FEC FORM 1	STATEMENT OF ORGANIZATION	RECEIVED FEC MAIL CENTER 2010 AUG - 2 AM 8: 36 Ottice Use Only
1. NAME OF COMMITTEE (in tull)	(Check if name Example: If typing, type is changed) over the lines.	9 12FE4M5
Middle Class A	America PAC	. <u>.</u>
ADDRESS (number and street	PO Box 521	a ana ana ana ana ana ana ana ana ana an
(Check if address is changed)	Western Springs	IL 60558
	CITY	STATE ZIP CODE
COMMITTEE'S E-MAIL ADD (Check if address is changed)	PRESS (Please provide only one e-mail address) middleclasspac@aol.com s	:
COMMITTEE'S WEB PAGE	ADDRESS (URL)	
(Check if addross is changed)	,	
2. DATE 07	22 2010	
3. FEC IDENTIFICATION		
4. IS THIS STATEMENT		A)
l certily that I have examine Type or Print Name of Treas	d this Statement and to the best of my knowledge and bei surer Miriam Tai	lief it is true, correct and complete.
Signalure of Treasurer	Minia Tai	_{Date} 07 22 2010
NOFE: Submission of false, cr	roneous, or incomplete information may subject the person sign ANY CHANGE IN INFORMATION SHOULD BE REPORTE	•
Office Use Only	For lurther informati Federal Election Com Toll Free 800.424-95: Local 202-694-1100	mission FEC FORM 1

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FEC	Form	I (Revise	d 02/2009)

(a)		This committee: 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 Candid		
Candid Party	date Affiliatio	on Office State State State District
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.
Name Candio		
Party		Imittee: (National, State (Democratic.
(d)		This committee is a or subordinate) committee of the Republican, etc.) Party.
Politi	ical A	ction Committee (PAC):
(e)		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
		Membership Organization Trade Association Cooperative
		In addition, this committee is a Lobbyist/Registrant PAC.
(f)	\mathbf{X}	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	Fund	raising 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.
	Com	nittees Participating in Joint Fundraiser
	1.	FEC ID number C
	2.	FEC ID number C
	3.	FEC ID number C
	4.	FEC ID number C

5.

FEC	Form	1	(Revised	02/2009)
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Write or Type Committee Name

Middle Class America PAC

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

	· · · · · · · · · · · · · · · · · · ·		
Mailing Address	1000 W. Hillgrove		
		· · · · · · · · · · · · · · · · · · ·	·
	Western Springs	; IL	60558
	CITY	STATE	ZIP CODE
	nected Organization Affiliated Committee Joint Fu		
Custodian of Records books and records.			
Custodian of Records books and records.	: Identify by name, address (phone number optional) a		
Custodian of Records books and records. Full Name	aine McCarthy PO Box 521	and position of the pe	erson in possession of com
Custodian of Records books and records. Full Name	aine McCarthy PO Box 521		
Custodian of Records books and records. Full Name	aine McCarthy PO Box 521	and position of the pe	erson in possession of com

Full Name Miriam Tai of Treasurer .:. PO Box 521 Mailing Address ÷ . . 1 1 : ł Western Springs IL 60558 . 4.4 - - - -...... CITY STATE ZIP CODE **Title or Position** i Treasurer · 9703 202 415 • Telephone number

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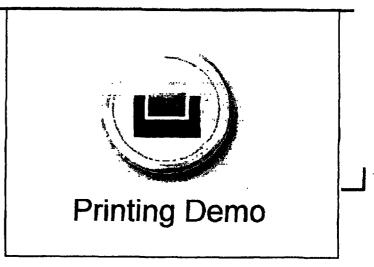
Name of Bank, Depository. etc.

	1119 ° 1 ° 1 ° 1 ° 1 ° 1 ° 1 ° 1 ° 1 ° 1	e	n diamangkantan tari peringkantan ka	
Full Name of Designated Agent	Michael McLaughlin	1		
Mailing Address	PO Box 521	second	······································	
	Western Springs		60558	
	CITY	STAT		
Tilla or Position		Telephone number	312 285	8922

 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.

Firs	st National Bank	of LaGran	ge		· · · · · · · · · · · · · · · · ·	i ¹ .
Mailing Address	620 Bu	ilingt	on Ave		· ·	
	· ·			:	60525	·
		CITY		STATE	ZIP CODE	
Namo of Bank, Deposi			<u>.</u> : : .			
Mailing Address	·			···· •.	· ! <u>-</u>	2
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		CITY		STATE	ZIP CODE	

To print and file this form, select "Print" from the "File" menu above. In the "Print" window, select "Document" from the drop down menu labeled "Comments and Forms" Doing so will ensure that the icons and other instructions will not appear on your filing. Click the Printing Demo icon for more help.



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No Postmark				
Overnight Delivery Service (Specify):	Shipping Date			
Next Bus	iness 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			
Date Other (Specify):	of Receipt or Postmarked			
(Imp)	8/2/10			
PREPARER (3/2005)	DATE PREPARED			

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