Only

STATEMENT OF

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FEC ORGANIZATION FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. BFB PAC 499 S. CAPITOL STREET, SW ADDRESS (number and street) SUITE 422 (Check if address is changed) WASHINGTON 20003 DC CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS Compliance@ABConsultingDC.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 09 2016 C00584805 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. Lindsay F. Angerholzer Type or Print Name of Treasurer Lindsay F. Angerholzer [Electronically Filed] 80 2016 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

FEC F C	orm 1 (Revised 02/2009)	Page 2
TYPE OF (COMMITTEE e Committee:	. 250 -
(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. (Cor information below.)	mplete the candidate
Name of Candidate		
Candidate Party Affilia	Office Sought: House Senate President	State
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate		
Party Co		(Domooratio
(d)	(National, State This committee is a or subordinate) committee of the	(Democratic, Republican, etc.) Party.
Political A	Action Committee (PAC):	
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its co	nnected organization is a
	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 s committee. (i.e., nonconnected committee)	egregated 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 Fun	draising Representative:	
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for t committees/organizations, 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 t committees/organizations, none of which is an authorized committee of a federal candidate.	wo or more political
Con	nmittees Participating in Joint Fundraiser	
1.	FEC ID number	
2.	FEC ID number	
3.	FEC ID number	
4.		

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Write or Type Committee Nam	ie	-
BFB PAC		
6. Name of Any Connected	Organization, Affiliated Committee, Joint Fundraising Representative, or Leadersh	nip PAC Sponsor
BRENDAN F BOYLE		
Mailing Address	PO BOX 11545	
ivialing Address	PHILADELPHIA PA 19116 CITY STATE	ZIP CODE
Relationship: Connecte	ed Organization Affiliated Committee Joint Fundraising Representative X Lea	dership PAC Sponsor
. Custodian of Records: Ide books and records.	entify by name, address (phone number optional) and position of the person in posi	session of committee
Full Name		
Mailing Address		
Title or Position	CITY STATE	ZIP CODE
	Telephone number	
3. Treasurer: List the name ar any designated agent (e.g.,	nd address (phone number optional) of the treasurer of the committee; and the nar assistant treasurer).	ne and address of
Full Name Lindsay F of Treasurer	. Angerholzer	
Mailing Address	499 S. Capitol Street, SW	
	Suite 422	
	Washington DC 20003	ZID CODE
Title or Position Treasurer		ZIP CODE 103 - 0606

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Full Name of Designated		
Agent		
Mailing Address		
	CITY STATE	ZIP CODE
Title or Position	CITY	ZIP CODE
safety deposit b Name of Bank,	oxes or maintains funds. Depository, etc.	
	Depository, etc. Bank of America 201 Pennsylvania Avenue SE	
Name of Bank,	Depository, etc. Bank of America 201 Pennsylvania Avenue SE	3 , 1
Name of Bank,	Depository, etc. Bank of America 201 Pennsylvania Avenue SE	3 1 -
Name of Bank,	Depository, etc. Bank of America 201 Pennsylvania Avenue SE	ZIP CODE
Name of Bank,	Depository, etc. Bank of America 201 Pennsylvania Avenue SE Washington CITY STATE	
Name of Bank, Mailing Address	Depository, etc. Bank of America 201 Pennsylvania Avenue SE Washington CITY STATE	
Name of Bank, Mailing Address	Depository, etc. Bank of America 201 Pennsylvania Avenue SE Washington CITY STATE Depository, etc.	
Name of Bank, Mailing Address Name of Bank,	Depository, etc. Bank of America 201 Pennsylvania Avenue SE Washington CITY STATE Depository, etc.	
Name of Bank, Mailing Address Name of Bank,	Depository, etc. Bank of America 201 Pennsylvania Avenue SE Washington CITY STATE Depository, etc.	