

04 MAY -3 PM 4:44

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 12FE4MS

Denise Majette for Senate

ADDRESS (number and street) 3851 Snappinger Parkway

(Check if address is changed) Suite 336

Decatur GA 30035

CITY STATE ZIP CODE

COMMITTEE'S E-MAIL ADDRESS kendra@denisemajetteforsenate.org

COMMITTEE'S WEB PAGE ADDRESS (URL) http://www.denisemajetteforsenate.org

COMMITTEE'S FAX NUMBER 4042842506

2. DATE 04 / 15 / 2004

3. FEC IDENTIFICATION NUMBER C 000373280

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 Roger LaVine

Signature of Treasurer *Roger LaVine* Date 04 / 28 / 2004

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 Denise L. Majette

Candidate Party Affiliation DEM Office Sought House Senate President State GA 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

Denise Majette for Senate

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 William Harshman

Mailing Address 3951 Snapfinger Parkway
Suite 335
Decatur GA 30035

Title or Position Secretary CITY GA STATE 30035 ZIP CODE 404 284 2420
Telephone number

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 Roger LeVine

Mailing Address 3951 Snapfinger Parkway
Suite 335
Decatur GA 30035

Title or Position Treasurer CITY GA STATE 30035 ZIP CODE 404 284 2420
Telephone number

Full Name of Designated Agent Shannon McNeal

Mailing Address 3951 Snapfinger Parkway
Suite 335
Decatur GA 30035

Title or Position President CITY GA STATE 30035 ZIP CODE 404 284 2420
Telephone number

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.

Citizens Trust Bank

Mailing Address

2592 South Halston Road

Decatur

GA

30035

CITY Δ

STATE Δ

ZIP CODE Δ

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]

Wachovia Bank

Mailing Address

2533 Wesley Chapel Road

Dacula

GA

30036

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Any Connected Organization or Affiliated Committee

[ADDITIONAL]

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship

Type of Connected Organization:

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

Designated Agent

[ADDITIONAL]

Full Name _____

Mailing Address _____

Title or Position CITY STATE ZIP CODE

_____ Telephone number _____

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]

Bank of America

Mailing Address

2385 Wesley Chapel Road

Decatur

GA

30036

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Any Connected Organization or Affiliated Committee

[ADDITIONAL]

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship

Type of Connected Organization:

Corporation

Corporation w/o Capital Stock

Labor Organization

Membership Organization

Trade Association

Cooperative

Designated Agent

[ADDITIONAL]

Full Name

Mailing Address

Title or Position

CITY

STATE

ZIP CODE

Telephone number - -

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]

Mailing Address			
	CITY ▲	STATE ▲	ZIP CODE ▲

Relationship

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 |

Designated Agent

[ADDITIONAL]

Full Name _____

Mailing Address _____

Title or Position

CITY A

STATE A

ZIP CODE A

Telephone number _____

Barcode area is reserved for your internal use
Service must be marked on label
FedEx Service: 2 Dimensional QR Code (14x17)

Affix Express Manifest Barcode Label Here OR



when using a FedEx Shipper

FEDEX USA Airbill
Express

828049675401

Pitney Bowes Management Services

FedEx STANDARD OVERNIGHT FRI

IMP: 30APR04

TRK# 8280 4967 5401

FORM 0709

Deliver By: 30APR04 A2

20510 -DC-US

NJ WASA



24020320671
24020320671

1 To: **Chetkov** 216 534 6586
Sender Name: **Kendra Vega** 404 284 2400
Company: **Denise Maitte Fed Senate**
Address: **3751 Sunset Crest Pkwy 335**
City: **Decatur** State: **GA** ZIP: **30033**

2 Your Internal Billing Reference:
3 To: **SECRETARY OF THE SENATE**
Address: **OFFICE OF PUBLIC RECORDS**
882 SENATE HOPPER OFFICE BUILDING
Address: **20510**

City: **Washington** State: **DC** ZIP: **20510-7110**



4a Express Packaging Options:
1 FedEx Priority Overnight
2 FedEx First Overnight
3 FedEx 2Day
4 Express Freight Service

5 Packaging:
1 FedEx Mailer
2 FedEx Envelope
3 FedEx Tube
4 FedEx Box
5 FedEx Pallet

6 Special Handling:
1 Fragile
2 Hazardous
3 Perishable
4 High Value
5 Restricted
6 Signature Required
7 Signature Restricted

7 Payment:
1 Cash
2 Money Order
3 Mail Order
4 Bill
5 Check

8 Release Signature:
1 Signature Required
2 Signature Restricted
3 No Signature Required

9 Total Packages: **1**

10 Release Signature: **404**

11 Release Signature: **404**

INS

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