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**Equal Opportunity in Education Project**  
**P O Box 158085**  
**Nashville, TN 37215**

June 19, 2001

Ms. Colleen Manning  
Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Dear Ms. Manning:

RE: **Statement of Organization**  
**Identification Number: C00366104**

In response to your letter dated May 23, 2001 we are submitting the following pages as an amendment to our original Statement of Organization.

As we discussed on the phone today, we have corrected Page 2, Item No. 6 of the Statement of Organization by removing any reference to the Type of Connected Organization.

We have enclosed an executed Cover Page for the filing and the previously referenced Page 2.

If you have any further questions, please feel free to contact me at 615-391-9707.

Sincerely,



L. Stuart Dungan  
Treasurer

LSD/ab

2001 JUN 22 A 8:29

**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. 12PB4M5

EQUAL OPPORTUNITY IN EDUCATION PROJECT

ADDRESS (number and street) P O BOX 158085

(Check if address is changed) WASHVILLE TN 37215

CITY STATE ZIP CODE

COMMITTEE'S E-MAIL ADDRESS  
N/A

COMMITTEE'S WEB PAGE ADDRESS (URL)  
N/A

2. DATE 06 19 2001

3. FEC IDENTIFICATION NUMBER C 00366 104

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 L. STUART DUNGAN  
Signature of Treasurer [Signature] Date 06 19 2001

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing the Statement to the penalties of 2 U.S.C. §437g. 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 Party Affiliation	Office Sought	House	Senate	President	State District
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- (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

N/A \_\_\_\_\_  
 \_\_\_\_\_

Mailing Address \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

CITY ▲ STATE ▲ ZIP CODE ▲

Relationship \_\_\_\_\_

Type of Connected Organization:

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

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.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input checked="" type="checkbox"/> First Class Mail	POSTMARKED <i>6-19-01</i>
<input type="checkbox"/> Registered/Certified Mail	POSTMARKED (R/C)
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House office of Records and Registration	Date of Receipt
<input type="checkbox"/> Received from the Senate Office of Public Records	Date of Receipt
<input type="checkbox"/> Other ( Specify):	Postmarked and/or Date of Receipt
<input type="checkbox"/> Electronic Filing	
<i>AMU</i> PREPARER	<i>6-22-01</i> DATE PREPARED