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FEC  
FORM 1

STATEMENT OF  
ORGANIZATION

(1996 form only)

1. NAME OF COMMITTEE (in full) (Check if name is changed) Example: If typing, type over the line. 125E-4445

People for Carl Andrews Committee

ADDRESS (number and street)

171 Victoria Place East

(Check if address is changed)

Atlanta

GA

303024

CITY

STATE

ZIP CODE

COMMITTEE'S E-MAIL ADDRESS

COMMITTEE'S WEB PAGE ADDRESS (URL)

COMMITTEE'S FAX NUMBER

(202) 692-7932

2. DATE

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

Stephen R. Bokser

Signature of Treasurer

Date 11/18/03

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. 5487g.

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

Office Use Only					
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For further information contact  
Federal Election Commission  
725 First Street, N.W.  
Washington, D.C. 20542-1199

FEC FORM 1  
(Revised 02/2003)

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: Emmanuel, Carl Andrews

Candidate Party Affiliation: DEM 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 with Capital Stock  Labor Organization
- Membership Organization  Trade Association  Cooperative

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 Stephen R. BakserMailing Address 47 Victoria Place EastFt. Lee NS 07024Title or Position Treasurer CITY  STATE  ZIP CODE Telephone number 201-381-1111

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 Stephen R. BakserMailing Address 47 Victoria Place EastFt. Lee NS 07024Title or Position Treasurer CITY  STATE  ZIP CODE Telephone number 201-381-1111Full Name of Designated Agent Carmen L. WilliamsMailing Address 426 St. Nicholas AveApartment 5BNew York NY 10027Title or Position Compliance officer CITY  STATE  ZIP CODE Telephone number 212-694-2484

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.

J.P. Morgan Chase

Mailing Address

391 Utica Avenue

Brooklyn NY 11203

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.

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