

# STATEMENT OF ORGANIZATION

(See reverse side for instructions)

|  |  |  |   |
|--|--|--|---|
| 1. (a) NAME OF COMMITTEE IN FULL<br>The Cassidy Companies, Inc. Political Action Committee | <input type="checkbox"/> (Check if name is changed)    | RECEIVED<br>FEDERAL ELECTION COMMISSION<br>COMMUNICATIONS UNIT | 2. DATE<br>5/14/97  |
| (b) Number and Street Address<br>700 13th Street, N.W.                                     | <input type="checkbox"/> (Check if address is changed) | 3. FEC IDENTIFICATION NUMBER                                   |   |
| (c) City, State and ZIP Code<br>Washington, D.C. 20006                                     | May 19 3 39 PM '97                                     |  | 4. IS THIS STATEMENT AN AMENDMENT?<br><input type="checkbox"/> YES <input checked="" 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.

| Name of Any Connected Organization or Affiliated Committee | Mailing Address and ZIP Code                    | Relationship           |
|--|---|------------------------|
| The Cassidy Companies, Inc.                                | 700 13th Street, N.W.<br>Washington, D.C. 20005 | Connected organization |

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 |
|----------------------|--|-------------------|
| Catherine S. Simpson | 700 13th Street, N.W. Washington, D.C. 20005 | Associate         |

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                            | Mailing Address                              | Title or Position     |
|--------------------------------------|--|-----------------------|
| Catherine S. Simpson                 | 700 13th Street, N.W. Washington, D.C. 20005 | Associate             |
| Timothy E. Dixon/Assistant Treasurer | same   | Senior Vice President |

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                    |
|--------------------------------|---|
| First Union Bank               | 740 15th Street, N.W.<br>Washington, D.C. 20005 |


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 | SIGNATURE OF TREASURER | DATE |
| Catherine S. Simpson            |                        |      |

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.

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 checked="" type="checkbox"/> Hand Delivered  | DATE OF RECEIPT<br><b>5-19-97</b>    |
| <input type="checkbox"/> First Class Mail   | POSTMARKED                           |
| <input type="checkbox"/> Registered/Certified Mail  | POSTMARKED                           |
| <input 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<br>and/or DATE OF RECEIPT |
| <br>PREPARER | <b>5-20-97</b><br>DATE PREPARED      |