

FEC  
FORM 1

STATEMENT OF  
ORGANIZATION

RECEIVED

2011 AUG -3 PM 4:46

FEC MAIL CENTER

1. NAME OF  
COMMITTEE (in full)



(Check if name  
is changed)

Example: If typing, type  
over the lines.

12FE4M5

Council of the North American Insulation Manufacturers Association Inc. Political Action Committee (IMPAC)

ADDRESS (number and street)

44 Canal Center Plaza Suite 310



(Check if address  
is changed)

Alexandria

VA

22314

CITY

STATE

ZIP CODE

COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address)

koffringa@naima.org



(Check if address  
is changed)

COMMITTEE'S WEB PAGE ADDRESS (URL)

www.naima.org



(Check if address  
is changed)

2. DATE

08 3 2011

3. FEC IDENTIFICATION NUMBER

C 00498865

4. 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.

Type or Print Name of Treasurer

Kate Offringa

Signature of Treasurer



Date

08 03 2011

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  
Use  
Only

For further information contact:  
Federal Election Commission  
Toll Free 800-424-9530  
Local 202-694-1100

FEC FORM 1  
(Revised 02/2009)

## 5. TYPE OF COMMITTEE

**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 candidate information below.)

Name of Candidate

Candidate  
Party AffiliationOffice  
Sought:☐

House

☐

Senate

☐

President

State

District

- (c) ☐ This committee supports/opposes only one candidate, and is NOT an authorized committee.

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) ☒ This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:
- |   |  |   |
|---|--|---|
| <input type="checkbox"/> Corporation                        | <input type="checkbox"/> Corporation w/o Capital Stock | <input type="checkbox"/> Labor Organization |
| <input checked="" type="checkbox"/> Membership Organization | <input type="checkbox"/> Trade Association             | <input type="checkbox"/> 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 segregated fund or party committee. (i.e., nonconnected committee)
- ☐ 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 for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.
- (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.

**Committees Participating in Joint Fundraiser**

- |    |       |               |   |
|----|-------|---------------|---|
| 1. | _____ | FEC ID number | C |
| 2. | _____ | FEC ID number | C |
| 3. | _____ | FEC ID number | C |
| 4. | _____ | FEC ID number | C |

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Write or Type Committee Name

Council of the North American Insulation Manufacturers Association Inc. Political Action Committee (IMPAC)

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

North American Insulation Manufacturers Association Inc.

Mailing Address

44 Canal Center Plaza Suite 310

Alexandria

CITY

VA

STATE

22314

ZIP CODE

Relationship: ☒ Connected Organization ☐ Affiliated Committee ☐ Joint Fundraising Representative ☐ Leadership PAC Sponsor

## 7. Custodian of Records: Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Full Name

Ward &amp; Lawless LLC

Mailing Address

163 Mitchells Chance Road #320

Edgewater

CITY

MD

STATE

21037

ZIP CODE

Title or Position

Custodian of Records

Telephone number

888 - 658 - 8484

## 8. 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

Kate Offringa

Mailing Address

44 Canal Center Plaza Suite 310

Alexandria

CITY

VA

STATE

22314

ZIP CODE

Title or Position

Treasurer

Telephone number

703 - 684 - 0084

Full Name of  
Designated  
Agent

Michelle Bunch

Mailing Address

44 Canal Center Plaza Suite 310

Alexandria

CITY

VA

STATE

22314

ZIP CODE

Title or Position

Assistant Treasurer

Telephone number

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.

BB&amp;T

Mailing Address

300 S. Washington Street

Alexandria

CITY

VA

STATE

22314

ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

CITY

STATE

ZIP CODE

Federal Election Commission  
**ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS**  
The FEC added this page to the end of this filing to indicate how it was received.

☒ Hand Delivered Date of Receipt  
8/3/11

☐ USPS First Class Mail Postmarked

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Delivery Confirmation™ or Signature Confirmation™ Label ☐

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☐ Postmark Illegible

☐ No Postmark

☐ Overnight Delivery Service (Specify): Shipping Date  
Next Business Day Delivery ☐

☐ Received from House Records & Registration Office Date of Receipt

☐ Received from Senate Public Records Office Date of Receipt

☐ Received from Electronic Filing Office Date of Receipt

☐ Other (Specify): Date of Receipt or Postmarked

 8/4/11  
PREPARER DATE PREPARED