

FEC  
FORM 1

# STATEMENT OF ORGANIZATION

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2009 MAY 26 A 9:04  
Office Use Only

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

Smartition Congress

ADDRESS (number and street) 1001 Poinsett Hwy

(Check if address is changed)

Greenville SC 29609-1

CITY

STATE

ZIP CODE

COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address)

(Check if address is changed)

Campaign@SmartitionCongress.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address is changed)

SmartitionCongress.com

2. DATE 05/11/2009

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 DAVID R. MURRAY, SR.

Signature of Treasurer David R. Murray, Sr. Date 05/11/2009

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 02/2009)
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## 5. TYPE OF COMMITTEE

**Candidate Committee:**

(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

Andrew Smart

Candidate Party Affiliation

ACP

Office Sought:



House



Senate



President

State

56

District

04

(c)  This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate

**Party Committee:**

(d)  This committee is a  (National, State or subordinate) committee of the  (Democratic, Republican, etc.) Party.

**Political Action Committee (PAC):**

(e)  This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:

 Corporation Corporation w/o Capital Stock Labor Organization Membership Organization Trade Association Cooperative In addition, this committee is a Lobbyist/Registrant PAC.

(f)  This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)

 In addition, this committee is a Lobbyist/Registrant PAC. In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)**Joint Fundraising Representative:**

(g)  This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.

(h)  This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.

**Committees Participating in Joint Fundraiser**

1.  FEC ID number  C
2.  FEC ID number  C
3.  FEC ID number  C
4.  FEC ID number  C

Write or Type Committee Name

## 6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

Mailing Address

CITY

STATE

ZIP CODE

Relationship:  Connected Organization  Affiliated Committee  Joint Fundraising Representative  Leadership PAC Sponsor

## 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

David Murray

Mailing Address

500 CYPRESS LINKS WAY

Title or Position

CITY

STATE

ZIP CODE

TREASURER

Telephone number

1864-230-8992

## 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

DAVID R MURRAY SR

Mailing Address

500 CYPRESS LINKS WAY

Title or Position

CITY

STATE

ZIP CODE

TREASURER

Telephone number

1864-244-9581

Full Name of  
Designated  
Agent

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Mailing Address

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CITY

STATE

ZIP CODE

Title or Position

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Telephone number

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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.

*Briarcliff Banking and Trust Company*

Mailing Address

*1701 Haywood Rd*

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*Greenviile*

*SC*

*29601-1*

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

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Mailing Address

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CITY

STATE

ZIP CODE

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Federal Election Commission  
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