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) America Votes Action Fund 1155 Connecticut Avenue, NW ADDRESS (number and street) Suite 600 (Check if address is changed) Washington 20036 DC CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS avactionfund@americavotes.org (Check if address is changed) Optional Second E-Mail Address sfinkle@americavotes.org COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2015 C00492520 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. Susan Finkle Sourlis Type or Print Name of Treasurer Susan Finkle Sourlis [Electronically Filed] 06 26 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. FEC FORM 1 (Revised 06/2012)

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

	FEC Fo	rm 1 (Revised 02/2009)	Page 2
		OMMITTEE Committee	
(a)	ididate	e Committee: This committee is a principal campaign committee. (Complete the candidate information below.)	
(b)	Ī	This committee is an authorized committee, and is NOT a principal campaign committee. (Com information below.)	
Nam Can	ne of didate		
	didate y Affiliati	Office Sought: House Senate President	State District
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Nam Can	e of didate		
Par	ty Con	nmittee:	(Domogratic
(d)		· · · · · · · · · · · · · · · · · · ·	(Democratic, Republican, etc.) Party.
Poli	itical A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con-	nected 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 se committee. (i.e., nonconnected committee)	gregated 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	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	mittees Participating in Joint Fundraiser	
	1.	FEC ID number	
	2.	FEC ID number	
	3.		
	4.	FEC ID number C	

FFC Form 1 (Deviced	03/2000)	Dama 2
FEC Form 1 (Revised Write or Type Committee Nam		Page 3
America Votes		
	Organization, Affiliated Committee, Joint Fundraising Representative, or Leadershi	p PAC Sponsor
NONE		
Mailing Address		
	CITY STATE Z	IP CODE
Relationship: Connecte	ed Organization Affiliated Committee Joint Fundraising Representative Lead	ership PAC Sponsor
. Custodian of Records: Ide books and records.	ntify by name, address (phone number optional) and position of the person in posse	ession of committee
Susan Fir	nkla	
Full Name		
Mailing Address	1155 Connecticut Ave NW	
	Suite 600	
	Washington DC 20036	
Title or Position	CITY STATE Z	IP CODE
	202 90 	62 7240
 Treasurer: List the name ar any designated agent (e.g., 	nd address (phone number optional) of the treasurer of the committee; and the name assistant treasurer).	e and address of
Full Name Susan Fin	ıkle Sourlis	.
	1155 Connecticut Avenue, NW	
Mailing Address	Suite 600	
	Washington	
		P CODE
Title or Position Treasurer		

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Full Name of Designated	Susan Higgins	
Agent		
Mailing Address	1155 Connecticut Avenue, NW	
	Suite 600	
	Washington DC 20036	·
	CITY STATE	ZIP CODE
Title or Position Assistant Treas		962 - 7240
safety deposit b	r Depositories: List all banks or other depositories in which the committee deposits funds, ho boxes or maintains funds. Depository, etc.	lds accounts, rents
safety deposit b	poxes or maintains funds.	lds accounts, rents
safety deposit b	Depository, etc. Bank of America 1500 Pennsylvania Avenue, NW	lds accounts, rents
safety deposit b Name of Bank,	Depository, etc. Bank of America 1500 Pennsylvania Avenue, NW	lds accounts, rents
safety deposit b Name of Bank,	Depository, etc. Bank of America 1500 Pennsylvania Avenue, NW	
safety deposit b Name of Bank,	Depository, etc. Bank of America 1500 Pennsylvania Avenue, NW	
safety deposit b Name of Bank, Mailing Address	Depository, etc. Bank of America 1500 Pennsylvania Avenue, NW Washington DC 20005	
safety deposit b Name of Bank, Mailing Address	Depository, etc. Bank of America 1500 Pennsylvania Avenue, NW Washington CITY STATE Depository, etc.	
safety deposit b Name of Bank, Mailing Address	Depository, etc. Bank of America 1500 Pennsylvania Avenue, NW Washington CITY STATE Depository, etc. Amalgamated Bank	
safety deposit b Name of Bank, Mailing Address	Depository, etc. Bank of America 1500 Pennsylvania Avenue, NW Washington CITY STATE Depository, etc. Amalgamated Bank 1825 K Street, NW	
safety deposit be Name of Bank, Mailing Address Name of Bank,	Depository, etc. Bank of America 1500 Pennsylvania Avenue, NW Washington CITY STATE Depository, etc. Amalgamated Bank 1825 K Street, NW	
safety deposit be Name of Bank, Mailing Address Name of Bank,	Depository, etc. Bank of America 1500 Pennsylvania Avenue, NW Washington CITY STATE Depository, etc. Amalgamated Bank 1825 K Street, NW	ZIP CODE