FEC FORM 1

STATEMENT OF ORGANIZATION

FORM 1	(PRGANIZA	MIO	N		
		(See instruction	ıs)			Office use only
1. NAME OF COMMITTEE (n full)	(Check if name is changed)	Exam over	nple: If typying, type the lines	12FE4M5	
APOLLO GE	OUP INC, POLITIC	AL ORGANIZATI	ON FOI	R LEGISLATIVE LEA	ADERSHIP	
ADDRESS (number a	nd street) 4025	S. Riverpoint Pk	cwy			
(Check if addre	ess MS (CF-KX10				
is changed)	Pho	enix			AZ	85040
			CITY		STATE	ZIP CODE 📥
COMMITTEE'S E-M	AIL ADDRESS (Please	e provide only one e-n	nail addre	ss)		
(Check if address is changed)	ess ruth	.broos@apollogr	p.edu			
					1111	
COMMITTEE'S WE (Check if address is changed)	B PAGE ADDRESS (L	IRL)				
2. DATE 0	M / D D / Y	^Y 2 0 1 1				
3. FEC IDENTIFIC	CATION NUMBER	(C C00	309781		
4. IS THIS STATE	EMENT X NEV	V (N) OR		AMENDED (A)		
I certify that I have exa	mined this Statement and	I to the best of my knov	vledge and	d belief it is true, correct and	d complete	_
Type or Print Name	of Treasurer	Conwey Casillas				
Signature of Treasur	er Electronically File	ed by Conwey Ca	asillas		Date 03	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
NOTE: Submission of				e person signing this State		
Office Use Only				For further information c Federal Election Commiss Toll Free 800-424-9530 Local 202-694-1100		FEC FORM 1 (Revised 02/2009)

	FE	EC Form 1 (Revised 02/2009)	Page 2					
5.	TYPE C	DF COMMITTEE (Check One)						
	Candidate 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. (Complete the information below.)	candidate					
	Name o Candida							
	Candida Party Af		State District					
	(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.						
	Name o							
	Party C	Committee:						
	(d)		Democratic, epublican,etc.) Party.					
	Politica	al Action Committee (PAC):	_					
	(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization on line 6.)	rganization is a:					
		X Corporation Corporation w/o Capital Stock Labor	Organization					
		Membership Organization Trade Association Coop	erative					
		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 fu committee. (i.e., nonconnected committee)	ind 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 Fu	indraising Representative:						
	(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or m committees/organizations, at least one of which is an authorized committee of a federal candidate.	ore political					
	(h)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or m committees/organizations, none of which is an authorized committee of a federal candidate.	ore political					
		Committees Participating in Joint Fundraiser						
		1. FEC ID number						
		2. FEC ID number C						
		3. FEC ID number						
		4. FEC ID number						

Write or Type Committee Name

	APOLLO GROUP INC. P	OLITICAL ORGANIZATION FOR LI	EGISLATIVE LEADERSHIP	
6.	Name of Any Connected Org	ganization, Affiliated Committee, Joint Fo	undraising Representative, or Leade	rship PAC Sponsor
لــا	Apollo Group, Inc. (AGI)			
l i				
	Mailing Address	4025 S. Riverpoint Pk	wy	
	-	MS: CF-KX10		
		Phoenix		85040 _
		CITY▲	STATE ≜	ZIP CODE
	Relationship: X Connected Organization	Affiliated Committee	Joint Fundraising Representative	Leadership PAC Sponsor
7.	Custodian of Records: Ide possession of Committee Full Name Ruth F	Broos	per optional), and position of th	e person in
	Mailing Address	4025 S Riverpoint Pkv	vy	
		Phoenix		85040 _ 0723
	Title or Position ♥ Custodian	CITY A	STATE A Telephone number 602	ZIP CODE à - <u>557</u> - <u>1115</u>
8.	name and address of any	and address (phone number optior designated agent (e.g., assistant tre		tee; and the
		888 16th Street NW		
	Mailing Address	Suite 800		
		Washington	DC	20006 – 4104
	Title or Position ♥	CITY A	STATE A	ZIP CODE A
	Treasurer		Telephone number 202	355 1395

FEC Form 1	(Revised 02	72009)				
Full Name of Designated Agent	_	Bridget Christine Lovett				
Mailing Address	_	16013 S Desert				
	-	Phoenix		AZ	85048	
Title or Position ▼		CITY A	:	STATE 🛦	ZIP CODE	A
As	ssistant Tr	easurer	Telephone numb	480	273	0455
Banks or Other D safety deposit boxe Name of Bank, Dep	es or maintair		hich the committee d			
safety deposit boxe Name of Bank, Dep	es or maintair	ns funds.				
safety deposit boxe	es or maintair pository, etc.	rs funds. Fargo				
safety deposit boxe Name of Bank, Dep	es or maintair pository, etc.	rs funds. Fargo			85003	0.00
safety deposit boxe Name of Bank, Dep	es or maintair pository, etc.	Fargo 100 W Washington		STATE 4		0.00
safety deposit boxe Name of Bank, Dep	es or maintain pository, etc. Wells F	Fargo 100 W Washington Phoenix			85003	0.00
safety deposit boxe Name of Bank, Dep Mailing Address	es or maintain pository, etc. Wells F	Fargo 100 W Washington Phoenix			85003	0.00
safety deposit boxe Name of Bank, Dep Mailing Address	es or maintain pository, etc. Wells F	Fargo 100 W Washington Phoenix			85003	0.00
safety deposit boxe Name of Bank, Dep Mailing Address Name of Bank, Dep	es or maintain pository, etc. Wells F	Fargo 100 W Washington Phoenix			85003	0.00
safety deposit boxe Name of Bank, Dep Mailing Address Name of Bank, Dep	es or maintain pository, etc. Wells F	Fargo 100 W Washington Phoenix			85003	0.00

Banks or Other Depositories: safety deposit boxes or maintain		nittee deposits funds, hold	ls accounts, rents
Name of Bank, Depository, etc.	J. 4.1.4.5		[ADDITIONAL]
Mailing Address			
J			
	CITY 🗖	STATE_	ZIP CODE 🛕
Name of Any Connected Orga Apollo Group, Inc. (AGI)	nnization, Affiliated Committee, Joint Fundraising Re	presentative, or Leader	[ADDITIONAL ship PAC Sponsor
	4025 S. Riverpoint Pkwy.		
Mailing Address			
	Phaemir		
	Phoenix	L AZ L	85040
ationship:	CITY▲	STATE A	ZIP CODE
Connected Organization	Affiliated Committee Joint Fundraising Re	epresentative Lead	dership PAC Sponsor
Designated Agent			[ADDITIONAL]
Full Name			
Mailing Address			
Title or Position ▼	CITY A	STATE▲	ZIP CODE A
	Telepi	hone number	
Joint Fundraiser Participant			[ADDITIONAL]
		EC ID number	
		LO ID HUHIDEI	