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ELECTION CENTER

2003 MAY -7 P 12:58

FEC  
FORM 1

STATEMENT OF  
ORGANIZATION

Office Use Only

1. NAME OF  
COMMITTEE (as full)

(Check if name  
is changed)

Example: If typing, type  
over the lines.

12FE4MS

STEAMFITTERS LOCAL 638 PAC

ADDRESS (number and street)

132-32 48TH AVENUE

(Check if address  
is changed)

LONG ISLAND CITY

NY

11101

CITY ▲

STATE ▲

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

DAVEGROTE@AOL.COM

COMMITTEE'S WEB PAGE ADDRESS (URL)

COMMITTEE'S FAX NUMBER

718 - 784 - 7285

2. DATE

04 29 2003

3. FEC IDENTIFICATION NUMBER ▶

C

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

PATRICK E. DOLAN

Signature of Treasurer



Date

04 29 2003

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.

Office  
Use  
Only

For further information contact:  
Federal Election Commission  
Toll Free 800-424-9690  
Local 202-694-1100

FEC FORM 1  
(Revised 02/2003)

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)  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

ENTERPRISE ASSOC OF STEAMFITTERS  
LOCAL 638

Mailing Address 32-32 48TH AVENUE

LONG ISLAND CITY NY 11101

CITY ▲ STATE ▲ ZIP CODE ▲

Relationship \_\_\_\_\_

Type of Connected Organization:

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

Write or Type Committee Name

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 PATRICK E. DOLAN

Mailing Address 32-32 48TH AVENUE  
LONG ISLAND CITY NY 11101

Title or Position TREASURER CITY ▲ STATE ▲ ZIP CODE ▲

Telephone number 718-392-3420

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 PATRICK E. DOLAN

Mailing Address 32-32 48TH AVENUE  
LONG ISLAND CITY NY 11101

Title or Position TREASURER CITY ▲ STATE ▲ ZIP CODE ▲

Telephone number 718-392-3420

Full Name of Designated Agent WILLIAM ABBATE

Mailing Address 32-32 48TH AVENUE  
LONG ISLAND CITY NY 11101

Title or Position ASST TREASURER CITY ▲ STATE ▲ ZIP CODE ▲

Telephone number 718-392-3420

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.

JP MORGAN CHASE

Mailing Address

10-51 JACKSON AVENUE

LONG ISLAND CITY

NY

11101

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Bank, Depository, etc.

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

Federal Election Commission

## ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

The Commission has added this page to the end of this filing to indicate how it was received.

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