FEC FORM 1	STATEMENT (ORGANIZATIC	2015 050 0	CEIVED PAGE 1/6 IL CENTER 28 PM 12: 15 Office Use Only
1. NAME OF COMMITTEE (in full)		nple:If typing, type 12FE4	
Will Not Bend F	PAC		
ADDRESS (number and stree (Check if address is changed)			
COMMITTEE'S E-MAIL AD		SIALE	
(Check if address is changed)	sethw@weatherscorp.com Optional Second E-Mail Address Kristin@dbcapitolstrategies	com	
COMMITTEE'S WEB PAGE (Check if address is changed)			
2. DATE 12	16 2015		
3. FEC IDENTIFICATION			
4. IS THIS STATEMENT		AMENDED (A)	· ·
I certify that I have examine	ed this Statement and to the best of my k	nowledge and belief it is true, cc	rrect and complete.
Type or Print Name of Trea	surer Dan Backer		
:	Dan Backer	Date	мем / рего / усучучу 12 16 2015
NOTE: Submission of false, e	rroneous, or incomplete information may subj ANY CHANGE IN INFORMATION SHO		
Office Use Only		For further information contact: Federal Election Commission Toll Free 800-424-9530 Local 202-694-1100	FEC FORM 1 (Revised 06/2012)

FEC Form 1 (Revised 02/2009)

5.	TYPE	E OF C	OMMITTEE	
0.			e Committee:	
	(a)		This committee is a principal campaign committee. (Complete the candidate information below.)	
	(b)	۵	This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candida information below.)	ate
	Name Cand			
	Cand Party	idate Affiliati	on Office State Senate President District	
	(c)	Ο	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
	Name Cand			
	Part	y Con	nmittee:	
	(d)		(National, State (Democratic, This committee is a or subordinate) committee of the Republican, etc.)	Party.
	Poli	tical A	Action Committee (PAC):	
	(e)	D	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organizat	ion is a
			Corporation Corporation w/o Capital Stock Labor Organiza	ation
			Membership Organization Trade Association Cooperative	
			In addition, this committee is a Lobbyist/Registrant PAC.	
	(f)	\boxtimes	This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or committee. (i.e., nonconnected committee)	r party
			In addition, this committee is a Lobbyist/Registrant PAC.	
			In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
	Joint	t Fund	draising Representative:	
	(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more politic committees/organizations, at least one of which is an authorized committee of a federal candidate.	al
	(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.	al
		Com	nmittees Participating in Joint Fundraiser	
			Ⅰ	v
		1.		
		2.		
		3.		
		4.		

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Write or Type Committee Name

Will Not Bend PAC

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

	<u> + + , , , , , + + + + + + + + + + + </u>		
Mailing Address			
	CITY	STATE	ZIP CODE
Relationship:	nected Organization	Joint Fundraising Representativ	e Leadership PAC Sponsor
7. Custodian of Records: books and records.	: Identify by name, address (phone number op	tional) and position of the pers	on in possession of committee
Kristir			
	203 S Union St		
Mailing Address	$ \underbrace{ \begin{array}{c} 1 \\ 1 \end{array}}_{1} \underbrace{ \begin{array}{c} 1 \end{array}}_{1} \underbrace{ \begin{array}{c} 1 \\ 1 \end{array}}_{1} \underbrace{ \begin{array}{c} 1 \end{array}}_{1} \underbrace{ \end{array}}_{1} \underbrace{ \begin{array}{c} 1 \end{array}}_{1} \underbrace{ \end{array}}_{1} \underbrace{ \begin{array}{c} 1 \end{array}}_{1} \underbrace{ \end{array}}_{1} \underbrace{ \end{array}}_{1} \underbrace{ \begin{array}{c} 1 \end{array}}_{1} \underbrace{ \end{array}}_{1} \\ \underbrace{ \end{array}}_{1} \\\\ \underbrace{ \end{array}}_{1} \underbrace{ \end{array}}_{1} \\ \\ \\ \\ \underbrace{ \end{array}}_{1} \\ \underbrace$		
	Alexandria		22314
Title or Position	CITY	STATE	ZIP CODE
Assistant Treasurer		Telephone number	
 Treasurer: List the name any designated agent (e 	e and address (phone number optional) of the e.g., assistant treasurer).	e treasurer of the committee; an	nd the name and address of
Full Name Seth V	Weathers	<u> </u>	
Mailing Address	10945 State Bridge Road		
	Suite 401-422		
	Johns Creek		
Tille or Desition	CITY	STATE	ZIP CODE
Title or Position Treasurer			

FEC Form 1 (Revised 02/2009)

Full Name of Designated Agent	Kristin How	arđ	1			1	1	1	1	1	1	 _ I		1.		. 1.	1	1						1	ļ	1					1	
Mailing Address		203 S	Unior	st	_1.	1	ł	1			<u> </u>		. 1	1	1	1	1			[_1_		_1			I	. [1	[
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Title or Position Custodian of Re	cords	<u> </u>	1. 1.	<u> </u>	<u>. </u>	1		1						Tel	eph	one	e ni	uml	ber		L	20)2 		- L_	21	0	_]-	·L	54 	431 1	

Page 4

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.

	cess National Bank		
Mailing Address	4221 Walney Road		
	Suite 120		<u> </u>
	CITY	STATE ZIP CODE	
Name of Bank, Depos	itory, etc.		
L		<u></u>	
Mailing Address			
	CITY	STATE ZIP CODE	

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FEC MISCELLANEOUS TEXT RELATED TO A REPORT, SCHEDULE OR ITEMIZATION

Form/Schedule: F1N Transaction ID :

Consistent with the stipulated judgment in Carey v. FEC, this committee has established a separate bank account (a Carey Account) to deposit and withdraw funds raised in unlimited amounts from individuals, corporations, labor organizations, and/or other political committees (Carey Contributions). The Carey Contributions maintained in this Carey account will not be used to make contributions, whether direct, in-kind, or via coordinated communications, or coordinated expenditures, to federal candidates or committees.

Form/Schedule: Transaction ID:

FORM 1S -STATEMENT OF ORGANIZATION (Su
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Page 6

FEC Form 1S (Re	vised 06/20	11)							_												_	_	P	age	÷	6	
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Name of Bank, Deposito	ry, etc.																		L	AL	טי	111	O	NA	۱L	l	
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Name of Any Connecte	d Organiza	ition, Af	filiate	d Coi	mmit	tee,	Joi	nt F	uno 1	drais	ing 1	Rej	ores i	ient	atīv I I	/e, (or L I	.ea	der	shi 1				1TI pon: 1			
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Connected Organization		Affiliat	ed Co	mmitt	ee		Jo	pint	Fur	odrais	sing	Rep	ores	enta	ative	•		Le	ade	ersh	ip l	PAC	C SI	pon	sor		

Connected Organization	Affiliated Committee Joint F	undraising Representative	ership PAC Sponsor
Designated Agent	dur.		[ADDITIONAL]
Dan Bao	xer <u> </u>	<u> </u>	<u> </u>
Mailing Address	203 South Union Street		
	Suite 300		
• termente anno •	Alexandria	VA2	2314
Title or Position	CITY 🐣	STATE	ZIP CODE
Assistant Treasurer		Telephone number202	<u> </u>
Joint Fundraiser Participar	nt		[ADDITIONAL]
1		FEC ID number	

tol Strategies Inion St, Ste 300 ria, VA 22314

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17 DEC '15

Federal Election Commission ATTN: NEW PAC REGISTRATIONS 999 E Street, N.W. Washington DC 20463-0001

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Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMINO The FEC added this page to the end of this filing to indicate	1
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Received from Senate Public Records Office	Date of Receipt
Received from Electronic Filing Office	Date of Receipt
Date of F	Receipt or Postmarked
PREPARER (3/2015)	DATE PREPARED