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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 COMMITTEE (in full) is changed) over the lines. EMPLOYEE--OWNED S CORPORATIONS OF AMERICA PAC (ESCA PAC) 1341 G STREET, NW ADDRESS (number and street) SUITE 600 (Check if address is changed) WASHINGTON 20005 DC CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS nlundberg@vennstrategies.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2015 C00458257 FEC IDENTIFICATION NUMBER 3. X 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. Matt Foster Type or Print Name of Treasurer Matt Foster [Electronically Filed] 80 18 2015 Signature of Treasurer Date 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 For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530 Only

Local 202-694-1100

	FFC <b>Fo</b>	rm 1 (Revised 02/2009)	Page <b>2</b>			
		OMMITTEE	i aye Z			
		didate 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. (Con information below.)	nplete the candidate			
Nam Cand	e of didate					
	didate / Affiliati	Office Sought: House Senate President	State			
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.				
Name Cand	e of didate					
Par	ty Con	nmittee:	<b>(</b> 5			
(d)		This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.			
Poli	tical A	ction Committee (PAC):				
(e)	$\times$	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con-	nnected 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 scommittee. (i.e., nonconnected committee)	egregated fund or party			
		In addition, this committee is a Lobbyist/Registrant PAC.				
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)				
Join	t Fund	Iraising Representative:				
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for to committees/organizations, at least one of which is an authorized committee of a federal candidate.	wo or more political			
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for to committees/organizations, none of which is an authorized committee of a federal candidate.	vo or more political			
	Committees Participating in Joint Fundraiser					
	1.	FEC ID number				
	2.	FEC ID number				
	3.	FEC ID number				
	4.					

Treasurer

	_		_
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	Write or Type Comm		(=========
	EMPLOYE	EOWNED S CORPORATIONS OF AMERICA PAC (	ESCA PAC)
6.	Name of Any Co	nnected Organization, Affiliated Committee, Joint Fundraising Representative, or Leaders	hip PAC Sponsor
E	mployeeowr	ned S Corporations of America	
L			
	Mailing Address	1341 G Street, NW	
		Suite 600	
		Washington DC 20005	
		CITY STATE	ZIP CODE
	_		
	Relationship: X	Connected Organization Affiliated Committee Joint Fundraising Representative Lea	adership PAC Sponsor
'.	Custodian of Red books and records	cords: Identify by name, address (phone number optional) and position of the person in pos	session of committee
	Full Name	Noelle M. Lundberg	
	Mailing Address	1341 G Street, NW	1
	g	Suite 600	
		Washington DC 20005	
	Title or Position	CITY STATE	ZIP CODE
	Custodian of Rec	rords Telephone number	466 8700
3.		e name and address (phone number optional) of the treasurer of the committee; and the name (e.g., assistant treasurer).	me and address of
	I dii Italiio	Matt Foster	1
	of Treasurer	<sub>1</sub> 1333 NW Vivion Road	
	Mailing Address		
		Kansas City MO 64118	
	Title or Position	CITY STATE	ZIP CODE

Telephone number

9.

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Full Name of Designated Agent	Stephanie Silverman						
Mailing Address	1341 G Street, NW						
	Suite 600						
	Washington DC 20005						
Title or Position	CITY STATE ZIP	CODE					
Assistant Treas	surer Telephone number 202 – 466	_   8700					
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.							
	M&T Bank						
Mailing Address	1680 K Street						
	Washington DC 20006						
	CITY STATE ZIF	CODE					
Name of Bank, Depository, etc.							
Mailing Address							
	CITY STATE ZIF	CODE					