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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.

12FE4MS

APPLIED SIGNAL TECHNOLOGY INC. PAC (AST PAC)

ADDRESS (number and street)

400 WEST CALIFORNIA AVENUE

(Check if address
is changed)

SUNNYVALE

CA

94086

CITY ▲

STATE ▲

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

astpac@appsig.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

www.astpac.com

COMMITTEE'S FAX NUMBER

408-774-2499

2. DATE

06

02

2006

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

THOMAS B. LIESY

Signature of Treasurer

Thomas B. Liesy

Date

06

02

2006

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 800-424-6530
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

APPLIED SIGNAL TECHNOLOGY INC.

Mailing Address 1400 WEST CALIFORNIA AVE

SUNNYVALE CA 94086

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

APPLIED SIGNAL TECHNOLOGY INC, PAC (AST 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 SHERYL GRAY

Mailing Address 400 WEST CALIFORNIA AVE SUNNYVALE CA 94086

Title or Position BOOKKEEPER CITY STATE ZIP CODE Telephone number 408-522-3405

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 THOMAS B. LIESY

Mailing Address 400 WEST CALIFORNIA AVE SUNNYVALE CA 94086

Title or Position TREASURER CITY STATE ZIP CODE Telephone number 408-522-3303

Full Name of Designated Agent JOSEPH LEONELLI

Mailing Address 400 WEST CALIFORNIA AVE SUNNYVALE CA 94086

Title or Position ASSISTANT TREASURER CITY STATE ZIP CODE Telephone number 408-622-3433

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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.

WELLS FARGO NATIONAL BANK

Mailing Address

1121 PARK CENTER RD

SAN JOSE CA 95113

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"/> USPS Express Mail | Postmarked |
| <input type="checkbox"/> Postmark Illegible | |
| <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 |
| <input type="checkbox"/> Received from Senate Public Records Office | Date of Receipt |
| <input type="checkbox"/> Received from Electronic Filing Office | Date of Receipt |
| <input type="checkbox"/> Other (Specify): | Date of Receipt or Postmarked |

| | |
|---|----------------------|
|  | <i>6/12/06</i> |
| PREPARER | DATE PREPARED |

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