Only

STATEMENT OF

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FEC ORGANIZATION FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 X COMMITTEE (in full) is changed) over the lines. Plain State PAC 525 Ninth St., NW ADDRESS (number and street) Suite 800 (Check if address is changed) Washington 20004 DC CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS scammer@hecht.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 07 2019 C00287045 FEC IDENTIFICATION NUMBER > 3. X OR IS THIS STATEMENT NEW (N) 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. Hecht, Tim, , , Type or Print Name of Treasurer Hecht, Tim,,, [Electronically Filed] 80 07 2019 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 (Revised 06/2012) Toll Free 800-424-9530

Local 202-694-1100

	FEC Fo	rm 1 (Revised 02/2009)	Page 2				
		E OF COMMITTEE					
	naidate	date Committee:					
(a)	Ш	This committee is a principal campaign committee. (Complete the candidate information below.)					
(b)	Ш	This committee is an authorized committee, and is NOT a principal campaign committee. (Compinformation below.)	plete the candidate				
	ne of didate						
	didate y Affiliatio	Office Sought: House Senate President	State				
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	District				
	ne of didate						
Par	ty Con	nmittee:					
(d)		· · · · · · · · · · · · · · · · · · ·	Democratic, Republican, etc.) Party.				
Pol	itical A	ction Committee (PAC):					
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its cont	nected organization is a				
		Corporation Corporation w/o Capital Stock	Labor Organization				
		Membership Organization Trade Association	Cooperative				
(5)		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 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.)					
Joir	nt Fund	raising Representative:					
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate.	o 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.	o or more political				
	Com	Committees Participating in Joint Fundraiser					
	1.	FEC ID number					
	2.	FEC ID number					
	3.	FEC ID number					
	4.						

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Write or Type Committee Name		
Plain State PAC		
Name of Any Connected O	Organization, Affiliated Committee, Joint Fundraising Representative, or L	eadership PAC Sponsor
NONE		
Mailing Address		
	CITY	710.0005
	CITY STATE	ZIP CODE
Relationship: Connected	d Organization Affiliated Committee Joint Fundraising Representative	Leadership PAC Sponso
Custodian of Records: Identification books and records.	tify by name, address (phone number optional) and position of the person	n in possession of committe
Cammer, S	Sandra, , ,	
Full Name		
	525 Ninth St., NW	
Mailing Address	525 Ninth St., NW Suite 800	
	Suite 800	20004
	Suite 800	20004
	Suite 800	20004 ZIP CODE
Mailing Address	Suite 800 Washington DC 2	
Mailing Address Title or Position Assistant Treasurer	Suite 800 Washington CITY STATE Telephone number and address (phone number optional) of the treasurer of the committee; and	ZIP CODE
Title or Position Assistant Treasurer Treasurer: List the name and any designated agent (e.g., a Full Name Hecht, Tim,	Suite 800 Washington CITY STATE Telephone number d address (phone number optional) of the treasurer of the committee; and assistant treasurer).	ZIP CODE
Title or Position Assistant Treasurer Treasurer: List the name and any designated agent (e.g., a Full Name of Treasurer	Suite 800 Washington CITY STATE Telephone number d address (phone number optional) of the treasurer of the committee; and assistant treasurer).	ZIP CODE
Title or Position Assistant Treasurer Treasurer: List the name and any designated agent (e.g., a Full Name Hecht, Tim,	Suite 800 CITY STATE Telephone number d address (phone number optional) of the treasurer of the committee; and assistant treasurer).	ZIP CODE
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Full Name of Designated Agent	1		
Mailing Address			
	L		
	L	CITY STATE	ZIP CODE
Title or Position		Telephone number	
safety deposit bo Name of Bank, I	Depository, etc		
	BB&T		
		4000 K OT NIM	
Mailing Address	Ĺ	1909 K ST NW	
Mailing Address	L	1909 K ST NW WASHINGTON DC 20006	
Mailing Address	L		ZIP CODE
Mailing Address Name of Bank, I	L [WASHINGTON DC 20006 CITY STATE	ZIP CODE
	L Depository, etc	WASHINGTON DC 20006 CITY STATE	
	L Depository, etc	WASHINGTON DC 20006 CITY STATE	
Name of Bank, I	L Depository, etc	WASHINGTON DC 20006 CITY STATE	
Name of Bank, I	L Depository, etc	WASHINGTON DC 20006 CITY STATE	

: 97 A = G7 9 @ G B9 C I G H9 L H F 9 @ 5 H9 8 HC 5 F 9 D C F H Z G7 < 98 I @ C F → H9 A = N 5 H = C B

Form/Schedule: F1A
Transaction ID:

Amended to update the committee name, address and to change the committee type from a principal campaign committee to a multi-candidate PAC.

Form/Schedule: Transaction ID: