Image# 201701319041603575				01/31/2017 11:11
FEC FORM 1	STATEMEN ORGANIZ			PAGE 1 / 4
			Offi	ce Use Only
1. NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5	
ADDRESS (number and street)	1001 G Street, NW			
 (Check if address is changed) 	Suite 800			
is onunged)	Washington			
	CITY ▲		STATE A	ZIP CODE
COMMITTEE'S E-MAIL ADDRE	SS			
(Check if address is changed)	info@teamlpac.com			<u> </u>
	Optional Second E-Mail Add	dress		
COMMITTEE'S WEB PAGE AD (Check if address is changed)	DRESS (URL)			
2. DATE 01 3	1 / Y Y Y Y 2017			
3. FEC IDENTIFICATION N	JMBER ► C ca	00519413		
4. IS THIS STATEMENT	NEW (N) OR	X AMENDED (A)		
I certify that I have examined the	nis Statement and to the best	of my knowledge and belief it	is true, correct and	complete.
Type or Print Name of Treasure	r Rosen, Hilary, , ,			
Signature of Treasurer	1, Hilary, , ,	[Electronically Filed]	Date 01	29 / Y Y Y Y 2016
NOTE: Submission of false, errore		may subject the person signing t ON SHOULD BE REPORTED W		penalties of 2 U.S.C. §437g.
Office Use Only		For further information c Federal Election Commissi Toll Free 800-424-9530 Local 202-694-1100		FEC FORM 1 (Revised 06/2012)

01/31/2017 11 : 11

-		_
FEC FC	orm 1 (Revised 02/2009)	Page 2
TYPE OF C	COMMITTEE	
Candidat	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. (Comp information below.)	lete the candidate
Name of Candidate		
Candidate Party Affiliat	ion Office Sought: House Senate President	State
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate		
Party Cor	nmittee:	
(d)		Democratic, Republican, etc.) Par
Political A	Action Committee (PAC):	
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its conr	nected 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) x	This committee supports/opposes more than one Federal candidate, and is NOT a separate sec committee. (i.e., nonconnected committee)	gregated fund or par
	In addition, this committee is a Lobbyist/Registrant PAC.	
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Joint Fun	draising Representative:	
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal 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.	o or more political
Con	mittees Participating in Joint Fundraiser	
1.	FEC ID number	
2.	FEC ID number	
3.	FEC ID number	
4.	FEC ID number	

I

FEC Form 1 (Revised 02/2009)

Page 3

Write or Type Committee Name

L PAC

6.	Nam	e of	Any	Cor	nne	cte	d (Drg	an	iza	tio	n, .	Aff	ilia	ate	d (Со	mn	nitt	tee,	J	oin	t F	un	dra	ais	ing	J R	epi	res	en	Ital	tive	e, c	or L	ea	de	rsł	nip	P P	AC	; SI	por	150	or
N	ONE																												-																
	Mailin	g Ac	ldres	s				L																																					
								L																																					
								L																											L							- L			
																	CI	ΤY													ST	AT	E						ZI	P (co	DE			
	Relati	onsh	iip:		Cor	nne	cte	d C)rga	aniz	zati	on	0	ļ	\ffil	liat	ed	Со	mı	nitt	ee	[Joi	nt	Fur	ndr	ais	ing	Re	ері	res	en	tati	ve	0	l	_ea	ide	erst	nip	PA	IC :	Spo	onso

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

Shipp, Eliz	abeth, , ,
Full Name	
Mailing Address	1001 G Street, NW
	Suite 800
	Washington DC 20001
Title or Position	CITY STATE ZIP CODE
Assistant Treasurer	Telephone number

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	Rosen, Hilary, , ,		
Mailing Address	1001 G Street, NW		
	Suite 800		
	Washington	DC 20001	
	CITY	STATE	ZIP CODE
Title or Position Treasurer		Telephone number	628 6880

FEC Form 1 (Revised 02/2009)

Full Name of Designated Agent				1				1																	1		
Mailing Address																											
						1											L			L			1			1	
								CIT	Y								ST	ATE				ZI	р С	COD	θE		
Title or Position																											
												Tele	eph	ione	e ni	uml	ber										

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.

Ba	ank of America	
Mailing Address	1801 K Street, NW	
	Washington	DC 20006
	CITY	STATE ZIP CODE
Name of Bank, Depos	sitory, etc.	
Mailing Address		
	CITY	STATE ZIP CODE