Only

08/10/2018 15 : 21

## STATEMENT OF

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**FEC ORGANIZATION** FORM 1 Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 COMMITTEE (in full) over the lines. is changed) FIDELITY NATIONAL FINANCIAL INC PAC 2001 601 Riverside Avenue ADDRESS (number and street) Building V (Check if address is changed) Jacksonville 32204 FL CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS jason.hill@fnf.com (Check if address X is changed) Optional Second E-Mail Address Tara.VanRooy@fnf.com COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2018 C00364455 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. Van Rooy, Tara, , , Type or Print Name of Treasurer Van Rooy, Tara,,, [Electronically Filed] 80 10 2018 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

Er	=C <b>E</b> 2=	m 1 (Revised 02/2000)	Page <b>2</b>
		m 1 (Revised 02/2009)  DMMITTEE	raye Z
Cand	lidate	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. (Complinformation below.)	ete the candidate
Name Candid			
Candid Party A		n Office Sought: House Senate President	State District
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name Candid			
Party	Com	mittee:	
(d)			Democratic, epublican, etc.) Party
Politi	cal A	etion Committee (PAC):	
(e)	×	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization on line 6.)	ected 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)		This committee supports/opposes more than one Federal candidate, and is NOT a separate seg committee. (i.e., nonconnected committee)	regated 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	Fund	raising 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.	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.	or more political
	Comr	nittees Participating in Joint Fundraiser	
	1.	FEC ID number	
	2.	FEC ID number	
	3.	FEC ID number	
	4.		

Title or Position Treasurer

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Write or Type Committee		. ago <b>v</b>
3.		
	ATIONAL FINANCIAL INC PAC 2001	
6. Name of Any Connec	cted Organization, Affiliated Committee, Joint Fundraising Representative,	, or Leadership PAC Sponsor
Fidelity National Fi	inancial, Inc.	
Mailing Address	601 Riverside Avenue	
Mailing Address	Bldg. V	
	Jacksonville	32204
	CITY STATE	ZIP CODE
<ul> <li>Custodian of Records books and records.</li> </ul>	: Identify by name, address (phone number optional) and position of the p	person in possession of committee
books and records.	S: Identify by name, address (phone number optional) and position of the p	person in possession of committee
books and records.  Hill, C		person in possession of committee
books and records.	Jason, , ,  601 Riverside Avenue	person in possession of committee
books and records.  Hill, C	Jason, , ,  601 Riverside Avenue  Building V, 7th Floor	
books and records.  Hill, C	Jason, , ,  601 Riverside Avenue	person in possession of committee
books and records.  Hill, C	Jason, , ,  601 Riverside Avenue  Building V, 7th Floor	
books and records.  Hill, Control  Full Name  Mailing Address	Jason, , ,  601 Riverside Avenue  Building V, 7th Floor  Jacksonville  CITY  STATE	32204
books and records.  Hill, Full Name  Mailing Address  Title or Position  Senior Counsel	Jason, , ,  601 Riverside Avenue  Building V, 7th Floor  Jacksonville  CITY  STATE	32204 ZIP CODE 854 – 8751
books and records.  Hill, Full Name  Mailing Address  Title or Position  Senior Counsel  I Treasurer: List the nam any designated agent (expected)	Jason, , ,  601 Riverside Avenue  Building V, 7th Floor  Jacksonville  CITY  STATE  Telephone number  Telephone number	32204 ZIP CODE 854 – 8751
books and records.  Hill, Full Name  Mailing Address  Title or Position  Senior Counsel  I reasurer: List the name any designated agent (expected for the content of the co	Jason, , ,  601 Riverside Avenue  Building V, 7th Floor  Jacksonville  CITY  STATE  Telephone number  Telephone number  and address (phone number optional) of the treasurer of the committee; e.g., assistant treasurer).	32204 ZIP CODE 854 – 8751
books and records.  Hill, Full Name  Mailing Address  Title or Position  Senior Counsel  Treasurer: List the nam any designated agent (a Full Name Van F	Jason, , ,  601 Riverside Avenue  Building V, 7th Floor  Jacksonville  CITY  STATE  Telephone number  ne and address (phone number optional) of the treasurer of the committee; e.g., assistant treasurer).  Rooy, Tara, , ,	32204 ZIP CODE 854 – 8751
books and records.  Hill, Full Name  Mailing Address  Title or Position  Senior Counsel  I Treasurer: List the name any designated agent (expected for the senior counse).  Full Name of Treasurer	Jason, , ,  601 Riverside Avenue  Building V, 7th Floor  Jacksonville  CITY  STATE  Telephone number  ne and address (phone number optional) of the treasurer of the committee; e.g., assistant treasurer).  Rooy, Tara, , ,	32204 ZIP CODE 854 – 8751

904

Telephone number

854

8194

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Full Name of Designated	Colby, Jeff, , ,	
Agent	COA Diverside Avenue	
Mailing Address	601 Riverside Avenue	
	Bldg. 5, 6th Floor	
	Jacksonville FL 32204	
	CITY STATE ZI	IP CODE
Title or Position Asst. Treasurer		54   -   8787
Banks or Other safety deposit bo	<b>Depositories:</b> List all banks or other depositories in which the committee deposits funds, holds a pixes or maintains funds.	accounts, rents
Name of Bank, [	Depository, etc.	
	Depository, etc.  Bank of America	
Name of Bank, [	Bank of America	
Name of Bank, [	Bank of America	
Name of Bank, [	Bank of America  2000 Clayton Road  Concord  CA 94520	IP CODE
Name of Bank, [	Bank of America  2000 Clayton Road  Concord  CA 94520  CITY  STATE  Z	ZIP CODE
Name of Bank, [	Bank of America  2000 Clayton Road  Concord  CA 94520  CITY  STATE  Z	
Name of Bank, I	Bank of America  2000 Clayton Road  Concord  CA 94520  CITY  STATE  Z  Depository, etc.	
Name of Bank, [	Bank of America  2000 Clayton Road  Concord  CA 94520  CITY  STATE  Z  Depository, etc.	
Name of Bank, E	Bank of America  2000 Clayton Road  Concord  CA 94520  CITY  STATE  Z  Depository, etc.	

## : 97 'A = G7 9 @ G B9 C I G'H9 LH'F9 @ 5 H98 'HC'5 'F9 DCF HZ G7 < 98 I @ 'CF' + H9 A = N5 H= CB

Form/Schedule: F1A Transaction ID:

Amended to disclose a new custodian of records and update email and address changes.

Form/Schedule: Transaction ID: