## 3031141629

FEC FORM 1

## STATEMENT OF ORGANIZATION

RECEIVED 2013 ALL -

						Office-Use 200y				
NAME OF     COMMITTEE (in full)	A. W.	(Check if name is changed)		nple:If typing, type the lines.	12FE4M5	" " IL LENT				
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Committee 1	<u> </u>									
ADDRESS (number and street)	14.7	Fiarrial	initi	Ridinin						
(Check if address is changed)	لـــــا		' 							
		SITIOINI I I			MA STATE ▲	ZIP CODE 4				
COMMITTEE'S E-MAIL ADDRE	SS			·						
(Check if address is changed)	L		· <u> </u>							
	Option	al Second E-Mail Ac	Idress	100 mg (100 mg) 100 mg (100 mg)	entra de la companya					
	السلسا		<u> </u>		.121-1-1					
COMMITTEE'S WEB PAGE AD	DRESS	(URL)								
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				•						
2. DATE	9	2013								
3. FEC IDENTIFICATION N	UMBER		0,5	44999						
4. IS THIS STATEMENT	NE	W (N) OR	V	AMENDED (A)						
I certify that I have examined t	his State	ment and to the bes	t of my k	nowledge and belief it	is true, correc	t and complete.				
Type or Print Name of Treasure	er Wi	lliam Higg	in S							
	11-11	1-50			\$*\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\					
Signature of Treasurer	//llia	m Heggi	is		Date ]	1 19 2013				
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 Only				For further information co Federal Election Commission Toll Free 800-424-9530 Local 202-694-1100		FEC FORM 1 (Revised 06/2012)				

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## Joint Fundraising Representative:

(f)

FEC Form 1 (Revised 02/2009)

(C)

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g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political
	\$1,000!	committees/organizations, at least one of which is an authorized committee of a federal candidate.

In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)

(h)	\$ 1	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more politica
	Sam)	committees/organizations, none of which is an authorized committee of a federal candidate.

Committees Participating in Joint Fundraiser

committee. (i.e., nonconnected committee)

In addition, this committee is a Lobbyist/Registrant PAC.

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This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party

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Write or Type Committee Name	)	
6. Name of Any Connected C	Organization, Affiliated Committee, Joint Fundralsing Representative, or Leadership	PAC Sponsor
Mailing Address		
	CITY STATE ZIF	CODE
Relationship: Connected	d Organization Affiliated Committee Joint Fundraising Representative Leader	rship PAC Sponsor
7. Custodian of Records: Iden	atify by name address (above symbol patients) and position of the parent in passes	noine of committee
books and records.	ntify by name, address (phone number optional) and position of the person in posses	islon or committee
Full Name		
Mailing Address		
-		<u> </u>
Title or Position	CITY STATE ZIF	CODE
8. Treasurer: List the name an any designated agent (e.g.,	d address (phone number optional) of the treasurer of the committee; and the name assistant treasurer).	and address of
Full Name of Treasurer		
Mailing Address		
Title or Position	CITY STATE ZIF	CODE
	Telephone number	

CITY

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ZIP CODE

STATE

FEC Form 1 (Revised 02/2009)

Full Name of Designated Agent

mericans For America PAC 7 Farragut Rd Soston, MA 02127 FEC 999Est, NW Washington, DC 20463

**PREPARER** 

(8/2013)

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DATE PREPARED