

FEC  
FORM 1

STATEMENT OF  
ORGANIZATION

RECEIVED  
FEB 20 2007  
3:55

Office Use Only

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

ADDRESS (number and street) (Check if address is changed)  
P.O. BOX 145  
SPRING HOUSE PA 19477-9998  
CITY STATE ZIP CODE

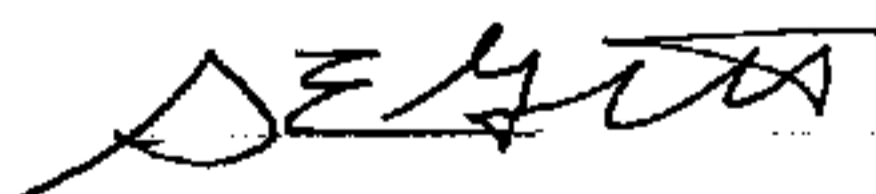
COMMITTEE'S E-MAIL ADDRESS  
FRANK.PDTZ@COMCAST.NET

COMMITTEE'S WEB PAGE ADDRESS (URL)  
NONE

COMMITTEE'S FAX NUMBER  
NONE

2. DATE  
3. FEC IDENTIFICATION NUMBER ▶ C00416859  
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  
Signature of Treasurer  Date 03 09 2007

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 02/2003)

27039403745

**Federal Election Commission**  
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Other (Specify): Date of Receipt or Postmarked

 3/19/07  
 PREPARER DATE PREPARED

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