FEC

STATEMENT OF

FORM 1	ORGANIZA	ATION		
1 011111 1	(See instruction	ons)		Office use only
NAME OF COMMITTEE (in f	(Check if name is changed)	Example: If typying, type over the lines	12FE4M5	1 1
International U	nion of Operating Engineers Lo	cal 324 National Politica	al 	
ADDRESS (number and s	treet) 500 Hulet Dr			
(Check if address				
is changed)	Bloomfield Townshi		<u> </u>	48302 _
		CITY	STATE	ZIP CODE ▲
COMMITTEE'S E-MAIL	_ ADDRESS (Please provide only one e-			
(Check if address is changed)	rose.burke@benesy	sinc.com		
.				
COMMITTEE'S WEB F	PAGE ADDRESS (URL)			
(Check if address	1			
is changed)				
2. DATE M M M 0 4	/ D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
3. FEC IDENTIFICAT		C C00093989	•	
4. IS THIS STATEMI	ENT NEW (N) OR	X AMENDED (A)	
Legrify that I have examin	ned this Statement and to the best of my kno	nwledge and belief it is true corre	ect and complete	
roomy macriare onaim	·	-	oct and complete	
Type or Print Name of 1	reasurer Mr. Leo L. Bode	tte		
Signature of Treasurer	Electronically Filed by Mr. Leo L	. Bodette	Date 0 4	23 / 2009
NOTE: Submission of fals	se, erroneous, or incomplete information ma		•	_
Office		For further informa		
Use		Federal Election Cor Toll Free 800-424-95	nmission	FEC FORM 1 (Revised 02/2009)

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5.			OMMITTEE (Check One) Committee:		
	(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 information below.)	ne candidate	
	Name Candi				
	Candi Party	idate Affiliatio	on Office House Senate President	State District	
	(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.		
	Name Candi				
	Party	Comm			
	(d)		This committee is a (National, State (or subordinate) committee of the	(Democratic, Republican,etc.) Party.	
	Politic	cal Act	tion Committee (PAC):		
	(e) X This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is				
			Corporation Corporation w/o Capital Stock X La	bor Organization	
			Membership Organization Trade Association Co	poperative	
			In addition, this committee is a Lobbyist/Registrant PAC.		
	(f)		This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated committee. (i.e., nonconnected committee)	d fund or party	
			In addition, this committee is a Lobbyist/Registrant PAC.		
			In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)		
	loint E	Eundra	ising Representative:		
		100			
	(g)	Ш	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or committees/organizations, at least one of which is an authorized committee of a federal candidate.	more political	
	(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.				
		Com	mittees Participating in Joint Fundraiser		
			1. FEC ID number		
			2. FEC ID number		
			3. FEC ID number		
			. FEC ID number C		

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Write or Type Committee Name					
International Union of C	perating Engineers Local 324 Nation	al Political Activities Com	ım.		
6. Name of Any Connected Org	ganization, Affiliated Committee, Joint Fund	Iraising Representative, or Le	adership PAC Sponsor		
International Union of Op	perating Engineers Local 324				
Mailing Address	500 Hulet Dr				
	Bloomfield Twp	[М]	48302		
	CITY	STATE A	ZIP CODE		
Relationship:					
X Connected Organization	Affiliated Committee Join	nt Fundraising Representative	Leadership PAC Sponsor		
Custodian of Records: Ide possession of Committee	entify by name, address, (phone number books and records.	· optional), and position o	f the person in		
Full Name	se Allen-Burke				
Mailing Address	700 Tower Drive				
	Suite 300				
	Troy	MI	48098		
Title or Position ▼ Accountin	CITY A g Superviso	STATE Telephone number 248	ZIP CODE 4 - 813 - 9800		
	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 Mr. Lee	D L. Bodette				
Mailing Address	500 Hulet Dr				
	Bloomfield Townshi		48302		
Title or Position ♥	CITY 🛦	STATE.	ZIP CODE A		
Business	Repr.	Telephone number	_ 451 _ 0324		

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Full Name of Designated Agent			
Mailing Address			
Title or Position ▼	CITY A	STATE 🛦	ZIP CODE A
	Tele	ephone number	
 Banks or Other Depositori safety deposit boxes or main Name of Bank, Depository, ε 	ds accounts, rents		
Chas	se		
Mailing Address	37458 Six Mile Rd		
	Livonia	MI _	48152 _
	CITY 🗻	STATE △	ZIP CODE 🛕
Name of Bank, Depository, e	etc.		
Mailing Address			

Banks or Other Depositories: safety deposit boxes or maintains	List all banks or other depositories in which the committee	e deposits funds, ho	olds accounts, rents
Name of Bank, Depository, etc.	Tallas.		[ADDITIONAL]
Mailing Address			
	CITY 🗻	STATE ⊿	ZIP CODE 🛕
	nization, Affiliated Committee, Joint Fundraising Represention Committee (EPEC) /International Union of		
Mailing Address	1125 17th St NW		
	Washington	DC	20036
Relationship:	CITY	STATE A	ZIP CODE
Connected Organization	X Affiliated Committee Joint Fundraising Repres	sentative Le	adership PAC Sponsor
Designated Agent			[ADDITIONAL]
Full Name			
Mailing Address			
Title or Position ▼	CITY A	STATE ∆	ZIP CODE A
	Telephone	e number	
Joint Fundraiser Participant			[ADDITIONAL]
L	FEC	ID number C	

Image# 29992027646 Form/Schedule: F1A Requested information-Amending for Affiliated Organization Transaction ID: