01/30/2006 18 : 02

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

IUOE Local 4 Social Action Committee-Federal

ADDRESS (Number and Street)

(Check if address is changed)

18 Trotter Drive

Medway | MA | 02053 -

CITY ▲ STATE ▲ ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

office@iuoelocal4.org

COMMITTEE'S WEB PAGE ADDRESS (URL)

www.iuoelocal4.org

COMMITTEE'S FAX NUMBER

5085331433

2. DATE M M / D D / Y Y Y Y 01 30 2006

3. **FEC IDENTIFICATION NUMBER** **C C00115568**

4. IS THIS STATEMENT X 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 **David F. Fantini**

Signature of Treasurer Electronically Filed by David F. Fantini Date M M / D D / Y Y Y Y 01 30 2006

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 202-694-1100

FEC FORM 1
(Revised 02/2003)

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

International Union of Operating Engineers

Mailing Address 16 Trotter Drive

Medway MA 02053 -

CITY STATE ZIP CODE

Relationship

Type of Connected Organization:

Corporation Corporation w/o Capital Stock X Labor Organization

Membership Organization Trade Association Cooperative

Write or Type Committee Name

IUOE Local 4 Social Action Committee-Federal

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: Mrs. Barbara J. Paine

Mailing Address: 16 Trotter Dr.

Medway (CITY ▲) MA (STATE ▲) 02053 – (ZIP CODE ▲)

Title or Position ▼: Office Manager

Telephone number: 508 – 533 – 1433

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: David F. Fantini

Mailing Address: 16 Trotter Drive

Medway (CITY ▲) MA (STATE ▲) 02053 – (ZIP CODE ▲)

Title or Position ▼: Treasurer

Telephone number: 508 – 533 – 1433

Full Name of Designated Agent: Mr. William D. McLaughlin

Mailing Address: 16 Trotter Drive

Medway (CITY ▲) MA (STATE ▲) 02053 – (ZIP CODE ▲)

Title or Position ▼: Assistant Treasurer

Telephone number: 508 – 533 – 1433

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.

Bank of America

Mailing Address P O Box 25118

Tampa FL 33622 - 5118

CITY STATE ZIP CODE