FEC FORM 1

STATEMENT OF ORGANIZATION

FORM 1	(PRGANIZA	MIOI	V		
		(See instruction	ıs)			Office use only
NAME OF COMMITTEE (i	n full)	(Check if name is changed)	Exam over t	ple: If typying, type he lines	12FE4M	5
NATIONAL F	AWNBROKERS A	SSOCIATION INC	POLITI	CAL ACTION COM	IMITTEE (N	P A-P-
ADDRESS (number an	nd street)	BOX 508				
(Check if addre	ess LLL					
is changed)	Kell	er 	шш	L TX		
			CITY▲		STATE▲	ZIP CODE ▲
COMMITTEE'S E-M	AIL ADDRESS (Please	e provide only one e-n	nail addre	ss)		
(Check if addressis changed)	ess LL					
					шш	
(Check if address is changed)	B PAGE ADDRESS (Less	JRL)				
2. DATE M	M / D D / Y	2009				
3. FEC IDENTIFIC	CATION NUMBER	(C 000	307397		
4. IS THIS STATE	EMENT NEV	V (N) OR	X	AMENDED (A)		
I certify that I have exa	mined this Statement and	d to the best of my know	vledge and	belief it is true, correct a	nd complete	
Type or Print Name	of Treasurer	Kevin Prochaska				
Signature of Treasur	er Electronically File	ed by Kevin Proc	haska		Date 1	1 1 0 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
NOTE: Submission of				e person signing this Stat		nalties of 2 U.S.C. §437g.
Office Use Only				For further information Federal Election Commis Toll Free 800-424-9530 Local 202-694-1100		FEC FORM 1 (Revised 02/2009)

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5.			OMMITTEE (Check One) ommittee:						
	(a)	(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 (Candid								
	Candic Party A		Office Sought: House Senate	State President District					
	(c)		ittee.						
	Name Candic								
	Party (Comm							
	(d)		This committee is a (National, State (or subordinate) committee of the	(Democratic, Republican,etc.) Party.					
	Politic	al Act	ion Committee (PAC):						
	(e)	X	This committee is a separate segregated fund. (Identify connected organization on line 6	6.) Its connected organization is a:					
			Corporation Corporation w/o Capital Stock	Labor Organization					
			Membership Organization X Trade Association	Cooperative					
			Wellie of the Organization	Cooperative					
	(f)		In addition, this committee is a Lobbyist/Registrant PAC.	vote appropriate friend or mortic					
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.									
	Joint F	undra	sing 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 procommittees/organizations, none of which is an authorized committee of a federal candida						
		Comi	nittees Participating in Joint Fundraiser						
			1. FEC ID number	С					
			2. FEC ID number	С					
			3. FEC ID number	C					
			4. FEC ID number	С					

Write or Type Committee Name

	NATIONAL PAWNBROK	ERS ASSOCIATION INC POLITICA	L ACTION COMMITTEE (NPA-	PAC)				
6.	Name of Any Connected Org	panization, Affiliated Committee, Joint F	undraising Representative, or Lead	ership PAC Sponsor				
L	NATIONAL PAWNBROKE	RS ASSOCIATION INC POLITICAL	ACTION COMMITTEE (NPA-P	AC)				
	Mailing Address	PO BOX 508						
		Keller Keller		76244 _ [_ _				
		CITY	STATE 🛦	ZIP CODE				
	Relationship:		_					
	X Connected Organization	Affiliated Committee ,	Joint Fundraising Representative	Leadership PAC Sponsor				
7.	possession of Committee	ntify by name, address, (phone num books and records. einecke PO Box 2686	ber optional), and position of t	ne person in				
		Keller		76244				
	Title or Position ▼	CITY A	STATE A	ZIP CODE A				
	Executive	Director	Telephone number817	- <u>337</u> - <u>8830</u>				
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 Kevin I	Prochaska						
	Mailing Address	1921 Bridgecrest Lan	e					
		Roanoke		76262				
	Title or Position ♥	CITY A	STATE	ZIP CODE A				
	Treasurer		Tolophone number 214 _ 302 _ 7296					
			Telephone number					

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	Full Name of Designated Agent	-									
	Mailing Address	s									
	Title or Position ▼				CITY A				STATE A	ZIP CODE	A
							Tel	ephone nur	nber		
9.	Banks or Other I	Depositorio xes or maint	es: List all ains funds.	banks or oth	ner deposito	ries in w	nich the	committee	deposits funds, ho	olds accounts, ren	nts
	Name of Bank, Do	epository, et	ic.								
	Mailing Address										
							1 1				
					CITY 🛕				STATE △	ZIP COD	ΕΔ
	Name of Bank, Do	epository, et	ic.								
	Mailing Address										
											-
					CITY 🗖				STATE 4	ZIP COD	E 🛆