PAGE 1/5 STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) over the lines. is changed) American Water Works Company, Inc. Employee Federal PAC P.O. BOX 1770 ADDRESS (number and street) (Check if address is changed) **VOORHEES** 08043 NJ CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS Maureen.Duffy@amwater.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2017 C00354548 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. Gambol, Jennifer, , , Type or Print Name of Treasurer Gambol, Jennifer, , , [Electronically Filed] 80 2017 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. FEC FORM 1

Office			For further information contact:
Use			Federal Election Commission
			Toll Free 800-424-9530
Only			Local 202-694-1100

FEC Form	1 (Revised 02/2009)	Page 2
TYPE OF COM		
(a) T	his committee is a principal campaign committee. (Complete the candidate information below.	
	his committee is an authorized committee, and is NOT a principal campaign committee. (Comformation below.)	plete the candidate
Name of Candidate		
Candidate Party Affiliation	Office Sought: House Senate President	State
(c) T	his committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate		
Party Comm	ittee: (National, State	(Democratic,
(d) T	his committee is a or subordinate) committee of the	Republican, etc.) Party
Political Acti	on Committee (PAC):	
(e) x T	his committee is a separate segregated fund. (Identify connected organization on line 6.) Its cor	nnected organization is
	Corporation Corporation w/o Capital Stock	Labor Organization
[Membership Organization Trade Association	Cooperative
	In addition, this committee is a Lobbyist/Registrant PAC.	
	his committee supports/opposes more than one Federal candidate, and is NOT a separate sommittee. (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.)	
Joint Fundrai	sing Representative:	
_	is committee collects contributions, pays fundraising expenses and disburses net proceeds for to	vo or more political
CC	ommittees/organizations, at least one of which is an authorized committee of a federal candidate.	
	is committee collects contributions, pays fundraising expenses and disburses net proceeds for to emmittees/organizations, none of which is an authorized committee of a federal candidate.	vo or more political
Commit	tees Participating in Joint Fundraiser	
1	FEC ID number	
2	FEC ID number	
3		
4.		

	-		
l	FEC Form 1 (Revised	d 02/2009)	Page 3
W	rite or Type Committee Nar		-
A	American Wat	er Works Company, Inc. Employee Federal	PAC
6.	Name of Any Connected	Organization, Affiliated Committee, Joint Fundraising Representative, or Leadersh	nip PAC Sponsor
Aı	merican Water Wor	ks Company, Inc.	
_			
		1025 Laurel Oak Road	
	Mailing Address		
		Voorhees NJ 08043	. -
		CITY STATE 2	ZIP CODE
	Relationship: X Connect	ted Organization Affiliated Committee Joint Fundraising Representative Lead	dership PAC Sponsor
	Custodian of Records: Id books and records.	lentify by name, address (phone number optional) and position of the person in poss	session of committee
	Andrade	es, Vanessa, , ,	
	Full Name	,1025 Laural Oak Road	
	Mailing Address		
		Voorhees , NJ , 08043	
		Voorhees NJ 08043	
	Title or Position	CITY STATE 2	ZIP CODE
			309 4726
3.	Treasurer: List the name a any designated agent (e.g.,	and address (phone number optional) of the treasurer of the committee; and the nam, assistant treasurer).	ne and address of
	Full Name Gambol, of Treasurer	Jennifer, , ,	
	Mailing Address	131 Woodcrest Road	
		Cherry Hill NJ 08003	
	Title or Position	CITY STATE Z	ZIP CODE
	Treasurer	Tolophono number 856 3	5909

T LC T OII	n 1 (Revised 02/2009)	Page 4
Full Name of Designated	Witherspoon, Charles, , ,	
Agent	131 Woodcrest Road	
Mailing Address		
	Cherry Hill NJ 08003	
Title D 22	CITY STATE	ZIP CODE
Title or Position Assistant Treas	rurer Telephone number	781 - 3034
safety deposit be	oxes or maintains funds.	
Name of Bank,	PNC Bank	1 1 1 1 1 1 1
	Depository, etc. PNC Bank 1600 Market Street	
Name of Bank,	Depository, etc. PNC Bank 1600 Market Street	
Name of Bank,	PNC Bank 1600 Market Street	ZIP CODE
Name of Bank,	PNC Bank 1600 Market Street Philadelphia PA 19103	ZIP CODE
Name of Bank,	PNC Bank 1600 Market Street Philadelphia PA 19103	ZIP CODE
Name of Bank,	PNC Bank 1600 Market Street Philadelphia PA 19103 CITY STATE	ZIP CODE
Name of Bank, Mailing Address Name of Bank,	PNC Bank 1600 Market Street Philadelphia PA 19103 CITY STATE	ZIP CODE
Name of Bank, Mailing Address Name of Bank,	PNC Bank 1600 Market Street Philadelphia PA 19103 CITY STATE	ZIP CODE

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

FEC Form 1S (Revised 02/2017)

upplemental information 5(g) or (h), 6, 8 and/or 9 Page $\frac{5}{}$ of $\frac{5}{}$

h). Joint Fundraising	,		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	C
ame of Any Connected (Organization, Affiliated Committee, Joint Fu	ndraising Representativ	re, or Leadership PAC Spor
Mailing Address			
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
		pint Fundraising Represent	tative Leadership PAC S
esignated Agent: Identify Gambol, J Full Name	by name, address (phone number – optional)		tative Leadership PAC S
esignated Agent: Identify Gambol, J	by name, address (phone number – optional)		tative Leadership PAC S
esignated Agent: Identify Gambol, J Full Name	by name, address (phone number – optional) ennifer, , , 203 Woodston Road		
esignated Agent: Identify Gambol, J Full Name	by name, address (phone number – optional)		Leadership PAC S
esignated Agent: Identify Gambol, J Full Name	by name, address (phone number – optional) ennifer, , , 203 Woodston Road Woolwich Twp.		
esignated Agent: Identify Gambol, J Full Name Mailing Address	by name, address (phone number – optional) ennifer, , , 203 Woodston Road Woolwich Twp.	NJ	08085
esignated Agent: Identify Gambol, J Full Name Mailing Address TITLE OR POSITION Treasurer Interpretation of Control of C	by name, address (phone number – optional) ennifer, , , 203 Woodston Road Woolwich Twp. CITY es: List all banks or other depositories in whi	NJ STATE ▲	08085 ZIP CODE A
esignated Agent: Identify Gambol, J Full Name Mailing Address TITLE OR POSITION Treasurer Interpretation of Control of C	by name, address (phone number – optional) ennifer, , , 203 Woodston Road Woolwich Twp. CITY es: List all banks or other depositories in whi	NJ STATE ▲	08085 ZIP CODE A
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