FEC

STATEMENT OF

PAGE 1/5

ORGANIZATION FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Siemens Corporation PAC 300 New Jersey Avenue, NW ADDRESS (number and street) Suite 1000 (Check if address is changed) Washington 20001 DC CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS kaduncan@comerica.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 01 2015 C00353797 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. Elizabeth Reicherts Type or Print Name of Treasurer Elizabeth Reicherts [Electronically Filed] 10 2015 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 Only

Local 202-694-1100

	FFC Fo	rm 1 (Revised 02/2009)	Page 2				
TYP	E OF C	OMMITTEE	. wyo 2				
Car	ndidate	Committee:					
(a)	Ш	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.)					
Nam Cand	e of didate						
	didate / Affiliati	Office Sought: House Senate President	State				
(c)							
Nam Cand	e of didate						
Par	ty Con	Committee:					
(d)		This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.				
Poli	tical A	ction Committee (PAC):					
(e)	\times	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con-	nnected organization is a				
		X Corporation Corporation w/o Capital Stock	Labor Organization				
		Membership Organization Trade Association	Cooperative				
		X In addition, this committee is a Lobbyist/Registrant PAC.					
(f)		This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or committee. (i.e., nonconnected committee)					
		In addition, this committee is a Lobbyist/Registrant PAC.					
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)					
Join	t Fund	raising Representative:					
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political 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 to committees/organizations, none of which is an authorized committee of a federal candidate.	wo or more political				
	Com	Committees Participating in Joint Fundraiser					
	1.	FEC ID number					
	2.	FEC ID number					
	3.	FEC ID number					
	4.						

FEC Form 1 (Revised (02/2000)	Page 3					
Write or Type Committee Name		raye 3					
Siemens Corpo							
-	Organization, Affiliated Committee, Joint Fundraising Representative, or Leadershi	n DAC Sponsor					
-	organization, Anniated Committee, John Fundraising Representative, of Leadersin	p PAC Spoilsoi					
Siemens Corporation							
Mailing Address	527 Madison Avenue						
Mailing / Maross	8th Floor						
	New York NY 10022						
	CITY STATE Z	IP CODE					
_	SITE Z	II CODE					
Relationship: X Connected	d Organization Affiliated Committee Joint Fundraising Representative Lead	ership PAC Sponsor					
Custodian of Records: Ider books and records.	ntify by name, address (phone number optional) and position of the person in posse	ession of committee					
Comerica Bank PAC Services							
Full Name							
Mailing Address	P.O. Box 75000						
	MC2250						
	Detroit MI 48275-225	0 -					
Title or Desition	CITY	D CODE					
Title or Position	CITY STATE ZI	P CODE					
Recordkeeper	7 Telephone number 248 37	71 7045					
 Treasurer: List the name and any designated agent (e.g., a 	d address (phone number optional) of the treasurer of the committee; and the name assistant treasurer).	e and address of					
Full Name Elizabeth F of Treasurer							
Mailing Address	300 New Jersey Avenue, NW						
	Suite 1000						
	Washington DC 20001						
	CITY STATE ZI	P CODE					
Title or Position Treasurer	Tolophono number 202 43	4 4806					
I	Telephone number						

FEC For n	n 1 (Revised 02/2009)	Page 4
Full Name of Designated Agent	<u> </u>	
Mailing Address		
	CITY STATE	ZIP CODE
Title or Position	SIAIE SIAIE	ZII CODE
	Telephone number	
Name of Bank, [Comerica Bank	
	Detroit MI	48275
	CITY STATE	ZIP CODE
Name of Bank, [Depository, etc.	
Mailing Address		
	CITY STATE	ZIP CODE

: 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:

Update New Treasurer

Form/Schedule: Transaction ID: