

**FEC
FORM 1**

**STATEMENT OF
ORGANIZATION**

(See instructions)

Of ce Use Only

1. NAME OF COMMITTEE (In full) (Check if name is changed) Example: If typing, type over the lines 12FE4M5

Local 32BJ SEIU American Dream Political Action Fund (32BJ American Dream Fund)

ADDRESS (Home or street) 101 Avenue of the Americas

(Check if address is changed) New York NY 10013

CITY STATE ZIP CODE

COMMITTEE'S E-MAIL ADDRESS

hfigueroa@seiu32bj.org

COMMITTEE'S WEB PAGE ADDRESS (URL)

2. DATE 02 / 19 / 2003

3. FEC IDENTIFICATION NUMBER C00355289

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 Hector Figueroa

Signature of Treasurer Electronically Filed by Hector Figueroa Date 02 / 20 / 2003

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. 5437g.

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS

Office Use Only				
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For further information contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-694-1110

FEC FORM 1
(Revised 1/2001)

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	Office				State
Party Affiliation	Sought:	House	Senate	President	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

Local 32B-32J Service Employees International Union _____

Mailing Address _____
 101 Avenue of the Americas _____

_____ New York _____ NY _____ 10013 _____

CITY ▲ STATE ▲ ZIP CODE ▲

Relationship _____ Connected Organization _____

Type of Connected Organization:

- | | | |
|-------------------------|-------------------------------|--------------------------------------------------------|
| Corporation | Corporation w/o Capital Stock | <input checked="" type="checkbox"/> Labor Organization |
| Membership Organization | Trade Association | Cooperative |

Write or Type Committee Name

Local 32BJ SEIU American Dream Political Action Fund (32BJ American Dream Fund)

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 **Lori Ann Orme-Coleman**

Mailing Address **101 Avenue of the Americas**

New York NY 10013 -

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

Telephone number _____ - _____ - _____

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 **Hector Figueroa**

Mailing Address **101 Avenue of the Americas**

New York NY 10013 -

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

Telephone number _____ - _____ - _____

Full Name of Designated Agent **Lori Ann Orme-Coleman**

Mailing Address **101 Avenue of the Americas**

New York NY 10013 -

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

Telephone number _____ - _____ - _____

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.

Fleet Bank

Mailing Address

1185 Sixth Avenue

Third Floor

New York

NY

10036 -

CITY Δ

STATE Δ

ZIP CODE Δ

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															
	CITY ▲					STATE ▲					ZIP CODE ▲				

Name of Any Connected Organization or Affiliated Committee

[ADDITIONAL]

Service Employees International Union Political Action Committee

Mailing Address

1313 L Street, N.W.

Washington

DC

20005

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship

Affiliated Committee

Type of Connected Organization:

Corporation

Corporation w/o Capital Stock

Labor Organization

Membership Organization

Trade Association

Cooperative

Designated Agent

[ADDITIONAL]

Full Name _____

Mailing Address _____

Title or Position ▼

CITY ▲

STATE▲

ZIP CODE ▲

Telephone number _____ - _____ - _____