PAGE 1 / 4 STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) over the lines. is changed) Secure Energy For America Association PAC (SEAPAC) P.O. Box 1216 ADDRESS (number and street) (Check if address is changed) McMurray 15317 PA CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS slming@comerica.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2015 C00560078 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. **David Young** Type or Print Name of Treasurer David Young [Electronically Filed] 03 2015 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 Toll Free 800-424-9530 Only Local 202-694-1100

(Revised 06/2012)

|             | EEC Fa                | rm 1 (Pavisad 02/2000)  | Page <b>2</b>                            |
|-------------|-----------------------|---|--|
|             |                       | rm 1 (Revised 02/2009) OMMITTEE   | rage <b>Z</b>                            |
|             |                       | e 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. (Cominformation below.)   | plete the candidate                      |
| Nam<br>Cand | e of<br>didate        |   |  |
|             | didate<br>/ Affiliati | on Office Sought: House Senate President  | State                                    |
| (c)         |                       | This committee supports/opposes only one candidate, and is NOT an authorized committee.   |  |
| Nam<br>Cand | e of<br>didate        |   |  |
| Par         | ty Con                | nmittee:  |  |
| (d)         |                       | This committee is a (National, State or subordinate) committee of the   | (Democratic,<br>Republican, etc.) Party. |
| Poli        | tical A               | ction Committee (PAC):  |  |
| (e)         | $\times$              | This committee is a separate segregated fund. (Identify connected organization on line 6.) Its cor  | nnected organization is a                |
|             |                       | Corporation Wo 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 secommittee. (i.e., nonconnected committee)  | egregated 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.)  |  |
| Join        | t Fund                | Iraising Representative:  |  |
| (g)         |                       | This committee collects contributions, pays fundraising expenses and disburses net proceeds for to committees/organizations, at least one of which is an authorized committee of a federal candidate. | vo 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.        | vo or more political                     |
|             | Com                   | mittees Participating in Joint Fundraiser   |  |
|             | 1.                    | FEC ID number   |  |
|             | 2.                    | FEC ID number   |  |
|             | 3.                    | FEC ID number   |  |
|             | 4.                    |   |  |

Title or Position PAC Treasurer

|   |   | <u></u>                             |
|---|---|-------------------------------------|
| FEC Form 1 (Revised                                   | d 02/2009)  | Page <b>3</b>                       |
| Write or Type Committee Nar                           |   | 3                                   |
| Secure Energy   | / For America Association PAC (SE   | APAC)                               |
|   | Organization, Affiliated Committee, Joint Fundraising Representat                         | •                                   |
| Secure Energy for Ar                                  |   |                                     |
|   |   |                                     |
| Mailing Address                                       | P.O. Box 1216   |                                     |
| Č   |   |                                     |
|   | McMurray PA   | 15317                               |
|   | CITY STATE  | ZIP CODE                            |
| books and records.                                    | lentify by name, address (phone number optional) and position of the                      | e person in possession of committee |
| Full Name   |   |                                     |
| Mailing Address                                       | P.O. Box 75000  |                                     |
|   | MC2250  |                                     |
|   | Detroit MI  | 48275-2250                          |
| Title or Position                                     | CITY STATE  | ZIP CODE                            |
| Recordkeeper  | Telephone number  |                                     |
| Treasurer: List the name a any designated agent (e.g. | and address (phone number optional) of the treasurer of the commit, assistant treasurer). | tee; and the name and address of    |
| Full Name David Young                                 | oung  |                                     |
| Mailing Address                                       | 3721 MacCorkle Ave. S.E.  |                                     |
|   |   |                                     |
|   |   |                                     |

CITY

STATE

Telephone number

202

ZIP CODE

7371

253

| l   |   |                       |
|---|---|-----------------------|
| FEC For   | m 1 (Revised 02/2009)   | Page <b>4</b>         |
|   |   |                       |
| Full Name of<br>Designated                            |   |                       |
| Agent   |   |                       |
| Mailing Address                                       |   |                       |
|   |   |                       |
|   |   |                       |
|   | CITY STATE  | ZIP CODE              |
| Title or Position                                     |   |                       |
|   | Telephone number  | -                     |
|   |   |                       |
| Banks or Other<br>safety deposit be<br>Name of Bank,  |   | holds accounts, rents |
| safety deposit be<br>Name of Bank,                    | oxes or maintains funds.  Depository, etc.  Comerica Bank  P.O. Box 75000     | holds accounts, rents |
| safety deposit be                                     | oxes or maintains funds.  Depository, etc.  Comerica Bank  P.O. Box 75000     | holds accounts, rents |
| safety deposit be<br>Name of Bank,                    | Depository, etc.  Comerica Bank  P.O. Box 75000                               |                       |
| safety deposit be<br>Name of Bank,                    | oxes or maintains funds.  Depository, etc.  Comerica Bank  P.O. Box 75000     |                       |
| safety deposit be<br>Name of Bank,                    | Depository, etc.  Comerica Bank  P.O. Box 75000                               |                       |
| safety deposit be<br>Name of Bank,                    | Depository, etc.  Comerica Bank  P.O. Box 75000  Detroit  MI 482              | 275                   |
| safety deposit be<br>Name of Bank,<br>Mailing Address | Depository, etc.  Comerica Bank  P.O. Box 75000  Detroit  MI 482              | 275                   |
| safety deposit be<br>Name of Bank,<br>Mailing Address | Depository, etc.  Comerica Bank  P.O. Box 75000  Detroit  MI 482              | 275<br>               |
| safety deposit be<br>Name of Bank,<br>Mailing Address | Depository, etc.  Comerica Bank  P.O. Box 75000  Detroit  MI 482  CITY  STATE | 275<br>               |
| safety deposit be<br>Name of Bank,<br>Mailing Address | Depository, etc.  Comerica Bank  P.O. Box 75000  Detroit  MI 482  CITY  STATE | 275<br>               |
| safety deposit be<br>Name of Bank,<br>Mailing Address | Depository, etc.  Comerica Bank  P.O. Box 75000  Detroit  MI 482  CITY  STATE | 275<br>               |