

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

RISK PAC - RISK AND INSURANCE MANAGEMENT SOCIETY, INC. PAC

ADDRESS (number and street) 1065 Avenue of the Americas 13th Floor New York NY 10018 CITY STATE ZIP CODE

COMMITTEE'S E-MAIL ADDRESS ppizio@rims.org Optional Second E-Mail Address

COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed)

2. DATE 09 / 30 / 2016

3. FEC IDENTIFICATION NUMBER C C00494005

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 Paul J. Pizio

Signature of Treasurer Paul J. Pizio [Electronically Filed] Date 09 / 30 / 2016

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.