FEC

STATEMENT OF

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ORGANIZATION FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Patriotic Americans PAC PO Box 242471 ADDRESS (number and street) (Check if address is changed) Charlotte 28224 NC CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS PatrioticAmericansPAC@gmail.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 06 2017 C00637009 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. Stoner, Ruth, Rochelle, , Type or Print Name of Treasurer Stoner, Ruth, Rochelle, , [Electronically Filed] 04 06 2017 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

	FEC Fo	rm 1 (Revised 02/2009)	Page 2
		OMMITTEE	
	naidate	Committee:	
(a)	Ш	This committee is a principal campaign committee. (Complete the candidate information below.)	
(b)	Ш	This committee is an authorized committee, and is NOT a principal campaign committee. (Compinformation below.)	plete the candidate
	ne of didate		
	didate y Affiliatio	Office Sought: House Senate President	State
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	District
	ne of didate		
Par	ty Con	nmittee:	
(d)		(National, State	Democratic, Republican, etc.) Party.
Pol	itical A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its cont	nected 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)			areasted fund or porty
(f)	×	This committee supports/opposes more than one Federal candidate, and is NOT a separate secommittee. (i.e., nonconnected committee)	gregated fulld of party
		In addition, this committee is a Lobbyist/Registrant PAC.	
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Joir	nt Fund	raising Representative:	
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate.	o or more political
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	o or more political
	Com	mittees Participating in Joint Fundraiser	
	1.	FEC ID number	
	2.	FEC ID number	
	3.	FEC ID number	
	4.		

1		
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Write or Type Committee Name		
Patriotic Americ	ans PAC	
6. Name of Any Connected C	Organization, Affiliated Committee, Joint Fundraising Representative, or	Leadership PAC Sponsor
NONE		
Mailing Address		
J		
	CITY STATE	ZIP CODE
		П
Relationship: Connected	d Organization Affiliated Committee Joint Fundraising Representative	Leadership PAC Sponsor
 Custodian of Records: Ider books and records. 	ntify by name, address (phone number optional) and position of the person	on in possession of committee
	th, Rochelle, ,	
Full Name	PO Box 242471	
Mailing Address		
	Charlotte	28224
	Chandle	
Title or Position	CITY STATE	ZIP CODE
Treasurer	Telephone number	
8. Treasurer: List the name and any designated agent (e.g., a	d address (phone number optional) of the treasurer of the committee; and assistant treasurer).	d the name and address of
Full Name Stoner, Ru	th, Rochelle, ,	
Mailing Address	PO Box 242471	
-		
	Charlotte NC	28224
	CITY STATE	ZIP CODE
Title or Position Treasurer		-
I	Telephone number	

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Full Name of Designated	1,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Agent		
Mailing Address		
	CITY STATE	ZIP CODE
Title or Position		
	Telephone number	
safety deposit b Name of Bank,	r Depositories: List all banks or other depositories in which the committee deposits funds, ho oxes or maintains funds. Depository, etc.	
safety deposit b Name of Bank,	oxes or maintains funds. Depository, etc. Capital One Bank	
safety deposit b	oxes or maintains funds. Depository, etc. Capital One Bank	
safety deposit b Name of Bank,	oxes or maintains funds. Depository, etc. Capital One Bank	2
safety deposit b Name of Bank,	Depository, etc. Capital One Bank 6400 Belcrest Road	ZIP CODE
safety deposit b Name of Bank,	Depository, etc. Capital One Bank 6400 Belcrest Road Hyattsville CITY STATE	
safety deposit b Name of Bank, Mailing Address	Depository, etc. Capital One Bank 6400 Belcrest Road Hyattsville CITY STATE	
safety deposit b Name of Bank, Mailing Address	Depository, etc. Capital One Bank 6400 Belcrest Road Hyattsville CITY STATE	ZIP CODE
safety deposit b Name of Bank, Mailing Address	oxes or maintains funds. Depository, etc. Capital One Bank 6400 Belcrest Road Hyattsville CITY STATE Depository, etc.	ZIP CODE
safety deposit b Name of Bank, Mailing Address Name of Bank,	oxes or maintains funds. Depository, etc. Capital One Bank 6400 Belcrest Road Hyattsville CITY STATE Depository, etc.	ZIP CODE
safety deposit b Name of Bank, Mailing Address Name of Bank,	oxes or maintains funds. Depository, etc. Capital One Bank 6400 Belcrest Road Hyattsville CITY STATE Depository, etc.	ZIP CODE

: 97 A = G7 9 @ G5 B9 CI G H9 L H F 9 @ 5 H9 8 HC 5 F 9 DC F H Z G7 < 98 I @ C F → H9 A = N 5 H = C B

Form/Schedule: F1N Transaction ID:

This committee intends to make independent expenditures, and consistent with the U.S. Court of Appeals for the District of Columbia Circuit decision in SpeechNow v. FEC, it therefore intends to raise funds in unlimited amounts. This committee will not use those funds to make contributions, whether direct, in-kind, or via coordinated communications, to federal candidates or committees.

Form/Schedule: Transaction ID: