

HISCOCK & BARCLAY ^{LLP}

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FEC MAIL CENTER

John Kelepurovski, Jr.
Associate

October 23, 2012

VIA OVERNIGHT MAIL

Federal Election Commission
999 E. Street, N.W.
Washington, DC 20463

Re: Manufacturers Association of Central New York, Inc. Federal PAC - FEC Form 1
"Statement of Organization."

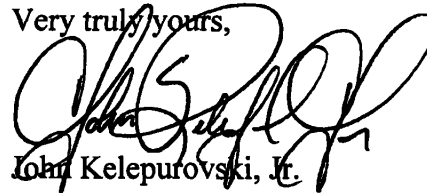
Dear Sir or Madam:

Enclosed please find a completed Statement of Organization (FEC Form 1) submitted on behalf of Manufacturers Association of Central New York, Inc. Federal PAC for registration and filing with the FEC.

Please note the Manufacturers Association of Central New York, Inc. was previously a co-sponsor of a separate committee called Manufacturers Association of Central New York and Greater Syracuse Chamber of Commerce Political Action Committee (Central Upstate Business Political Action Committee - "CUBPAC"), Id No. C00447938. CUBPAC is in the process of being dissolved and a termination report has been submitted to the FEC simultaneously with this submission under separate cover.

Please contact me with any questions.

Very truly yours,



John Kelepurovski, Jr.

JK:jk
Enclosure

cc: Karyn Burns
(Via Electronic Mail - kburns@macny.org)

One Park Place - 300 South State Street - Syracuse, New York 13202 hblaw.com
jkelepurovski@hblaw.com Direct: 315.425.2739 Fax: 315.425.8582

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FEC FORM 1

STATEMENT OF ORGANIZATION

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1. NAME OF COMMITTEE (in full)

(Check if name is changed)

Example: If typing, type over the lines.

12FE4M5

Manufacturers Association of Central New York, Inc. Federal PAC

ADDRESS (number and street)

5788 Widewaters Parkway

Suite 5

(Check if address is changed)

Syracuse

NY

13214

CITY

STATE

ZIP CODE

COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address)

(Check if address is changed)

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address is changed)

2. DATE

MM / DD / YYYY

3. FEC IDENTIFICATION NUMBER

C

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

John F. Osta

Signature of Treasurer

[Handwritten Signature]

Date

10 / 23 / 2012

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 02/2009)

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5. TYPE OF COMMITTEE

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 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 _____

Party Committee:

- (d) This committee is a (National, State or subordinate) committee of the (Democratic, Republican, etc.) Party.

Political Action Committee (PAC):

- (e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:
 - Corporation Corporation w/o Capital Stock Labor Organization
 - Membership Organization Trade Association Cooperative
 - In addition, this committee is a Lobbyist/Registrant PAC.
- (f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)
 - In addition, this committee is a Lobbyist/Registrant PAC.
 - In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)

Joint Fundraising Representative:

- (g) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.
- (h) 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	<input type="checkbox"/>
2.	_____	FEC ID number	<input type="checkbox"/>
3.	_____	FEC ID number	<input type="checkbox"/>
4.	_____	FEC ID number	<input type="checkbox"/>

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Write or Type Committee Name

Manufacturers Association of Central New York, Inc. Federal PAC

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

Manufacturers Association of Central New York, Inc.

Mailing Address

5788 Widewaters Parkway

Suite 5

Syracuse

NY

13214

CITY

STATE

ZIP CODE

Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor

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

Treasurer

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

John F. Osta

Mailing Address

5788 Widewaters Parkway

Suite 5

Syracuse

NY

13214

CITY

STATE

ZIP CODE

Title or Position

Treasurer

Telephone number

315

474

4201

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Full Name of Designated Agent

Karyn E. Burns

Mailing Address

c/o Manufacturers Association of Central New York, Inc.

5788 Widewaters Parkway

Syracuse

NY

13214

CITY

STATE

ZIP CODE

Title or Position

Assistant Treasurer

Telephone number

315

474

4201

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.

Citizens Bank NA

Mailing Address

250 South Clinton Street

Suite 202

Syracuse

NY

13202

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

CITY

STATE

ZIP CODE

12030930380

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.

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<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> USPS First Class Mail	Postmarked
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Delivery Confirmation™ or Signature Confirmation™ Label <input type="checkbox"/>	
<input type="checkbox"/> USPS Express Mail	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input checked="" type="checkbox"/> Overnight Delivery Service (Specify): <i>UPS</i>	Shipping Date <i>10/22/12</i>
Next Business Day Delivery <input checked="" type="checkbox"/>	
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked
<i>JMW</i> PREPARER	<i>10/24/12</i> DATE PREPARED

(3/2005)