

cc [Stanny  
F. ...]

# STATEMENT OF ORGANIZATION

(See reverse side for instructions)

REC'D  
COMMISSION  
MAIL ROOM

1. (a) NAME OF COMMITTEE IN FULL  (Check if name is changed)  
**AEG Transportation Systems Inc. Associates Political Fund**

(b) Number and Street Address  (Check if address is changed)  
**1501 Lebanon Church Road**

(c) City, State and ZIP Code  
**Pittsburgh PA 15025**

2. DATE  
**11/06/95**

3. FEC IDENTIFICATION NUMBER  
**CD0255399**

4. IS THIS STATEMENT AN AMENDMENT?  
 YES  NO

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	State/District

(c) This committee supports/opposes only one candidate \_\_\_\_\_ and is NOT an authorized committee.  
(name of candidate)

(d) This committee is a \_\_\_\_\_ committee of the \_\_\_\_\_ Party.  
(National, State or subordinate) (Democratic, Republican, etc.)

(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 a party committee.

Name of Any Connected Organization or Affiliated Committee	Mailing Address and ZIP Code	Relationship

Type of Connected Organization  
 Corporation  Corporation w/o Capital Stock  Labor Organization  Membership Organization  Trade Association  Cooperative

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
Treasurer		
Rayna Scarlato	1501 Lebanon Church Road	Treasurer
Denise DiGiacomo	Pittsburgh PA 15236	Asst. Treasurer

8. 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 and ZIP Code

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 <b>Rayna Scarlato</b>	SIGNATURE OF TREASURER <i>Rayna Scarlato</i>	DATE <b>11/06/95</b>
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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.

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**Federal Election Commission  
 ENVELOPE REPLACEMENT PAGE  
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The Commission has added this page to the end of this filing to indicate how it was received.

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J.A.Q.  
 PREPARER

11/14/95  
 DATE PREPARED

25030065407