

FEC FORM 1

STATEMENT OF ORGANIZATION

Office Use Only

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

AMERICAN ASSOCIATION OF CLINICAL UROLOGISTS - AMERICAN UROLOGICAL ASSOCIATION PAC (UROPAC)

ADDRESS (number and street) P.O. Box 15441

(Check if address is changed)

Washington DC 20003-

CITY ▲ STATE ▲ ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

(Check if address is changed) info@uropac.org

Optional Second E-Mail Address UROPAC@aristotle.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address is changed) uropac.org

2. DATE 04 / 15 / 2013

3. FEC IDENTIFICATION NUMBER C C00273003

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 Dr. Arthur Tarantino

Signature of Treasurer Dr. Arthur Tarantino [Electronically Filed] Date 04 / 23 / 2013

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.