMENT OF ORGANIZATION

RECEIVED
FEDERAL
OFFICE MAIL CENTER
2003 AUG 26 A 9:12
Office Use Only

1. NAME OF COMMITTEE (in full) (Check if name is changed) Example: If typing, type over the lines. 12FE4M5

Clean's Man For President '2004

ADDRESS (number and street) 646 St. Nicholas Avenue Apt. 1

(Check if address is changed)

New York NY 10031-1

CITY ▲ STATE ▲ ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

COMMITTEE'S WEB PAGE ADDRESS (URL)

COMMITTEE'S FAX NUMBER

-- -- --

2. DATE 08 20 2003

3. FEC IDENTIFICATION NUMBER ▶ C

4. IS THIS STATEMENT N 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 Rosalie Long

Signature of Treasurer Date

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 202-694-1100

FEC FORM 1
(Revised 02/2003)

FE1AN04A.PDF

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: Albertha Brinson-Butts

Candidate's Party Affiliation: Republican Office Sought: House Senate ✓ President State: NY 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

Adam Clayton Powell Jr. Democratic Committee

Mailing Address: C.P.O.
330 Ninth Avenue
New York NY 10001-9999

CITY ▲ STATE ▲ ZIP CODE ▲

Relationship: Affiliated Committee

Type of Connected Organization:

Corporation | Corporation w/o Capital Stock | Labor Organization

Membership Organization | Trade Association | Cooperative

Write or Type Committee Name

Cleon's Mom For President '2004

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: The Rev. Dr. Calvin Otis Butts, 3rd

Mailing Address: 846 St. Nicholas Avenue

New York | NY | 10031

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

Campaign Manager | Telephone number: 212-926-3544

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: Rosalie Long

Mailing Address: 773 Concourse Village East #20C

Bronx | NY | 10451

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

Treasurer | Telephone number: 718-293-0574

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.

Emigrant Savings Bank

Mailing Address

812 Lexington Avenue

New York NY 10021-

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.

☐	Hand Delivered	Date of Receipt
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PREPARER

8-26-03
DATE PREPARED

(6/2002)