

RECEIVED
FEC MAIL
OPERATIONS CENTER

2004 APR 12 A 11: 56

TMW
41 Sheffield Avenue
Providence, RI 02911

April 5, 2004

Ms. Kristine Adams
Campaign Finance Analyst
Federal Elections Commission
Washington, DC 20463

Dear Ms. Adams:

Enclosed please find an amended Statement of Organization for the Ocean State Political Action Committee (OSPAC). This amended statement is in response to your letter dated March 17, 2004 to my attention.

While I have completed the Statement of Organization in its entirety, in speaking to an analyst in your department, it is my understanding that only section "6" of the form was inaccurate. I have amended said section as directed by FEC staff.

If there are any other concerns or questions regarding OSPAC's filing requirements, please do not hesitate to contact me at (401) 486-4118, during work hours.

Thank you for your assistance in this matter.

Sincerely,



Timothy M. Welsh

RECEIVED
FEC MAIL
OPERATIONS CENTER

2004 APR 12 A 11:56

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

12FR4145

OCEAN STATE POLITICAL ACTION COMMITTEE (OS PAC)

ADDRESS (number and street)

41 SHEPHERD AVENUE



(Check if address
is changed)

BRANDONCE

NC

27911

CITY ▲

STATE ▲

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

PAC@OCEANSTATEPAAC.COM

COMMITTEE'S WEB PAGE ADDRESS (URL)

WWW.OCEANSTATEPAAC.COM

COMMITTEE'S FAX NUMBER

2. DATE

04 03 2004

3. FEC IDENTIFICATION NUMBER ▶

C00397067

4. IS THIS STATEMENT



NEW (N)

OR



AMENDED (A)

I certify that I have reviewed this Statement and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Timothy M. WELSH

Signature of Treasurer

Date

04 03 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
F21 Form 202-424-2526
Local 202-696-1100

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

Wanted _____

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

OCEAN STATE POLITICAL ACTION COMMITTEE

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 Timothy M. Welsh

Mailing Address 111 Sheffield Avenue

PROVIDENCE RI 02901

Title or Position CITY STATE ZIP CODE

TREASURER Telephone number 401-353-5568

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 Timothy M. Welsh

Mailing Address 111 SHEFFIELD AVENUE

PROVIDENCE RI 02901

Title or Position CITY STATE ZIP CODE

TREASURER Telephone number 401-353-5568

Full Name of Designated Agent

Mailing Address

Title or Position CITY STATE ZIP CODE

Telephone number

B. 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.

CITIZENS BANK

Mailing Address

ONE CITIZENS PLAZA

PROVIDENCE

RI

02903

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

CITY

STATE

ZIP CODE

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.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input checked="" type="checkbox"/> USPS First Class Mail	Postmarked 4/5/04
<input type="checkbox"/> USPS Registered/Certified/Priority/Express Mail	Postmarked (R/C)
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
<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>JSD</i>	4/12/04
PREPARER	DATE PREPARED