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FEDERAL ELECTION COMMISSION  
WASHINGTON, D.C. 20463

11/22/2006

C00168070  
AMERICAN AMBULANCE ASSOCIATION FEDERAL PAC (AKA AMBU-PAC)  
North, Tristan Mr  
8201 GREENSBORO DRIVE  
MCLEAN, VA 22102

Dear Treasurer,

Beginning January 1, 2007, the Federal Election Commission (FEC) will begin sending all courtesy materials to committees **exclusively** via electronic mail. This means that reporting reminders and other mailings concerning changes in the law will no longer be sent to committees through the U.S. mail system. As a result, it is important that every committee update its Statement of Organization (FEC Form 1) to disclose an official (and current) email address.

FEC records indicate that your committee's current email address information is:

Undisclosed

If this address information is correct, no further action is required on your part. However, if this information is inaccurate or undisclosed, please amend your FEC Form 1 accordingly.

The Commission recognizes that disclosing a personal email address on a public document may raise privacy concerns. For that reason, committees may wish to create a separate email account solely for this purpose. As the agency begins to communicate with committees electronically, keeping that email address current will be essential.

For assistance with amending FEC Form 1 (enclosed), please feel free to contact staff in the Information Division (1-800-424-9530; press 6 when prompted) or your assigned Campaign Finance Analyst in the Reports Analysis Division (1-800-424-9530; press 5 when prompted).

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FEC FORM 1

STATEMENT OF ORGANIZATION

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Office Use Only

1. NAME OF COMMITTEE (in full)

(Check if name is changed)

Example: If typing, type over the lines.

12FE4M5

American Ambulance Association Federal PAC

ADDRESS (number and street)

8201 Greensboro Drive

(Check if address is changed)

Suite 300

McLean

VA

22102

CITY

STATE

ZIP CODE

COMMITTEE'S E-MAIL ADDRESS

tnorthe@the-aaa.org

sizbeneamg-inc.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

www.the-aaa.org

COMMITTEE'S FAX NUMBER

703-610-1905

2. DATE

12 13 2006

3. FEC IDENTIFICATION NUMBER

C00168070

4. 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.

Type or Print Name of Treasurer

Maria Bianchi

Signature of Treasurer

Maria Bianchi

Date

12 18 2006

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 02/2003)

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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)  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

\_\_\_\_\_  
\_\_\_\_\_

Mailing Address \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

CITY ▲ STATE ▲ ZIP CODE ▲

Relationship \_\_\_\_\_

Type of Connected Organization:

- Corporation  Corporation w/o Capital Stock  Labor Organization
- Membership Organization  Trade Association  Cooperative

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Write or Type Committee Name

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

Mailing Address

Title or Position CITY STATE ZIP CODE

Telephone number

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

Mailing Address

Title or Position CITY STATE ZIP CODE

Telephone number

Full Name of Designated Agent

Mailing Address

Title or Position CITY STATE ZIP CODE

Telephone number

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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.

\_\_\_\_\_

Mailing Address

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_ - \_\_\_\_\_

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 FEC added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
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<input type="checkbox"/> USPS Express Mail	Postmarked
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<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
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<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
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<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

*St1*  
 PREPARER  
 (3/2005)

12/22/06  
 DATE PREPARED

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