

RECEIVED
FEDERAL ELECTION
COMMISSION
PUBLIC DISCLOSURE
DIVISION

2015 SEP 29 PM 12:22

Per this letter,
Please accept the
attached Form 1
as our Amended
Form per your
request.

Thank you and
Have a fantastic day!
Jane

CONFIDENTIAL

Committee Name:
Project ACU a SuperPAC

If registered, FEC ID:

Today's Date:
August 14, 2015

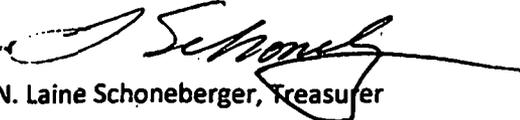
Federal Elections Commission
999 E Street, N.W.
Washington, DC 20463

Re: Form 1, Statement of Organization-Unlimited Contributions

To whom it may concern:

This committee intends to make unlimited independent expenditures, and consistent with the US Court of Appeals for the District of Columbia Circuit decision in SpeechNow v. FEC, it therefore intends to raise funds in unlimited amounts. This committee will not use those funds to make contributions, whether direct, in kind, or via coordinated communications, to federal candidates or committees.

Respectfully submitted,


N. Laine Schoneberger, Treasurer



FEDERAL ELECTION COMMISSION
WASHINGTON, D.C. 20463

RQ-1

September 23, 2015

N LAINE SCHONEBERGER, TREASURER
PROJECT ACU A SUPERPAC
2141 E BROADWAY RD SUITE 220
TEMPE, AZ 85282

Response Due Date

10/28/2015

IDENTIFICATION NUMBER: C00583971

REFERENCE: STATEMENT OF ORGANIZATION

Dear Treasurer:

This letter is prompted by the Commission's preliminary review of the report(s) referenced above. This notice requests information essential to full public disclosure of your federal election campaign finances. **Failure to adequately respond by the response date noted above could result in an audit or enforcement action.** Additional information is needed for the following 2 item(s):

1. You have failed to disclose name and address of your treasurer on your Statement of Organization (FEC Form 1). Commission Regulations require that the Statement of Organization disclose the name and address of the treasurer of the committee. Please amend your Statement of Organization to include the missing information. 11 CFR §102.2(a)
2. Your committee failed to designate a campaign depository on Line 9. Please be advised that each registered political committee must designate a campaign depository or depositories. The committee must maintain at least one checking account or transaction account at one of the depositories. Please amend your Statement of Organization (FEC Form 1) to disclose the committee's depository. (11 CFR § 102.2(a)(1)(vi) and 11 CFR §103.2)

Please note, you will not receive an additional notice from the Commission on this matter. Adequate responses must be received by the Commission on or before the due date noted above to be taken into consideration in determining whether audit action will be initiated. Failure to comply with the provisions of the Act may also result in an enforcement action against the committee. Any response submitted by your committee will be placed on the public record and will be considered by the Commission prior to taking enforcement action. **Requests for extensions of time in which to respond will not be considered.**

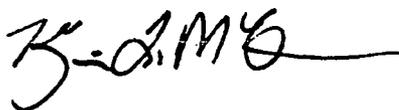
NON-CONFIDENTIAL INFORMATION

PROJECT ACU A SUPERPAC

Page 2 of 2

Electronic filers must file amendments (to include statements, designations and reports) in an electronic format and must submit an amended report in its entirety, rather than just those portions of the report that are being amended. If you should have any questions regarding this matter or wish to verify the adequacy of your response, please contact me on our toll free number (800) 424-9530 (at the prompt press 5 to reach the Reports Analysis Division) or my local number (202) 694-1173.

Sincerely,



Kevin McQueen
Campaign Finance Analyst
Reports Analysis Division

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FEC FORM 1

STATEMENT OF ORGANIZATION

RECEIVED
FEC MAIL CENTER
2015 SEP 29 AM 7:18

Office Use Only

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

Project ACU a Super PAC

ADDRESS (number and street) 2141 E Broadway Rd

(Check if address is changed) Suite 220

Tempe CITY AZ 85282 STATE ZIP CODE

COMMITTEE'S E-MAIL ADDRESS

(Check if address is changed) laine@projectacu.com

Optional Second E-Mail Address

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address is changed) www.projectacu.com

2. DATE 08 / 10 / 2015

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 N. LAINE Schoneberger

Signature of Treasurer [Signature] Date 08 / 10 / 2015

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 52 U.S.C. §30109. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

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5. TYPE OF COMMITTEE

Candidate Committee:

- (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 _____

Party Committee:

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

Political Action Committee (PAC):

- (e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected 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 segregated fund or party 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.)

Joint Fundraising Representative:

- (g) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.
- (h) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.

Committees Participating in Joint Fundraiser

1. _____ FEC ID number C
2. _____ FEC ID number C
3. _____ FEC ID number C
4. _____ FEC ID number C

UNIVERSITY MICROFILMS

Write or Type Committee Name

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

[Empty grid lines for organization name]

Mailing Address

[Empty grid lines for mailing address]

CITY

STATE

ZIP CODE

Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor

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

[Empty grid lines for full name]

Mailing Address

[Empty grid lines for mailing address]

Title or Position

CITY

STATE

ZIP CODE

[Empty grid lines for title or position]

Telephone number

[Empty grid lines for 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

W. Laine Schonberger

Mailing Address

2124 E Broadway Rd
Suite 220
Tempe

CITY

STATE

ZIP CODE

Title or Position

Treasurer

Telephone number

602-981-2921-6287

NON-PROFIT CORPORATION

Full Name of Designated Agent

[Grid for Full Name of Designated Agent]

Mailing Address

[Grid for Mailing Address Line 1]

[Grid for Mailing Address Line 2]

[Grid for Mailing Address Line 3]

CITY

STATE

ZIP CODE

Title or Position

[Grid for Title or Position]

Telephone number

[Grid for Telephone number]

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.

U.S. Bank [Grid]

Mailing Address

2995 S. Alma School Rd [Grid]

[Grid for Mailing Address Line 2]

Chandler [Grid] AZ [Grid] 85248 [Grid]

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

[Grid for Name of Bank, Depository, etc.]

Mailing Address

[Grid for Mailing Address Line 1]

[Grid for Mailing Address Line 2]

[Grid for Mailing Address Line 3]

CITY

STATE

ZIP CODE

NONPROFIT CORPORATION

Project ACU a Super PAC
2141 E. Broadway Rd
Suite 220
Tempe, AZ 85282

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