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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Texas America 21st Century PAC 2929 Mossrock St ADDRESS (number and street) Suite 215 (Check if address is changed) San Antonio 78230 TX CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS brengarth@capcompliance.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2014 C00521195 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. Megan Brengarth Type or Print Name of Treasurer Megan Brengarth [Electronically Filed] 01 2014 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. Office For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530 Only

Local 202-694-1100

ı	FEC Fo i	rm 1 (Revised 02/2009)	Page 2
TYPI	E OF C	OMMITTEE • 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. (Con information below.)	nplete the candidate
Nam Cand	e of lidate		
	lidate ⁄ Affiliatio	Office Sought: House Senate President	State District
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name Cand	e of lidate		
Par	ty Con	nmittee: (National, State	(Democratic,
(d)		This committee is a or subordinate) committee of the	Republican, etc.) Party.
Poli	tical A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con-	nnected 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)	X	This committee supports/opposes more than one Federal candidate, and is NOT a separate scommittee. (i.e., nonconnected committee)	egregated 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	t Fund	raising Representative:	
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for to 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 to committees/organizations, none of which is an authorized committee of a federal candidate.	vo or more political
	Com	mittees Participating in Joint Fundraiser	
	1.	FEC ID number	
	2.	FEC ID number	
	3.	FEC ID number	
	4.		

FEC Form 1 (Revised C		Page 3
Write or Type Committee Name		
	21st Century PAC	
6. Name of Any Connected C	rganization, Affiliated Committee, Joint Fundraising Representative, or Leadershi	p PAC Sponsor
NONE		
Mailing Address		
		-
	CITY STATE Z	IP CODE
Relationship: Connected	Organization Affiliated Committee Joint Fundraising Representative Lead	ership PAC Sponsor
reductionship.	2 Julia Variation 2 Julia Variation 1 Julia Variation 1 Julia Variation 2 Julia Variation 1 Julia Variation 2 Julia Vari	sioimp i vio oponiooi
. Custodian of Records: Iden	tify by name, address (phone number optional) and position of the person in posse	ession of committee
books and records.		
Megan Bre	engarth	1
Full Name	600 Pennsylvania Ave SE	
Mailing Address	Suite 210	
	Washington DC 20003	
Title or Position	CITY STATE ZI	P CODE
Treasurer	Telephone number	. -
	relephone number	
 Treasurer: List the name and any designated agent (e.g., a 	d address (phone number optional) of the treasurer of the committee; and the name issistant treasurer).	and address of
Full Name Megan Bre	ngarth	
of Treasurer		
Mailing Address	600 Pennsylvania Ave SE	
	Suite 210	
	Washington DC 20003	
Title or Position Treasurer		P CODE
<u> </u>	Telephone number	

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Full Name of Designated		
Agent		
Mailing Address		
	CITY STATE	ZIP CODE
Title or Position		
	Telephone number	
safety deposit b	er Depositories: List all banks or other depositories in which the committee deposits funds, ho poxes or maintains funds. Depository, etc.	
safety deposit to Name of Bank,	Depository, etc. PNC Bank 1650 Pennsylvania Ave SE	
safety deposit b	Depository, etc. PNC Bank 1650 Pennsylvania Ave SE	
safety deposit to Name of Bank,	Depository, etc. PNC Bank 1650 Pennsylvania Ave SE	3
safety deposit to Name of Bank,	PNC Bank 650 Pennsylvania Ave SE	ZIP CODE
safety deposit to Name of Bank, Mailing Address	Depository, etc. PNC Bank 650 Pennsylvania Ave SE Washington DC 20003	
safety deposit to Name of Bank, Mailing Address	Depository, etc. PNC Bank 650 Pennsylvania Ave SE Washington CITY STATE	
safety deposit to Name of Bank, Mailing Address	Depository, etc. PNC Bank 650 Pennsylvania Ave SE Washington CITY STATE	
safety deposit to Name of Bank, Mailing Address	Depository, etc. PNC Bank 650 Pennsylvania Ave SE Washington CITY STATE Depository, etc.	
safety deposit to Name of Bank, Mailing Address Name of Bank,	Depository, etc. PNC Bank 650 Pennsylvania Ave SE Washington CITY STATE Depository, etc.	
safety deposit to Name of Bank, Mailing Address Name of Bank,	Depository, etc. PNC Bank 650 Pennsylvania Ave SE Washington CITY STATE Depository, etc.	