FEC FORM 1

STATEMENT OF ORGANIZATION

(See instructions)

Office use only

1. NAME OF COMMITTEE (in full) ☐ (Check if name is changed) Example: If typing, type over the lines 12FE4M5

National Association of Development Companies - 504PAC

ADDRESS (number and street)

6764 Old McLean Village Drive

☐ (Check if address is changed)

McLean | VA | 22101 -

CITY ▲ STATE ▲ ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

frank@nadco.org

COMMITTEE'S WEB PAGE ADDRESS (URL)

www.nadco.org

COMMITTEE'S FAX NUMBER

703 748-2583

2. DATE M M 05 / D D 27 / Y Y Y Y 2005

3. FEC IDENTIFICATION NUMBER C C00332254

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 David W. Amick

Signature of Treasurer Electronically Filed by David W. Amick Date M M 05 / D D 27 / Y Y Y Y 2005

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

FEC FORM 1
(Revised 02/2003)

25058814650

5. TYPE OF COMMITTEE (Check One)

(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 information below.)

Name of Candidate

Candidate Party Affiliation ☐ Office Sought: ☐ House ☐ Senate ☐ President State District ☐

(c) ☐ This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate

(d) ☐ This committee is a ☐ (National, State (or subordinate) committee of the ☐ (Democratic, Republican,etc.) Party.

(e) ☒ This committee is a separate segregated fund

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

6. Name of Any Connected Organization or Affiliated Committee

Mailing Address

CITY▲ STATE▲ ZIP CODE▲

Relationship

Type of Connected Organization:

☐ Corporation ☐ Corporation w/o Capital Stock ☐ Labor Organization

☐ Membership Organization ☒ Trade Association ☐ Cooperative

Write or Type Committee Name

National Association of Development Companies - 504PAC

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: Frank Witchey

Mailing Address: 6764 Old McLean Village Drive

McLean | VA | 22101 –

Title or Position ▼ | CITY ▲ | STATE ▲ | ZIP CODE ▲

Director

Telephone number 703 – 748 – 2575

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: David W. Amick

Mailing Address: Premier Capital Corporation

151 North Delawarw, Suite 750

Indianapolis | IN | 46204 –

Title or Position ▼ | CITY ▲ | STATE ▲ | ZIP CODE ▲

Telephone number 317 – 974 – 0504

Full Name of Designated Agent

Mailing Address

Title or Position ▼ | CITY ▲ | STATE ▲ | ZIP CODE ▲

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.

United Bank

Mailing Address 1320 Old Chain Bridge Road

McLean | VA | 22101 -

CITY | STATE | ZIP CODE

25036146553

Federal Election Commission

ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

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N/A PREPARER	N/A DATE PREPARED

(5/2004)

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