FEC

Only

STATEMENT OF

PAGE 1/5

ORGANIZATION FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Siemens Corporation PAC 300 New Jersey Avenue, NW ADDRESS (number and street) Suite 1000 (Check if address is changed) Washington 20001-DC CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS outsourcing@aristotle.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 20 2019 C00353797 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. Fairchild, Ann, D,, Type or Print Name of Treasurer Fairchild, Ann, D,, [Electronically Filed] 09 20 2019 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

Local 202-694-1100

| | FFC Fo | rm 1 (Revised 02/2009) | Page 2 |
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| | | OMMITTEE | raye z |
| Can | didate | 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. | |
| Name 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 |
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| Write or Type Committee Nam | ie | |
| Siemens Corpo | oration PAC | |
| 6. Name of Any Connected | Organization, Affiliated Committee, Joint Fundraising Representative, or Lea | adership PAC Sponsor |
| Siemens Corporation | | |
| <u> </u> | | |
| | 300 New Jersey Ave NW | |
| Mailing Address | Ste 1000 | |
| | Washington DC 200 | 001-2268 |
| | CITY STATE | ZIP CODE |
| _ | | ZIF CODE |
| Relationship: X Connecte | ed Organization Affiliated Committee Joint Fundraising Representative | Leadership PAC Sponsor |
| . Custodian of Records: Ide books and records. | entify by name, address (phone number optional) and position of the person i | n possession of committee |
| Mason, D | Pavid, , , | 1 |
| Full Name | ,205 Pennsylvania Ave SE | |
| Mailing Address | | |
| | Washington DC 200 | 003-1164 |
| | Washington DO Laboration and the second seco | |
| Title or Position | CITY STATE | ZIP CODE |
| Custodian of Records | Telephone number | 8345 |
| Treasurer: List the name ar any designated agent (e.g., | nd address (phone number optional) of the treasurer of the committee; and the assistant treasurer). | ne name and address of |
| Full Name Fairchild, of Treasurer | Ann, D, , | |
| Mailing Address | 300 New Jersey Avenue NW | |
| | | |
| | Orlando FL 200 | 001 |
| Title or Position | CITY STATE | ZIP CODE |
| Treasurer | Telephone number 407 | - 620 - 6007 |

| I LC FOII | m 1 (Revised 02/2009) | Page 4 |
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| | III 1 (NEVISEU UZ/ZUUS) | raye 4 |
| Full Name of Designated Agent | | |
| Mailing Address | | |
| | | |
| | | |
| | CITY STATE | ZIP CODE |
| Title or Position | Telephone number |] |
| Banks or Other safety deposit bo Name of Bank, I | r Depositories: List all banks or other depositories in which the committee deposits funds oxes or maintains funds. Depository, etc. Comerica Bank | s, noius accounts, rents |
| | | |
| Mailing Address | 645 Griswold Street | |
| Mailing Address | 645 Griswold Street Suite 70 | |
| Mailing Address | Suite 70 | 3226 |
| Mailing Address | Suite 70 | 3226 ZIP CODE |
| Mailing Address Name of Bank, I | Suite 70 Detroit CITY STATE | |
| | Suite 70 Detroit CITY STATE | ZIP CODE |
| | Suite 70 Detroit CITY STATE Depository, etc. | ZIP CODE |
| Name of Bank, I | Suite 70 Detroit CITY STATE Depository, etc. | ZIP CODE |
| Name of Bank, I | Suite 70 Detroit CITY STATE Depository, etc. | ZIP CODE |

: 97 'A = G7 9 @ G B9 C I G'H9 L H'F9 @ 5 H98 'HC'5 'F9 DC F HZ G7 < 98 I @ 'C F' + H9 A = N5 H + C B

Form/Schedule: F1A Transaction ID:

Amended to update Treasurer.

Form/Schedule: Transaction ID: