

# THE TEMPERANCE LANCE-COUNCIL WHITE HOUSE 2000

ANTI-HYPOCRISY PARTY

RECEIVED  
FEDERAL ELECTION  
COMMISSION MAIL ROOM

1752 EAST AVENUE "J"

(310) 712-5600 3 | 56 PM '99

STE. #175

LANCASTER, CA 93535

April 27, 1999

**TO: THE FEDERAL ELECTION  
COMMITTEE**

1. We need to receive our *FEC ID#*.
2. We are under the assumption that ANDY DODSON or GEORGE SMARAGDIS has been assigned to our campaign?

If neither has been, please advise who has been.

*Sincerely,*

**M. UMOREN-CLARK**

THE ANTI-HYPOCRISY COMMITTEE

Please see STATEMENT OF CANDIDACY form for reference,  
which was filed in early April.

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# STATEMENT OF ORGANIZATION

(See reverse side for instructions)

ORIGINAL

RECEIVED  
GENERAL ELECTIONS  
COMMISSION MAIL ROOM  
APR 8 1 56 PM '99

1. (a) NAME OF COMMITTEE IN FULL <input type="checkbox"/> (Check if name is changed) <span style="font-size: 1.5em;">The Anti-Hypocrisy Committee</span>	2. DATE <span style="font-size: 1.5em;">APRIL 1, 1999</span>
(b) Number and Street Address <input type="checkbox"/> (Check if address is changed) <span style="font-size: 1.2em;">1752 E. Ave. "J"</span>	3. FEC Identification Number _____
(c) City, State and ZIP Code <span style="font-size: 1.2em;">Lancaster, CA 93535</span>	4. Is This Report An Amendment? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO

**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<br><span style="font-size: 1.2em;">Temperance Watch Council</span> | Candidate Party Affiliation<br><span style="font-size: 1.2em;">Anti-Hypocrisy</span> | Office Sought<br><span style="font-size: 1.2em;">U.S. Presidency</span> | State/District<br><span style="font-size: 1.2em;">CA/*5</span> |
|--------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------|-------------------------------------------------------------------------|----------------------------------------------------------------|
- (c) This committee supports/opposes only one candidate \* (Registered Democrat) and is NOT an authorized committee.  
 (name of candidate) \_\_\_\_\_
  - (d) This committee is a \_\_\_\_\_ committee of the \_\_\_\_\_ Party.  
 (National, State or subordinate) \_\_\_\_\_ (Democratic, Republican, etc.) \_\_\_\_\_
  - (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 a party committee.

6. Name of Any Connected Organization or Affiliated Committee	Mailing Address and ZIP Code	Relationship
<span style="font-size: 1.5em;">NONE AT THIS TIME</span> 4/1/99	<span style="font-size: 1.5em;">N/A</span>	<span style="font-size: 1.5em;">N/A</span>

Type of Connected Organization  
 Corporation  Corporation w/o Capital Stock  Labor Organization  Membership Organization  Trade Association  Cooperative

**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	Mailing Address	Title or Position
<span style="font-size: 1.5em;">M.</span>		

**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	Mailing Address	Title or Position
<span style="font-size: 1.2em;">MARGARET UMOREN-CLARK</span>	<span style="font-size: 1.2em;">518 CHASE COMMON DR, NORCROSS, GA 30071</span>	<span style="font-size: 1.2em;">TREASURER</span>

**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.	Mailing Address and ZIP Code
<span style="font-size: 1.5em;">NONE AT THIS TIME (4/1/99)</span>	

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 <span style="font-size: 1.2em;">Margaret Umoren-Clark</span>	SIGNATURE OF TREASURER <span style="font-size: 1.2em;">(Signature)</span>	DATE <span style="font-size: 1.2em;">4/10/99</span>
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NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. 5437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

For further information contact:  
Federal Election Commission  
Toll-free 800-424-9530  
Local 202-219-3420

FESAN121

FEC FORM 1

(revised 4/97)

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.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input checked="" type="checkbox"/> First Class Mail	POSTMARKED 4/28/99
<input type="checkbox"/> Registered/Certified Mail	POSTMARKED
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House office of Records and Registration	Date of Receipt
<input type="checkbox"/> Received from the Senate Office of Public Records	Date of Receipt
<input type="checkbox"/> Other ( Specify):	Postmarked and/or Date of Receipt
<input type="checkbox"/> Electronic Filing	

  
PREPARER

5/3/99  
DATE PREPARED