

September 12, 2007

Federal Election Commission 999 E St., N.W. Washington, D.C. 20463

To Whom It May Concern,

We received a notice indicating our failure to properly identify the relationship between HearPAC and Hearing Industries Association. An amended FEC FORM 1 was mailed to you to resolve the problem; however the amended form was left unsigned by HearPAC treasurer Jerome C. Ruzicka. We apologize for the confusion. Please disregard the Statement of Organization dated 9/11/07 and use the included form found in this mailing to satisfy your earlier request.

Best Regards,

Micah Levi Spangler

Government Relations Coordinator Hearing Industries Association 515 King St. Suite 420 Alexandria, VA 22314

703-684-5744

mspangler@clarionmanagement.com

## M

FEC

Only

FE3AN042.PDI

1. - - --

## STATEMENT OF **ORGANIZATION**

RECEIVED FEC MAIL CENTER

2007 SEP 17 AH 9: 45 FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. HEARPAC, OF HEARING FINDIUSTRUES ASSOCIATION ADDRESS (number and street) (Check if address is changed) CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS M. e.a. r.p. q. C. b. N. e. G. f. i. n. g. . 10 f. g. COMMITTEE'S WEB PAGE ADDRESS (URL) COMMITTEE'S FAX NUMBER DATE C00437798 FEC IDENTIFICATION NUMBER ▶ AMENDED (A) 4. IS THIS STATEMENT NEW (N) OR I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. Jerome C. Ruzicka Type or Print Name of Treasurer Signature of Treasurer 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 For further information contact: **FEC FORM 1** Federal Election Commission Use (Revised 02/2003)

Toll Free 800-424-9530

Local 202-694-1100

5. TYPE OF COMMITTEE (Check One)	Page 2
(a) This committee is a principal campaign committee. (Complete the candidate information below.)  This committee is an authorized committee, and is NOT a principal campaign committee. information below.)	•
Name of Candidate	
Candidate Office Party Affiliation Sought: House Senate President	State State District
(c) This committee supports/opposes only one candidate, and is NOT an authorized committee	ee.
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 separa committee.	ate segregated fund or party
6. Name of Any Connected Organization or Affiliated Committee  [H <sub>1</sub> FA R <sub>1</sub>   N <sub>1</sub> 6   IN D V   S   T   R <sub>1</sub>   U   E   S   A   S   O   C   U   A   T   R   D   N   U   E   S   A   S   O   C   U   A   T   R   D   N   U   E   S   D   C   U   A   T   R   D   N   U   E   S   D   C   U   A   T   R   D   N   U   E   S   D   C   U   A   T   R   D   N   U   E   S   D   C   U   A   T   R   D   N   U   E   S   D   C   U   A   T   R   D   N   U   E   S   D   C   U   A   T   R   D   N   U   E   S   D   C   U   A   T   R   D   N   U   E   S   D   C   U   A   T   R   D   N   U   E   S   D   C   U   A   T   R   D   N   D   U   E   S   D   C   U   A   T   R   D   N   D   U   E   S   D   C   U   A   T   R   D   N   D   U   E   S   D   C   U   A   T   R   D   N   D   U   E   S   D   C   U   A   T   R   D   N   D   U   E   S   D   C   U   A   T   D   D   U   E   S   D   C   U   A   T   D   D   U   E   S   D   C   U   A   T   D   D   U   E   S   D   C   U   A   T   D   D   U   E   S   D   D   U   E   S   D   D   U   E   S   D   D   U   E   S   D   D   U   E   S   D   D   U   E   S   D   D   U   E   S   D   D   U   E   S   D   D   U   E   S   D   D   U   E   S   D   D   U   E   S   D   D   U   E   S   D   D   U   E   S   D   D   U   E   S   D   D   U   E   S   D   D   U   E   S   D   D   U   E   S   D   D   U   E   S   D   D   U   E   D   D   U   E   D   D   U   E   D   D   U   E   D   D   U   E   D   D   U   E   D   D   U   E   D   D   U   E   D   D   U   E   D   D   U   E   D   D   U   E   D   D   U   E   D   D   U   E   D   D   U   E   D   D   U   D   D   U   E   D   D   U   D   U   E   D   D   U   D   U   D   D   U   D   D	
Mailing Address SICIS KICING SIT.	
15: U1: TE 1440	
	223,141-131,57
CITY ▲ STATE ▲	ZIP CODE ▲
Relationship   P. A. O. E. N. 7, 6, P. G. A. W. I. Z. A. T. I. O. N.	
Type of Connected Organization:	
Corporation Corporation w/o Capital Stock Labor C	Organization
Membership Organization Trade Association Cooper	ative

FE3AN042.PDF

:

	-			
	FEC Form 1 (Revised	02/2003)		Page 3
٧	Vrite or Type Committee Nam	_	1 /2	
	Mear VAC	of Hearing Industrie		
7.	books and records.	entify by name, address (phone number -	- optional) and position of the po	erson in possession of committee
	Full Name CAR	D.L.E. RO.611N		
	Mailing Address	15.15 KIIMG SIT		
		501718 420		3 15 F
		ALEXANDRIA	IVA	223114-6200
	Title or Position▼	CITY ▲	STATE ▲	ZIP CODE ▲
	MILLE PRES	LID SN7	Telephone number 2	0 <sub>1</sub> 31-6 <u>61</u> 41-151 <del>34</del> 4
8.	Treasurer: List the name at any designated agent (e.g.,	nd address (phone number – optional) o assistant treasurer).	f the treasurer of the committee;	and the name and address of
	Full Name of Treasurer	DIME GRUZIIGKA		
	Mailing Address	BILAIRIKIEY LABISI		
		1660101 WATSHILWIGHT	TION AVEL SION	71 <del>//</del>
		EDEN PRAIRIE	M.V	<u> 5,5,3,9,4</u> -13,40,4
	Title or Position▼	CITY ▲	STATE ▲	ZIP CODE ▲
	TIRE A SURIER		Telephone number 191	52-1941-16401
	Full Name of Designated Agent	0, L, E, 12, 0, 6% N, 1, 1, 1		
	Mailing Address	5,1,5, 1/1,1/6, 15,7.	<u> </u>	
		SU117F 1420		
		ALEXANDALA	LIA VIA	1223/14-13/157
	Title or Position▼	CITY ▲	STATE ▲	ZIP CODE ▲
	V11CF PRES	IPEMT	Telephone number 2	0,31-16,6,4-15,7,4,4
_				

	FEC Form	1 (Re	vised	02/	/200:	3)																							Pag	ю 4	ļ	
9.	Banks or Other safety deposit b Name of Bank,	r Depo	osito or ma	rles ninta	: Lis ins f	t al		nks	or o	ther	dep	oosit	orie	s ir	ı Wh	nich	the	co	mmi	ttee	de	posi	its f	und	s, i	hold	ls a	ccc	ount	ts, r	rents	\$
		B	V 12	Ĭ	É		<u>(</u>	$\mathcal{H}_{\square}$	ER	18	Εı	Ri	<b>7</b> ,		1	L1				L		ı						<u></u>				
	Mailing Address			Į	10	٥١٥	1 1	FI	91	R	F	A)	4	<sub>1</sub> S	7.			-1	1					_1	_1_			ı.	1		<u> </u>	
				L		1			_1				1	<u>t</u>					1	1 1	L			!	_ I	1				ا ا	L	ı
				l	Ąc	-,E		A	N <sub>I</sub> )	R	L	<u>م</u>		ı	<u>I</u>						U	AJ		7	-13	<u>د</u> رع	31	<u>ر</u>	<u>/</u> ] -	L		
				CITY A										STATE ▲							ZIP CODE ▲											
	Name of Bank,	Depos	sitory,	etc																												
		L		<u> </u>			ш			1				ı	1	Ш			1		ш	1	. 1.			1		1	1_			
	Mailing Address			L			لــــــــــــــــــــــــــــــــــــــ						ı	ŀ	ı	Ш				لــــــــــــــــــــــــــــــــــــــ								<u>_</u>			Ш	
				L		1	LL			1		ı	L	.1		LL	_1			Ш	Ш								<u> </u>	لــــــــــــــــــــــــــــــــــــــ	<u> </u>	1_
				i													,		1	ı	١.	ı		1			,		١_	Ι,		

CITY A

STATE A

ZIP CODE A

Federal Election Commiss ENVELOPE REPLACEMENT PAGE FOR INC The FEC added this page to the end of this filing to	COMING DOCUMENTS
Hand Delivered	Date of Receipt
USPS First Class Mail	Postmarked 9 mg
USPS Registered/Certified	Postmarked (R/C)
USPS Priority Mail	Postmarked
Delivery Confirmation™ or Signature	e Confirmation™ Label
USPS Express Mail	Postmarked
Postmark Illegible	
No Postmark	
Overnight Delivery Service (Specify):	Shipping Date
Next	Business Day Delivery
Received from House Records & Registration Office	Date of Receipt ce
Received from Senate Public Records Office	Date of Receipt
Received from Electronic Filing Office	Date of Receipt
Other (Specify):	ate of Receipt or Postmarked
h	9/17/07
PREPARER (3/2005)	DATE PREPARED