

FEC
FORM 1

STATEMENT OF ORGANIZATION

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2006 MAY -8 A 8:12

Office Use Only

1. NAME OF
COMMITTEE (in full)

(Check if name
is changed)

Example: If typing, type
over the lines.

12FE4M5

AERDPAC (Aeroflex, Inc.)

ADDRESS (number and street)

2345 Crystal Drive

(Check if address
is changed)

Suite 300

Arlington

VA

22202

CITY ▲

STATE ▲

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

COMMITTEE'S WEB PAGE ADDRESS (URL)

COMMITTEE'S FAX NUMBER

703-412-1105

2. DATE

05

02

2006

3. FEC IDENTIFICATION NUMBER ▶

C00422824

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

Thomas A. Bezas

Signature of Treasurer

Date

05

02

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)

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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) 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

Aeroflex, Inc.

Mailing Address

35 South Service Road

Plainville

NY

11803-0622

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship

Connected Organization

Type of Connected Organization:

Corporation

Corporation w/o Capital Stock

Labor Organization

Membership Organization

Trade Association

Cooperative

26039071932

Write or Type Committee Name

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 Jill Wyman

Mailing Address Aeroflex, Inc.
2345 Crystal Dr., Suite 300
Arlington VA 22202

Title or Position Executive Assistant CITY STATE ZIP CODE

Telephone number 703-412-1144

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 Thomas A. Bezas

Mailing Address Aeroflex, Inc.
2345 Crystal Dr., Suite 300
Arlington VA 22202

Title or Position Vice President CITY STATE ZIP CODE

Telephone number 703-412-3383

Full Name of Designated Agent Jill Wyman

Mailing Address Aeroflex, Inc.
2345 Crystal Dr., Suite 300
Arlington VA 22202

Title or Position Executive Assistant CITY STATE ZIP CODE

Telephone number 703-412-1144

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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.

Chevy Chase Bank

Mailing Address

16216 Crystal Square Arcade

Arlington

VA

22202

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Bank, Depository, etc.

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

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Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
 The FEC added this page to the end of this filing to indicate how it was received.

Hand Delivered Date of Receipt

USPS First Class Mail Postmarked
5/4/06

USPS Registered/Certified Postmarked (R/C)

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No Postmark

Overnight Delivery Service (Specify): Shipping Date
 Next Business Day Delivery

Received from House Records & Registration Office Date of Receipt

Received from Senate Public Records Office Date of Receipt

Received from Electronic Filing Office Date of Receipt

Other (Specify): Date of Receipt or Postmarked

Jei
 PREPARER

5/8/06
 DATE PREPARED

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