

FEC FORM 1

STATEMENT OF ORGANIZATION

(See instructions)

SECRETARY OF THE SENATE
06 JUL 18 PM 12:32

Office use only

1. NAME OF COMMITTEE (In full)

(Check if name is changed)

Example: If typing, type over the lines

12FE4M5

Democratic Veterans for a Secure America

ADDRESS (number and street)

P.O. Box 1174

(Check if address is changed)

Springfield

VA

22151

CITY

STATE

ZIP CODE

COMMITTEE'S E-MAIL ADDRESS

None

COMMITTEE'S WEB PAGE ADDRESS (URL)

None

COMMITTEE'S FAX NUMBER

2. DATE

MM / DD / YYYY
07 / 01 / 2006

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

I. Samuel A. Eskanazi

Signature of Treasurer

S. A. Eskanazi

Date

MM / DD / YYYY
07 / 01 / 2006

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

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)

RECEIVED
FEDERAL ELECTION
COMMISSION
PUBLIC ENCLOSURE

2006 JUL 18 5:13

26039140502

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 _____

Candidate Party Affiliation 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

CARNEY FOR CONGRESS _____

Mailing Address _____ PO BOX 38 _____

DIMOCK PA 18816 _____

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship Joint Fundraising Participant _____

Type of Connected Organization:

- Corporation Corporation w/o Capital Stock Labor Organization
- Membership Organization Trade Association Cooperative

20030140503

Write or Type Committee Name

Democratic Veterans for a Secure America

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 Samuel ^{I.} Eskenazi

Mailing Address 750 Columbus Avenue #8L

New York NY 10025 -

Title or Position ▼ CITY ▲ STATE ▲ ZIP CODE ▲

Treasurer Telephone number 212 - 663 - 3073

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 Samuel ^{I.} Eskenazi

Mailing Address 750 Columbus Avenue #8L

New York NY 10025 -

Title or Position ▼ CITY ▲ STATE ▲ ZIP CODE ▲

Treasurer Telephone number 212 - 663 - 3073

Full Name of Designated Agent Whitney W. Burns

Mailing Address P.O. Box 1174

Springfield VA 22161 -

Title or Position ▼ CITY ▲ STATE ▲ ZIP CODE ▲

Assistant Treasurer Telephone number _____

26039140504

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.

Bank of America

Mailing Address

730 16th Street NW

Washington

DC

20006

CITY ▲

STATE ▲

ZIP CODE ▲

26039140505

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.

[ADDITIONAL]

Name of Bank, Depository, etc.

Mailing Address _____

_____ - _____

CITY ▲ STATE ▲ ZIP CODE ▲

Name of Any Connected Organization or Affiliated Committee

[ADDITIONAL]

LUCAS FOR CONGRESS

Mailing Address

PO BOX 175766

COVINGTON

KY

41017

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship **Joint Fundraising Participant**

Type of Connected Organization:

Corporation

Corporation w/o Capital Stock

Labor Organization

Membership Organization

Trade Association

Cooperative

26039140506

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.

[ADDITIONAL]

Mailing Address _____

_____ - _____

CITY ▲ STATE ▲ ZIP CODE ▲

Name of Any Connected Organization or Affiliated Committee

[ADDITIONAL]

MASSA FOR CONGRESS

Mailing Address 59 EAST MARKET STREET SUITE 244

CORNING NY 14830 - _____

CITY ▲ STATE ▲ ZIP CODE ▲

Relationship Joint Fundraising Participant

Type of Connected Organization:

- | | | |
|--|--|---|
| <input type="checkbox"/> Corporation | <input type="checkbox"/> Corporation w/o Capital Stock | <input type="checkbox"/> Labor Organization |
| <input type="checkbox"/> Membership Organization | <input type="checkbox"/> Trade Association | <input type="checkbox"/> Cooperative |

25039140507

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.

[ADDITIONAL]

Mailing Address

_____ - _____

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Any Connected Organization or Affiliated Committee

[ADDITIONAL]

PATRICK MURPHY FOR CONGRESS

Mailing Address

PO BOX 868

LEVITTOWN

PA

19058

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship **Joint Fundraising Participant**

Type of Connected Organization:

Corporation

Corporation w/o Capital Stock

Labor Organization

Membership Organization

Trade Association

Cooperative

26039140508

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.

[ADDITIONAL]

Mailing Address _____

CITY ▲ STATE ▲ ZIP CODE ▲

Name of Any Connected Organization or Affiliated Committee

[ADDITIONAL]

TIM WALZ FOR US CONGRESS

Mailing Address PO BOX 938

MANKATO MN 56002

CITY ▲ STATE ▲ ZIP CODE ▲

Relationship Joint Fundraising Participant

Type of Connected Organization:

- Corporation
- Corporation w/o Capital Stock
- Labor Organization
- Membership Organization
- Trade Association
- Cooperative

26039140509

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.

[ADDITIONAL]

Name of Bank, Depository, etc.

Mailing Address

CITY ▲		STATE ▲	ZIP CODE ▲	

Name of Any Connected Organization or Affiliated Committee

[ADDITIONAL]

WEAVER FOR CONGRESS 2006

Mailing Address

PO BOX 807

RADCLIFF

KY

40159

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship

Joint Fundraising Participant

Type of Connected Organization:

Corporation

Corporation w/o Capital Stock

Labor Organization

Membership Organization

Trade Association

Cooperative

26039140510

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
 The FEC added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> USPS First Class Mail	Postmarked
<input checked="" type="checkbox"/> USPS Registered/Certified	Postmarked (R/C) 7/14/06
<input type="checkbox"/> USPS Priority Mail	Postmarked
Delivery Confirmation™ or Signature Confirmation™ Label <input type="checkbox"/>	
<input type="checkbox"/> USPS Express Mail	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
	Next Business Day Delivery <input type="checkbox"/>
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input checked="" type="checkbox"/> Received from Senate Public Records Office	Date of Receipt 7/18/06
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

Jac
PREPARER
 (3/2005)

7/18/06
DATE PREPARED

25039140511