

**FEC
FORM 1**

**STATEMENT OF
ORGANIZATION**

(See instructions)

Officer Use Only

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

DELPHI CORPORATION POLITICAL ACTION COMMITTEE

ADDRESS (Home or street) **WORLD HEADQUARTERS**

(Check if address is changed) **5725 DELPHI DR. M/C 483-400-521**

TROY MI 48098

CITY STATE ZIP CODE

COMMITTEE'S E-MAIL ADDRESS

thomas.c.woods@delphiauto.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

2. DATE **04 / 01 / 2002**

3. FEC IDENTIFICATION NUMBER **C00346130**

4. IS THIS STATEMENT 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 **MARTHA DENBAAS**

Signature of Treasurer Electronically Filed by **MARTHA DENBAAS** Date **04 / 04 / 2002**

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

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	Office				State
Party Affiliation	Sought:	House	Senate	President	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) 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

DELPHI CORPORATION _____

Mailing Address _____ 5725 DELPHI DRIVE _____

_____ MIC 463-400-521 _____

_____ TROY _____ MI _____ 48096 _____ 2815 _____

CITY ▲ STATE ▲ ZIP CODE ▲

Relationship _____ CONNECTED ORGANIZATION _____

Type of Connected Organization:

- Corporation
- Corporation w/o Capital Stock
- Labor Organization
- Membership Organization
- Trade Association
- Cooperative

Write or Type Committee Name

DELPHI CORPORATION POLITICAL ACTION 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 **MARTHA DENBAAS**

Mailing Address **COMERICA BANK PAC SERVICES MC 2250**
P.O. BOX 75000
DETROIT MI 48275 - 2250

Title or Position ▼ **TREASURER** CITY ▲ STATE ▲ ZIP CODE ▲
 Telephone number **248 - 371 - 7045**

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 **MARTHA DENBAAS**

Mailing Address **COMERICA BANK PAC SERVICES MC 2250**
P.O. BOX 75000
DETROIT MI 48275 - 2250

Title or Position ▼ **TREASURER** CITY ▲ STATE ▲ ZIP CODE ▲
 Telephone number **248 - 370 - 7045**

Full Name of Designated Agent **RONALD BEEBER**

Mailing Address **5725 DELPHI DRIVE**
M/C 483-400-521
TROY MI 48098 - 2815

Title or Position ▼ **CHAIRMAN** CITY ▲ STATE ▲ ZIP CODE ▲
 Telephone number **248 - 813 - 2595**

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

P.O. BOX 75000

PAC SERVICES MC 2250

DETROIT

MI

48275 - 2250

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]

CITIBANK

Mailing Address WORLD HEADQUARTERS

399 PARK AVENUE

NEW YORK NY 10043 -

CITY ▲ STATE ▲ ZIP CODE ▲

Name of Any Connected Organization or Affiliated Committee

[ADDITIONAL]

DELPHI CORPORATION MICHIGAN POLITICAL ACTION COMMITTEE

Mailing Address 5725 DELPHI DRIVE

MAC 483-400-521

TROY MI 48098 2815

CITY ▲ STATE ▲ ZIP CODE ▲

Relationship

AFFILIATED PAC

Type of Connected Organization:

Corporation

Corporation w/o Capital Stock

Labor Organization

Membership Organization

Trade Association

Cooperative

Designated Agent

[ADDITIONAL]

Full Name THOMAS C. WOODS

Mailing Address 5725 DELPHI DRIVE

MC 483-400-521

TROY

MI

48098 - 2815

Title or Position ▼

CITY ▲

STATE▲

ZIP CODE ▲

ASSISTANT TREASURER

Telephone number 248 - 813 - 2620

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]

DELPHI CORPORATION NEW YORK POLITICAL ACTION COMMITTEE

Mailing Address

5725 DELPHI DRIVE

MAC 483-400-521

TROY MI 48098 2815

CITY ▲ STATE ▲ ZIP CODE ▲

Relationship

AFFILIATED PAC

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 _____ - _____ - _____