03/13/2002 15 : 12

FEC FORM 1

STATEMENT OF ORGANIZATION

(See instructions)

Office Use Only

1. NAME OF COMMITTEE (In full) X (Check if name is changed) Example: If typing, type over the lines 12FE4M5

ING America Insurance Holdings Inc. Political Action Committee (ING US PAC)

ADDRESS (Number and street) 151 Farmington Avenue

X (Check if address is changed) TS31

Hartford CT 06156 -

CITY STATE ZIP CODE

COMMITTEE'S E-MAIL ADDRESS

RubinRS@ING-AFS.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

N/A

2. DATE M 03 D 13 Y 2002

3. FEC IDENTIFICATION NUMBER C00184028

4. IS THIS STATEMENT NEW (N) OR X 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 Rachel S. Rubin

Signature of Treasurer Electronically Filed by Rachel S. Rubin Date M 03 D 13 Y 2002

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. S437g.

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 202-694-110

FEC FROM 1
(Revised 1/2001)

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) X 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

ING America Insurance Holdings Inc.

Mailing Address 5780 Powers Ferry Road

Atlanta GA 30327 1390

CITY ▲ STATE ▲ ZIP CODE ▲

Relationship Connected

Type of Connected Organization:

X Corporation Corporation w/o Capital Stock Labor Organization

Membership Organization Trade Association Cooperative

Write or Type Committee Name

ING America Insurance Holdings Inc. Political Action Committee (ING US 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: **Rachel S. Rubin**

Mailing Address: **151 Farmington Avenue**

TS31

Hartford CITY ▲ | **CT** STATE ▲ | **06156** ZIP CODE ▲

Title or Position ▼: **Treasurer**

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: **Rachel S. Rubin**

Mailing Address: **151 Farmington Avenue**

TS31

Hartford CITY ▲ | **CT** STATE ▲ | **06156** ZIP CODE ▲

Title or Position ▼: **Treasurer**

Telephone number ___ - ___ - ___

Full Name of Designated Agent: Kevin P. Brown

Mailing Address: **151 Farmington Avenue**

TS31

Hartford CITY ▲ | **CT** STATE ▲ | **06156** ZIP CODE ▲

Title or Position ▼: **Deputy Treasurer**

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.

SunTrust Bank

Mailing Address P.O. Box 4418

Atlanta GA 30302 -

CITY △ STATE △ ZIP CODE △

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.

[ADDITIONAL]

Name of Bank, Depository, etc.

Webster Bank

Mailing Address

777 Northrup Road

Wallingford CT 06492 -

CITY ▲ STATE ▲ ZIP CODE ▲

Name of Any Connected Organization or Affiliated Committee

[ADDITIONAL]

Mailing Address

CITY ▲ STATE ▲ ZIP CODE ▲

Relationship

Type of Connected Organization:

Corporation | Corporation w/o Capital Stock | Labor Organization

Membership Organization | Trade Association | Cooperative

Designated Agent **[ADDITIONAL]**

Full Name _____

Mailing Address _____

Title or Position ▼ **CITY ▲** **STATE▲** **ZIP CODE ▲**

_____ Telephone number _____ – _____ – _____