08/27/2002 14 : 26

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

United Association Political Education Committee

ADDRESS (Number and street)

901 Massachusetts Avenue, NW

(Check if address is changed)

Washington DC 20001 - 4307

CITY ▲ STATE ▲ ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

kgerberich@saltercpa.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

2. DATE 08 / 27 / 2002

3. FEC IDENTIFICATION NUMBER ▶ C00012476

4. IS THIS STATEMENT X 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 Martin J. Maddaloni

Signature of Treasurer Electronically Filed by Martin J. Maddaloni Date 08 / 27 / 2002

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
Toll Free 800-424-9530
Local 202-694-110

FEC FROM 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 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) X 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

PLUMBERS LOCAL UNION NO 27 POLITICAL ACTION COMMITTEE

Mailing Address 1040 MONTOUR WEST INDUSTRIAL PARK

CORAOPOLIS PA 15108

CITY ▲ STATE ▲ ZIP CODE ▲

Relationship Affiliated Committee

Type of Connected Organization:

Corporation | Corporation w/o Capital Stock | X Labor Organization

Membership Organization | Trade Association | Cooperative

Write or Type Committee Name

United Association Political Education 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: **Thomas H. Patchell, Asst. Treasurer**

Mailing Address: **901 Massachusetts Avenue, NW**

Washington, DC 20001 –

Title or Position ▼ | CITY ▲ | STATE ▲ | ZIP CODE ▲

Asst. Treasurer

Telephone number: 202 – 628 – 5823

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: **Martin J. Maddaloni**

Mailing Address: **3160 Denfield Place**

Philadelphia PA 19145 –

Title or Position ▼ | CITY ▲ | STATE ▲ | ZIP CODE ▲

Treasurer

Telephone number: 202 – 628 – 5823

Full Name of Designated Agent:

Mailing Address:

Title or Position ▼ | 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.

Mailing Address

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]**

Mailing Address

CITY ▲ STATE ▲ ZIP CODE ▲

Name of Any Connected Organization or Affiliated Committee **[ADDITIONAL]**

STEAMFITTERS UNION LOCAL 476 POLITICAL ACTION COMMITTEE

Mailing Address 55 STAMP FARM ROAD

CRANSTON RI 02921

CITY ▲ STATE ▲ ZIP CODE ▲

Relationship Affiliated Committee

Type of Connected Organization:

Corporation	Corporation w/o Capital Stock	X	Labor Organization
Membership Organization	Trade Association		Cooperative

Designated Agent **[ADDITIONAL]**

Full Name

Mailing Address

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

Telephone number _____ – _____ – _____

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]

UNITED ASSOCIATION OF PLUMBERS AND PIPEFITTERS OF THE US AND CANADA LOCAL 816 POL ACT COMM

Mailing Address 1300 W THOMAS

BAY CITY MI 48706

CITY ▲ STATE ▲ ZIP CODE ▲

Relationship Affiliated Committee

Type of Connected Organization:

Corporation	Corporation w/o Capital Stock	X	Labor Organization
Membership Organization	Trade Association		Cooperative

Designated Agent **[ADDITIONAL]**

Full Name

Mailing Address

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

Telephone number _____ – _____ – _____