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FEC
FORM 1

STATEMENT OF
ORGANIZATION

Office Use Only

1. NAME OF COMMITTEE (in full) (Check if name is changed) Example: If typing, type over the lines. 12FE4M5

COMMITTEE ON PIPE AND TUBE IMPORTS
FEDERAL PAC

ADDRESS (number and street) 900 SEVENTH STREET, N.W.

(Check if address is changed) SUITE 500

WASHINGTON DC 20001-4017

CITY STATE ZIP CODE

COMMITTEE'S E-MAIL ADDRESS
SCHAGRIN@EROLS.COM

COMMITTEE'S WEB PAGE ADDRESS (URL)
N/A

COMMITTEE'S FAX NUMBER
202-429-2524

2. DATE 07 03 2007

3. FEC IDENTIFICATION NUMBER C

4. IS THIS STATEMENT X 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 Roger B. Schagrin

Signature of Treasurer [Signature] Date 07 03 2007

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 800-424-9530 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

THE COMMITTEE ON PIPE AND TUBE IMPORTS

Mailing Address 900 SEVENTH STREET N.W.
 SUITE 500
 WASHINGTON DC 20001-4017
 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

Committee on Pipe and Tube Imports Federal 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 Tamaral Browne

Mailing Address 900 Seventh St. N.W. Suite 500 WASHINGTON DC 20001-4017

Title or Position CITY STATE ZIP CODE

DIR. GOV'T AFFAIRS Telephone number 202-223-1700

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 ROGER B. SCHAGRIN

Mailing Address 900 Seventh St. NW SUITE 500 WASHINGTON DC 20001-4017

Title or Position CITY STATE ZIP CODE

EXEC. DIRECTOR Telephone number 202-223-1700

Full Name of Designated Agent Tamaral Browne

Mailing Address 900 Seventh St. N.W. Suite 500 WASHINGTON DC 20001-4017

Title or Position CITY STATE ZIP CODE

DIR. GOV'T AFFAIRS Telephone number 202-223-1700

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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.

BRANCH BANKING AND TRUST (BB+T)

Mailing Address

1909 K STREET

WASHINGTON DC 20006-1152

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Bank, Depository, etc.

Mailing Address

CITY ▲


STATE ▲

ZIP CODE ▲

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Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
 The FEC added this page to the end of this filing to indicate how it was received.

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<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
Next Business Day Delivery <input type="checkbox"/>	
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
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<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

	<i>7/9/07</i>
PREPARER	DATE PREPARED

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