

# FEC FORM 1

# STATEMENT OF ORGANIZATION

(See instructions)

Office use only

1. NAME OF COMMITTEE (in full)

(Check if name is changed)

Example: If typing, type over the lines

12FE4M5

PIPEFITTERS POLITICAL ACTION COMMITTEE

ADDRESS (number and street)

30100 NORTHWESTERN HWY

(Check if address is changed)

FARMINGTON HILLS

MI

48334

CITY ▲

STATE ▲

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

Holly\_J\_Morris@Comerica.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

COMMITTEE'S FAX NUMBER

2483717272

2. DATE

04 / 30 / 2007

3. FEC IDENTIFICATION NUMBER

C C00129627

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 **C WILLIAM HELWIG II**

Signature of Treasurer Electronically Filed by **C WILLIAM HELWIG II**

Date

04 / 30 / 2007

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. S437g.

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)

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

**PIPEFITTERS LOCAL 636**  
 \_\_\_\_\_  
 \_\_\_\_\_

Mailing Address **30100 NORTHWESTERN HIGHWAY**  
 \_\_\_\_\_

**FARMINGTON HILLS**  **MI**  **48334** -   
 CITY ▲ STATE ▲ ZIP CODE ▲

Relationship **CONNECTED** \_\_\_\_\_

Type of Connected Organization:

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

Write or Type Committee Name

**PIPEFITTERS POLITICAL ACTION COMMITTEE**

- 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 **COMERICA BANK**

Mailing Address **PAC SERVICES**  
**P.O. BOX 75000**  
**DETROIT MI 48275 - 2250**

Title or Position ▼ **RECORDKEEPER** CITY ▲ STATE ▲ ZIP CODE ▲  
**248 371 5562**  
 Telephone number

- 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 **C WILLIAM HELWIG II**

Mailing Address **30100 NORTHWESTERN HWY**  
**FARMINGTON HILLS MI 48334 -**

Title or Position ▼ **TREASURER** CITY ▲ STATE ▲ ZIP CODE ▲  
**248 538 6636**  
 Telephone number

Full Name of Designated Agent **FRANK WIECHERT**

Mailing Address **30100 NORTHWESTERN HWY.**  
**FARMINGTON HILLS MI 48334 -**

Title or Position ▼ **CHAIRMAN** CITY ▲ STATE ▲ ZIP CODE ▲  
**248 538 6636**  
 Telephone number

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.

COMERICA BANK

Mailing Address

PAC SERVICES, MC 2250

P.O. BOX 75000

DETROIT

MI

48275

2250

CITY ▲

STATE ▲

ZIP CODE ▲

**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.

[ ADDITIONAL ]

Mailing Address

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

CITY ▲ STATE ▲ ZIP CODE ▲

Name of Any Connected Organization or Affiliated Committee

[ ADDITIONAL ]

PIPEFITTERS POLITICAL ACTION CO

Mailing Address

30100 NORTHWESTERN HWY.

FARMINGTON HILLS

MI

48334

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship

AFFILIATED

Type of Connected Organization:

Corporation

Corporation w/o Capital Stock

Labor Organization

Membership Organization

Trade Association

Cooperative

**Designated Agent**

**[ ADDITIONAL ]**

Full Name

Mailing Address

Title or Position ▼

CITY ▲

STATE ▲

ZIP CODE ▲

Telephone number  -  -

