Only

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STATEMENT OF **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. Orbis Technologies Federal PAC 122 C Street, NW ADDRESS (number and street) Suite 530 (Check if address is changed) Washington 20001 DC CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS leo@potadv.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2019 C00696799 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. Clark, Leo, Thomas, Mr., Type or Print Name of Treasurer Clark, Leo, Thomas, Mr., [Electronically Filed] 04 09 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

FEC <b>Fo</b>	rm 1 (Revised 02/2009)	Page <b>2</b>
TYPE OF C	OMMITTEE e 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. (Corinformation below.)	nplete the candidate
Name of Candidate		
Candidate Party Affiliati	Office Sought: House Senate President	State
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate		
Party Con	nmittee: (National, State	(Democratic,
(d)	This committee is a or subordinate) committee of the	Republican, etc.) Party
Political A	ction Committee (PAC):	
(e) <b>x</b>	nnected organization is	
	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.)	
Joint Fund	Iraising Representative:	
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for t	wo 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 t 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	

FEC <b>Form 1</b> (Revised (	02/2009)	Page <b>3</b>
Write or Type Committee Name		. age <b>v</b>
	gies Federal PAC	
	Organization, Affiliated Committee, Joint Fundraising Representative, or Lea	dership PAC Sponsor
Orbis Technologies		
Mailing Address	180 Admiral Cochrane Drive	
Mailing Address	Suite 305	
	Annapolis MD 2140	)1   _   _
	CITY STATE	ZIP CODE
Relationship: <b>x</b> Connected	d Organization Affiliated Committee Joint Fundraising Representative	Leadership PAC Sponsor
<ol> <li>Custodian of Records: Ider books and records.</li> </ol>	ntify by name, address (phone number optional) and position of the person in	n possession of committee
Clark, Leo	, Thomas, Mr.,	1
Mailing Address	,122 C Street, NW	
g	Suite 530	
	Washington DC 200	01
Title or Position	CITY STATE	ZIP CODE
Treasurer	Telephone number 202	4192
3. <b>Treasurer</b> : 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).	e name and address of
Full Name Clark, Leo	, Thomas, Mr.,	
Mailing Address	122 C Street, NW	
	Suite 530	
	Washington   DC   2000	01
Title or Position , Treasurer	CITY STATE	ZIP CODE
	Telephone number	

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Full Name of Designated Agent	Clinkenbeard, Kirk, L., ,					
Mailing Address	122 C Street, NW					
	Suite 530					
	Washington	DC L	20001 ZIP CODE			
Title or Position Assistant Treasur	er 	number 202	547 4192			
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.  Bank of America						
Mailing Address	201 Pennsylvania Ave SE					
			20002			
	Washington	DC	20003			
_	CITY	STATE	ZIP CODE			
Name of Bank, De	epository, etc.					
L						
Mailing Address						
		1 1 1				

## : 97 'A - G7 9 @ 5 B9 CI G'H9 LH F9 @ 5 H98 'HC '5 'F9 DC F H Z G7 < 98 I @ 'C F' + H9 A - N5 H-C B

Form/Schedule: F1A Transaction ID:

Statement of Organization is modified on 4/09/19 to correct error identified by FEC in 3/19/19 letter.

Form/Schedule: Transaction ID: