

**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

Water Well PAC, The Water Systems Council PAC

ADDRESS (Home or street)

1101 M Street, N.W.

(Check if address is changed)

Washington

DC

20007

CITY ▲

STATE ▲

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

COMMITTEE'S WEB PAGE ADDRESS (URL)

COMMITTEE'S FAX NUMBER

2. DATE 04 / 09 / 2002

3. FEC IDENTIFICATION NUMBER C C00335588

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 Richard M. Gold

Signature of Treasurer Electronically Filed by Richard M. Gold Date 02 / 06 / 2006

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

For further information contact:  
Federal Election Commission  
Toll Free 800-424-9530  
Local 202-894-1100

**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

Water Systems Council \_\_\_\_\_

Mailing Address \_\_\_\_\_ 1101 30th Street, N.W., Suite 500 \_\_\_\_\_

\_\_\_\_\_

Washington DC 20007 - \_\_\_\_\_

CITY A

STATE A

ZIP CODE A

Relationship  Connected \_\_\_\_\_

Type of Connected Organization:

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

Write or Type Committee Name

**Water Well PAC, The Water Systems Council PAC**

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 **Beth Salvosa**

Mailing Address **2099 Pennsylvania Ave., NW**  
**Suite 100**  
**Washington DC 20006**

Title or Position ▼ **Manager of Political** CITY ▲ STATE ▲ ZIP CODE ▲  
 Telephone number **202 - 955 - 3000**

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 **Richard M. Gold**

Mailing Address **2099 Pennsylvania Ave. NW**  
**Suite 100**  
**Washington DC 20006**

Title or Position ▼ **Treasurer** CITY ▲ STATE ▲ ZIP CODE ▲  
 Telephone number **202 - 955 - 3000**

Full Name of Designated Agent **Chris DeLacy**

Mailing Address **2099 Pennsylvania Ave., NW**  
**Suite 100**  
**Washington DC 20006**

Title or Position ▼ **Assistant Treasurer** CITY ▲ STATE ▲ ZIP CODE ▲  
 Telephone number **202 - 955 - 3000**

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.

Wachovia Bank

Mailing Address

2000 L Street, NW

Washington

DC

20006 -

CITY Δ

STATE Δ

ZIP CODE Δ