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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Zovio Inc PAC 1811 E. Northrop Blvd ADDRESS (number and street) (Check if address is changed) Chandler 85286 ΑZ CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS MABRILL@COMERICA.COM (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2019 C00478404 FEC IDENTIFICATION NUMBER > 3. X OR IS THIS STATEMENT NEW (N) 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. Weisel, Sandra, , , Type or Print Name of Treasurer Weisel, Sandra,,, [Electronically Filed] 12 18 2019 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

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		m 1 (Revised 02/2009)  DMMITTEE	raye Z			
Cand	lidate	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. (Complinformation below.)	ete the candidate			
Name Candid						
Candid Party A		n Office Sought: House Senate President	State District			
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.				
Name Candid						
Party	Com	mittee:				
(d)			Democratic, epublican, etc.) Party			
Politi	cal A	etion Committee (PAC):				
(e)	×	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization on line 6.)	ected organization is			
		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	Fund	raising Representative:				
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate.	or more political			
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	or more political			
	Comr	nittees Participating in Joint Fundraiser				
	1.	FEC ID number				
	2.	FEC ID number				
	3.	FEC ID number				
	4.					

FFC Form 1 (Davised )	02/2000)	Daga 2
FEC Form 1 (Revised 0 Write or Type Committee Name		Page 3
	•	
Zovio Inc PAC		
6. Name of Any Connected C	Organization, Affiliated Committee, Joint Fundraising Representative, or	Leadership PAC Sponsor
Zovio Inc		
Mailing Address	1811 E. Northrop Blvd	
	Chandler	85286     _   _   _
	CITY STATE	ZIP CODE
_		
Relationship: X Connected	d Organization Affiliated Committee Joint Fundraising Representative	Leadership PAC Sponsor
Custodian of Records: Ider books and records.	ntify by name, address (phone number optional) and position of the person	on in possession of committee
PAC Servi	ices, Comerica Bank, , ,	
Full Name	,P.O. Box 75000	
Mailing Address	P.O. BOX 73000	
	MC2250	
	Detroit MI	48275-2250
Title or Position	CITY STATE	ZIP CODE
Recordkeeper	Telephone number 248	
3. <b>Treasurer:</b> List the name and any designated agent (e.g., a	d address (phone number optional) of the treasurer of the committee; an assistant treasurer).	d the name and address of
Full Name Weisel, Sa	indra, , ,	
of Treasurer		
Mailing Address	1811 E. Northrop Blvd	
	Chandler   AZ	85286
	CITY STATE	ZIP CODE
Title or Position PAC Treasurer	866	-  475  -  0317

FEC FUII	n 1 (Revised 02/2009)		Page <b>4</b>
Full Name of Designated Agent	Weisel, Sandra, , ,		
Mailing Address	1811 E. Northrop Blvd		
	Chandler	AZ 85	5286
	CITY	STATE	ZIP CODE
Title or Position Treasurer		ephone number 866	-  475  -  0317
Banks or Other	Depositories: List all banks or other depositories in which t	he committee deposits funds	s, holds accounts, rents
		•	
	oxes or maintains funds.	,	
safety deposit be	oxes or maintains funds.	, , , , , , , , , , , , , , , , , , , ,	
safety deposit bo	oxes or maintains funds.  Depository, etc.	· 	
safety deposit be	Depository, etc.  Comerica Bank		
safety deposit bo	Depository, etc.  Comerica Bank PO Box 75000		3275-2250 
safety deposit bo	Depository, etc.  Comerica Bank  PO Box 75000  MC 2250		3275-2250 
safety deposit bo	Depository, etc.  Comerica Bank  PO Box 75000  MC 2250  Detroit  CITY	MI 48	
safety deposit be Name of Bank, I	Depository, etc.  Comerica Bank  PO Box 75000  MC 2250  Detroit  CITY	MI 48	
safety deposit be Name of Bank, I	Depository, etc.  Comerica Bank  PO Box 75000  MC 2250  Detroit  CITY	MI 48	
safety deposit be Name of Bank, Mailing Address  Name of Bank,	Depository, etc.  Comerica Bank  PO Box 75000  MC 2250  Detroit  CITY	MI 48	
safety deposit be Name of Bank, Mailing Address  Name of Bank,	Depository, etc.  Comerica Bank  PO Box 75000  MC 2250  Detroit  CITY	MI 48	

## : 97 'A = G7 9 @ 5 B9 CI G'H9 LH'F9 @ 5 H98 'HC'5 'F9 DCFHŽG7 < 98 I @ 'CF' ± H9 A = N5 H± CB

Form/Schedule: F1A Transaction ID:

Change of PAC Treasurer.

Form/Schedule: Transaction ID: