HARLEYSVILLE INSURANCE POLITICAL ACTION COMMITTEE – FEDERAL
"HIPAC – FED"
355 MAPLE AVENUE
HARLEYSVILLE, PENNSYLVANIA 19438

Roger A. Brown
Treasurer
(215) 256-5173
Fax: (215) 256-5631
rbrown@harleysvillegroup.com

August 31, 2001

RECEIVED
FEC MAIL ROOM
2001 SEP -4 P 12:31

Via – Certified Mail, Return Receipt Requested

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Re: Statement of Organization - Amendment

Dear Sir or Madam:

Enclosed is an Amendment to the Statement of Organization. Please change your records to show that Roger A. Brown, effective August 17, 2001, is the Treasurer.

Should you have any questions concerning this, please direct them to my attention.

Very truly yours,

Roger A. Brown
Treasurer

RAB:nd
Enclosure

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FEC FORM 1

STATEMENT OF ORGANIZATION

(See Instructions)

RECEIVED
FEC MAIL ROOM
2001 SEP -4 P 4:01

Office Use Only

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

Harleysville Group Political Action Committee - Federal (HIPAC-FED)

ADDRESS (number and street)

355 Maple Avenue

[ ] (Check if address is changed)

Harleysville | PA | 19438 - 2297

CITY ▲ STATE ▲ ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

COMMITTEE'S WEB PAGE ADDRESS (URL)

2. DATE 08 / 17 / 2001

3. FEC IDENTIFICATION NUMBER ▶ C 00123950

4. IS THIS STATEMENT [ ] NEW (N) OR [X] 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 A. Brown

Signature of Treasurer

Date 08 / 31 / 2001

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 1/01)

FE1AN040.PDF

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**

Mailing Address

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

Mailing Address

Title or Position ▼ CITY ▲ STATE ▲ ZIP CODE ▲

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: Roger A. Brown

Mailing Address: 355 Maple Avenue

Harleysville | PA | 19438 – 2297

Title or Position ▼: Senior Vice President, Secretary, Governance Officer & General Counsel

CITY ▲ STATE ▲ ZIP CODE ▲

Telephone number: 215 – 256 – 5173

Full Name of Designated Agent

Mailing Address

Title or Position ▼ CITY ▲ STATE ▲ ZIP CODE ▲

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.

Mailing Address

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.

☐	Hand Delivered	Date of Receipt
☐	First Class Mail	POSTMARKED
☑	Registered/Certified Mail	POSTMARKED (R/C) 8/31/01
☐	No Postmark	
☐	Postmark Illegible	
☐	Received from the House office of Records and Registration	Date of Receipt
☐	Received from the Senate Office of Public Records	Date of Receipt
☐	Other (Specify):	Postmarked _____ and/or Date of Receipt
☐	Electronic Filing	

DAC	9/04/01
PREPARER	DATE PREPARED

(6/2000)