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FEC FORM 1

STATEMENT OF ORGANIZATION

RECEIVED

2012 MAY 21 AM 7: 05

			5.50	Office Use Only
NAME OF COMMITTEE (in full)	(Check if name is changed)	Example:If typing, type over the lines.	12FE4M5	TAIL CENTER
Tieichmollogy		on of Ameri	ica I	ac Net
ADDRESS (number and street)	1601, Penns	Vilvanija Lu	e NW	
	Niorth Bui		t re 16101	2
(Check if address is changed)	Washington	0 .	_	200041-
		CITY	STATE	ZIP CODE
COMMITTEE'S E-MAIL ADDRE	SS (Please provide only one e-	mail address)		
(Check if address		 		
is changed)	Lateration	<u> </u>	· L-L-L-L-L- L	
COMMITTEES WED DACE AD	ODESS (UDI)			
COMMITTEE'S WEB PAGE AD	l		elikol Kana Latatakan	in the second
(Check if address is changed)	. 	 		
		<u> </u>		
S DATE OF 1	3 / 3277	•		
2. DATE	या किराया			s ·
3. FEC IDENTIFICATION N	UMBER CO	0317.446		
4. IS THIS STATEMENT	NEW (N) OR	AMENDED (A)		
I certify that I have examined to	his Statement and to the best	of my knowledge and belief it	is true, correct	and complete.
Type or Print Name of Treasure	, Jeff Be	ites		
Signature of Treasurer	mp	t	Date OS	I LE LOOL T
NOTE: Submission of false, erron	V	may subject the person signing t		the penalties of 2 U.S.C. §437g.
Office Use Only		For further information c Federal Election Commission Toll Free 800-424-9530 Local 202-694-1100		FEC FORM 1 (Revised 02/2009)

4-38-52

Supplies the supplies

FEC F	orm 1 (Revised 02/2009)	Page 2
	COMMITTEE	
	te 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. (Compinformation below.)	lete the candidate
Name of Candidate		
Candidate Party Affilia	tion Office Sought: House Senate President	State
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate		
Party Co		
(d)		Democratic, epublican, etc.) Party.
Political A	Action Committee (PAC):	
(e) V	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization on line 6.)	ected organization is a
で	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 NQT a separate seg committee. (i.e., nonconnected committee)	regated 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 Fun	idraising Representative:	
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least แต่อ of which is an authorized committee of a forderai candidate.	o or more political
(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.	or more political
Cor	mmittees Participating in Joint Fundraiser	
1.	FEC ID number C	
2.	FEC ID number	
3.	FEC ID number	
4.		

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Write or Type Committee Na	me		
	ociation of America Inc.		Action Commi
6. Name of Any Connected	d Organization, Affiliated Committee, Joint Fun	draising Representative, or Le	eadership PAC Sponsor
Telchwolloch	1 Akkbidi atti b mi lofi	Humerlical IIu	c
	11111111		
Mailing Address	GOILI PEMUSIYIVIAMI	althreinwi	
	North Building	1 SWITHE 16101C	
	WalshilmgtloM	STATE	2IP CODE
L		OIAIL	_
Relationship: Connec	sted Organization Affiliated Committee Joi	nt Fundraising Representative	Leadership PAC Sponsor
Custodian of Records: le books and records.	dentify by name, address (phone number option	nal) and position of the person	in possession of committee
Full Name	nu P. Collins		
Mailing Address	GOL PRINSYLWANI	1 a Lux NW	
	Morth Building	Suite 600	<u> </u>
	washington 1	المال المال	000/1-1
Title or Position	CITY	STATE	ZIP CODE
Assistani	to General Copusel.	Telephone number 202	1-1687-144421
8. Treasurer: List the name any designated agent (e.g.	and address (phone number optional) of the true, assistant treasurer).	easurer of the committee; and	the name and address of
Full Name of Treasurer	Frey J. Battes	 	
Mailing Address	16,01 Pigninsylvani	1 A LUIE NWI	
	North Building	Suite 600	<u> </u>
	Washington	STATE	DOCA - LILI
Title or Position	1		
Chilet Fine	amicinal Oftiners	Telephone number 703	1-12841-1531191

Full Name of Designated Agent	Benjamin J. Aderson		
Mailing Address	6011 Penusylvania Live	NW	
	North Building Suit	te 6	00
	Washingtion	STATE	200041
Title or Position	Telephone nur	mber 3	021-16821-144281
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.			
	Wellis Fargo Bank Whi	<u></u>	
Mailing Address	P.O. Box 6995		
		1 1 1	
	Portland	OR	22281-16225
	CITY	STATE	ZIP CODE
Name of Bank,	Depository, etc.		
Mailing Address			
	CITY	STATE	ZIP CODE

Federal Election C ENVELOPE REPLACEMENT PAGE F The FEC added this page to the end of this	OR INCOMING DOCUMENTS
	Date of Receipt
Hand Delivered	
	Postmarked
USPS First Class Mail	5/17/12
USPS Registered/Certified	Postmarked (R/C)
11000 Diate 14 - 14 - 11	Postmarked
USPS Priority Mail Delivery Confirmation™ or S	Signature Confirmation™ Label
USPS Express Mail	Postmarked
Postmark Illegible	
No Postmark	
Overnight Delivery Service (Specify):	Shipping Date
	Next Business Day Delivery
Received from House Records & Registrat	Date of Receipt ion Office
Received from Senate Public Records Office	Date of Receipt ce
Received from Electronic Filing Office	Date of Receipt
Other (Specify):	Date of Receipt or Postmarked
4mb	5/21/12
PREPARER	DATE PREPARED

(3/2005)