

Americans for Real Change FACI 3 AM 10: 49 1390 Chain Bridge Road, #515 McLean, Virginia 22101

June 26, 2012

Federal Election Commission 999 E Street, N.W. Washington, D.C. 20463

Re:

Form 1, Statement of Organization

Americans for Real Change PAC - Unlimited Contributions

To Whom It May Concern:

This committee intends to make independent expenditures, and consistent with the U.S. Court of Appeals for the District of Columbia decision in SpeechNow v. FEC, it therefore intends to raise funds in unlimited amounts. This committee will not use those funds to make contributions, whether direct, in-kind, or via coordinated communications, to federal candidates or committees.

Respectfully submitted,

Jake Menges Treasurer

1203084021

FEC FORM 1

Only

STATEMENT OF ORGANIZATION

RECEIVED

2012 JUL 13 AM 8: 39

(Revised 02/2009)

NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) over the lines. is changed) for Real Change PAC ADDRESS (number and street) (Check if address is changed) VA 2, 2, 1, 0, 1 CITY STATE ZIP CODE COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address) compliance@complianceconsultingva.com (Check if address is changed) COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE C FEC IDENTIFICATION NUMBER 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. Jake Menges Type or Print Name of Treasurer Signature of Treasur 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

Local 202-694-1100

5.

		OMMITTEE			
Can		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. (Complete the cancinformation below.)					
Name Cand					
Candi Party	idate Affiliati	Office State on Sought: House Senate President District			
(c)	: 	This committee supports/opposes only one candidate, and is NOT an authorized committee.			
Name Candi					
Part	y Con	nmittee:			
(d)		(National, State (Democratic, This committee is a or subordinate) committee of the Republican, etc.) Party.			
Polit	tical 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).		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.)			
Join	t Fund	draising 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	nmittees Participating in Joint Fundraiser			
	1.,	FEC ID number C			
	2.	FEC ID number			
•	3.	FEC ID number C			
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W	Write or Type Committee Name							
Americans for Real Change PAC								
6.	Name of Any Conne	cted Organization, Affiliated Committee, Joint Fundralsing Representative, or Leadership PAC S	ponsor					
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L	<u> </u>							
L								
	Mailing Address							
		CITY STATE ZIP COD	E					
	Relationship: Co	nnected Organization 🏅 Affiliated Committee 👸 Joint Fundraising Representative 🤅 Leadership P	AC Spapsor					
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 ,	Custodian of Record	s: Identify by name, address (phone number optional) and position of the person in possession o	Committee					
•	books and records.	or definity by fluinc, address (prioris names) - optionary and position of the person in possession of	COMMINGE					
	1.0							
	Full Name	a, b, e, 1, 1, H, o, b, b, s, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,						
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	Title or Position	CITY STATE ZIP CODI	•					
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	····							
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	a k e Menges	لـــــا					
	Mailing Address	3, 1, 1, E, a, s, t, 7, 2, n, d, S, t, r, e, e, t, 1, 1, 1, 1, 1, 1, 1,						
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	White as Parties	CITY STATE ZIP CODE						
	Title or Position [T; r; e; a; s; u; r	e r Telephone number [3,4,7]-[2,6,6]-[9,0,7.91					
		lelephone number	لتستنت					

Full Name of Designated Agent	C ₁ a ₁ b ₁ e ₁ l ₁ l ₁ H ₁ o ₁ b ₁ b ₁ s ₁		
Mailing Address	1,3,9,0, ,C,h,a,i,n, ,B,r,i,d,g,e, ,R	oad	
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	M ₁ C ₁ L ₁ e ₁ a ₁ n ₁ CITY	V A STATE	2, 2, 1, 0, 1 - L L L L L L L L L L L L L L L L L L
Title or Position			
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Banks or Other safety deposit b Name of Bank,	Depositories: List all banks or other depositories in which the commoxes or maintains funds. Depository, etc.	ittee deposit	s funds, holds accounts, rents
	B, B, &, T, , , , , , , , , , , , , , , , ,	<u> </u>	
Mailing Address	1,7,1,7, K,i,n,g, S,t,r,e,e,t,	<u> </u>	
			
	A, 1, e, x, a, n, d, r, i, a, , , , , , , , , , , , , , , , ,	VA	2,2,3,1,4-
	CITY	STATE	ZIP CODE
Name of Bank,	Depository, etc.		
		<u> </u>	
Mailing Address		1111	
	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. **Date of Receipt Hand Delivered** Postmarked **USPS First Class Mail** Postmarked (R/C) **USPS** Registered/Certified **Postmarked USPS Priority Mail** Delivery Confirmation™ or Signature Confirmation™ Label **Postmarked USPS Express Mail** Postmark Illegible No Postmark **Shipping Date** Overnight Delivery Service (Specify): **Next Business Day Delivery Date of Receipt** 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 or Postmarked Other (Specify): **DATE PREPARED** PREPARER

(3/2005)