FEC FORM 1	STATEMEN ORGANIZ		PAGE 1 / 4
1. NAME OF COMMITTEE (in full)	(Check if name is changed)	Example:If typing, type over the lines.	12FE4M5
Northwest Med-T	ech Osteoarthrit	is Relief PAC	
ADDRESS (number and street)	11419 Patriot Lane		
(Check if address is changed)	Potomac CITY ▲		MD 20854 Image: State ▲ ZIP CODE ▲
COMMITTEE'S E-MAIL ADDRE	SS		
(Check if address is changed)	jrushmdmba@yahoo.co Optional Second E-Mail Add		
COMMITTEE'S WEB PAGE AD (Check if address is changed)	DRESS (URL)		
2. DATE 08 / 2			
3. FEC IDENTIFICATION N	UMBER ► C co	00624445	
4. IS THIS STATEMENT	NEW (N) OR	AMENDED (A)	
I certify that I have examined t	his Statement and to the best	of my knowledge and belief it	t is true, correct and complete.
Type or Print Name of Treasure	John J. Rush		
Signature of Treasurer	J. Rush	[Electronically Filed]	Date 08 / 22 / 2016
NOTE: Submission of false, erron		may subject the person signing ON SHOULD BE REPORTED V	this Statement to the penalties of 2 U.S.C. §437g. VITHIN 10 DAYS.
Office Use Only		For further information of Federal Election Commiss Toll Free 800-424-9530 Local 202-694-1100	

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08/22/2016 17 : 21

	FEC Fo	rm 1 (Revised 02/2009)	Page 2	
TYP	E OF C	OMMITTEE		
Car	ndidate	e 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. (Compleinformation below.)	te the candidate	
Nam Cano	ie of didate			
	didate y Affiliati	on Office Sought: House Senate President	State	
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.		
Nam Cano	ie of didate			
Par	ty Con	nmittee:		
(d)			emocratic, publican, etc.) Party.	
Poli	itical A	ction Committee (PAC):		
(e)	X	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its conne	cted organization is a	
		Corporation Corporation w/o Capital Stock	abor 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.)			
Join	it Func	Iraising 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.	or more political	
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or committees/organizations, none of which is an authorized committee of a federal candidate.	or more political	
	Com	mittees Participating in Joint Fundraiser		
	1.	FEC ID number		
	2.	FEC ID number		
	3.	FEC ID number		
	4.	FEC ID number		

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FEC Form 1 (Revised 02/2009)

Write or Type Committee Name

Northwest Med-Tech Osteoarthritis Relief PAC

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

N	orthwest Med-Tech				
	Mailing Address	11419 Patriot Lane			
		Potomac		MD 20854	
		CITY		STATE	ZIP CODE
	Relationship: X Connected	Organization Affiliated Commit	ttee Joint Fundraising	g Representative	eadership 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.				
	John J. Ru	sh			
	Full Name				
		11419 Patriot Lane			
	Mailing Address				
		Potomac		MD 20854	
	Title or Position	CITY		STATE	ZIP CODE
	Treasurer		Telephone nur	mber 301	928 – 1697
_	-			50 L.1	

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	John J. Rush				
Mailing Address	11419 Patriot Lane				
	Potomac		MD	20854	
	CITY		STATE		ZIP CODE
Title or Position		Telephone n	umber	301	928 - 1697

FEC Form 1 (Revised 02/2009)

Full Name of Designated Agent	John J. Rush
Mailing Address	11419 Patriot Lane
	Potomac MD 20854
	CITY STATE ZIP CODE
Title or Position	Telephone number 301 - 928 - 1697

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.

The	/anguard Group	
Mailing Address	2000 Kubach Road	
	Philadelphia	PA [19116
	CITY	STATE ZIP CODE
Name of Bank, Depositor	y, etc.	
Mailing Address		
	CITY	STATE ZIP CODE