

## Small Business Political Alliance PAC 1390 Chain Bridge Road #515 McLean, VA 22101

May 27, 2011

Federal Election Commission 999 E Street, NW Washington, DC 20463

Re:

Form 1, Statement of Organization – Unlimited Contributions

**Federal Election Commission:** 

This committee intends to make independent expenditures and, consistent with the U.S. Court of Appeals for the District of Columbia Circuit Court decision in <u>SpeechNow v. FEC</u>, it therefore intends to raise funds in unlimited amounts. This committee will not use those funds to make contributions, whether direct, in-kind, or via coordinated communications to federal candidates or committees.

Respectfully submitted,

Cabell Hobbs Treasurer

2011 JUN - 1 AM 11: 12

FORM 1

1030612032

## **STATEMENT OF ORGANIZATION**

	(See instructions	S)	Office use only
1. NAME OF COMMITTEE (in fu	(Check if name is changed)	Example: If typying, type over the lines	12FE4M5
SMALL BUSINE	SS POLITICAL ALLIANCE POLIT	ICAL ACTION COMMITTEE	E (SBPA PAC)
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ADDRESS (number and str	1390 CHAIN BRIDGE	ROAD	
(Check if address	#515		
is changed)	MCLEAN		VA
. •	(	CITY	STATE▲ ZIP CODE ▲
COMMITTEE'S F-MAIL	ADDRESS (Please provide only one e-r		
(Check if address	compliance@complia		
: is changed)	1,,,,,,,,,		
COMMITTEE'S WEB PA	·		
(Check if address is changed)	www.electsmallbiz.org	9	
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	and the state of t		
2. DATE 05	27 2011		
3. FEC IDENTIFICAT	ON NUMBER C	a subseque florar de remaire, som a la la materia.	•
4. IS THIS STATEME	NT X NEW (N) OR	AMENDED (A)	
	(4,	4	
I cortify that I have evamine	ed this Statement and to the best of my know	ledge and belief it is true, correct and	d complete
i certify triat i riave examine	this diatement and to the best of my known	louge and benefit to those, correct and	3 complete
Type or Print Name of T	reasurer CABELL HOBBS		
Signature of Treasurer	Calal horas		Date 05 27 2011
NOTE: Submission of felse	, erroneous, or incomplete information may s  ANY CHANGE IN INFORMATION	subject the person signing this Stater	
Office	. The state of the	For further information co	nation.
Use		Federal Election Commissi Toll Free 800-424-9530	CEC ECOM 4

5.	TYPE OF CO	DMMITTEE (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 Affiliat	Office State  ion Sought: House Senate President  District		
	(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.		
	Name of Candidate			
	Party Comm	(National, State (Democratic, Republican,etc.) Party.		
_	Political Act	tion Committee (PAC):		
	(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected 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) X.	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 Fundra	ising Representative:		
	(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.		
	(h)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.		
	Com	mittees Participating in Joint Fundraiser		
		1. FEC ID number C:		
		2. FEC ID number C		
		3. FEC ID number		
		4. FEC ID number C. 4.		

**TREASURER** 

Write or Type Committee Name SMALL BUSINESS POLITICAL ALLIANCE POLITICAL ACTION COMMITTEE (SBPA PAC) Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor **Mailing Address** CITY STATE A ZIP CODE Relationship: Joint Fundraising Representative Affiliated Committee **Connected Organization** 7. Custodian of Records: Identify by name, address, (phone number -- optional), and position of the person in possession of Committee books and records. MĘLODIE JOHNSON Full Name 1390 CHAIN BRIDGE ROAD **Mailing Address** #515 **MCLEAN** VA 22101 Title or Position ♥ CITY A **ASSISTANT TREASURER** Telephone number

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	CABELL HOBBS			
Mailing Address		1390 CHAIN BRIDGE ROAD		<del> </del>
		#515		· · · · · · · · · · · · · · · · · · ·
		MCLEAN	_VA	22101 _
Title or Position ♥		CITY &	STATE	ZIP CODE &

Telephone number

FEC Form 1 (Rev	ISEG U2/2009)	<del></del>	Page 4
Full Name of Designated Agent	MELODIE JOHNSON		
Mailing Address	1390 CHAIN BRIDGE ROAD		
	#515		
	MCLEAN	VA	22101 –
Title or Position ♥	CITY A	STATE &	ZIP CODE A
ASSIS	TANT TREASURER Telephor	e number	
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Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING The FEC added this page to the end of this filing to indicate to	
Hand Delivered	Date of Receipt
USPS First Class Mail	Postmarked
USPS Registered/Certified	Postmarked (R/C)
USPS Priority Mail	Postmarked 5/27/11
Delivery Confirmation™ or Signature Confirm	nation™ Label    Lab
USPS Express Mail	Postmarked
Postmark Illegible	·
No Postmark	
Overnight Delivery Service (Specify):	Shipping Date
Next Business	s Day Delivery
Received from House Records & Registration Office	Date of Receipt
Received from Senate Public Records Office	Date of Receipt
Received from Electronic Filing Office	Date of Receipt
Other (Specify):	eceipt or Postmarked
En	6/1/4
PREPARER (3/2005)	DATE PREPARED