

FEC
FORM 1

STATEMENT OF ORGANIZATION

RECEIVED
FEDERAL ELECTION COMMISSION
DEC 12 11 35

Office Use Only

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

AMERICAN AIRLINES FEDERAL CREDIT UNION PAC (AA CREDIT UNION PAC)

ADDRESS (number and street) 4151 AMON CARTER BLVD

(Check if address is changed) MD 2100

FORT WORTH TX 76155-0069

CITY ▲ STATE ▲ ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS
AACREDITUNIONPAC@AACREDITUNION.ORG

COMMITTEE'S WEB PAGE ADDRESS (URL)

COMMITTEE'S FAX NUMBER
817-931-6655

2. DATE 03 05 2007

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 FAITH L. ANDERSON

Signature of Treasurer *Faith L. Anderson* Date 03 12 2007

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.

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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
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- (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

AMERICAN AIRLINES FEDERAL CREDIT UNION

Mailing Address 4151 AMON CARTER BLVD.

MD 2100

FORT WORTH TX 76155-0069

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship CONNECTED

Type of Connected Organization:

- | | | | |
|-------------------------|-------------------------------------|-------------------------------|--------------------|
| Corporation | <input checked="" type="checkbox"/> | Corporation w/o Capital Stock | Labor Organization |
| Membership Organization | | Trade Association | Cooperative |

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Write or Type Committee Name

AMERICAN AIRLINES FEDERAL CREDIT UNION PAC (AA CREDIT UNION 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 FAITH LLEVA ANDERSON

Mailing Address 4151 AMON CARTER BLVD.

MD 2100

FORT WORTH TX 76155-0069

Title or Position CITY STATE ZIP CODE

TREASURER

Telephone number 817-931-7004

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 FAITH LLEVA ANDERSON

Mailing Address 4151 AMON CARTER BLVD.

MD 2100

FORT WORTH TX 76155-0069

Title or Position CITY STATE ZIP CODE

TREASURER

Telephone number 817-931-7004

Full Name of Designated Agent WALTER RAY FURNACE

Mailing Address 4151 AMON CARTER BLVD.

MD 2100

FORT WORTH TX 76155-0069

Title or Position CITY STATE ZIP CODE

ASSISTANT TREASURER

Telephone number 817-967-1111

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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.

American Airlines Federal Credit Union

Mailing Address

4151 Amon Carter Blvd.

MD 2100

Fort Worth

TX

76155

0069

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.

<input checked="" type="checkbox"/> Hand Delivered	Date of Receipt 3/13/07
<input type="checkbox"/> USPS First Class Mail	Postmarked
<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
<input type="checkbox"/> USPS Priority Mail	Postmarked
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 type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
Next Business Day Delivery <input 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

 PREPARER	3/13/07 DATE PREPARED
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