## 395044

**FEC** FORM 1

Only

FE3AN042.PDI

## STATEMENT OF **ORGANIZATION**

RECEIVED FEC MAIL CENTER

2008 JAN 30 AM 8: 57

Office Use Only NAME OF actional Example: If typing, type (Check if name 12FE4M5 COMMITTEE (in full) is changed) over the lines. IODOM FOR INDEPENDENCE ADDRESS (number and street) (Check if address is changed) CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS COMMITTEE'S WEB PAGE ADDRESS (URL) COMMITTEE'S FAX NUMBER 14041-14741-112401 01 23 2008 ·;: . DATE FEC IDENTIFICATION NUMBER ▶ 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. Alexandra Odom Type or Print Name of Treasurer Signature of Treasurer 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 For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 02/2003) Toll Free 800-424-9530

Local 202-694-1100

FE3AN042.PDF

FEC Form 1 (Revised	02/2003)	Page 2
5. TYPE OF COMMITTEE (C	Check One)	
(a) X This committee	ee is a principal campaign committee. (Complete the candidate information belo	ow.)
(b) This committee	ee is an authorized committee, and is NOT a principal campaign committee. (C elow.)	omplete the candidate
Name of Candidate JER	RY, A ODOM	_;
Candidate Party Affiliation	Office Sought: House Senate President	State
(c) This committee	ee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate		11111
(d) j	ee is a sometime of the (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.
(e) This committee	ee is a separate segregated fund.	
(f) This committee committee.	ee supports/opposes more than one Federal candidate, and is NOT a separate	segregated fund or party
Name of Any Connected C	Organization or Affiliated Committee	
Mailing Address		
Maining Address		<del></del>
		<del></del>
	CITY ▲ STATE ▲	ZIP CODE ▲
Relationship	<u></u>	1 1 1 1 1 1 1
Total on one		
Type of Connected Organiza	ation:	
<u> </u>	ation:	anization
Type of Connected Organiza	Corporation w/o Capital Stock	

CITY A

STATE A

Telephone number

ZIP CODE A

404-474-11240

Custodian of Records: Identify by name, address (phone number - optional) and position of the person in possession of committee

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FEC Form 1 (Revised 02/2003)

ALEXANDRA ODOM

Write or Type Committee Name

books and records.

Title or Position ▼

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CHAIRMAN

Full Name

 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.

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_		CITY A									STATE A					ZIP CODE ▲												
Name of Bank, D	Depository,	etc.																										
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Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING I The FEC added this page to the end of this filing to indicate h	
Hand Delivered	Date of Receipt
USPS First Class Mail	Postmarked
USPS Registered/Certified	Postmarked (R/C)
USPS Priority Mail	Postmarked 1/23/08
Delivery Confirmation <sup>™</sup> or Signature Confirm	ation™ Label
USPS Express Mail	Postmarked
Postmark Illegible	
No Postmark	
Overnight Delivery Service (Specify):	Shipping Date
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):	ceipt or Postmarked
En	1/30/08
PREPARER (3/2005)	DATE PREPARED
(5,200)	