FEC

Only

STATEMENT OF

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ORGANIZATION FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. L PAC PO Box 76940 ADDRESS (number and street) (Check if address is changed) Washington 20013 DC CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS info@teamlpac.com (Check if address X is changed) Optional Second E-Mail Address leighanne@poliops.com COMMITTEE'S WEB PAGE ADDRESS (URL) www.teamlpac.com (Check if address is changed) DATE 2017 C00519413 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. Robasciotti, Rachel, , , Type or Print Name of Treasurer Robasciotti, Rachel, , , [Electronically Filed] 04 12 2018 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

Local 202-694-1100

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		OMMITTEE	
Car	ndidate	Committee:	
(a)	Ш	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
	ne of didate		
	didate y Affiliati	Office Sought: House Senate President	State
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
	ne of didate		
Par	ty Con	nmittee:	
(d)		· · · · · · · · · · · · · · · · · · ·	Democratic, epublican, etc.) Party.
Pol	itical A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected	ected 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)	×	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.)	
Joir	nt Fund	raising 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	
	2.	FEC ID number	
	3.	FEC ID number	
	4.		

		sed 02/2009)	Page 3
Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor NONE Mailing Address CITY STATE ZIP CODE Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Spon Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of committee books and records. Coller, Leigh, Full Name Mailing Address PO Box 1572 Assistant Treasurer Assistant Treasurer 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 Affiliated Committee Joint Fundraising Representative, or Leadership PAC Sponsor Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of committee books and records. Coller, Leigh, Full Name Assistant Treasurer Telephone number 804 - 350 - 4972 Treasurer: List the name and address (phone number optional) of the treasurer of the committee; and the name and address of reasurer Rebasciotii, Rachel, , , of Treasurer Mailing Address PO Box 76940 Washington DC 127013 PC 120013 PC 120013	Write or Type Committee N	Name	
Mailing Address CITY STATE ZIP CODE Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Spon Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of committ books and records. Collier, Leigh, Full Name Assistant Treasurer Assistant Treasurer 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 Robasciotti, Rachel, PO Box 76940 Washington DC 220013 PO Box 76940 Washington DC 220013 PO Box 76940 Washington DC 220013 PO Box 76940	L PAC		
Mailing Address CITY STATE ZIP CODE Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Spon Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of commit books and records. Collier, Leigh, . , Full Name PO Box 1572 Mailing Address PO Box 1572 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 Robasciotti, Rachel, , OT STATE IP CODE Washington DC 20013 PO Box 76940 Washington DC 20013 PO Box 76940 Washington DC 20013 PO Box 76940	Name of Any Connect	ed Organization, Affiliated Committee, Joint Fundraising Representative, or l	eadership PAC Sponsor
Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of committe books and records. Collier, Leigh, , , Full Name Mailing Address Glen Allen CITY STATE ZIP CODE Assistant Treasurer Telephone number Glen Allen CITY STATE ZIP CODE Assistant Treasurer Telephone number Robasciotti, Rachel, , , Full Name of Treasurer Robasciotti, Rachel, , , Full Name of Treasurer Mailing Address PO Box 76940 Washington DC 20013 PO Box 76940	NONE		
Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of committe books and records. Collier, Leigh, , , Full Name Mailing Address Glen Allen CITY STATE ZIP CODE Assistant Treasurer Telephone number Glen Allen CITY STATE ZIP CODE Assistant Treasurer Telephone number Robasciotti, Rachel, , , Full Name of Treasurer Robasciotti, Rachel, , , Full Name of Treasurer Mailing Address PO Box 76940 Washington DC 20013 PO Box 76940			
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Full Name Mailing Address PO Box 1572 Glen Allen Glen Allen CITY STATE ZIP CODE 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 Mailing Address PO Box 76940 Washington DC 20013 LDC 20014 LDC		Identify by name, address (phone number optional) and position of the perso	n in possession of committ
Full Name Mailing Address PO Box 1572	Collie	r. Leigh	
Glen Allen CITY STATE ZIP CODE Assistant Treasurer Telephone number Telephone			
Title or Position CITY STATE ZIP CODE Assistant Treasurer Telephone number Telephone number 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 Mailing Address PO Box 76940 Washington CITY STATE ZIP CODE	Mailing Address	PO BOX 1572	
Title or Position CITY STATE ZIP CODE 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 Mailing Address PO Box 76940 Washington CITY STATE ZIP CODE			
Assistant Treasurer Telephone number Telephone		Glen Allen DC	23060
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 Mailing Address PO Box 76940 Washington DC 20013 CITY STATE ZIP CODE	Title or Position	CITY STATE	ZIP CODE
any designated agent (e.g., assistant treasurer). Full Name Robasciotti, Rachel, , , of Treasurer Mailing Address PO Box 76940 Washington CITY STATE ZIP CODE	Assistant Treasurer		350 4972
of Treasurer Mailing Address PO Box 76940 Washington CITY STATE ZIP CODE	Treasurer: List the name any designated agent (e	and address (phone number optional) of the treasurer of the committee; and .g., assistant treasurer).	I the name and address of
Washington CITY STATE ZIP CODE		sciotti, Rachel, , ,	
CITY STATE ZIP CODE			
CITY STATE ZIP CODE	of Treasurer		
	of Treasurer		
	of Treasurer	PO Box 76940 Washington DC 2	

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Full Name of Designated		
Agent		
Mailing Address		
	CITY STATE	ZIP CODE
Title or Position		1 1
	Telephone number	
safety deposit bo		docodino, Tonto
safety deposit bo	xes or maintains funds.	
safety deposit bo Name of Bank, [Depository, etc. Bank of America 1801 K Street, NW Washington DC 20006	
safety deposit bo Name of Bank, [Depository, etc. Bank of America 1801 K Street, NW Washington CITY STATE	ZIP CODE
safety deposit bo Name of Bank, I Mailing Address	Depository, etc. Bank of America 1801 K Street, NW Washington CITY STATE	
safety deposit bo Name of Bank, [Mailing Address	Depository, etc. Bank of America 1801 K Street, NW Washington CITY STATE	
Name of Bank, I	Depository, etc. Bank of America 1801 K Street, NW Washington CITY STATE	
safety deposit bo Name of Bank, [Mailing Address	Depository, etc. Bank of America 1801 K Street, NW Washington CITY STATE	