

**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  
**NATIONAL FUNERAL DIRECTORS ASSOCIATION OF THE U S INC POLITICAL ACTION**  
**COMTE(NFDA-PAC)**

ADDRESS (Number and street) (Check if address is changed)  
**13625 BISHOP'S DRIVE**  
**BROOKFIELD** **WI** **53005**  
 CITY STATE ZIP CODE

COMMITTEE'S E-MAIL ADDRESS  
**bholton@nfda.org**

COMMITTEE'S WEB PAGE ADDRESS (URL)

COMMITTEE'S FAX NUMBER

2. DATE <sup>M M / D D / Y Y</sup>  
**11 / 12 / 2003**

3. FEC IDENTIFICATION NUMBER **C C00204008**

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 **Robert J Biggins, CFSP**

Signature of Treasurer Electronically Filed by **Robert J Biggins, CFSP** Date <sup>M M / D D / Y Y</sup>  
**11 / 12 / 2003**

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

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	Office				State
Party Affiliation	Sought:	House	Senate	President	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

National Funeral Directors Association Inc \_\_\_\_\_

\_\_\_\_\_

Mailing Address \_\_\_\_\_ 13625 Bishop's Drive \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_ Brookfield \_\_\_\_\_ WI \_\_\_\_\_ 53005 - \_\_\_\_\_

CITY ▲

STATE ▲

ZIP CODE ▲

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

Type of Connected Organization:

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

Write or Type Committee Name

**NATIONAL FUNERAL DIRECTORS ASSOCIATION OF THE U S INC POLITICAL ACTION CMTE (NFD-APAC)**

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 Mr. William R. Holton

Mailing Address 13625 Bishop's Drive

Brookfield WI 53005

Title or Position ▼ CITY ▲ STATE ▲ ZIP CODE ▲

Accounting Manager Telephone number 262 - 789 - 1800

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 Robert J Biggins, CFSP

Mailing Address PO Box 385

Rockland MD 02370 - 0385

Title or Position ▼ CITY ▲ STATE ▲ ZIP CODE ▲

Treasurer Telephone number 761 - 878 - 1775

Full Name of Designated Agent Mark D Musgrove, CFSP

Mailing Address 1152 Olive St

Eugene OR 97401 - 8547

Title or Position ▼ CITY ▲ STATE ▲ ZIP CODE ▲

President Telephone number 541 - 686 - 2818

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.

	Associated Bank		
Mailing Address	401 E. Kilbourn		
	Milwaukee		
	WI	53202	-
	CITY Δ	STATE Δ	ZIP CODE Δ

**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.

[ ADDITIONAL ]

Mailing Address

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_ - \_\_\_\_\_

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 R Doggett Whitaker, Jr

Mailing Address 1704 College St

Newberry SC 29108 - 2640

Title or Position ▼ CITY ▲ STATE ▲ ZIP CODE ▲

President-elect Telephone number 803 - 276 - 5000

**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.

[ ADDITIONAL ]

Mailing Address

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_ - \_\_\_\_\_

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 Mr. John J. Hogan

Mailing Address 136-25 41st Ave

Flushing NY 11355

Title or Position ▼ CITY ▲ STATE ▲ ZIP CODE ▲

Secretary Telephone number 718 - 939 - 3100