Image# 11971776039 PAGE 1/4

FEC FORM 1		STATE ORG <i>A</i>			-				0	ffice U	se Onl	у			
NAME OF COMMITTEE (in	n full)	(Check if is change		Example over the	e:If typing e lines.	, type	121	FE4M	:5						
CONCERNED W	OMEN FC	R AMERICA LI	EGISLAT	IVE ACT	ION CO	MMITT	EE PC	DLITIC	CAL A	ACTI	ON (COM	1MI7 ⊥	ΓΤΕΙ	Ξ
ADDRESS (number a	nd street)	PO Box 66680													
(Check if ac is changed)	ddress	Washington					DC	;	200	035		<u> </u>			
			С	SITY			STAT	Έ			ZIP (CODE	Ξ		
COMMITTEE'S E-MA (Check if is change	address	S (Please provide of info@cwpac.org	only one e-n	mail addres	ss)										
COMMITTEE'S WEB (Check if is changed)	address	RESS (URL) www.cwpac.org													
2. DATE 10	0 28	2011													
3. FEC IDENTIFIC	CATION NUI	MBER	C cod	0375865											
4. IS THIS STATE!	MENT X	NEW (N)	OR		AMEND	ED (A)									
I certify that I have e	examined this	Statement and to	the best o	of my knov	wledge an	d belief i	it is true	e, corre	ct and	d com	plete				
Type or Print Name	of Treasurer	Lee LaHaye													
Signature of Treasure	Lee LaHa	ıye		[Ei	lectronicall	y Filed]	Date	1	0	2	28	/ Y	20)11	Υ
NOTE: Submission of		us, or incomplete in								pena	lties o	f 2 U	.S.C.	§437	g.

Office Use Only			For further information contact: Federal Election Commission Toll Free 800-424-9530 Local 202-694-1100	FEC FORM 1 (Revised 02/2009)
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	FEC Fo	rm 1 (Revised 02/2009)	Page 2
		OMMITTEE 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
Nam Can	e of didate		
	didate y Affiliati	on Office Sought: House Senate President	State
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Nam Cand	e of didate		
Par	ty Con	nmittee:	N 4' -
(d)		· · · · ·	Democratic, epublican, etc.) Party.
Poli	itical A	ction Committee (PAC):	
(e)	\times	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its conn	ected organization is a
		Corporation Corporation w/o Capital Stock	Labor Organization
		Membership Organization Trade Association	Cooperative
		X In addition, this committee is a Lobbyist/Registrant PAC.	
(f)		This committee supports/opposes more than one Federal candidate, and is NOT a separate seg committee. (i.e., nonconnected committee)	regated 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 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
	Com	mittees Participating in Joint Fundraiser	
	1.	FEC ID number C	
	2.	FEC ID number C	
	3.	FEC ID number	
	4		

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Write or Type Committee Name		
CONCERNED WOMEN F	FOR AMERICA LEGISLATIVE ACTION COMMITTEE POLITICAL ACT	ON COMMITTEE
6. Name of Any Connected C	Organization, Affiliated Committee, Joint Fundraising Representative, or Leadersh	nip PAC Sponsor
Concerned Women fo	r America Legislative Action Committee	
	<u> </u>	
	1015 15th Street, NW	
Mailing Address		
	Suite 1100	
	Washington DC 20005	
	CITY STATE	ZIP CODE
Relationship: X Connected	d Organization Affiliated Committee Joint Fundraising Representative Lea	dership PAC Sponsor
 Custodian of Records: Identification books and records. 	ntify by name, address (phone number optional) and position of the person in pos-	session of committee
Lee LaHay	ye	
Full Name	1616 T Street, NW	
Mailing Address		
	Washington , DC , 20009	
Title or Position	CITY STATE 2	ZIP CODE
Treasurer		4941
. Treasurer: List the name an any designated agent (e.g., a	d address (phone number optional) of the treasurer of the committee; and the nar assistant treasurer).	ne and address of
Full Name Lee LaHay of Treasurer	re	
Mailing Address	1616 T Street, NW	
	Washington DC 20009	
Title or Position	CITY STATE 2	ZIP CODE
Treasurer		- 4941

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Full Name of		
Designated Agent		
Mailing Address		
	CITY STATE	ZIP CODE
Title or Position		
	Telephone number	
Banks or Other safety deposit be Name of Bank, I		noids accounts, rents
safety deposit be Name of Bank, I	Depository, etc. SunTrust Bank PO Box 62227	noids accounts, rents
safety deposit bo	Depository, etc. SunTrust Bank PO Box 62227	noids accounts, rents
safety deposit be Name of Bank, I	Depository, etc. SunTrust Bank PO Box 62227	nolds accounts, rents
safety deposit be Name of Bank, I	Depository, etc. SunTrust Bank PO Box 62227	
safety deposit be Name of Bank, I	Depository, etc. SunTrust Bank PO Box 62227	
safety deposit be Name of Bank, I	Depository, etc. SunTrust Bank PO Box 62227 Orlando FL 328	62
safety deposit be Name of Bank, I Mailing Address	Depository, etc. SunTrust Bank PO Box 62227 Orlando FL 328	62
safety deposit be Name of Bank, I Mailing Address	Depository, etc. SunTrust Bank PO Box 62227 Orlando FL 328	262 ZIP CODE
safety deposit be Name of Bank, I Mailing Address	Depository, etc. SunTrust Bank PO Box 62227 Orlando CITY STATE Depository, etc.	262 ZIP CODE
safety deposit be Name of Bank, I Mailing Address	Depository, etc. SunTrust Bank PO Box 62227 Orlando CITY STATE Depository, etc.	262 ZIP CODE
Safety deposit be Name of Bank, I Mailing Address	Depository, etc. SunTrust Bank PO Box 62227 Orlando CITY STATE Depository, etc.	262