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FEC FORM 1		STATE ORG <i>A</i>						Office U	se Only		
NAME OF COMMITTEE (in	n full)	(Check if is change		Example: I over the li	f typing, type nes.	121	FE4M5				
Oshkosh C	Corpora	ation Emp	loyees	PAC	(OCEF	PAC)					
		P.O. Box 2566									
ADDRESS (number and street)											
(Check if address		2307 Oregon Stre	et 								
is changed)	)	Oshkosh				WI		54903		-	
			CI	TY		STAT	E		ZIP C	ODE	
COMMITTEE'S E-MA (Check if is change	address	S (Please provide o	-	nail address)							
COMMITTEE'S WEB  (Check if is change	address	RESS (URL) N/A									
2. DATE 03	3 01	2012									
3. FEC IDENTIFIC	CATION NU	MBER	C c00	304477							
4. IS THIS STATE	MENT	NEW (N)	OR	×	MENDED (A)	)					
I certify that I have e	examined thi	s Statement and to	the best o	f my knowle	edge and belie	ef it is true	, correct	and com	plete.		
Type or Print Name	of Treasurer	Corey R Braun									
Signature of Treasure	er Corey R	Braun		[Elec	tronically Filed	Date	03	/ D	)1	Y	y y y 2012
NOTE: Submission of		ous, or incomplete in				_		the pena	Ities of	2 U.S.	C. §437g.

Office			For further information contact:	FEC FORM 1
Use			Federal Election Commission Toll Free 800-424-9530	(Revised 02/2009)
 Only			Local 202-694-1100	(Neviseu 02/2009)

FEC Form 1 (Revised 02/2009)	Page 2
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. (Cominformation below.)	nplete the candidate
Name of Candidate	
Candidate Party Affiliation Office Sought: House Senate President	State
(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 cor	nnected organization is a
Corporation Wo 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 secommittee. (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.)	
Joint Fundraising Representative:	
(g) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two 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 committees/organizations, none of which is an authorized committee of a federal candidate.	
Committees Participating in Joint Fundraiser	
1.	
2.	
3.	
4.	

FEC Form 1 (Revise	d 02/2009)		Page <b>3</b>
Write or Type Committee Na	me		
Oshkosh Corp	oration Employees	PAC (OCEPAC	)
6. Name of Any Connected	d Organization, Affiliated Committee,	Joint Fundraising Representa	tive, or Leadership PAC Sponsor
Oshkosh Corporation	n , , , , , , , , , , , , , ,		
	P.O. Box 2566		
Mailing Address	F.O. BOX 2300		
	2307 Oregon Street		
	Oshkosh	WI	54903
	CITY	STAT	E ZIP CODE
_	_		
Relationship: X Connec	cted Organization Affiliated Committe	Joint Fundraising Repres	Sentative Leadership PAC Sponsor
	dentify by name, address (phone numb	er optional) and position of the	ne person in possession of committee
books and records.			
Michael Full Name	I G Power		
Moiling Address	c/o PASS 1950 Roland Clarke PI		
Mailing Address	Suite 300		
	Reston	, , VA	, 20191
	TROSION		
Title or Position	CITY	STATE	ZIP CODE
Assistant Treasurer			. 703 476 3070
		Telephone number	
O Transport Link No. 1000		N - 6 Al 100 - 200 -	
8. <b>Treasurer:</b> List the name any designated agent (e.g	and address (phone number optiona ., assistant treasurer).	i) of the treasurer of the commi	ttee; and the name and address of
Full Name Corey R	R Braun		,
of Treasurer			
Mailing Address	P.O. Box 2566		
	2307 Oregon Street		
	Oshkosh	<u> </u>	54903
T	CITY	STATE	ZIP CODE
Title or Position Treasurer		Talanh	920   233   9521
		Telephone number	

FEC Form 1 (	Revised 02/2009)		Page <b>4</b>
Full Name of Designated Agent Mic	chael G Power		
Mailing Address	2600 American Drive		
	PO Box 2017		1
	Appleton	WI WI STATE	54912-2017 ZIP CODE
Title or Position Assistant Treasurer		ephone number 920	
safety deposit boxes Name of Bank, Depos		the committee deposits fun	ids, holds accounts, rents
Mailing Address	250 N. Sawyer Street		
	Oshkosh	WI	54901
	CITY	STATE	ZIP CODE
Name of Bank, Depor	sitory, etc.		
L			
Mailing Address			
	1		

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## : 97 'A = G7 9 @ G B9 C I G'H9 LH'F9 @ 5 H98 'HC'5 'F9 DCF HZ G7 < 98 I @ 'CF' + H9 A = N5 H= CB

Form/Schedule: F1A
Transaction ID:

This amendment is being filed to disclose a new Committee Treasurer and to update the address and phone number for the Custodian of Records.

Form/Schedule: Transaction ID: