10/25/2001 14 : 23

FEC FORM 1

STATEMENT OF ORGANIZATION

(See instructions)

Office Use Only

1. NAME OF COMMITTEE (In full) X (Check if name is changed) Example: If typying, type over the lines 12FE4M5

ITT INDUSTRIES PAC A/K/A (ITTPAC)

ADDRESS (Number and street)

4 WEST RED OAK LANE

(Check if address is changed)

WHITE PLAINS NY 10604

CITY STATE ZIP CODE

COMMITTEE'S E-MAIL ADDRESS

Bill.Kansky@itt.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

2. DATE 10 / 25 / 2001

3. FEC IDENTIFICATION NUMBER C00141002

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 WILLIAM KANSKY

Signature of Treasurer Electronically Filed by WILLIAM KANSKY Date 10 / 25 / 2001

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. S437g.

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS

Office Use Only				

For further information contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-694-110

FEC FROM 1
(Revised 1/2001)

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

(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) X 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

ITT INDUSTRIES

Mailing Address 4 WEST RED OAK LANE

WHITE PLAINS NY 10604

CITY ▲ STATE ▲ ZIP CODE ▲

Relationship CONNECTED ORGANIZATION

Type of Connected Organization:

X Corporation Corporation w/o Capital Stock Labor Organization

Membership Organization Trade Association Cooperative

Write or Type Committee Name

ITT INDUSTRIES PAC A/K/A (ITTPAC)

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: KATHY STOLAR

Mailing Address: 4 WEST RED OAK LANE

WHITE PLAINS — CITY ▲

NY — STATE ▲

10604 — ZIP CODE ▲

Title or Position ▼: CUSTODIAN OF RECORDS

Telephone number: 914 – 641 – 2067

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: WILLIAM KANSKY

Mailing Address: 4 WEST RED OAK LANE

WHITE PLAINS — CITY ▲

NY — STATE ▲

10604 — ZIP CODE ▲

Title or Position ▼: TREASURER

Telephone number: 914 – 641 – 2096

Full Name of Designated Agent: THOMAS R. MARTIN

Mailing Address: 4 WEST RED OAK LANE

WHITE PLAINS — CITY ▲

NY — STATE ▲

10604 — ZIP CODE ▲

Title or Position ▼: CHAIRMAN/DES. AGENT

Telephone number: 914 – 641 – 2157

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.

COMERICA BANK

Mailing Address

PAC SERVICES MC 2250

P.O. BOX 75000

DETROIT MI 48275 - 2250

CITY △ STATE △ ZIP CODE △

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]**

CHASE MANHATTAN BANK

Mailing Address ONE CHASE MANHATTAN PLAZA

NEW YORK NY 10081 -

CITY STATE ZIP CODE

Name of Any Connected Organization or Affiliated Committee **[ADDITIONAL]**

Mailing Address

CITY STATE ZIP CODE

Relationship

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 _____ – _____ – _____

X