Image# 26940316186 09/05/2006 10:37

FEC FORM 1

STATEMENT OF ORGANIZATION

FORM 1	ORGANI	ZATION		
	(See instru	ctions)		Office use only
NAME OF COMMITTEE (in f	(Check if name is changed)	Example: If typying, type over the lines	12FE4M5	
SUPPORTERS	OF ENGINEERS LOCAL 3 EN	IDORSED CANDIDATES		
ADDRESS (number and s	treet) 1620 South Loop	Road		
(Check if addre	ess			
is changed)	Alameda		[ÇA]	94501 -
COMMITTEE'S E-MAI	ADDRESS	CITY▲	STATE▲	ZIP CODE ▲
	- ADDITESS			1
COMMITTEE'S WEB	PAGE ADDRESS (URL)			
COMMITTEE'S FAX N	UMBER			
نيا لينا				
2. DATE 0 9	/ D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
3. FEC IDENTIFICA	TION NUMBER	C C00024422		
	V		-	
4. IS THIS STATEM	ENT X NEW (N) OF	AMENDED (A)		
I certify that I have examin	ned this Statement and to the best of my	knowledge and belief it is true, correct	ct and complete	
Type or Print Name of	Treasurer Russ Burns			
Signature of Treasurer	Electronically Filed by Russ B	Burns	Date 0 9	/ D D / Y Y Y O O 6
NOTE: Submission of fall	se, erroneous, or incomplete information	may subject the person signing this	Statement to the penalti	es of 2 U.S.C. S437g.
	ANY CHANGE IN INFOR	MATION SHOULD BE REPORTE	ED WITHIN 10 DAYS	
Office Use Only		For further informati Federal Election Com Toll Free 800-424-95	mission	FEC FORM 1 (Revised 02/2003)

FEO Form	1 (Revised 02/2003)	Page 2
5. TYPE OF COM	MMITTEE (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 tinformation below.)	he candidate
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		
(e) X (f)	(National, State This committee is a (or subordinate) committee of the This committee is a separate segregated fund This committee supports/opposes more than one Federal candidate, and is NOT a separate segregate committee.	(Democratic, Republican,etc.) Party.
6. Name of Any	Connected Organization or Affiliated Committee	
Mailing Addres	s	
	CITY STATE A	ZIP CODE
Relationship		
Type of Conne	cted Organization:	
Corpo	ration Corporation w/o Capital Stock Labor Organ	ization
Memb	pership Organization Trade Association Cooperative	

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Write or Type Committee Name

	SUPPORTERS	OF ENGINEERS I	LOCAL 3 ENDO	ORSED CANDIDA [·]	TES
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	SUPPORTERS OF EN	IGINEERS LOCAL 3 ENDORSED CANDIDA	TES											
7.	Custodian of Records: possession of Committ	Identify by name, address, (phone number ee books and records.	optional), and position of th	e person in										
	Full Name													
	Mailing Address													
	Title or Position ♥	CITY 🛦	STATE ▲	ZIP CODE A										
			Felephone number											
8.	Treasurer: List the nan name and address of a	ne and address (phone number optional) of ny designated agent (e.g., assistant treasurer	the treasurer of the commi).	ttee; and the										
	Full Name of Treasurer Russ	s Burns												
	Mailing Address	1620 South Loop Rd.	1620 South Loop Rd.											
		Alameda	CA	94501										
	Title or Position ♥	CITY A	STATE▲	ZIP CODE A										
			Telephone number											
	Full Name of Designated Agent													
	Mailing Address													
	Title or Position ♥	CITY A	STATE A	ZIP CODE A										
			Гelephone number											

	FEC Form	1 (Re	evised	102	/200	03)																											Pa	age	4		_
9.	Banks or Other safety deposit box	xes or	main	tain		List Inds	ba	nks	or	oth	ner	de _l	oos	itor	ies	in	wh	ich	the	e co	mr	nitte	e c	lepo	osit	s fu	nds	s, h	olds	ac	col	ınts	s, re	nts			
	Name of Bank, Do	etc.																																			
							 		1				L	1	L																				L		_
	Mailing Address					Ш						L	L	1																							
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