

**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

Intl Cemetery Cremation and Funeral Assn. PAC

ADDRESS (number and street)

107 Carpenter Dr Ste 100

☐ (Check if address is changed)

Sterling

CITY ▲

VA

STATE ▲

20164

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

☒ (Check if address is changed)

fecinfo@pass1.com

Optional Second E-Mail Address

Poul@iccfa.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

☐ (Check if address is changed)

2. DATE

MM / DD / YYYY  
07 / 03 / 2019

3. FEC IDENTIFICATION NUMBER ►

C C00385195

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 Frew, Ray, , ,

Signature of Treasurer Frew, Ray, , ,

[Electronically Filed]

Date

MM / DD / YYYY  
07 / 03 / 2019

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  
Use  
OnlyFor further information contact:  
Federal Election Commission  
Toll Free 800-424-9530  
Local 202-694-1100**FEC FORM 1**  
(Revised 06/2012)

## 5. TYPE OF COMMITTEE

**Candidate 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 of Candidate \_\_\_\_\_

Candidate Party Affiliation  Office Sought: ☐ House ☐ Senate ☐ President State  District

- (c) ☐ This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate \_\_\_\_\_

**Party Committee:**

- (d) ☐ This committee is a  (National, State or subordinate) committee of the  (Democratic, Republican, etc.) Party.

**Political Action Committee (PAC):**

- (e) ☒ 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) ☐ 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.)

**Joint Fundraising 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 committees/organizations, none of which is an authorized committee of a federal candidate.

**Committees Participating in Joint Fundraiser**

|    |       |               |   |       |
|----|-------|---------------|---|-------|
| 1. | _____ | FEC ID number | C | _____ |
| 2. | _____ | FEC ID number | C | _____ |
| 3. | _____ | FEC ID number | C | _____ |
| 4. | _____ | FEC ID number | C | _____ |

Write or Type Committee Name

**Intl Cemetery Cremation and Funeral Assn. PAC****6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor**

Intl Cemetery Cremation and Funeral Assn

Mailing Address

107 Carpenter Drive Ste 100

Sterling

CITY

VA

STATE

20164

ZIP CODE

Relationship: ☒ Connected Organization ☐ Affiliated Committee ☐ Joint Fundraising Representative ☐ Leadership 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.

Full Name

Lemasters, Poul, , ,

Mailing Address

107 Carpenter Drive Suite 100

Sterling

CITY

VA

STATE

20164

ZIP CODE

Title or Position

Custodian of Records

Telephone number

703

391

8400

**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

Frew, Ray, , ,

Mailing Address

27501 S. Western Avenue

Rancho Palos Verdes

CITY

CA

STATE

90275

ZIP CODE

Title or Position  
Treasurer

Telephone number

310

521

4417

Full Name of  
Designated  
Agent

Lemasters, Poul, , ,

Mailing Address

107 Carpenter Drive Suite 100

Sterling

CITY

VA

STATE

20164

ZIP CODE

Title or Position

Assistant Treasurer

Telephone number

703

391

8400

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.

Burke &amp; Herbert Bank &amp; Trust

Mailing Address

King &amp; Fairfax Streets

Alexandria

CITY

VA

STATE

22314

ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

CITY

STATE

ZIP CODE

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB  
.

Form/Schedule: F1A

Transaction ID :

This amendment is being filed to update the Assistant Treasurer, Custodian of Records and PAC email addresses.  
Please update your records accordingly.

Form/Schedule:

Transaction ID: