STATEMENT OF ORGANIZATION

(See reverse side for instructions)

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

National Air Traffic Controllers Association Political Action Committee (NATCA PAC)

(b) Address [ ] (Check if address is changed)

1150 17th Street, NW, Suite 701

(c) City, State and ZIP Code

Washington, DC 20036

2. DATE August 8, 1994

3. FEC IDENTIFICATION NUMBER C00238725

4. IS THIS A TERMINATION NOTICE? [ ] YES [X] 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.

Name of Any Connected Organization or Affiliated Committee	Mailing Address and ZIP Code	Relationship
1. National Air Traffic Controllers Association (aka NATCA)	1150 17th St., NW; Suite 701 Washington, DC 20036	Connected
2. District No. 1 Marine Engineers' Beneficial Association Political Action Fund	444 North Capitol St., NW Suite 800 Washington, ~~DC 20001~~-1570	Affiliated

Type of Connected Organization

[ ] Corporation [ ] Corporation w/o Capital Stock [X] 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
Ilisa Amy Oman	1150 17th St., NW; Suite 701 Washington, DC 20036	Custodian of Records

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
John F. Thornton	1150 17th St., NW; Suite 701 Washington, DC 20036	Treasurer
Barbara Jayne Clancy		Asst. 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
First Union Bank	444 North Capitol Street, NW Washington, DC 20001

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
BARBARA JAYNE CLANCY	Barbara Jayne Clancy	August 8, 1994

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)