

STATEMENT OF ORGANIZATION

(See reverse side for instructions)

1. (a) NAME OF COMMITTEE IN FULL International Longshoremen's Association District Council of Philadelphia/Wilmington Political Action Committee (I.L.A. District Council)		2. DATE May 1, 1997 P.A.C.)	
(b) Number and Street Address P.O. Box 43557		3. FEC Identification Number	
(c) City, State and ZIP Code Philadelphia, PA 19106		4. Is This Report An Amendment? ☐ YES ☒ NO	

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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 | State/District |
|-------------------|-----------------------------|---------------|----------------|
| | | | |
- ☐ (c) This committee supports/opposes only one candidate _____ and is NOT an authorized committee.
(name of candidate)
- ☐ (d) This committee is a _____ committee of the _____ Party.
(National, State or subordinate) (Democratic, Republican, etc.)
- ☒ (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 a party committee.

6. Name of Any Connected Organization or Affiliated Committee	Mailing Address and ZIP Code	Relationship
International Longshoremen's Assoc. District Council of Philadelphia/ Wilmington	P.O. Box 40036 Philadelphia, PA 19106	Connected
International Longshoremen's Assoc. Committee on Political Education	17 Battery Place Suite 1530 New York, NY 10004	Affiliated

Type of Connected Organization:

- ☐ Corporation ☐ Corporation w/o Capital Stock ☒ Labor Organization ☐ Membership Organization ☐ Trade Association ☐ Cooperative

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
Louis Carberry	P.O. Box 43557, Philadelphia, PA 19106	Treasurer

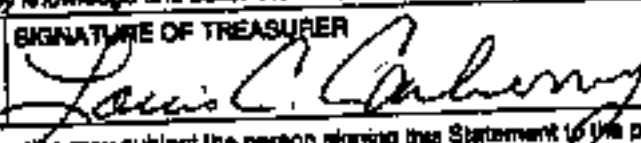
8. Treasurer: List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name	Mailing Address	Title or Position
Louis Carberry	P.O. Box 43557, Philadelphia, PA 19106	Treasurer
Daniel Duffy		Asst. Treasurer

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.	Mailing Address and ZIP Code
Pennsylvania Savings Bank	11 Penn Center 1835 Market Street - Suite 2601 Philadelphia, PA 19103

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 Louis C. Carberry	SIGNATURE OF TREASURER 	DATE 5/1/97
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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.

For further information contact:
Federal Election Commission
Toll-free 800-424-9530
Local 202-218-3420

FECAN053

FEC FORM 1
(revised 4/87)

Federal Election Commission
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Records

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scb
PREPARER

5-5-97
DATE PREPARED