

FEDERAL ELECTION COMMISSION WASHINGTON, D.C. 20463

June 10, 2009

Jim D. Marshall, Treasurer Aerospace District Lodge 837-IAMAW-PAC 212 Utz Ln. Hazelwood, MO 63042

Identification Number: C00169151

Reference: April Quarterly Report (1/01/09-3/31/09)

Dear Treasurer:

This letter is prompted by the Commission's preliminary review of the report(s) referenced above. This notice requests information essential to full public disclosure of your federal election campaign finances. Failure to adequately respond by the response date noted above could result in an audit or enforcement action. Additional information is needed for the following item:

- Your report(s) was not signed by the treasurer or designated agent listed on your Statement of Organization. Please amend your report(s) by providing the signature of an individual that is authorized to sign the report(s). 2 U.S.C. §434(a)(1) and 11 CFR §104.14(a) and (d) If a new treasurer has been appointed, please file an amended Statement of Organization (FORM 1) or a letter (if not an electronic filer) to reflect this change.

Please note, you will not receive an additional notice from the Commission on this matter. Adequate responses must be received by the Commission on or before the due date noted above to be taken into consideration in determining whether audit action will be initiated. Failure to comply with the provisions of the Act may also result in an enforcement action against the committee. Any response submitted by your committee will be placed on the public record and will be considered by the Commission prior to taking enforcement action. Requests for extensions of time in which to respond will not be considered.

<u>Electronic filers must file amendments (to include statements, designations and reports) in an electronic format and must submit an amended report in its entirety, rather than just those portions of the report that are being amended.</u>

Response Due Date: July 16, 2009

RO-RECEIVED FEC MAIL CENTER

2009 JUN 22 A 11: 10

FEC FORM 1	STATEMENT ( ORGANIZATIO					A II: 10					
1. NAME OF COMMITTEE (in full)		nple:If typing, type the lines.	12FE4M5		*						
John DeWint	ri Diarriity, Trree	JULICIAICI				]					
[Aleriois: parcier]	Diistriidti Lord	<u>; e 181317-II</u>	A m A C - P	AC	┶┶┶	1					
ADDRESS (number and street)	21121 UITIZI ILIAINIA			╺┷┈╿╶も─┞╶╢╌╸	<u>I. I. I. I.</u>						
(Check if address is changed)	HiAizieiliwioiadi	┶┷┶┷┷┷┷┙	<u>m</u> ol	6 <u>3</u> 042	<u></u>	] ]					
	CITY		STATE		DE						
COMMITTEE'S E-MAIL ADDRE	SS (Please provide only one e-mail ad	dress)									
(Check if address	DIAICI 11+418131719151	BICIGILIOIDIAI	onet			L					
is changed)					<u>l_l l_l</u>	J					
COMMITTEE'S WEB PAGE ADI	DRESS (URL)										
(Check if address					<u>i i i i</u>	L					
is changed)											
2. DATE 0.6	6 2009										
3. FEC IDENTIFICATION N		69151									
4. IS THIS STATEMENT		AMENDED (A)				<b>_</b> .					
I certify that I have examined the Type or Print Name of Treasure	nis Statement and to the best of my in John Deh	knowledge and belief it ), 77 Dar	is true, correct a	and complete.							
Signature of Treasurer	Hallit a	ents	Date D. G	· · · · · · · · · · · · · · · · · · ·	2009	 }`					
	eous, or incomplete information may sut ANY CHANGE IN INFORMATION SHO			he penalties of 2	U.S.C. §437(	g.					
Office Use Only		For further information co Federal Election Commissio Toll Free 800-424-9530 Local 202-694-1100		FEC FOF (Revised 02/		_					

I

29030103380

e 9

FEC Form 1 (Revised 02/2009)

TYPE OF Candida				_																											
(a)		This	com	mittee	is a	a pri	ncipa	l ca	mpa	ign	con	nm	ittee	. (C	omp	olete	th	e ca	ndid	ate	info	rmat	ion	belo	w.)						
(b)				mittee n bel		in ai	uthor	ized	con	nmit	tee,	, ai	nd is	5 N(	а тс	a pri	nci	pai o	amp	baig	n co	ommi	itte	e. (C	ompi	lete	e the	0 CE	India	late	
Name of Candidate		L	<u> </u>		ц.,	<u>,  </u>				11		1		I	_L_	1_1				1	LL		<u> </u>	<u> </u>		┵	_ <b>_</b>	_ <b>_</b>	<u> </u>		_ <b>_</b>
Candidate Party Affil		ſ		• . •	. ·		-	)ffice ioug	-	•	÷	I	Hou	50		 		Sena	ate			Pi	res	ident			Sta Disi	te trict		·	
(C)		This	com	mittee	sup	port	s/op	oose	s or	nly a	ne	ca	ndid	ate,	and	d is i	NC	)T ai	n aul	thoi	rized	con	nm	ittee.							
Name of Candidate		L		}		_]						_ }		]	}	1_1				]					ļ	1					<u> </u>
Party C	omi	nitte	æ:																												
: (d) ··	:	This	com	mittee	is a	L							nal, oord			omr	nitte	9e 0	f the	,		· · · ·			•			ratic can,		.) Pa	urty.
Politica	l Ac	tion	Cor	nmil	tt <b>ee</b>	(P/	AC):		·															•				—			
(e) ,	•		com	nittee	is a	l sep	oarat	e se	greg	ateo	d fu	Ind	. (Ide	entif	ly co	nne	cte	d orę	yaniz	zatio	on oi	n line	e 6.	) Its c	onn	ect	ed (	orga	nize	ition	is a:
		· ·	c	orpor	ation	1					•			Co	rpor	atior	n w	/o C	apita	al S	itock	:		·		La	bor	Orç	jani;	zatio	n
		: · 	N	lembe	ərshi	p Or	rgani	zatic	on			-		Tra	de	Asso	ocia	tion								Cc	юре	ərativ	ve		
			•		In a	dditie	on, th	nis c	omm	ittee	ə is	a L	.obb	yist	/Reg	gistra	ant	PAC													
(f) .	 -			mittee 9. (i.e.								nc	ne	Fed	eral	can	did	ate,	and	is	NOT	as	ю	arate	seg	reç	jate <sup>,</sup>	d fu	nd (	or pa	irty
			In	additi	ion, t	his d	comn	nitte	e is a	a Lo	bby	vist/	Reg	istra	ant F	PAC.															
		<u>ر</u>	In	additi	ion, t	his d	comn	nitte	e is a	a Lei	ade	orst	nip P	AC	. (Id	entify	y sį	oons	or or	n lin	ie 6.	)									

## Joint Fundraising Representative:

This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political (g) committees/organizations, at least one of which is an authorized committee of a federal candidate.

\_ ...

## **Committees Participating in Joint Fundraiser**

1.	l		 L	1_			1						1			1		1	1	1		FEC ID	number	С			· ·. 		۰.	·· ·	·	•
2.	ł	1	 L			1		1	1	1		L		1	$\bot$	1	1	1	1	1		FEC ID	number	С	•	-		 			•	:
3.	Į	_[			T	Ţ				1	ļ							1			J	FEC ID	number	С	· 	••		· <i>.</i> -		··	۰ <u>،</u> 	-
4.	l	1	 		L		Ĺ			1				1.	$\bot$		1	L			_	FEC ID	number	С	•	 •	•	۰ <sup>.</sup>	• . •		•	

Page 2

<sup>(</sup>h) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate. ÷

FEC Form 1 (Revised 02/2009)

6

. •

Dago	٨
rade	4

Full Name of Designated Agent	╶┶╴┧╌┧╴┥╶┥╴┨╶┨╴┨╶┨╴┨									
Mailing Address										
		<del>┟╶╽╶┨┍┡╶╽┈╽╶┠╺┥╶┨╶</del> ╎								
Title or Position										
	└╼┶┶┟╍┶┶┶┶┷┷┙	Telephone number	╶╢╸┠╌╍╼┚╸┠╌╍╌╾╌┙							
safety deposit boxes or i	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, Deposito	ry, etc.									
L	╾┹╴┠╌┹╶┠╴┹╴┠╴╋╴╋╸╋╴╋╴╋╴╋									
Mailing Address										
		<u>╷</u>								
	CITY	STATE	ZIP CODE							
Name of Bank, Deposito	ry, etc.									
<u> </u>										
Mailing Address		<u>╷╷╷╷╷╷╷╷╷╷╷╷╷╷</u>								

CITY

STATE

ZIP CODE

9.

6. 51. 10

Write or Type Committee Name

L

6. Name of Any Connected	Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor								
Mailing Address									
	$\left[ \begin{array}{c} 1 \end{array} \right] \left[ \begin{array}{c} 1 \end{array} \left] \left[ \begin{array}{c} 1 \end{array} \right] \left[ \begin{array}{c} 1 \end{array} \right] \left[ \begin{array}{c} 1 \end{array} \left] \left[ \begin{array}{c} 1 \end{array} \right] \left[ \begin{array}{c} 1 \end{array} \left] \left[ \begin{array}{c} 1 \end{array} \left] \left[ \end{array} \right] \left[ \end{array} \left] \left[ \end{array} \left] \left[ \end{array} \right] \left[ \end{array} \left] \left[ \end{array} \left] \left[ \end{array} \right] \left[ \end{array} \left] \left[ \end{array} \left] \left[ \end{array} \left] \left[ \end{array} \left] \left[ \end{array} \right] \left[ \end{array} \right] \left[ \end{array} \left] \left[ \end{array} \left] \left[ \end{array} \left] \left[ \end{array} \right] \left[ \end{array} \left] \left[ \end{array} \left] \left[ \end{array} \left] \left[ \end{array} \right] \left[ \end{array} \left] \left[ \end{array} \right] \left[ \end{array} \left] \\$								
	CITY STATE ZIP CODE								
Relationship: Connecte	ed Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor								
<ol> <li>Custodian of Records: Ide books and records.</li> </ol>	entify by name, address (phone number optional) and position of the person in possession of committee								
Fully Trach	N DeWitt Darity								
	2  2  4  + 2  4  + 2  4  4  4  4  4  4  4  4  4  4  4  4								
Mailing Address									
	(Haizieiliwioioidi IIIIII Mio) (6301413-[11]								
Title or Position									
	Telephone number $3114 - 571 - 0603 \times 5$								
Dielcijyi-itine	$Telephone number  \boxed{114} - \boxed{57} - \boxed{0.6.03} \times 5$								
<ol> <li>Treasurer: List the name a any designated agent (e.g.,</li> </ol>	nd address (phone number optional) of the treasurer of the committee; and the name and address of assistant treasurer).								
Full Name of Treasurer									
Mailing Address	$2121$ , $u_1 \tau_2$ , $L_{\alpha n e_1}$								
	Hazielinicioidi								
Title or Position	CITY STATE ZIP CODE								
LSecy ' 4-TIF	$\frac{ 2 Q_1S_1  5  Q_1C_1  +  }{ 1- 1- 1- 1- 1- 1- 1- 1- 1- 1- 1- 1- 1- $								
	L_								

## 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.

Date of Receipt Hand Delivered Postmarked **USPS First Class Mail** Postmarked (R/C) **USPS Registered/Certified** 6/09 Postmarked **USPS Priority Mail** Delivery Confirmation<sup>™</sup> or Signature Confirmation<sup>™</sup> Label Postmarked **USPS Express Mail** Postmark-Illegible No Postmark **Shipping Date Overnight Delivery Service (Specify):** Next Business Day Delivery Date of Receipt **Received from House Records & Registration Office Date of Receipt Received from Senate Public Records Office** Date of Receipt **Received from Electronic Filing Office** Date of Receipt or Postmarked Other (Specify): PREPARER DATE PREPARED (3/2005)