Texas Ethics Commission P.O. Box 12070 Austin, Texas 78711-2070 (512) 463-5800 1-800-325-8506

CORRECTION AFFIDAVIT FOR CANDIDATE/OFFICEHOLDER

FORM COR-C/OH

1 ACCOUNT#

2 Total pages filed: 3

3 CANDIDATE / OFFICEHOLDER NAME
MS / MRS / MR: Mr. FIRST: William MI: H.
NICKNAME: Bill LAST: White SUFFIX:

4 ORIGINAL REPORT TYPE
- [X] January 15
- [ ] July 15
- [ ] 30th day before election
- [ ] 8th day before election
- [ ] Runoff
- [ ] Exceeded $500 limit
- [ ] 15th day after treasurer appointment (officeholder only)
- [ ] Final report
- [ ] Other (specify)

5 ORIGINAL PERIOD COVERED
Month Day Year THROUGH Month Day Year
11/27/2003 THROUGH 12/31/2003

OFFICE USE ONLY
Date Received
RECEIVED
Date Hand-delivered or Date Postmarked
MAY 10 2004
CITY SECRETARY
Receipt # Amount
Legal Totals
Date Processed
Date Imaged

6 EXPLANATION OF CORRECTION
Attached please find the Statement of Organization for the following contributor:
Seafarers Political Activity

7 AFFIDAVIT

PAMELA F. ROSENAUER
Notary Public
State of Texas
Commission Exp. 6/6/2006

AFFIX NOTARY STAMP / SEAL ABOVE

I swear, or affirm, under penalty of perjury, that this corrected report is true and correct.

William H. White
Signature of Candidate or Officeholder

Sworn to and subscribed before me by William H. White this the 27th day of April, 2004

to certify which, witness my hand and seal of office.

Pamela F. Rosenauer Pamela F. Rosenauer Notary Public
Signature of officer administering oath Printed name of officer administering oath Title of officer administering oath

Remember To Attach Any Part Of The Campaign Finance Report Form Needed To Report And Explain Corrections

Printed on recycled paper

Revised 02/04/2004

(See reverse side for instructions)

1. (a) NAME OF COMMITTEE (In Full) (Check if name is changed)

Seafarers Political Activity Donation

(b) Number and Street Address (Check if address is changed)

5201 Auth Way

(c) City, State and ZIP Code

Camp Springs, MD 20746

2. Date

January 18, 1996

3. FEC IDENTIFICATION NUMBER

C00004325

4. IS THIS STATEMENT AN AMENDMENT?

☒ YES ☐ NO

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, _____ (name of candidate), and is NOT an authorized committee.

☐ (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 a party committee.

Name of Any Connected Organization or Affiliated Committee	Mailing Address and ZIP Code	Relationship

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

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
John Pay resigned Treasurer	5201 Auth Way Camp Springs, MD 20746	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

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	SIGNATURE OF TREASURER	DATE
John Fay, Treasurer	John Fay	1-18-96

NOTE: Submission of false, erroneous, or incomplete information may subject any person making 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 202-376-3120

FEC FORM 1
(revised 4/87)

S.P.A.D.

Seafarers Political Activity Donation

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

5201 Auth Way, Camp Springs, Maryland 20746 301-899-0675

JUN 15 11 15 AM '99

June 8, 1999

Federal Election Commission
999 E Street, N.W.
Washington, D.C. 20463

Re: Seafarers Political Activity Donation

Please be advised that effective June 3, 1999, Thomas J. DeVivio is no longer the Treasurer of Seafarers Political Activity Donation. He has been replaced by Margaret R. Bowen. Also we have appointed Frances Brown as Assistant Treasurer effective June 8, 1999.

Please update your records accordingly. If you have any questions regarding this matter, contact my office.

Very truly yours,

David Heindel
Chairman