

OFFICE OF THE CLERK  
FEDERAL ELECTION COMMISSION  
500 ... 3300 ...

**SUFFOLK COUNTY  
POLICE BENEVOLENT ASSOCIATION**

868 Church Street • Bohemia, New York 11716-5040 • (516) 563-4200

Tom Tohill  
President

March 28, 1997

Bill Holmes  
1st Vice President

Federal Election Commission  
999 E Street N.W.  
Washington, D.C. 20463

Tom Muratore  
2nd Vice President

Bill Zaiser  
Treasurer

RE: FEC I.D. #COO196055

Bob Tucci  
Financial Secretary

Dear Sir/Madam:

James E. Keesee  
Recording Secretary

Please find enclosed an amended Statement of Organization with regard to the Suffolk County Police Benevolent Association Federal PAC. I am filing this document because the former Committee Secretary, William Zaiser, has retired from the Police Department and resigned this position. The vacancy has been filled and our newly appointed Committee Secretary is J.E. Frayler.

Jim Edmonds  
Sgt.-at-Arms

This is the only change taking place at this time.

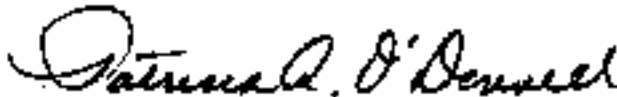
Winnie Hannigan  
Sgt.-at-Arms

Thank you for your time and attention.

Sal De Angelis  
1st Pct. Trustee

Sincerely,

William M. Tricarico  
2nd Pct. Trustee



Patricia A. O'Donnell  
Treasurer, S.C.P.B.A. Federal Political Action Committee  
SUFFOLK COUNTY P.B.A., INC.

Bill Mauck  
3rd Pct. Trustee

:po'd  
Enclosure

Bill Small  
4th Pct. Trustee

John Gang  
5th Pct. Trustee

Christopher J. Weigert  
6th Pct. Trustee

Jeff Frayler  
Headquarters-West

Jim DiGiorgio  
Headquarters-East

Kranz, Davis & Harsh  
Legal Counsel

# STATEMENT OF ORGANIZATION

(See reverse side for instructions)

FEDERAL ELECTION COMMISSION

1. (a) NAME OF COMMITTEE IN FULL <input type="checkbox"/> (Check if name is changed) <i>SUFFOLK COUNTY POLICE BENEVOLENT ASSOCIATION FEDERAL PAC</i>	2. DATE FILED HEREIN APR 71
(b) Number and Street Address <input type="checkbox"/> (Check if address is changed) <i>868 CHURCH ST. - SUITE 1</i>	3. FEC IDENTIFICATION NUMBER <i>200196055</i>
(c) City, State and ZIP Code <i>BOHEMIA, NY 11716</i>	4. IS THIS STATEMENT AN AMENDMENT? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO

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	State/District

(c) This committee supports/opposes only one candidate \_\_\_\_\_ and is NOT an authorized committee. (name of candidate)

(d) This committee is a \_\_\_\_\_ committee of the \_\_\_\_\_ Party. (National, State or subordinate) (Democratic, Republican, etc.)

(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 a party committee.

8. Name of Any Connected Organization or Affiliated Committee	Mailing Address and ZIP Code	Relationship
<i>SUFFOLK COUNTY POLICE BENEVOLENT ASSOCIATION, INC.</i>	<i>868 CHURCH ST. - SUITE 1 BOHEMIA, NY 11716</i>	<i>CONNECTED</i>

Type of Connected Organization

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

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	Mailing Address	Title or Position
<i>J. E. FRAYLER</i>	<i>S.C.P.B.A FEDERAL PAC 868 CHURCH ST., BOHEMIA, NY 11716</i>	<i>SECRETARY</i>

9. 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). THE FOLLOWING ARE IN ADDITION TO THE TREASURER LISTED ABOVE:

Full Name	Mailing Address	Title or Position
<i>PATRICIA A. O'DONNELL</i>	<i>SUFFOLK COUNTY PBA FEDERAL PAC</i>	<i>TREASURER</i>
<i>THOMAS R. TONILL</i>	<i>868 CHURCH ST. - SUITE 1</i>	<i>PRESIDENT</i>
<i>WILLIAM HOLMES</i>	<i>BOHEMIA, NY 11716</i>	<i>VICE PRESIDENT</i>
<i>THOMAS MURPHY &amp; ROBERT C. TUCCI</i>		<i>TRUSTEES</i>

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 and ZIP Code
<i>EUROPEAN AMERICAN BANK</i>	<i>4175 VETERANS MEMORIAL HIGHWAY ROXBOROUGH, NY 11779</i>

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 <i>PATRICIA A. O'DONNELL</i>	SIGNATURE OF TREASURER <i>Patricia A. O'Donnell</i>	DATE
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NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. 9437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

