Image# 2	28932414913
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FEC FORM 1	STATEMENT OF ORGANIZATION (See instructions)	Office use only
1. NAME OF COMMITTEE (in	full) (Check if name Example: If typying, type over the lines	12FE4M5
FMC Technolo	gies Employee Political Action Committee	
ADDRESS (number and	1803 Gears Road	
•	· · · · · · · · · · · · · · · · · · ·	
(Check if addr is changed)	ess Houston	TX
COMMITTEE'S E-MAI		STATE ZIP CODE
matt.acosta@f		
	PAGE ADDRESS (URL)	• • • • • • • • • • • • • • • • •
		· · · · · · · · · · · · · · · · · · ·
COMMITTEE'S FAX N 281-591-4134		
2. DATE 08		
3. FEC IDENTIFICA	TION NUMBER C C00366211	
4. IS THIS STATEM	ENT X NEW (N) OR AMENDED (A)	
certify that I have exami	ned this Statement and to the best of my knowledge and belief it is true, correct a	and complete
		· · · · · · · · · · · · · · · · · · ·
Type or Print Name of	Treasurer Mr. Matthew Acosta	
Signature of Treasurer	Electronically Filed by Mr. Matthew Acosta	Date 08 / 06 / Y Y Y Y
NOTE: Submission of fal	se, erroneous, or incomplete information may subject the person signing this Sta ANY CHANGE IN INFORMATION SHOULD BE REPORTED	
Office	For further information	oontaat:

Office Use Only			For further information contact: Federal Election Commission Toll Free 800-424-9530 Local 202-694-1100	FEC FORM 1 (Revised 12/2007)
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(h)

FEC	Form 1 (Revised 12/2007)	Page 2
5. TYPE OF C	OMMITTEE (Check One)	
Candidate	Committee:	
(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 t information below.)	he candidate
Name of Candidate		
Candidate Party Affilia	tion Office Sought: House Senate President	State District
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate		
Party Com (d)	nittee: (National, State This committee is a (or subordinate) committee of the	(Democratic, Republican,etc.) Party.
Political Ac	tion Committee (PAC):	
(e) X	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected	ed organization is a:
	X Corporation Corporation w/o Capital Stock La	bor Organization
	Membership Organization Trade Association C	ooperative
(f)	This committee supports/opposes more than one Federal candidate, and is NOT a separate segregate committee. (i.e., nonconnected committee)	d fund or party
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Joint Fundr	aising Representative:	
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate.	or more political
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This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.

Committees Participating in Joint Fundraiser

1.	FEC ID number	C
2.	FEC ID number	C
3.	FEC ID number	C
4.	FEC ID number	C
5.	FEC ID number	С

FEC Form 1 (Rev	<i>v</i> ised 12/2007)		Page 3
Write or Type Committee N	Name		
FMC Technologie	s Employee Political Action Committee		
6. Name of Any Connec	ted Organization, Affiliated Committee, Leadership PAC S	ponsor or Joint Fundraisi	ng Representative
FMC Technologies	, Inc .		
Mailing Address	1803 Gears Road		
			77067
	СІТУ	STATE 🛦	ZIP CODE 🔺
Relationship:	ization Affiliated Committee Leadership P	AC Sponsor	Fundraising Representative
Full Name	Ir. Matthew Acosta		
	Houston	TX	77067 _
Title or Position ♥	CITY A	STATE	
Trea	surer Telep	hone number 281	- <u>591</u> - 4494
	name and address (phone number optional) of the to of any designated agent (e.g., assistant treasurer).	treasurer of the commit	tee; and the
Full Name of Treasurer	Ir. Matthew Acosta		
Mailing Address	1803 Gears Road		
	Houston	<u>TX</u>	77067
Title or Position ♥	CITY 🛦	STATE	

281

Telephone number

591

4494

Manager, SOX 404 Com

FEC Form 1 (Revi	sed 12/2007)		Page 4
Full Name of Designated Agent			
Mailing Address			
Title or Position ▼		STATE 🛦	ZIP CODE 🛦
	т	elephone number	
Banks or Other Deposi safety deposit boxes or r Name of Bank, Deposito	naintains funds.	he committee deposits funds, he	
safety deposit boxes or r Name of Bank, Deposito	naintains funds. ry, etc.	he committee deposits funds, h	olds accounts, rents
safety deposit boxes or r Name of Bank, Deposito	naintains funds. ry, etc. orthern Trust Corporation 50 S. LaSalle	he committee deposits funds, h	
safety deposit boxes or r Name of Bank, Deposito	naintains funds. ry, etc. orthern Trust Corporation 50 S. LaSalle	he committee deposits funds, he	
safety deposit boxes or r Name of Bank, Deposito	naintains funds. ry, etc. orthern Trust Corporation 50 S. LaSalle Chicago		
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safety deposit boxes or n Name of Bank, Deposito Mailing Address	naintains funds. ry, etc. orthern Trust Corporation 50 S. LaSalle Chicago CITY A ry, etc.		$ \begin{array}{cccccccccccccccccccccccccccccccccccc$