

# 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

Patton Boggs PAC

ADDRESS (number and street)

2550 M Street N.W.

(Check if address is changed)

Washington

DC

20037

CITY ▲

STATE ▲

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

wryan@pattonboggs.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

COMMITTEE'S FAX NUMBER

2023310534

2. DATE

09 / 29 / 2006

3. FEC IDENTIFICATION NUMBER

C C00401083

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

Mr. Timothy J. May

Signature of Treasurer

Electronically Filed by Mr. Timothy J. May

Date

09 / 29 / 2006

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

None \_\_\_\_\_  
 \_\_\_\_\_

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

**Patton Boggs 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 **William J. Ryan**

Mailing Address **2550 M Street, N.W.**

**Washington** **DC** **20037** - -

Title or Position ▼ **Assistant Treasurer** **CITY ▲** **STATE ▲** **ZIP CODE ▲**

Telephone number **202** - **457** - **5642**

- 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 **Mr. Timothy J. May**

Mailing Address **2550 M Street N.W.**

**Washington** **DC** **20037** - -

Title or Position ▼ **Treasurer** **CITY ▲** **STATE ▲** **ZIP CODE ▲**

Telephone number **202** - **457** - **6050**

Full Name of Designated Agent **Mr. Thomas Hale Boggs, Jr.**

Mailing Address **2550 M Street NW**

**Washington** **DC** **20037** - -

Title or Position ▼ **Director** **CITY ▲** **STATE ▲** **ZIP CODE ▲**

Telephone number **202** - **457** - **6000**

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.

**Fidelity & Trust Bank**

Mailing Address

**1725 Eye Street, N.W.**

**Washington**

**DC**

**20006** -

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 ]

Citibank F.S.B.

Mailing Address

P. O. Box 19748

Washington

DC

20036

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Any Connected Organization or Affiliated Committee

[ ADDITIONAL ]

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship

Type of Connected Organization:

Corporation

Corporation w/o Capital Stock

Labor Organization

Membership Organization

Trade Association

Cooperative

**Designated Agent**

**[ ADDITIONAL ]**

Full Name Mr. Stuart M. Pape

Mailing Address 2550 M Street N.W.

Washington DC 20037

Title or Position ▼ CITY ▲ STATE ▲ ZIP CODE ▲

Director Telephone number 202 - 457 - 6000

**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

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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\_\_\_\_

CITY ▲

STATE ▲

ZIP CODE ▲

**Name of Any Connected Organization or Affiliated Committee**

[ ADDITIONAL ]

\_\_\_\_\_

\_\_\_\_\_

Mailing Address

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_

\_\_\_\_-

\_\_\_\_

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship

\_\_\_\_\_

Type of Connected Organization:

Corporation

Corporation w/o Capital Stock

Labor Organization

Membership Organization

Trade Association

Cooperative

**Designated Agent**

**[ ADDITIONAL ]**

Full Name Mr. Benjamin L. Ginsberg

Mailing Address 2550 M Street N.W.

Washington DC 20037 -

Title or Position ▼ CITY ▲ STATE ▲ ZIP CODE ▲

Director Telephone number 202 - 457 - 6000