PAGE 1 / 4

STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 COMMITTEE (in full) over the lines. is changed) NATIONAL ORGANIZATION FOR WOMEN PAC 1100 H STREET, NW ADDRESS (number and street) 3RD FL (Check if address is changed) WASHINGTON 20005 DC CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS elections@now.org (Check if address is changed) Optional Second E-Mail Address president@now.org COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2013 C00092247 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. Linda Berg Type or Print Name of Treasurer Linda Berg [Electronically Filed] 80 13 2013 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

| FEC Form 1 (Revised 02/2009) | Page 2 |
|--|--|
| TYPE OF COMMITTEE Candidate Committee: | |
| (a) This committee is a principal campaign committee. (Complete the candidate information by | pelow.) |
| (b) This committee is an authorized committee, and is NOT a principal campaign committee. information below.) | (Complete the candidate |
| Name of Candidate | |
| Candidate Party Affiliation Office Sought: House Senate President | Stateent |
| (c) This committee supports/opposes only one candidate, and is NOT an authorized committee | ee. |
| Name of Candidate | |
| Party Committee: | |
| (d) This committee is a (National, State or subordinate) committee of the | (Democratic, Republican, etc.) Party. |
| Political Action Committee (PAC): | |
| (e) X 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 |
| X 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 separ committee. (i.e., nonconnected committee) | ate segregated 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.) | |
| Joint Fundraising Representative: | |
| (g) This committee collects contributions, pays fundraising expenses and disburses net proceeds committees/organizations, at least one of which is an authorized committee of a federal cand | • |
| (h) This committee collects contributions, pays fundraising expenses and disburses net proceeds committees/organizations, none of which is an authorized committee of a federal candidate. | s for two or more political |
| Committees Participating in Joint Fundraiser | |
| 1. FEC ID number | |
| 2. | |
| 3. FEC ID number | |
| 4. | |

Title or Position Treasurer

| _ | | _ |
|---|---|---------------------------------------|
| FEC Form 1 (Revised | d 02/2009) | Page 3 |
| Write or Type Committee Nat | me | |
| NATIONAL OF | RGANIZATION FOR WOMEN PAC | \ • |
| 6. Name of Any Connected | Organization, Affiliated Committee, Joint Fundraising Representa | ative, or Leadership PAC Sponsor |
| National Organization | n for Women | |
| | | |
| Mailing Address | 1100 H Street, NW | |
| | | |
| | Washington DC | 20005 |
| | CITY STAT | TE ZIP CODE |
| books and records. | dentify by name, address (phone number optional) and position of t | the person in possession of committee |
| Full Name | | |
| Mailing Address | | |
| | | |
| | | |
| Title or Position | CITY STATE | E ZIP CODE |
| | Telephone number | |
| Treasurer: List the name a any designated agent (e.g. | and address (phone number optional) of the treasurer of the comm , assistant treasurer). | nittee; and the name and address of |
| Full Name Chitra Pa | anjabi | |
| Mailing Address | 1100 H Street, NW | |
| - | Ste. 300 | |
| | Washington | 20005 |

CITY

STATE

Telephone number

202

ZIP CODE

8669

628

| FEC For | m 1 (Revised | 02/2009) | Page 4 |
|---|------------------------------|--|---------------------|
| | | | |
| Full Name of Designated | Linda Berg | | |
| Agent | | | |
| Mailing Address | | 5856 Marbury Road | |
| | | | |
| | | Bethesda MD 20817 | |
| | | CITY STATE | ZIP CODE |
| Title or Position Assistant Treas | surer | | 628 8669 |
| Banks or Othe safety deposit b Name of Bank, | oxes or maint | | lds accounts, rents |
| safety deposit b | oxes or maint | tains funds. | lds accounts, rents |
| safety deposit b | oxes or maint Depository, et | tains funds. | lds accounts, rents |
| safety deposit b Name of Bank, | oxes or maint Depository, et | tains funds. | lds accounts, rents |
| safety deposit b Name of Bank, | oxes or maint Depository, et | tains funds. | |
| safety deposit b Name of Bank, | oxes or maint Depository, et | tains funds. tc. | |
| safety deposit b Name of Bank, | oxes or maint Depository, et | tains funds. tc. Washington CITY STATE | |
| safety deposit b Name of Bank, Mailing Address | oxes or maint Depository, et | tains funds. tc. Washington CITY STATE | |
| safety deposit b Name of Bank, Mailing Address Name of Bank, | Depository, et | tains funds. tc. Washington CITY STATE | |
| safety deposit b Name of Bank, Mailing Address | Depository, et | tains funds. tc. Washington CITY STATE | |
| safety deposit b Name of Bank, Mailing Address Name of Bank, | Depository, et | tains funds. tc. Washington CITY STATE | |