# STATEMENT OF ORGANIZATION

(See reverse side for instructions)

1. (a) NAME OF COMMITTEE IN FULL — (Check if name is changed) Dow Chemical Company
Headquarters Unit Employees Political Action Committee of The

2. DATE 1/4/94 12 54 PM '94

(b) Number and Street Address — X (Check if address is changed)
47 Building

3. FEC IDENTIFICATION NUMBER
C00074096

(c) City, State and ZIP Code
Midland, MI 48667

4. IS THIS STATEMENT AN AMENDMENT? X YES ___ NO

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 | State/District |
|---|---|---|---|
| | | | |

___ (c) This committee supports/opposes only one candidate _____ (name of candidate) and is NOT an authorized committee.

___ (d) This committee is a _____ (National, State or subordinate), committee of the _____ (Democratic, Republican, etc.) Party.

X (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 a party committee.

| 6. Name of Any Connected Organization or Affiliated Committee | Mailing Address and ZIP Code | Relationship |
|---|---|---|
| | | |

Type of Connected Organization
___ Corporation ___ Corporation w/o Capital Stock ___ Labor Organization ___ Membership Organization ___ Trade Association ___ Cooperative

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 | Mailing Address | Title or Position |
|---|---|---|
| Ridley S. Nimmo | 47 Building Midland, MI 48667 | Treasurer |

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 | Mailing Address | Title or Position |
|---|---|---|
| Ridley S. Nimmo | 47 Building Midland, MI 48667<br>(517) 636-3618 | Treasurer |

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. | Mailing Address and ZIP Code |
|---|---|
| | |

*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 | SIGNATURE OF TREASURER | DATE |
|---|---|---|
| Ridley S. Nimmo | [signature] | 12/1/93 |

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g.
ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

For further information contact:
Federal Election Commission
Toll-free 800-424-9530
Local 202-376-3120

FEC FORM 1
(revised 4/87)

24033720040

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.

| | | |
|---|---|---|
| ☐ | Hand Delivered | DATE OF RECEIPT |
| ☑ | First Class Mail | POSTMARKED 1-7-94 |
| ☐ | Registered/Certified Mail | POSTMARKED |
| ☐ | No Postmark | |
| ☐ | Postmark Illegible | |
| ☐ | Received from the House Office of Records and Registration | DATE OF RECEIPT |
| ☐ | Received from the Senate Office of Public Records | DATE OF RECEIPT |
| ☐ | Other (Specify): | POSTMARKED and/or DATE OF RECEIPT |

JMH
PREPARER

1-10-94
DATE PREPARED

FEC FORM 70-2 (12/92)

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