FEC FORM 1

STATEMENT OF ORGANIZATION

FORM 1	١ ٠	RGANIZA	1110	N							
		(See instruction	s)					Office	use only		
1. NAME OF COMMITTEE (in	n full)	(Check if name is changed)	Exar over	mple: If typying, ty the lines	pe	12FE	4M5				
EADS North	America Americar	s for Competitio	n in Ac	erospace PAC							لب
ADDRESS (number and	d street) 1616	North Ft. Myer C)rive			11		ш			
(Check if add	Suite	e 1600 1									
is changed)		igton			ப	VA			22209	-	لــــا
			CITY			STATE	_		ZIP C	ODE 📥	
	AIL ADDRESS ectioncompliance.	com									
ACAF ACGER					Ш		Ш	Ш			Щ.
					ш	1 1	Ш	ш		ш	
COMMITTEE'S WEE	B PAGE ADDRESS (U	IRL)									
					ш		ш	ш			
	<u> </u>	<u> </u>				1 1					
COMMITTEE'S FAX 301-856-0633	NUMBER										
2. DATE M 0 .	M / D D / Y	2008									
3. FEC IDENTIFIC	ATION NUMBER	C	Coo	421230							
4. IS THIS STATE	MENT NEV	V (N) OR	Х	AMENDED	(A)						
I certify that I have exan	nined this Statement and	I to the best of my know	vledge an	d belief it is true, co	orrect and	l complet	e				
		Candace Larsen									
Type or Print Name o	f Treasurer	Januace Larsen									
Signature of Treasure	er Electronically File	d by Candace L	arsen		[Date	0 5	/ [19	Ž	2 0 0 8 °
NOTE: Submission of f	alse, erroneous, or incor	nplete information may							2 U.S.C. S		
Office Use Only				For further information Federal Election C Toll Free 800-424	Commissi -9530				EC FC		1

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5.	TYPE OF CO	MMITTEE (Check One)	
	(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.)	ne candidate
	Name of Candidate		
	Candidate Party Affiliatio	n Office Sought: House Senate President	State District
	(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
	Name of Candidate		
	(d) X	This committee is a (National, State (or subordinate) committee of the	(Democratic, Republican,etc.) Party.
	(e) A	This committee is a separate segregated fund	
	(f)	This committee supports/opposes more than one Federal candidate, and is NOT a separate segregate committee.	d fund or party
6.	Name of Any	Connected Organization or Affiliated Committee	
L	1 1 1 1		
	Mailing Addre	ss 1616 N Fort Myer Drive	1
	3	Suite 1600	
		Arlington	22209
		CITY ≜ STATE ♣	ZIP CODE A
	Relationship	Connected Organization	
	Type of Conn	ected Organization:	
	X Corp	oration Corporation w/o Capital Stock Labor Organ	ization
	Men	bership Organization Trade Association Cooperative	

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Write or Type Com	mittee Name			
EADS North	America An	nericans for Competition in Aerospa	ace PAC	
		ntify by name, address, (phone numbe books and records.	er optional), and position of t	he person in
Full Name	PAC Ou	itsourcing LLC		
Mailing Address		7915 Old Branch Avenu	ie	
		First Floor		
		Clinton		20735 _
Title or Position	▼	CITY A	STATE	ZIP CODE A
	Custodian	of Records	Telephone number	
name and add	dress of any o	and address (phone number optiona designated agent (e.g., assistant treas e Larsen		nittee; and the
name and add	dress of any o	designated agent (e.g., assistant treas	urer).	nittee; and the
name and add	dress of any o	designated agent (e.g., assistant treas	urer).	nittee; and the
name and add	Candac	designated agent (e.g., assistant treas e Larsen 1616 North Ft. Myer Dri	ve, Suite 1	
name and add Full Name of Treasurer Mailing Address	Candac	e Larsen 1616 North Ft. Myer Dri	ve, Suite 1	22209
name and add Full Name of Treasurer Mailing Address Title or Position Full Name of	Candact	e Larsen 1616 North Ft. Myer Dri	ve, Suite 1 VA STATE	22209 ZIP CODE ▲
name and add Full Name of Treasurer Mailing Address Title or Position	Candace ✓ Treasurer	e Larsen 1616 North Ft. Myer Dri	ve, Suite 1 VA STATE	22209 ZIP CODE ▲
name and add Full Name of Treasurer Mailing Address Title or Position Full Name of Designated	Candace Treasurer Wade S.	e Larsen 1616 North Ft. Myer Dri Arlington CITY A	ve, Suite 1 VA STATE Telephone number 703	22209 ZIP CODE ▲
name and add Full Name of Treasurer Mailing Address Title or Position Full Name of Designated Agent	Candace Treasurer Wade S.	e Larsen 1616 North Ft. Myer Dri Arlington CITY A	ve, Suite 1 VA STATE Telephone number 703	22209 ZIP CODE ▲
name and add Full Name of Treasurer Mailing Address Title or Position Full Name of Designated Agent	Candace Treasurer Wade S.	e Larsen 1616 North Ft. Myer Dri Arlington CITY A . Williams	ve, Suite 1 VA STATE Telephone number 703	22209 ZIP CODE ▲

301

Telephone number

856

0770

Assistant Treasurer

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9.	Banks or Other Do safety deposit boxe Name of Bank, Dep	es or maintains funds.	rents
		Bank of America	
	Mailing Address	7810 Old Branch Avenue	
		Clinton MD 20735	
		CITY A STATE A ZIP CO	DDE 🛆
	Name of Bank, Dep	epository, etc.	
	Mailing Address		
			-

CITY 🔼

STATE **△**

ZIP CODE 🛕