# STATEMENT OF ORGANIZATION

(See reverse side for instructions.)

1. (a) NAME OF COMMITTEE IN FULL ☐ (Check if name is changed)

HARRIS BEACH & WILCOX, LLP POLITICAL COMMITTEE - FEDERAL

(b) Number and Street Address ☐ (Check if address is changed)

130 EAST MAIN STREET

(c) City, State and ZIP Code

ROCHESTER, NEW YORK 14604

FEDERAL ELECTION COMMISSION MAIL ROOM 98 MAY 4 1 25 PM '98

2. DATE 04/29/98

3. FEC IDENTIFICATION NUMBER C00195891

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.

☐ (e) This committee is a separate segregated fund.

[X] (f) This committee supports/opposes more than one Federal candidate and is NOT a separate segregated fund or a party committee.

| 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 |
|---|---|---|
| MARY BRIGIDA | 130 EAST MAIN STREET, ROCHESTER, NY 14604 | ACCOUNTANT |

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 |
|---|---|---|
| WILLIAM H. KEDLEY | 130 EAST MAIN STREET, ROCHESTER, NY 14604 | TREASURER |
| THOMAS ABBOTT | 130 EAST MAIN STREET, ROCHESTER, NY 14604 | ASST. TREAS. |

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 |
|---|---|
| FLEET BANK | CROSSROADS BRANCH, ROCHESTER, NEW YORK 14614 |

*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 |
|---|---|---|
| WILLIAM H. KEDLEY | | 04/29/98 |

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 4/97)

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.

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| ☐ | Electronic Filing | |

EJ — PREPARER

5/4/98 — DATE PREPARED

(4/98)