

Linda Kirkpatrick  
914 249-1804

RECEIVED  
MasterCard  
FEDERAL  
International  
OPERATIONS CENTER  
MasterCard  
2005 MAR 21 A 10:50

To Whom it May Concern,  
Attached please  
find a Statement of  
Organization form for  
MasterCard International  
Employees' PAC.

Please call me if  
you have any questions.

Regards,  
Linda

25038761260

FEC FORM 1

STATEMENT OF ORGANIZATION

(See instructions)

RECEIVED FEC MAIL OPERATIONS CENTER

2005 MAR 21 A 10:50 Office use only

1. NAME OF COMMITTEE (in full)

(Check if name is changed)

Example: If typing, type over the lines

12FE4M5

MasterCard International Inc. Employees' PAC

ADDRESS (number and street)

2000 Purchase Street

(Check if address is changed)

Purchase

NY

10577

CITY

STATE

ZIP CODE

COMMITTEE'S E-MAIL ADDRESS

COMMITTEE'S WEB PAGE ADDRESS (URL)

COMMITTEE'S FAX NUMBER

2. DATE

MM / DD / YYYY 03 / 17 / 2005

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

Linda Kirkpatrick

Signature of Treasurer

*Linda Kirkpatrick*

Date

MM / DD / YYYY 03 / 17 / 2005

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

Office Use Only

For further information contact: Federal Election Commission Toll Free 800-424-9530 Local 202-694-1100

FEC FORM 1 (Revised 02/2003)

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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

MasterCard International Inc. \_\_\_\_\_

\_\_\_\_\_

Mailing Address \_\_\_\_\_ 2000 Purchase Street \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_ Purchase \_\_\_\_\_ NY \_\_\_\_\_ 10577 - \_\_\_\_\_

CITY ▲ STATE ▲ ZIP CODE ▲

Relationship \_\_\_\_\_ Connected \_\_\_\_\_

Type of Connected Organization:

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

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Write or Type Committee Name

**MasterCard International Inc. Employees' PAC**

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 Linda Kirkpatrick

Mailing Address 2000 Purchase Street  
MS 2C202  
Purchase NY 10577 -

Title or Position ▼ CITY ▲ STATE ▲ ZIP CODE ▲

Treasurer Telephone number 914 - 249 - 1804

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 Linda Kirkpatrick

Mailing Address 2000 Purchase Street  
MS 2C202  
Purchase NY 10577 -

Title or Position ▼ CITY ▲ STATE ▲ ZIP CODE ▲

Treasurer Telephone number 914 - 249 - 1804

Full Name of Designated Agent Joseph Rubin

Mailing Address 1401 Eye Street,NW, #240  
Washington DC 20005 -

Title or Position ▼ CITY ▲ STATE ▲ ZIP CODE ▲

Assistant Treasurer Telephone number 202 - 414 - 8002

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

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 Next Business Day Delivery

Received from House Records & Registration Office Date of Receipt

Received from Senate Public Records Office Date of Receipt

Received from Electronic Filing Office Date of Receipt

Other (Specify): Date of Receipt or Postmarked

*EL* *3/21/05*  
 PREPARER DATE PREPARED  
 (3/2005)

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