		RECEIVED FEC MAN. CENTER
FEC FORM 1	STATEMENT OF ORGANIZATION	2018 OCT 15 PH 3 39
		Office Use Only
1. NAME OF COMMITTEE (in full)	(Check if name Example: If typing, type is changed) over the lines.	2 12FE4M5
TELECOMMUNICATION	S INDUSTRY ASSOCIATION BROADBAND PAC	<u> </u>
	<u></u>	
ADDRESS (number and street)	2500, WILSON BLVD.	
(Check if address	S⊍ITE 300 <u>, , , , , , , , , , , , , , , , , , </u>	
is changed)		VA 22201
Committee's e-mail add	CITY	STATE ZIP CODE
M.h.u.t.t. 0.P.t.i.	a,o, n, l, i, n, e, o, t, q, ,	<u> </u>
COMMITTEE'S WEB PAGE	ADDRESS (URL)	
	<u></u>	<u></u>
COMMITTEE'S FAX NUMBE	R	
202-346-3	2411	
2. DATE 10	15 2008	
3. FEC IDENTIFICATION	NUMBER C 00383356	
4. IS THIS STATEMENT	NEW (N) OR X AMENDED (/	A)
I certify that I have examine	d this Statement and to the best of my knowledge and be	lief it is true, correct and complete.

 Type or Print Name of Treasurer
 MARTHA H. HUTTO

 Signature of Treasurer
 Ion IS 2008

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 Only		For further information contact: Federal Election Commission Toll Free 800-424-9530 Local 202-694-1100	FEC FORM 1 (Revised 12/2007)	
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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. (Com information below.)	plete the candidate	
	Name of Candidate	l	<u>; ; ; </u>	
	Candidate Party Affiliatio	Office Senate President	State District	
	(C)	This committee supports/opposes only one candidate, and is NOT an authorized committee.		
	Name of Candidate			
	Party Com	mittee:		
	(d)		(Democratic, Republican, etc.) Party.	
	Political Ac	ction Committee (PAC):		
	(e) X	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con	nected organization is a:	
		Corporation Corporation w/o Capital Stock	Labor Organization	
		Membership Organization X Trade Association	Cooperative	
	(f)	This committee supports/opposes more than one Federal candidate, and is NOT a separate se committee. (i.e., nonconnected committee)	gregated fund or party	
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)		
	Joint Fund	raising Representative:		
	(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for tw committees/organizations, at least one of which is an authorized committee of a federal candidate.	vo or more political	
	(h)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for tw committees/organizations, none of which is an authorized committee of a federal candidate.	o or more political	
	Comr	nittees Participating in Joint Fundraiser		
	1.	FEC ID number		
	2.	FEC ID number		
	3.	FEC ID number C	.	
	4.			
	5.	FEC ID number C		

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Write or Type Committee Name

······································	SINDUSTRY ASSOCIATION (TIA)	<u></u>	l	· · · · · · · · · · · · · · · · · · ·
Mailing Address	2500 WILSON BLVD., SUITE 300			
			VĄ	22201
Deletionehin	CITY		STATE	ZIP CODE
Relationship: X · Connected Organiza	tion Affiliated Committee Lead	dership PAC Sponso	or Joir	t Fundraising Representativ
Custodian of Records: books and records.	Identify by name, address (phone number	optional) and position	on of the pe	rson in possession of com
Full Name	ГНА Н. НИТТО _{III} III III III III III I		<u></u>	<u></u>
Mailing Address		<u>! ! I !</u>	<u> </u>	<u></u> _
	2500 WILSON BLVD., SUITE 300	<u>. i : 1 : i i i</u>	<u></u>	
			VA	22201
Title or Position	CITY		STATE	ZIP CODE
		Telephone num	iber 70	03 – <u>907,</u> – <u>770</u>
Treasurer: List the name any designated agent (e	e and address (phone number optional) of t .g., assistant treasurer).	he treasurer of the	committee;	and the name and address
		<u> </u>	<u>i</u>	<u></u>
Full Name of Treasurer				
1846.07			┛┛	<u> </u>
of Treasurer	TIA		· · ·	
of Treasurer		<u> </u>	· · · ·	
of Treasurer	25001WILSON BLVD., SUITE 300		VA STATE	

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FEC Form 1 (Revised 12/2007)

Full Name of Designated Agent				
Mailing Address	2500 WILSON BLVD., SUITE 300 1 1 1	i. /i.	ا <u>م است</u> ار الم	
	L <u></u>	L	;;;	
	ARLINGTON, CITY	VA 222 STATE	01 () ZIP CODE	
Title or Position				
DIRECTOR O	OPERATIONS I Telephone nu	mber 703 -	907 7700	
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.				
	SUNTRUST BANK	<u>l</u>	<u>i I i I i I</u>	
Mailing Address	1445 NEW YORK AVENUE, NW		<u>;;</u>	
		<u>1</u>		
	WASHINGTON	DC 200	005	
	CITY	STATE	ZIP CODE	
Name of Bank,	Depository, etc.			
		. <u>ll.</u> '		
Mailing Address		<u> </u>	<u></u>	
	CITY	STATE	ZIP CODE	

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Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS The FEC added this page to the end of this filing to indicate how it was received.			
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USPS Express Mail	Postmarked		
Postmark Illegible			
No Postmark			
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N	ext Business Day Delivery		
Received from House Records & Registration	Date of Receipt Office		
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Received from Electronic Filing Office	Date of Receipt		
Other (Specify):	Date of Receipt or Postmarked		
20-	10/15/08		
PREPARER ; (3/2005)	DATE PREPARED		

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