FEC FORM 1

STATEMENT OF ORGANIZATION

FORM 1		(See instruction	_		Office and only
1. NAME OF COMMITTEE (in		Check if name schanged)	Example: If typying, type over the lines	12FE4M5	Office use only
ı , Adelphia Com	ımunications Corpo	oration PAC			
1					
ADDDESO	5619	TC Parkway			
ADDRESS (number and	street) Suite 7	700			
X (Check if addi	ress	wood Village		CO	80111 -
			CITY▲	STATE▲	ZIP CODE ▲
COMMITTEE'S E-MA tom.carlock@					
tom.cariock@					
COMMITTEE'S WEB	PAGE ADDRESS (UR	L)			
N/A					
	<u> </u>				
COMMITTEE'S FAX II 303-268-6472	NUMBER				
2. DATE 0.9	M / D D / Y	2 0 0 6 °			
3. FEC IDENTIFICA	ATION NUMBER	C	C C00321497		
4. IS THIS STATEM	MENT NEW (N) OR	X AMENDED (A)		
I certify that I have exam	ined this Statement and to	the best of my knov	vledge and belief it is true, correc	ct and complete	
Type or Print Name of	Treasurer To	m Carlock			
Signature of Treasure	r Electronically Filed	by Tom Carlo	ck	Date 0 9	29 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
NOTE: Submission of fa	•	-	subject the person signing this	·	_
Office Use Only			For further informati Federal Election Com Toll Free 800-424-95:	mission	FEC FORM 1 (Revised 02/2003)

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5.	5. TYPE OF COMMITTEE (Check One)				
	(a) This committee is a principal campaign committee	ee. (Complete the candidate informat	tion below.)		
	(b) This committee is an authorized committee, and information below.)	is NOT a principal campaign commi	ittee. (Complete the cand	lidate	
	Name of Candidate				
	Candidate Office Party Affiliation Sought:	House Senate	President	tate istrict	
	(c) This committee supports/opposes only one cand	idate, and is NOT an authorized com	ımittee.		
	Name of Candidate				
		tional, State subordinate) committee of the	(Demo Repub	ocratic, olican,etc.) Party.	
	(e) X This committee is a separate segregated fund				
	(f) This committee supports/opposes more than one committee.	Federal candidate, and is NOT a se	eparate segregated fund o	or party	
3.	Name of Any Connected Organization or Affiliated Committee				
	Adelphia Communications Corporation				
L		<u> </u>	<u> </u>		
	Mailing Address 5619 DTC Par	kway			
	Greenwood V	illage C	ÇO 8011	1	
	CITY	t st	ATE ▲ ZIP	CODE 🛦	
	Relationship Connected				
	Type of Connected Organization:				
	X Corporation Corporat	ion w/o Capital Stock	Labor Organization		
	Membership Organization Trade As	esociation	Cooperative		

Write or Type Committee Name	3)		Page 3
vvinte or Type Committee Name			
Adelphia Communications C	Corporation PAC		
 Custodian of Records: Identify possession of Committee book 	by name, address, (phone number op s and records.	tional), and position of th	e person in
Full Name Tom Carloc	k		
Mailing Address	5619 DTC Parkway		
	7th Floor		
	Greenwood Village	co	80111
Title or Position ▼	CITY A	STATE▲	ZIP CODE ▲
Treasurer	Te	303 ephone number	268 6434
Full Name of Treasurer Tom Carloc	k		
of Treasurer Tolli Carloc Mailing Address	5619 DTC Parkway		
Ul 116a3ulei	5619 DTC Parkway 7th Floor	00	00444
Ul 116a3ulei	5619 DTC Parkway	co	80111
Or 116a3u16i	5619 DTC Parkway 7th Floor	CO	80111
Mailing Address	5619 DTC Parkway 7th Floor Greenwood CITY A		
Mailing Address Title or Position ♥	5619 DTC Parkway 7th Floor Greenwood CITY A	STATE A	ZIP CODE A
Mailing Address Title or Position ▼ Treasurer Full Name of Designated	5619 DTC Parkway 7th Floor Greenwood CITY A	STATE A	ZIP CODE A
Mailing Address Title or Position ▼ Treasurer Full Name of Designated Agent	5619 DTC Parkway 7th Floor Greenwood CITY A	STATE A	ZIP CODE A
Mailing Address Title or Position ▼ Treasurer Full Name of Designated Agent	5619 DTC Parkway 7th Floor Greenwood CITY A	STATE A	ZIP CODE A

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9.	Banks or Other Depositories: safety deposit boxes or maintain Name of Bank, Depository, etc.	ns funds.	its, rents
	JP Mor	gan Chase 1 Chase Manhattan Plaza	
		New York NY 100	81 _ [

STATE ∠

ZIP CODE △

CITY 🗷

Image# 269505 ⁻	Image# 26950514828			
Form/Schedule: F1A Transaction ID:	This amended registration is being filed in order to disclose the change in address for the Treasurer and Custodian of Records.			