23038190882

FEC FORM 1

STATEMENT OF ORGANIZATION

(See Instructions)

RECEIVED
FEC MAIL
OPERATIONS CENTER
2003 AUG 15 P 10: 21

1. NAME OF COMMITTEE (in full) ☐ (Check if name is changed) Examples: If typing, type over the lines 12FE4145

SPRINKLER FITTERS LOCAL #704 POLITICAL ACTION COMMITTEE

ADDRESS (number and street) 32500 W. EIGHT MILE ROAD

☐ (Check if address is changed)

FARMINGTON | MI | 48336 - 5105

CITY ▲ STATE ▲ ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

SLNing@Comerica.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

2. DATE 05 / 01 / 2003

3. FEC IDENTIFICATION NUMBER ▶

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 RUTAN

Signature of Treasurer

Date 08 / 14 / 2003

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 800-424-9530
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.

8. Name of Any Connected Organization or Affiliated Committee

SPRINKLER FITTERS LOCAL #704

Mailing Address 32500 W. EIGHT MILE ROAD

FARMINGTON MI 48336 - 5105

CITY▲ STATE▲ ZIP CODE▲

Relationship CONNECTED ORGANIZATION

Type of Connected Organization.

[ ] Corporation [ ] Corporation w/o Capital Stock [X] Labor Organization

[ ] Membership Organization [ ] Trade Association [ ] Cooperative

Write or Type Committee Name

SPRINKLER FITTERS LOCAL #704 POLITICAL ACTION COMMITTEE

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: MARTHA DENBAAS

Mailing Address: COMERICA BANK FAC SERVICES - 2250

P.O. BOX 75000

DETROIT (CITY ▲) MI (STATE ▲) 48275 – 2250 (ZIP CODE ▲)

Title or Position ▼: CUSTODIAN OF RECORDS

Telephone number: 248 – 371 – 5562

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 RUTAN

Mailing Address: SPRINKLER FITTERS LOCAL #704

32500 W. EIGHT MILE ROAD

FARMINGTON (CITY ▲) MI (STATE ▲) 48336 – 5105 (ZIP CODE ▲)

Title or Position ▼: TREASURER

Telephone number: 248 – 474 – 7553

Full Name of Designated Agent:

Mailing Address:

CITY ▲ STATE ▲ ZIP CODE ▲

Title or Position ▼:

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.

COMERICA BANK

Mailing Address

P.O. BOX 75000

PAC SERVICES - 2250

DETROIT | MI | 48275 - 2250

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.

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

Mailing Address

CITY ▲ STATE ▲ ZIP CODE ▲

Title or Position ▼

Telephone number

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.

☑	Hand Delivered	Date of Receipt 8-15-03
☐	First Class Mail	POSTMARKED
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(6/2000)