

**FEC
FORM 1****STATEMENT OF
ORGANIZATION**

Office Use Only

1. NAME OF COMMITTEE (in full) ☒ (Check if name is changed) Example: If typing, type over the lines.

12FE4M5

The National Women's Political Caucus Parity PAC

ADDRESS (number and street)

1001 Connecticut Ave NW

☐ (Check if address is changed)

Washington

CITY ▲

DC

STATE ▲

20036

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

☐ (Check if address is changed)

info@nwpc.org

Optional Second E-Mail Address
elaine@elainegehr.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

☐ (Check if address is changed)

www.nwpc.org

2. DATE

MM / DD / YYYY
10 / 15 / 2009

3. FEC IDENTIFICATION NUMBER ►

C C00034256

4. 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.

Type or Print Name of Treasurer Elaine Gehr

Signature of Treasurer Elaine Gehr

[Electronically Filed]

Date

MM / DD / YYYY
03 / 09 / 2016

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
Use
OnlyFor further information contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-694-1100**FEC FORM 1**
(Revised 06/2012)

1. FEC ID number

2. FEC ID number

3. FEC ID number

4. FEC ID number

Write or Type Committee Name

The National Women's Political Caucus Parity PAC

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

National Women's Political Caucus

Mailing Address

1001 Connecticut Ave NW

Washington

DC

20036

CITY

STATE

ZIP CODE

Relationship: ☒ Connected Organization ☐ Affiliated Committee ☐ Joint Fundraising Representative ☐ Leadership PAC Sponsor**7. Custodian of Records:** Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Full Name

Paula Owen Willmarth

Mailing Address

6967 N London Ave

Kansas City

MO

64151

Title or Position

CITY

STATE

ZIP CODE

Custodian of Records

Telephone number

573

694

7889

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

Elaine Gehr

Mailing Address

3470 Olney-Laytonsville Rd 181

Olney

MD

20832

Title or Position
Treasurer

CITY

STATE

ZIP CODE

Telephone number

573

694

7889

Full Name of
Designated
Agent

Mailing Address

Title or Position

Telephone number

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.

TD Bank

Mailing Address

801 17th St NW

Washington

DC

20006

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

CITY

STATE

ZIP CODE