

OFFICE OF THE MISSISSIPPI SECRETARY OF STATE



STATEMENT OF ORGANIZATION
FOR A POLITICAL COMMITTEE

1. Name of committee Friends 4 Shae
2. Address of committee P.O. Box 13755
City, State, Zip Jackson, MS 39236 Email friends4shae@gmail.com
Phone 601-299-2430 FAX _____
Contact Person A. Shae Buchanan-Williams Phone 601-299-2430 Email friends4shae@gmail.com
Contact Full Address 5130 Millwood Place
Jackson, MS 39206
3. Is the committee registered with the Federal Election Commission (FEC)? Yes
FEC Identification Number _____ No
4. If the committee is authorized by a candidate:
Name of Candidate A. Shae Buchanan-Williams
Address 5130 Millwood Place Jackson, MS 39206
Office sought House of Representatives Party _____
5. Describe, as concisely as possible, the purpose of this committee and, if applicable, the identification of affiliated or connected organizations:
The purpose of this committee is for the election of Adrenace Buchanan-Williams to office.
6. Names and addresses of all officers: (attach separate sheet if necessary)
 - A. Name Cindy A. Elliott Office Manager
Address 4949 South Dr Jackson, MS 39209
 - B. Name Ermea J. Russell Office Treasurer/Secretary
Address P.O. Box 24560 24561 Jackson, MS 39225
 - C. Name _____ Office _____
Address _____
 - D. Name _____ Office _____
Address _____
7. Director Adrenace V. Williams Adrenace V. Williams 5/02/2016
(Type Name) (Signature) (Date)
8. Treasurer Ermea J. Russell Ermea Russell 5/12/2016
(Type Name) (Signature) (Date)

Send To:

1. Political Committees associated with statewide or multi-county elections should return the form to:
Delbert Hosemann, Secretary of State, Elections Division, P.O. Box 136, Jackson MS 39205.
2. Political Committees associated with single county elections should return this form to their County Circuit Clerk.
3. Political Committees associated with municipal elections should return this form to their Municipal Clerk.