03/05/2002 16 : 16

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

Credit Union Legislative Action Council of CUNA

ADDRESS (Number and street)

601 Pennsylvania Avenue, NW

X (Check if address is changed)

South Building, Suite 600

Washington DC 20004 - 2601

CITY ▲ STATE ▲ ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

COMMITTEE'S WEB PAGE ADDRESS (URL)

2. DATE 05 / 16 / 1972

3. **FEC IDENTIFICATION NUMBER** ▶ **C00007880**

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 Ms. Patricia Sowick

Signature of Treasurer Electronically Filed by Ms. Patricia Sowick Date 03 / 05 / 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 202-694-110

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.

6. Name of Any Connected Organization or Affiliated Committee

CUNA & Affiliates

Mailing Address 601 Pennsylvania Avenue, NW

Suite 600, South Bldg

Washington DC 20004

CITY ▲ STATE ▲ ZIP CODE ▲

Relationship Affiliated Committees

Type of Connected Organization:

Corporation Corporation w/o Capital Stock Labor Organization

Membership Organization Trade Association Cooperative

Write or Type Committee Name

Credit Union Legislative Action Council of CUNA

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

Mailing Address

Title or Position ▼ CITY ▲ STATE ▲ ZIP CODE ▲

Telephone number ___ - ___ - ___

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: **Patricia Sowick**

Mailing Address: **601 Pennsylvania Avenue, NW**

South Building, Suite 600

Washington DC 20004 -

Title or Position ▼ CITY ▲ STATE ▲ ZIP CODE ▲

VP of Administration

Telephone number 202 - 638 - 5777

Full Name of Designated Agent: **Richard Gose**

Mailing Address: **601 Pennsylvania Avenue, NW**

South Bldg, Suite 600

Washington DC 20004 -

Title or Position ▼ CITY ▲ STATE ▲ ZIP CODE ▲

Telephone number 202 - 638 - 5777

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.

Virginia Corporate FCU

Mailing Address PO Box 11469

Lynchburg VA 24505 -

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.

Name of Bank, Depository, etc. **[ADDITIONAL]**

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: John Mckechnie

Mailing Address: 601 Pennsylvania Avenue, NW

Suite 600, South Bldg

Washington DC 20004

Title or Position ▼ CITY ▲ STATE ▲ ZIP CODE ▲

Telephone number 202 - 638 - 5777