09/22/2004 17 : 27

FEC FORM 1

STATEMENT OF ORGANIZATION

(See Instructions)

Office Use Only

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

America's Health Insurance Plans PAC (AHIP PAC)

ADDRESS (Number and Street)

601 Penn. Avenue, NW

(Check if address is changed)

#500, South Bldg.

WASHINGTON DC 20004 -

CITY STATE ZIP CODE

COMMITTEE'S E-MAIL ADDRESS

fburkhart@ahip.org

COMMITTEE'S WEB PAGE ADDRESS (URL)

COMMITTEE'S FAX NUMBER

2029554397

2. DATE 10 31 2003

3. FEC IDENTIFICATION NUMBER C C00106740

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 Robert Borchardt

Signature of Treasurer Electronically Filed by Robert Borchardt Date 09 22 2004

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)

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) X 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

America's Health Insurance Plans, AHIP

Mailing Address 601 Penn. Ave., NW

#500, South Bldg.

Washington DC 20004 -

CITY STATE ZIP CODE

Relationship Connected Organizati

Type of Connected Organization:

Corporation Corporation w/o Capital Stock Labor Organization

Membership Organization X Trade Association Cooperative

Write or Type Committee Name

America's Health Insurance Plans PAC (AHIP 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: Frances Burkhart

Mailing Address: 601 Pennsylvania Ave NW
Suite #500 South Building

Washington — CITY ▲
DC — STATE ▲
20004 — ZIP CODE ▲

Title or Position ▼: Dir. of Pol. Affairs

Telephone number: 202 - 778 - 3217

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: Robert Borchardt

Mailing Address: 17434 Avenleigh Dr.

Ashton — CITY ▲
MD — STATE ▲
20861 — ZIP CODE ▲

Title or Position ▼: Treasurer

Telephone number: 202 - 778 - 3214

Full Name of Designated Agent:

Mailing Address:

CITY ▲
STATE ▲
ZIP CODE ▲

Title or Position ▼:

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.

Riggs National Bank

Mailing Address 1913 Mass. Ave., NW

Washington DC 20036 -

CITY STATE ZIP CODE