

MAINSTREAM PAC
P.O. Box 29
San Jose, California 95113-0029

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

MAR 8 12 44 PM '99

Phone (408) 271-2619

March 2, 1999

Certified Return Receipt

Federal Election Commission
999 F Street, N.W.
Washington, D.C. 20463

RE: **Mainstream PAC**

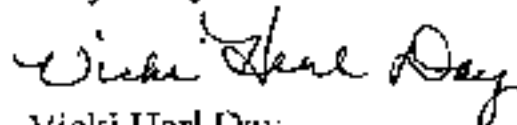
Dear Sir or Madam:

Enclosed is 1 original and 2 copies of Mainstream PAC's Statement of Organization.

Please return a file endorsed copy in the self-addressed, stamped envelope enclosed herewith.

Thank you for your assistance. Please do not hesitate to call if you have any questions.

Very Truly Yours



Vicki Herl Day
Mainstream PAC

Enclosures
VHD:hs

Paid for and authorized by Mainstream PAC

STATEMENT OF ORGANIZATION

(See reverse side for instructions)

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1. (a) NAME OF COMMITTEE IN FULL <input type="checkbox"/> (Check if name is changed) Mainstream PAC	2. DATE February 22, 1999
(b) Number and Street Address <input type="checkbox"/> (Check if address is changed) P.O. Box 29	3. FEC Identification Number Not issued
(c) City, State and ZIP Code San Jose, CA 95113-0029	4. Is This Report An Amendment? <input type="checkbox"/> YES <input checked="" type="checkbox"/> 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 _____ and is NOT an authorized committee.
(name of candidate)
- (d) This committee is a _____ committee of the _____ Party.
(National, State or subordinate) (Democratic, Republican, etc.)
- (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.

6. Name of Any Connected Organization or Affiliated Committee	Mailing Address and ZIP Code	Relationship
None		

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
Joe Judge	1223 Coyote Creek Ct. San Jose, CA 95116	Treasurer

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
Joe Judge	1223 Coyote Creek Ct., San Jose, CA 95116	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
Comerica Bank	333 W. Santa Clara St. San Jose, CA 95113-4339

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 Joe Judge	SIGNATURE OF TREASURER 	DATE 2/22/99
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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.

For further information contact:
 Federal Election Commission
 Toll-free 800-424-9590
 Local 202-219-3420

FEBAN121

FEC FORM 1
(revised 4/87)

