FEC FORM 1

STATEMENT OF ORGANIZATION

(See instructions)

1. NAME OF COMMITTEE (In full) NEWPORT NEWS SHIPBUILDING PAC (SHIPPAC) (Check if name is changed) Example: If typing, type over the lines 12FE4M5

   ADDRESS (street and number) 4101 WASHINGTON AVENUE

   BLDG. 5201

   (Check if address is changed) NEWPORT NEWS VA 23607

   COMMITTEE'S E-MAIL ADDRESS

   schnick_vw@nns.com

   COMMITTEE'S WEB PAGE ADDRESS (URL)

2. DATE 04/29/2002

3. FEC IDENTIFICATION NUMBER C00325092

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 VINCE SCHOENIG

   Signature of Treasurer Electronically Filed by VINCE SCHOENIG Date 05/13/2002

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: 800-424-6840
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 Office State
Party Affiliation Sought: House Senate President 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 (Democratic, Republican, etc.) Party)
(or subordinate) committee of the

(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

NEWPORT NEWS SHIPBUILDING

Mailing Address 4101 WASHINGTON AVENUE

NEWPORT NEWS VA 23607

CITY STATE ZIP CODE

Relationship CONNECTED

Type of Connected Organization:

x Corporation Corporation w/o Capital Stock Labor Organization

Membership Organization Trade Association Cooperative
NEWPORT NEWS SHIPBUILDING PAC (SHIPPAC)

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: COMERICA BANK
   Mailing Address: PAC SERVICES - MC 2250
                    P.O. BOX 75000
                    DETROIT, MI 48275 - 2250
   Title or Position: RECORDKEEPER
   Telephone number: 248 - 371 - 7269

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: VINCE SCHOENIG
   Mailing Address: 4101 WASHINGTON AVENUE
                    NEWPORT NEWS, VA 23607 -
   Title or Position: TREASURER
   Telephone number: 757 - 390 - 8348

   Full Name of Designated Agent:
   Mailing Address:
                    ____________________________
   Title or Position: ____________________________
   Telephone number: ____________________________
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.

<table>
<thead>
<tr>
<th>COMERICA BANK</th>
</tr>
</thead>
<tbody>
<tr>
<td>P.O. BOX 75000</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Mailing Address</th>
</tr>
</thead>
<tbody>
<tr>
<td>DETROIT, MI 48225</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>CITY</th>
<th>STATE</th>
<th>ZIP CODE</th>
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</table>
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.

[ADDITIONAL]

Name of Bank, Depository, etc.

Mailing Address

CITY
STATE
ZIP CODE

[ADDITIONAL]

Name of Any Connected Organization or Affiliated Committee

EMPLOYEES OF NORTHROP GRUMMAN CORPORATION PAC

Mailing Address 320 S. GRAND AVE, #700

LOS ANGELES
CA
90071

CITY
STATE
ZIP CODE

Relationship AFFILIATED

Type of Connected Organization:

Corporation
Corporation w/o Capital Stock
Labor Organization
Membership Organization
Trade Association
Cooperative
Designated Agent

[ADDITIONAL]

Full Name

Mailing Address

Title or Position ▼

CITY ▲

STATE ▲

ZIP CODE ▲

________________________________________

Telephone number _______ - _______ - _______