

FEC

Only

STATEMENT OF

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PAGE 1/4 -

ORGANIZATION 2814 JUST -9 AM 11: 29 FORM 1 CO ISTRICT USE CONVETCIO NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Supporting United States of America's Next Leaders PAC (SUSAN PAC) 9425 N Meridian Street ADDRESS (number and street) #237 (Check if address is changed) Indianapolis 46260 ZIP CODE A CITY A STATE A COMMITTEE'S E-MAIL ADDRESS thomas@maximumcompliance.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) 2014 DATE FEC IDENTIFICATION NUMBER ▶ 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. Thomas Francis Maxwell III Type or Print Name of Treasurer Muxue 11 ER 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: Use

Federal Election Commission Toll Free 800-424-9530 Local 202-694-1100

FEC FORM 1 (Revised 06/2012)

1	FEC Fo	rm 1 (Revised 02/2009) Page 2						
TYP	E OF C	OMMITTEE						
Cen	didate	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. (Complete the candidate						
	ري	information below.)						
Nam	e of didate							
	didate / Affiliati	Office State Sought: House Senate President						
		District						
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.						
Nam								
Cano	didate							
Par	ty Cor	nmittee:						
(d)		(National, State (Democratic, This committee is a non-subordinate) committee of the Republican, etc.) Par						
Poli	(===	action Committee (PAC):						
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected 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 segregated fund or party committee. (i.e., nonconnected committee)						
		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	draising Representative:						
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/urganizations, 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 two or more political						
		committees/organizations, none of which is an authorized committee of a federal candidate.						
	Con	nmittees Participating in Joint Fundraiser						
	1.							
	1.							
	2.	FEC ID number						
	3.							
	J .							
	4.							

Title or Position , Treasurer

FEC Form 1 (Revised 02/2009) Page 3 Write or Type Committee Name Supporting United States of America's Next Leaders PAC (SUSAN PAC) Name of Amy Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor SUSAN BROOKS 13406 BIRKENHEAD STREET Mailing Address IN 46032 CITY STATE ZIP CODE Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor Custodian of Records: Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records. Thomas Francis Maxwell III Full Name 4703 Woodway Lane, NW Mailing Address 20016 DC Washington Title or Position CITY STATE ZIP CODE 1398 Treasurer Telephone number 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). Thomas Francis Maxwell III Full Name of Treasurer 4703 Woodway Lane, NW Mailing Address ZIP CODE STATE CITY

Telephone number

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Full Name of Designated Judy Ch	hristofolis		
Agent		 	1_1_1_1_1_1_1_1_
Mailine Address	1940 Muessing Road		
Mailing Address		 	
			
	, Indianapolis	,	6239
	CITY	STATE	ZIP CODE
Title or Position			
Assistant Treasurer	Telepho	one number	J-L
Mailing Address	1445 Laughlin Avenue	<u> </u>	<u> </u>
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PREPARER	6/9	114 PREPARED

(8/2013)