STATEMENT OF

PAGE 1 / 4

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. NATIONAL ASPHALT PAVEMENT ASSOCIATION POLITICAL ACTION COMMITTEE (NAPA-PAC) 800 Maine Avenue ADDRESS (number and street) Suite 800 (Check if address is changed) WASHINGTON 20024 DC CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS arobinson@vsadc.com (Check if address X is changed) Optional Second E-Mail Address |spalmer@vsadc.com COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2017 C00444539 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. Palmer, Steven, O.,, Type or Print Name of Treasurer Palmer, Steven, O.,, [Electronically Filed] 09 25 2017 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

	FFC Fo	rm 1 (Revised 02/2009)	Page 2
		OMMITTEE	i aye Z
Can	ndidate	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 didate		
	didate / Affiliati	Office Sought: House Senate President	State
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Nam Cand	e of didate		
Par	ty Con	nmittee:	(5)
(d)		This committee is a (National, State or subordinate) committee of the	(Democratic, 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)		This committee supports/opposes more than one Federal candidate, and is NOT a separate s committee. (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	Iraising Representative:	
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for transmittees/organizations, at least one of which is an authorized committee of a federal candidate.	wo or more political
(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.	wo 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 (02/2009)	Page 3
Write or Type Committee Name	;	
NATIONAL ASPHALT	PAVEMENT ASSOCIATION POLITICAL ACTION COMMIT	TEE (NAPA-PAC)
6. Name of Any Connected O	Organization, Affiliated Committee, Joint Fundraising Representative, or Leade	ership PAC Sponsor
NATIONAL ASPHALT P	PAVEMENT ASSOCIATION POLITICAL ACTION COMMITTE	EE (NAPA-PAC)
Mailing Address	800 Maine Avenue, SW	
Mailing Address	Suite 800	
	WASHINGTON DC 20024	
	CITY STATE	ZIP CODE
Relationship: x Connected	d Organization Affiliated Committee Joint Fundraising Representative	Leadership PAC Sponsor
. Custodian of Records: Iden books and records.	ntify by name, address (phone number optional) and position of the person in p	consideration of committee
Robinson,	Aretha, , ,	1
Full Name	,800 Maine Avenue, SW	
Mailing Address	Suite 800	
	Washington DC 20024	
Title or Position	CITY STATE	ZIP CODE
PAC Manager	Telephone number 202 -	638 - 1950
3. Treasurer: List the name and any designated agent (e.g., a	d address (phone number optional) of the treasurer of the committee; and the assistant treasurer).	name and address of
Full Name Palmer, Ste	even, O., ,	
Mailing Address	800 Maine Avenue, SW	
	Suite 800	
	Washington DC 20024	
Title or Position Vice President	CITY STATE Telephone number 202 - [ZIP CODE 638 1950

1 LO 1 011	1 (Revised 02/2009)	Page 4
Full Name of		
Designated Agent		
Mailing Address		
	CITY STATE	ZIP CODE
Title or Position		
	Telephone number	
safety deposit bo		a decounts, rents
safety deposit bo	oxes or maintains funds.	
safety deposit be Name of Bank, I	wes or maintains funds. Depository, etc. Wachovia Bank 444 North Capitol Street NW	ZIP CODE
safety deposit be Name of Bank, I	Wachovia Bank 444 North Capitol Street NW Washington CITY STATE	
safety deposit be Name of Bank, I	Wachovia Bank 444 North Capitol Street NW Washington CITY STATE Depository, etc.	
Name of Bank, I	Wachovia Bank 444 North Capitol Street NW Washington CITY STATE	
safety deposit be Name of Bank, I	Wachovia Bank 444 North Capitol Street NW Washington CITY STATE Depository, etc.	
Name of Bank, I	Wachovia Bank 444 North Capitol Street NW Washington CITY STATE Depository, etc.	
Name of Bank, I	Wachovia Bank 444 North Capitol Street NW Washington CITY STATE Depository, etc.	