

**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 12FE4M5

CAMPAIGN FOR A NEW MAJORITY COMMITTEE

ADDRESS (Number and street) 430 SOUTH CAPITOL STREET SE

(Check if address is changed) 2nd FLOOR

WASHINGTON DC 20003

CITY STATE ZIP CODE

COMMITTEE'S E-MAIL ADDRESS forte@dccc.org

COMMITTEE'S WEB PAGE ADDRESS (URL)

COMMITTEE'S FAX NUMBER 2027417380

2. DATE 01 / 18 / 2005

3. FEC IDENTIFICATION NUMBER C C00404657

4. IS THIS STATEMENT X 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 John Lapp

Signature of Treasurer Electronically Filed by John Lapp Date 01 / 26 / 2005

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. 5437g.

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS

Office Use Only				
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For further information contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-694-1100

FEC FORM 1
(Revised 02/2003)

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

DEMOCRACY FOR AMERICA _____

Mailing Address _____ PO Box 8313 _____

_____ SUITE 300 _____

_____ Burlington _____ VT _____ 05402 - _____

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship | Joint FR Participant _____

Type of Connected Organization:

Corporation

Corporation w/o Capital Stock

Labor Organization

Membership Organization

Trade Association

Cooperative

Write or Type Committee Name

CAMPAIGN FOR A NEW MAJORITY COMMITTEE

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 John Lapp

Mailing Address 430 South Capitol Street, SE
2nd Floor
Washington DC 20003

Title or Position ▼ CITY ▲ STATE ▲ ZIP CODE ▲

Treasurer Telephone number 202 - 863 - 1500

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 John Lapp

Mailing Address 430 South Capitol Street, SE
2nd Floor
Washington DC 20003

Title or Position ▼ CITY ▲ STATE ▲ ZIP CODE ▲

Treasurer Telephone number 202 - 863 - 1500

Full Name of Designated Agent Ann Marie Habershaw

Mailing Address 430 South Capitol Street, SE
2nd Floor
Washington DE 20003

Title or Position ▼ CITY ▲ STATE ▲ ZIP CODE ▲

Assistant Treasurer Telephone number 202 - 863 - 1500

9. **Banks or Other Depositories:** List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

Bank of America, NA

Mailing Address

730 15th Street, NW

2nd Floor

Washington

DC

20005 -

CITY Δ

STATE Δ

ZIP CODE Δ

Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

[ADDITIONAL]

Mailing Address

_____ - _____

CITY ▲ STATE ▲ ZIP CODE ▲

Name of Any Connected Organization or Affiliated Committee

[ADDITIONAL]

DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE

Mailing Address

490 South Capitol Street SE

2nd Floor

Washington

DC

20003

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship

Joint FR Participant

Type of Connected Organization:

Corporation

Corporation w/o Capital Stock

Labor Organization

Membership Organization

Trade Association

Cooperative

Designated Agent

[ADDITIONAL]

Full Name _____

Mailing Address _____

Title or Position ▼

CITY ▲

STATE▲

ZIP CODE ▲

Telephone number _____ - _____ - _____
