

RECEIVED
FEC MAIL ROOM

2002 MAR 19 P 3:47

TO PROTECT OUR HERITAGE PAC
2421 W. PRATT
CHICAGO, IL 60645

March 1, 2002

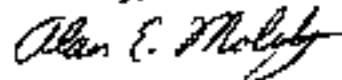
Federal Election Commission
999 E. Street, NW
Washington, DC 20463

Re: Amended FEC Form 1 (to show webpage)
C00135541

Ladies and Gentlemen:

Enclosed is the above amended Form 1 to add the PAC's new webpage. Thank
you.

Sincerely,



Alan E. Molotsky
Treasurer

Enclosure

RECEIVED
FEC MAIL ROOM

2002 MAR 19 P 3 47

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

TO PROTECT OUR HERITAGE PAC

ADDRESS (number and street)

2421 W PRATT

(Check if address
is changed)

CHICAGO

IL

60645

CITY ▲

STATE ▲

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

COMMITTEE'S WEB PAGE ADDRESS (URL)

WWW.PROTECTOURHERITAGEPAC.ORG

2. DATE

03 01 2002

3. FEC IDENTIFICATION NUMBER ▶

000135541

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

ALAN E. MOLOTSKY

Signature of Treasurer

Alan E. Molotsky

Date

03 01 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 800-424-0830
Local 202-694-1100

FEC FORM 1
(Revised 1/01)

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

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

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 ALAN E. MOLOTSKY
Mailing Address 3939 W. GREENWOOD
SKOKIE IL 60076-1940

Title or Position T.R.E.A.S.U.R.E.R. 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 ALAN E. MOLOTSKY
Mailing Address 3939 W. GREENWOOD
SKOKIE IL 60076-1940

Title or Position T.R.E.A.S.U.R.E.R. Telephone number

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.

FIRST SUBURBAN

Mailing Address

15033 W. DEMPSTER

SKOKIE IL 60077

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 Commission has 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"/> First Class Mail | POSTMARKED |
| <input type="checkbox"/> Registered/Certified Mail | POSTMARKED (R/C) |
| <input checked="" type="checkbox"/> No Postmark | |
| <input type="checkbox"/> Postmark Illegible | |
| <input type="checkbox"/> Received from the House office of Records and Registration | Date of Receipt |
| <input type="checkbox"/> Received from the Senate Office of Public Records | Date of Receipt |
| <input type="checkbox"/> Other (Specify): | Postmarked and/or Date of Receipt |
| <input type="checkbox"/> Electronic Filing | |

AMP
PREPARER

3-19-02
DATE PREPARED