

09 SEP 29 AM 11:00

FEC FORM 1

STATEMENT OF ORGANIZATION

Office Use Only

1. NAME OF COMMITTEE (in full)

(Check if name is changed)

Example: If typing, type over the lines.

12FE4M5

Pagliuca for Senate

ADDRESS (number and street)

102 Mount Auburn St.

(Check if address is changed)

Cambridge

MA

02138

CITY

STATE

ZIP CODE

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

(Check if address is changed)

steve@stevepagliuca.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address is changed)

www.stevepagliuca.com

2. DATE

09

21

2009

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

Sanjay Saimi

Signature of Treasurer

Sanjay Saimi

Date

09

21

2009

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)

29020323583

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 Steve Pagliuca

Candidate Party Affiliation DEM Office Sought: House Senate President State MA 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"/> C _____
2.	_____	FEC ID number	<input type="checkbox"/> C _____
3.	_____	FEC ID number	<input type="checkbox"/> C _____
4.	_____	FEC ID number	<input type="checkbox"/> C _____

29020323584

Write or Type Committee Name

Pagluca for Senate

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

Empty grid lines for organization name

Mailing Address

Empty grid lines for mailing address

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

Rosemary McCreedy

Mailing Address

102 Mount Auburn St.

Cambridge

MA

02138

Title or Position

CITY

STATE

ZIP CODE

Assistant Treasurer

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

Sanjay Saimi

Mailing Address

102 Mount Auburn St.

Cambridge

MA

02138

Title or Position

CITY

STATE

ZIP CODE

Treasurer

Telephone number

29020323585

Full Name of Designated Agent

N/A

Mailing Address

Empty address fields for city, state, and zip code.

CITY

STATE

ZIP CODE

Title or Position

Empty field for title or position.

Telephone number

Empty field for 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.

Bank of America

Mailing Address

161 Cambridge St. Boston MA 02114

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

Empty address fields for city, state, and zip code.

CITY

STATE

ZIP CODE

29020323586

Steve Pagliuca for Senate Inc.
102 Mt. Auburn St.
Cambridge, MA 02138

SCREENED
BY THE SENATE
POST OFFICE

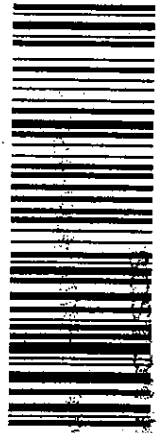
Office of Public Records
P.O. Box 2617
Alexandria, VA 22301-0517

22301+0517 8011



09 SEP 29 AM 11:00
SECRETARY OF THE SENATE

2617

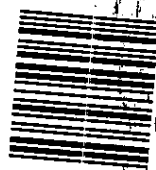


7009 1410 0001 3545 2989



UNITED STATES
POSTAL SERVICE

1000



22301

\$324
00038884-10

U.S. POSTAGE
PAID
CAMBRIDGE, MA
SEP 24 9 09
PM/DUNT

GENERAL DELIVERY

78552302062

NANCY ERICKSON
SECRETARY

PAMELA B. GAVIN
SUPERINTENDENT

HART SENATE OFFICE BUILDING
SUITE 232
WASHINGTON, DC 20510-2116
PHONE: (202) 224-0322

United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

HAND DELIVERED _____
Date of Receipt

USPS FIRST CLASS MAIL _____

USPS REGISTERED/CERTIFIED _____
Postmark **09-24-09**
Postmark

USPS PRIORITY MAIL _____

DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL

USPS EXPRESS MAIL _____
Postmark

OVERNIGHT DELIVERY SERVICE:

	SHIPPING DATE	NEXT BUSINESS DAY DELIVERY
FEDERAL EXPRESS	_____	<input type="checkbox"/>
UPS	_____	<input type="checkbox"/>
DHL	_____	<input type="checkbox"/>
AIRBORNE EXPRESS	_____	<input type="checkbox"/>

RECEIVED FROM FEDERAL ELECTION COMMISSION _____
Date of Receipt

POSTMARK ILLEGIBLE NO POSTMARK

FAX _____
Date of Receipt

OTHER _____
Date of Receipt or Postmark

PREPARER **RD** DATE PREPARED **09-29-09**

29020323588

29020323589

