Only

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STATEMENT OF **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. TRADE FINANCIAL CORPORATION PAC 671 NORTH GLEBE ROAD ADDRESS (number and street) **BALLSTON TOWER** (Check if address is changed) ARLINGTON 22203 VACITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS EtradePAC@myfecnotices.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 03 2014 C00356345 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. Doug Hollowell Type or Print Name of Treasurer Doug Hollowell [Electronically Filed] 12 2014 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

FF	C Form 1 (Revised 02/2009)	Page 2
TYPE C	OF COMMITTEE	1 ago 2
Candi	date Committee:	
(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. (Cominformation below.)	plete the candidate
Name o Candida		
Candida Party Af		State
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name o Candida		
Party	Committee:	(Damasan, 1)
(d)	This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.
Politic	al Action Committee (PAC):	
(e)	X This committee is a separate segregated fund. (Identify connected organization on line 6.) Its cor	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)	This committee supports/opposes more than one Federal candidate, and is NOT a separate se 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 F	undraising Representative:	
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for to committees/organizations, at least one of which is an authorized committee of a federal candidate.	vo 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.	vo or more political
(Committees Participating in Joint Fundraiser	
	. FEC ID number	
2	o. FEC ID number	
(B. FEC ID number	
4	I.	

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FEC Form 1 (Davised)	02/2000)	Dogo 2
FEC Form 1 (Revised) Write or Type Committee Name		Page 3
	ANCIAL CORPORATION PAC	
6. Name of Any Connected C	Organization, Affiliated Committee, Joint Fundraising Repres	sentative, or Leadership PAC Sponsor
E*Trade Financial Cor	poration	
Mailing Address	135 E. 57th Street	
3		
	New York	NY 10022
	CITY	STATE ZIP CODE
Relationship: X Connected	d Organization Affiliated Committee Joint Fundraising Re	representative Leadership PAC Sponsor
		_
books and records.	ntify by name, address (phone number optional) and position	of the person in possession of committee
Judy Stok Full Name	er	
Mailing Address	671 North Glebe Road	
Walling Address	Ballston Tower	
	Arlington	VA , 22203
Title or Position	CITY S	STATE ZIP CODE
Assistant Treasurer	Telephone number	er 703 - 236 - 8925
8. Treasurer: List the name an any designated agent (e.g., a	d address (phone number optional) of the treasurer of the coassistant treasurer).	ommittee; and the name and address of
Full Name Doug Hollo	owell	ı
of Treasurer	.074 North Olaha B.I	
Mailing Address	671 North Glebe Rd	
	Ballston Tower	
	Arlington	VA 22203
	CITY	TATE ZIP CODE
Title or Position Treasurer	1 =	703 236 8717

703 |-|

Telephone number

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FEC Forr	1 1 (Revised 02)	2009)													Рас	je 4
Full Name of Designated Agent	Judy Stoker															
	67	North (Glebe R	oad												
Mailing Address	Ba	Iston To	ower													
	Ar	ington			1 1					VA		22	2203	1 1	-	1 1
				CIT	Υ					STATE	<u> </u>			ZIP	CODE	
Title or Position Assistant Treas	ırer						Te	lepho	ne nu	mber	70	03	- _	236		8925
Banks or Other safety deposit bo Name of Bank, I	xes or maintains	st all ba funds.	anks or	other de	eposito	ories in	which	the c	ommit	tee dep	osits t	unas	, HOIC	ds acc	ounts,	rents
safety deposit bo	Depository, etc.	funds.		other do	eposito	ories in	which	the c	ommit	tee dep	osits f	unas	, rioic	ds acc	ounts,	rents
safety deposit bo	Depository, etc.	funds.		other de	eposito	ories in	which	the c	ommit	tee dep	osits f	unas	, HOIC	ds acc	ounts,	rents
safety deposit be Name of Bank, I	Depository, etc.	funds.		other de	eposito	ories in	which	the c	ommit	tee dep	osits f	unas	, Hold	ds acc	ounts,	rents
safety deposit bo Name of Bank, I	E*Trade B	funds.		other de	eposito	ories in	which	the c	ommit	tee dep			2110-9		ounts,	rents
safety deposit bo Name of Bank, I	E*Trade B	ank D. Box 1		other de		ories in	which	the c	ommit					9949	counts,	
safety deposit be Name of Bank, I	E*Trade B	ank D. Box 1				ories in	which	the c	ommit	VA				9949		
safety deposit be Name of Bank, I	E*Trade B	ank D. Box 1 errifield	542	CIT						VA			2110-9	9949 ZIP		
safety deposit be Name of Bank, I	P.C. Depository, etc.	ank D. Box 1 errifield	542	CIT						VA			2110-9	9949 ZIP		
Safety deposit be Name of Bank, I	P.C. Depository, etc.	ank D. Box 1 errifield	542	CIT						VA			2110-9	9949 ZIP		
Name of Bank, I	P.C. Depository, etc.	ank D. Box 1 errifield	542	CIT						VA	_		2110-9	9949 ZIP		