22037902928

RECEIVED
FEC MAIL
OPERATIONS CENTER

2002 DEC 23 P 12: 21

Office Use Only

FEC FORM 1

STATEMENT OF ORGANIZATION

(See instructions)

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

MAC PAC

ADDRESS (number and street) 33 S ROSELLE RD

(Check if address is changed)

SCHAUMBURG IL 60193-1638

CITY ▲ STATE ▲ ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

MJMARSHALL@MASONCONTRACTORS.COM

COMMITTEE'S WEB PAGE ADDRESS (URL)

2. DATE 12 13 2002

3. **FEC IDENTIFICATION NUMBER ▶** C00291799

4. IS THIS STATEMENT NEW (N) **OR** AMENDED (A) X

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 Liz Fidanck

Signature of Treasurer Liz Fidanck Date 12 13 2002

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 1/01)

FE1NNN06.PDF

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) This committee is a separate segregated fund.

(f) X 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**

Mailing Address

CITY ▲ STATE ▲ ZIP CODE ▲

Relationship

Type of Connected Organization:

Corporation | Corporation w/o Capital Stock | Labor Organization

Membership Organization | Trade Association | Cooperative

22037902930

FEC Form 1 (Revised 1/01) Page 3

Write or Type Committee Name

MAC 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 LIZ FIDORUK MASON CONTRACTORS ASSOC OF AMERICA

Mailing Address 33 S ROSELLE RD

SCHAUMBURG IL 60193 1638

Title or Position▼ CITY ▲ STATE ▲ ZIP CODE ▲

CONTROLLER Telephone number 847 301 0001

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 LIZ FIDORUK

Mailing Address 33 S ROSELLE RD

SCHAUMBURG IL 60193 1638

Title or Position▼ CITY ▲ STATE ▲ ZIP CODE ▲

CONTROLLER Telephone number 847 301 0001

Full Name of Designated Agent MARIAN J MARSHALL

Mailing Address 2121 K STREET NW STE 800

WASHINGTON DC 20037

Title or Position▼ CITY ▲ STATE ▲ ZIP CODE ▲

DIRECTOR OF GOVT AFR Telephone number 202 263 4612

FE1AN095.PDF

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.

HARRIS BANK

Mailing Address 520 CRESCENT BLVD

GLEN ELLYN IL 60137

CITY ▲ STATE ▲ ZIP CODE ▲

Name of Bank, Depository, etc.

Mailing Address

CITY ▲ STATE ▲ ZIP CODE ▲

22037902932

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
☑	First Class Mail	POSTMARKED 12-16-02
☐	Registered/Certified Mail	POSTMARKED (R/C)
☐	No Postmark	
☐	Postmark Illegible	
☐	Received from the House office of Records and Registration	Date of Receipt
☐	Received from the Senate Office of Public Records	Date of Receipt
☐	Other (Specify):	Postmarked _____ and/or Date of Receipt
☐	Electronic Filing	
	PREPARER	DATE PREPARED 12-23-02

(6/2000)