

FEC Form 1 (Revised 02/2009)

I

5.	TYPE	TYPE OF COMMITTEE						
	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 Candi							
	Candi Party	date Affiliatio	on Office Sought: House Senate President District					
	(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.					
	Name of Candidate							
	Party	Party Committee:						
	(d)		(National, State (Democratic, This committee is a or subordinate) committee of the Republican, etc.) Party.					
	Political Action Committee (PAC):							
	(e)	П	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)	M	This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party					
		A	committee. (i.e., nonconnected committee)					
			In addition, this committee is a Lobbyist/Registrant PAC.					
			In addition, this comanities is a Leadership PAC. (Identify sponsor on line 6.)					
	Joint	Fund	raising 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 coromittees/organizations, none of which is an authorized committee of a federal candidate.							
	Committees Participating in Joint Fundraiser							
		1.	FEC ID number					
		2.	FEC ID number					
		3 .	FEC ID number					
		4.	FEC ID number					

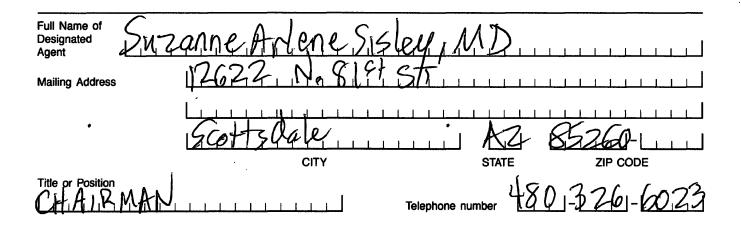
÷

FEC Form 1 (Revised 02/2009)		Page 3					
Write or Type Committee Name							
AMERICANS FOR GCIENTIFI	CTREE	DON					
6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor							
NONE							
Mailing Address							
CITY	STATE	ZIP CODE					
Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor							
 Custodian of Records: Identify by name, address (phone number optional) and books and records. 	position of the person in p	possession of committee					
Full Name Duzanne Arlene Sisley, /							
Mailing Address 12622 N_{18} $1/5$							
Scottzdale	A7 85	260-5232					
Title or Position CITY	STATE	ZIP CODE					
GHAIRMAN Telephon	ne number	326-6023					
8. Treasurer: List the name and address (phone number optional) of the treasurer any designated agent (e.g., assistant treasurer).	of the committee; and the	name and address of					
Full Name VINCENT Van Vleet							
Mailing Address 1268 E Edgemont	Averin						
RHOEN/X	AT 85 STATE						
Title or Position	e number 602-1	524-26.16					

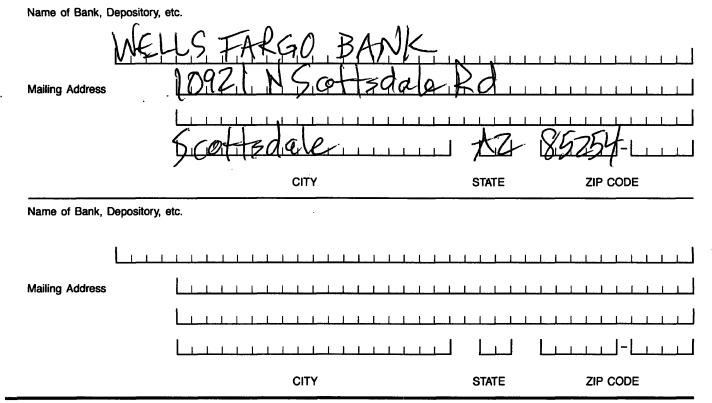
ł

ŝ

Γ



9. Banks or Other Depositorles: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.



-

Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS The FEC added this page to the end of this filing to indicate how it was received.					
Hand Delivered	Date of Receipt				
USPS First Class Mail	Postmarked 3 /2 6 /13				
USPS Registered/Certified	Postmarked (R/C)				
USPS Priority Mail	Postmarked				
Delivery Confirmation [™] or Signature Confirmation [™] Label					
USPS Express Mail	Postmarked				
Postmark Illegible					
No Postmark					
Overnight Delivery Service (Specify):	Shipping Date				
Next Busi	ness Day Delivery				
Received from House Records & Registration Office	Date of Receipt				
Received from Senate Public Records Office	Date of Receipt				
Received from Electronic Filing Office	Date of Receipt				
Date of Other (Specify):	of Receipt or Postmarked				
Pr	4/1/13				
PREPÅRER (3/2005)	DATE PREPARED				