## 8039812874

**FEC** FORM 1

## **STATEMENT OF ORGANIZATION**

(See instructions)

FEC RECEIVED MAIL CENTER 2008 AUG 13 AM 9: 13

Office use only

NAME OF COMMITTEE (in full)	(Check if na is changed)	me Example: If typying over the lines	: 12FE4M5	
Upstate Grassroots Vic	tory 2008	1.1.1.1.1.1.1.1.1	1111111	ليبيبيي
ADDRESS (number and street)	1341 G Street,	<b>'W</b>		لتستست
(Check if address	Sulte 740			لىسىسى
is changed)	Washington	<del></del>		20005 -
COMMITTEE'S E-MAIL ADDRES	ss.	CITY	STATE	ZIP CODE
Support@pcmslic.com	- 	<del> </del>	1111111	
<u> </u>	<u> </u>	<del> </del>		
COMMITTEE'S WEB PAGE ADD	RESS (URL)			
None				لتبيييي
				لتتتتت
COMMITTEE'S FAX NUMBER 2026281582	لسا			
2. DATE 08 ' 0	2008			
3. FEC IDENTIFICATION NUM	IBER	C		
4. IS THIS STATEMENT X	NEW (N)	OR AMENDI	ED (A)	
I certify that I have examined this State	tement and to the best of	my knowledge and belief it is true	, correct and complete	
Type or Print Name of Treasurer	Denise Kin	<b>.</b>		
Signature of Treasurer Electron	nically Filed by Deni	se King Denise	Spate O.E	3'08'2008
NOTE: Submission of false, erroneou	•	on may subject the person signin	•	•
Office Use Only FE3AN042.PDF		For further in Federal Electio Toll Free 800-4 Local 202-894	24-9530	FEC FORM 1 (Revised 12/2007)
I LUMINUTE. F DI				

5.			OMMITTEE (Check One)			
	(a)		This committee is a principal campaign committee. (Complete t	he candidate infor	nation below.)	
	(b)		This committee is an authorized committee, and is NOT a princinformation below.)	ipal campaign com	mittee. (Complete the	e candidate
	Name Candi			<u> </u>	<u> </u>	
	Candi Party	date Affiliati	on Sought: House	Senate .	President	State District
	(c)		This committee supports/opposes only one candidate, and is NO	OT an authorized c	ommittee.	
	Name Candi				<u> </u>	
	Party	Comm	TOTAL TOTAL STATE			
	(d)		This committee is a (National, State (or subordinate) con	nmittee of the		ernocratic, publican,etc.) Party.
	Politic	al Act	ion Committee (PAC):			
	(e)	1	This committee is a separate segregated fund. (Identify connect	ed organization on	line 6.) Its connected	l organization is a:
			Corporation Corporation w/o	Capital Stock	Labor	Organization
			Membership Organization Trade Association	on	Coope	erative
	<b>(f)</b>		This committee supports/opposes more than one Federal candid committee. (i.e., nonconnected committee)	ate, and is NOT a	separate segregated	fund or party
			In addition, this committee is a Leadership PAC. (Identify s	sponsor on line 6.)		· · · · · · · · · · · · · · · · · · ·
	Joint F	Fundra	Ising Representative:			
	(g)	X	This committee collects contributions, pays fundraising expenses committees/organizations, at least one of which is an authorized	and disburses ne committee of a fed	proceeds for two or eral candidate.	more political
	(h)		This committee collects contributions, pays fundraising expenses committees/organizations, none of which is an authorized committee.			more political
	•	Com	mittees Participating in Joint Fundraiser			
			GILLIBRAND FOR CONGRESS  1.	FEC ID number	C C00413914	ngan saga menganan seguanang
			2. NEW YORK STATE DEMOCRATIC COMMITTEE	FEC ID number	C C00143230	
			3.	FEC ID number	C	
			4.	FEC ID number	C	
			5.	FEC ID number	C	James angress (n.e. ) J

FEC Form 1 (Revise	ed 12/2007)		Page 3
Write or Type Committee Na Upstate Grassroots			
6. Name of Any Connected	i Organization, Affiliated Committee, Leadership PAC S	ponsor or Joint Fundra	Ising Representative
NONE	<u> </u>	<u> </u>	<u> </u>
<u> </u>		<u> </u>	
Mailing Address		<del></del>	<u> </u>
		ا ليا ل	
	CITY▲	STATE A	ZIP CODE A
Relationship:	Affiliated Committee Leadership P.	AC Sponsor Joir	nt Fundraising Representative
possession of Commit	Identify by name, address, (phone number option tee books and records.	nal), and position of th	e person in
Mailing Address	1341 G Street, NW		
	Suite 740		
	Washington	DC	20005
Title or Position ♥	CITY A	STATE	ZIP CODE A
	Telepi	hone number	
	me and address (phone number – optional) of the tr any designated agent (e.g., assistant treasurer).	reasurer of the commit	ttee; and the
Full Name of Treasurer De	nise King		· · · · · · · · · · · · · · · · · · ·
Mailing Address	1341 G Street, NW		
	Suite 740		
	Washington	DC	20005
Title or Position ♥	CITY ▲	STATE	ZIP CODE A
Treasu	ifer Talan	phone number	_ 341 _ 8865
		mone namosi	<del></del>

28039812877

Full Name of Designated Agent	Brian Foucart		
Mailing Address	1341 G Street, NW		
	Suite 740		
	Washington	DC	20005 –
itle or Position ♥	CITY A	STATE A	ZIP CODE A
Custo	dian of Records Tele	phone number	
safety deposit boxes or Name of Bank, Deposit	maintains funds. ory, etc. ank of America	·	noids accounts, rents
safety deposit boxes or Name of Bank, Deposite B	maintains funds. pry, etc.	·	noids accounts, rents
safety deposit boxes or Name of Bank, Deposite B	maintains funds.  bry, etc.  ank of America	·	noids accounts, rents
safety deposit boxes or Name of Bank, Deposite B	maintains funds.  bry, etc.  ank of America	·	20005   _
safety deposit boxes or Name of Bank, Deposite B	maintains funds.  pry, etc.  ank of America  1501 Pennsylvania Ave., N.W.		
Banks or Other Depos safety deposit boxes or Name of Bank, Deposite B Mailing Address  Name of Bank, Deposite	maintains funds.  bry, etc.  ank of America  1501 Pennsylvania Ave., N.W.  Washington  City A	L PC L	20005   -
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safety deposit boxes or Name of Bank, Deposits B. Mailing Address	maintains funds.  bry, etc.  ank of America  1501 Pennsylvania Ave., N.W.  Washington  City A	L PC L	20005   -
safety deposit boxes or Name of Bank, Deposits  Mailing Address  Name of Bank, Deposits	maintains funds.  bry, etc.  ank of America  1501 Pennsylvania Ave., N.W.  Washington  City A	L PC L	20005   -

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