Only

STATEMENT OF

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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. FRANKLIN FORUM PAC; THE 455 MASSACHUSETTS AVENUE NW ADDRESS (number and street) Suite 600 (Check if address is changed) WASHINGTON 20001 DC CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS mwhite@thefranklinforum.org (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 29 2015 C00561944 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. Matthew White Type or Print Name of Treasurer Matthew White [Electronically Filed] 06 15 2015 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

	EEC Ea	rm 1 (Pavisad 02/2000)	Page 2
		omm 1 (Revised 02/2009) OMMITTEE	raye Z
Car	ndidate	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. (Con information below.)	nplete the candidate
Nam Can	e of didate		
	didate y Affiliati	on Office Sought: House Senate President	State
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Nam Cand	e of didate		
Par	ty Con	nmittee:	
(d)		This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.
Poli	itical A	ction Committee (PAC):	
(e)	\times	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con-	nnected organization is a:
		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.)	
Join	t Fund	Iraising Representative:	
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for transmittees/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 to 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	
	4.		

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Write or Type Committee Nan		37 -
	RUM PAC; THE	
	Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership	PAC Sponsor
NONE		
<u> </u>		<u> </u>
Mailing Address		
	CITY STATE ZII	CODE
Relationship: Connecte	ed Organization Affiliated Committee Joint Fundraising Representative Leade	rship PAC Sponso
 Custodian of Records: Idea books and records. 	entify by name, address (phone number optional) and position of the person in posses	ssion of committee
Full Name		
Mailing Address		
Title or Position	CITY STATE ZIF	CODE
	Telephone number =	
3. Treasurer: List the name a any designated agent (e.g.,	nd address (phone number optional) of the treasurer of the committee; and the name assistant treasurer).	and address of
Full Name Matthew of Treasurer	White	
Mailing Address	455 Massachusetts Avenue, NW	
	Suite 600	
	Washington DC 20001	
Title or Position	CITY STATE ZIF	CODE
Treasurer	Telephone number 202 756	6 4119

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Full Name of Designated		
Agent		
Mailing Address	s	
	CITY STATE	ZIP CODE
Title or Position	ı	
	Telephone number]
safety deposit b	er Depositories: List all banks or other depositories in which the committee deposits funds boxes or maintains funds. Depository, etc.	s, holds accounts, rents
safety deposit b	boxes or maintains funds. Depository, etc. Wells Fargo Bank 1300 I ST NW s 11th Floor	s, holds accounts, rents
safety deposit t Name of Bank,	boxes or maintains funds. Depository, etc. Wells Fargo Bank 1300 I ST NW 11th Floor	
safety deposit to Name of Bank, Mailing Address	boxes or maintains funds. Depository, etc. Wells Fargo Bank 1300 I ST NW 11th Floor Washington DC 2	0005
safety deposit to Name of Bank, Mailing Address	boxes or maintains funds. Depository, etc. Wells Fargo Bank 1300 I ST NW S 11th Floor Washington DC 2	0005
safety deposit to Name of Bank, Mailing Address Name of Bank,	boxes or maintains funds. Depository, etc. Wells Fargo Bank 1300 I ST NW S 11th Floor Washington CITY STATE	0005
safety deposit to Name of Bank, Mailing Address	boxes or maintains funds. Depository, etc. Wells Fargo Bank 1300 I ST NW S 11th Floor Washington CITY STATE	0005
safety deposit to Name of Bank, Mailing Address Name of Bank,	boxes or maintains funds. Depository, etc. Wells Fargo Bank 1300 I ST NW S 11th Floor Washington CITY STATE	0005