FEC FORM 1

STATEMENT OF ORGANIZATION

Office Use Only

1. NAME OF COMMITTEE (In full) ☐ (Check if name is changed) Example: If typing, type over the lines. 12FE4M5

Consumer Bankers Association Political Action Committee, The

ADDRESS (number and street) 1000 Wilson Blvd, Suite 2500

☐ (Check if address is changed)

Arlington VA 22209-3912

CITY ▲ STATE ▲ ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

jehunt@cbanet.org

dlu@cbanet.org

COMMITTEE'S WEB PAGE ADDRESS (URL)

www.cbanet.org

COMMITTEE'S FAX NUMBER

703-528-1290

2. DATE 05 03 2007

3. FEC IDENTIFICATION NUMBER ▶ C00355535

4. 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.

Type or Print Name of Treasurer JAYNE ELLEN HUNT

Signature of Treasurer Jayne Ellen Hunt Date 05 03 2007

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

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(Revised 02/2003)

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5. TYPE OF COMMITTEE (Check One)

(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. (Complete the candidate information below.)

Name of Candidate

Candidate Party Affiliation

Office Sought: ☐ House ☐ Senate ☐ President

State

District

(c) ☐ This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate

(d) ☐ This committee is a (National, State or subordinate) committee of the (Democratic, Republican, etc.) Party.

(e) ☒ This committee is a separate segregated fund.

(f) ☐ This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee.

6. Name of Any Connected Organization or Affiliated Committee

None

Mailing Address

CITY ▲ STATE ▲ ZIP CODE ▲

Relationship

Type of Connected Organization:

☐ Corporation ☐ Corporation w/o Capital Stock ☐ Labor Organization

☐ Membership Organization ☐ Trade Association ☐ Cooperative

Write or Type Committee Name

The Consumer Bankers Association Political Action Committee

7. **Custodian of Records:** Identify by name, address (phone number – optional) and position of the person in possession of committee books and records.

Full Name: Danni Lu

Mailing Address: 1000 Wilson Blvd., Suite 2500

Arlington | VA | 22209-3912

Title or Position ▼: Accounting Manager | CITY ▲ | STATE ▲ | ZIP CODE ▲

Telephone number: 703-276-3860

8. **Treasurer:** List the name and address (phone number – optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name of Treasurer: Jayne Ellen Hunt

Mailing Address: 1000 Wilson Blvd, Suite 2500

Arlington | VA | 22209-3912

Title or Position ▼: Treasurer | CITY ▲ | STATE ▲ | ZIP CODE ▲

Telephone number: 703-276-3861

Full Name of Designated Agent: Danni Lu

Mailing Address: Same as above

Title or Position ▼: Accounting Manager | CITY ▲ | STATE ▲ | ZIP CODE ▲

Telephone number: 703-276-3869

9. **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

Mailing Address P.O. Box 85024

Richmond VA 23285-5024

CITY ▲ STATE ▲ ZIP CODE ▲

Name of Bank, Depository, etc.

Mailing Address

CITY ▲ STATE ▲ ZIP CODE ▲

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Federal Election Commission
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PREPARER	DATE PREPARED 5/14/07

(3/2005)

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