

**FEC  
FORM 1**

**STATEMENT OF  
ORGANIZATION**

(See instructions)

Office Use Only

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

NIAGARA MOHAWK HOLDINGS INC VOLUNTARY FEDERAL POLITICAL ACTION COMMITTEE

ADDRESS (Home or street) PO BOX 7102 FEDERAL STATION

(Check if address is changed) SYRACUSE NY 13261

CITY STATE ZIP CODE

COMMITTEE'S E-MAIL ADDRESS

williamsj@niagaramohawk.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

2. DATE 02 / 06 / 2002

3. FEC IDENTIFICATION NUMBER C00125658

4. IS THIS STATEMENT NEW (N) OR X 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 Mr Jeffrey Williams

Signature of Treasurer Electronically Filed by Mr Jeffrey Williams Date 02 / 06 / 2002

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. 5437g.

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS

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 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

NATIONAL GRID USA POLITICAL ACTION COMMITTEE \_\_\_\_\_

Mailing Address \_\_\_\_\_ 25 RESEARCH DRIVE \_\_\_\_\_

\_\_\_\_\_ WESTBOROUGH \_\_\_\_\_ MA \_\_\_\_\_ 01582 \_\_\_\_\_

CITY ▲ STATE ▲ ZIP CODE ▲

Relationship \_\_\_\_\_ affiliated committee \_\_\_\_\_

Type of Connected Organization:

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

Write or Type Committee Name

NIAGARA MOHAWK HOLDINGS INC VOLUNTARY FEDERAL POLITICAL ACTION COMMITTEE

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 Mr Jeffrey Williams

Mailing Address PO Box 7102 Federal Station

Syracuse NY 13261

Title or Position CITY STATE ZIP CODE

Treasurer Telephone number 716 857 4295

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 Mr Jeffrey Williams

Mailing Address PO Box 7102 Federal Station

Syracuse NY 13261

Title or Position CITY STATE ZIP CODE

Telephone number

Full Name of Designated Agent

Mailing Address

CITY STATE ZIP CODE

Title or Position CITY STATE ZIP CODE

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.

Key Bank

Mailing Address

201 S. Warren St.

Syracuse

NY

13202 -

CITY Δ

STATE Δ

ZIP CODE Δ

**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.

[ ADDITIONAL ]

Mailing Address

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_ - \_\_\_\_\_

CITY ▲ STATE ▲ ZIP CODE ▲

Name of Any Connected Organization or Affiliated Committee

[ ADDITIONAL ]

Niagara Mohawk Holdings, Inc.

\_\_\_\_\_

\_\_\_\_\_

Mailing Address

300 Erie Blvd. West

\_\_\_\_\_

Syracuse NY 13202

CITY ▲ STATE ▲ ZIP CODE ▲

Relationship

connected organizati

\_\_\_\_\_

Type of Connected Organization:

- X 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 \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_