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# FEC FORM 1

# STATEMENT OF ORGANIZATION

(See Instructions)

1. NAME OF COMMITTEE (in full) (Check if name is changed) Example: If typing, type over the lines. 12FE4M5

Planning Systems Incorporated PAC

ADDRESS (number and street) 12030 Sunrise Valley Drive

(Check if address is changed) Suite 400, Reston Plaza 1

Reston | VA | 20191 - 3459

CITY ▲ STATE ▲ ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

COMMITTEE'S WEB PAGE ADDRESS (URL)

2. DATE 12 16 2002

3. FEC IDENTIFICATION NUMBER ▶ C

4. IS THIS STATEMENT X 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.*

Type or Print Name of Treasurer Richard L. Jackson

Signature of Treasurer Date 12 16 2002

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 Use Only | | | | |
|---|---|---|---|---|

For further information contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-694-1100

FEC FORM 1
(Revised 1/01)

FE1A1040 PDF

5. TYPE OF COMMITTEE (Check One)

(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 of Candidate

Candidate Party Affiliation | Office Sought: House Senate President | State District

(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate

(d) This committee is a (National, State or subordinate) committee of the (Democratic, Republican, etc.) Party.

(e) X This committee is a separate segregated fund.

(f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee.

6. **Name of Any Connected Organization or Affiliated Committee**

Planning Systems Incorporated

Mailing Address 12030 Sunrise Valley Drive
Suite 400, Reston Plaza I
Reston VA 20191 3453

CITY ▲ STATE ▲ ZIP CODE ▲

Relationship connected

Type of Connected Organization:

X Corporation | Corporation w/o Capital Stock | Labor Organization

Membership Organization | Trade Association | Cooperative

Write or Type Committee Name

Planning Systems Incorporated PAC

7. Custodian of Records: Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Full Name: Richard L. Jackson

Mailing Address: c/o Planning Systems Incorporated
12030 Sunrise Valley Drive, Suite 400
Reston | VA | 20191 - 3453

Title or Position ▼ | CITY ▲ | STATE ▲ | ZIP CODE ▲

Treasurer | Telephone number 703 - 788 - 7781

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: Richard L. Jackson

Mailing Address: c/o Planning Systems Incorporated
12030 Sunrise Valley Drive, Suite 400
Reston | VA | 20191 - 3453

Title or Position ▼ | CITY ▲ | STATE ▲ | ZIP CODE ▲

Treasurer | Telephone number 703 - 788 - 7781

Full Name of Designated Agent: Angela G. Carpenter

Mailing Address: c/o Planning Systems Incorporated
12030 Sunrise Valley Drive, Suite 400
Reston | VA | 20191 - 3453

Title or Position ▼ | CITY ▲ | STATE ▲ | ZIP CODE ▲

Assistant Treasurer | Telephone number 703 - 788 - 7743

9. **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.

Name of Bank, Depository, etc.

First Union National Bank

Mailing Address 1970 Chain Bridge Road

3rd Floor

McLean VA 22102

CITY ▲ STATE ▲ ZIP CODE ▲

Name of Bank, Depository, etc.

Mailing Address

CITY ▲ STATE ▲ ZIP CODE ▲

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Federal Election Commission

# ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

The Commission has added this page to the end of this filing to indicate how it was received.

| | | |
|---|---|---|
| ☐ | Hand Delivered | Date of Receipt |
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| ☐ | Postmark Illegible | |
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| ☐ | Electronic Filing | |

| | |
|---|---|
| PREPARER | DATE PREPARED 12-26-03 |

(6/2000)