

**FEC
FORM 1**

**STATEMENT OF
ORGANIZATION**

(See instructions)

Office Use Only

1. NAME OF COMMITTEE (In full) (Check if name is changed) Example: If typing, type over the lines 12FE4M5
ECKERD CORPORATION POLITICAL ACTION COMMITTEE (ECKPAC)

ADDRESS (Number and street) P.O. BOX 4889
(Check if address is changed) CLEARWATER FL 33758
CITY STATE ZIP CODE

COMMITTEE'S E-MAIL ADDRESS
bweight@cpenny.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

2. DATE 09 / 20 / 2002

3. FEC IDENTIFICATION NUMBER C00041558

4. IS THIS STATEMENT NEW (N) OR X 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 **Mr. Brian H. Weight**

Signature of Treasurer Electronically Filed by **Mr. Brian H. Weight** Date 09 / 20 / 2002

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

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	Office				State
Party Affiliation	Sought:	House	Senate	President	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 w/o Capital Stock | Labor Organization |
| Membership Organization | Trade Association | Cooperative |

Write or Type Committee Name

ECKERD CORPORATION POLITICAL ACTION COMMITTEE (ECKPAC)

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 Mr. Brian H. Weight

Mailing Address 310 South Main Street

Salt Lake City UT 84101 -

Title or Position ▼ CITY ▲ STATE ▲ ZIP CODE ▲

National Mgr-Payroll Telephone number 801 - 350 - 2314

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 Mr. Brian H. Weight

Mailing Address 310 South Main Street

Salt Lake City UT 84101 -

Title or Position ▼ CITY ▲ STATE ▲ ZIP CODE ▲

National Mgr-Payroll Telephone number 0 - -

Full Name of Designated Agent Natalie Klun

Mailing Address 310 South Main Street

Salt Lake City UT 84101 -

Title or Position ▼ CITY ▲ STATE ▲ ZIP CODE ▲

Asst. Ntnl Mngr Telephone number 801 - 350 - 2328

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 _____

_____ - _____

CITY Δ STATE Δ ZIP CODE Δ
