

FEC FORM 1

STATEMENT OF ORGANIZATION

OPERATIONS CENTER

2003 SEP 26 11:21

Office Use Only

1. NAME OF COMMITTEE (in full)



(Check if name is changed)

Emphasize typing, type over the lines.

12 FD41MS

Friends of Kevin McAdams

ADDRESS (number and street)

P.O. Box 1777



(Check if address is changed)

Northfield

Vt

05701

CITY

STATE

ZIP CODE

COMMITTEE'S E-MAIL ADDRESS

Kevin.McAdams.Friends@verizon.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

www.kmca.org

COMMITTEE'S FAX NUMBER

2. DATE

09 11 2003

3. FEC IDENTIFICATION NUMBER

C00389569

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

Bernadette Ya Riordan

Signature of Treasurer

Bernadette Riordan

Date

09 11 2003

09 11 2003

09 11 2003

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. 5427g.

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

Office Use Only

For Further Information contact: Federal Election Commission, Toll Free 800-424-9600, Local 202-696-1100

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888 1 58 40 23

E. 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 K. R. V. ...

Candidate Party Affiliation Office Sought: None Senate President State 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.

F. Name of Any Connected Organization or Affiliated Committee

Mailing Address _____

CITY ▲ STATE ▲ ZIP CODE ▲

Relationship _____

Type of Connected Organization

- Corporation
- Corporation w/o Cash flow
- Labor Organization
- Membership Organization
- Trade Association
- Cooperative

23 03 821 0889

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Name of Type Committee Name

Friends of Kevin McAdams

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

KELLY, FARRELL

Mailing Address

201 EAST 36 ST, R15A

NEW YORK

NY

10016-

Title or Position

CITY

STATE

ZIP CODE

TREASURER

Telephone Number

917-847-7761

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

KELLY, FARRELL

Mailing Address

201 EAST 36 ST, R15A

NEW YORK

NY

10016-

Title or Position

CITY

STATE

ZIP CODE

TREASURER

Telephone number

Full Name of Designated Agent

BERNARDINE M. RIGORDAN

Mailing Address

170 CROFTY AVE

MONROE, NY

MONROE, NY

NY

10724-

Title or Position

CITY

STATE

ZIP CODE

ASSISTANT TREASURER

Telephone number

917-963-0979

23 03 821 0890

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9. Banks or Other Depositories: List all banks or other depositories in which the campaign deposits funds, mobile accounts, pass safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

AMERICANIZED BANK OF NEW YORK

Mailing Address

301 THIRD AVENUE

NEW YORK

NEW YORK

NY

10010

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

CITY

STATE

ZIP CODE

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 checked="" type="checkbox"/> Hand Delivered	Date of Receipt 9-26-03
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<i>SL</i> PREPARER	9-26-03 DATE PREPARED

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