PAGE 1/4 STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) over the lines. is changed) National Automatic Merchandising Association Political Action Committee (NAMA-PAC) 20 North Wacker Drive ADDRESS (number and street) **Suite 3500** (Check if address is changed) Chicago 60606 IL CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS dmathews@vending.org (Check if address is changed) Optional Second E-Mail Address edell@vending.org COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2013 C00235762 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. Mr. Dan H. Mathews Jr. Type or Print Name of Treasurer Mr. Dan H. Mathews Jr. [Electronically Filed] 05 16 2013 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. FEC FORM 1

Office			For further information contact:
Use			Federal Election Commission
			Toll Free 800-424-9530
Only			Local 202-694-1100

F	FC Fo	rm 1 (Revised 02/2009)	Page 2
		OMMITTEE	i uyo 🚣
Can	didate	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. (Con information below.)	nplete the candidate
Name Cand			
Cand Party	idate Affiliati	Office Sought: House Senate President	State
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name Cand			
Part	y Con	nmittee:	
(d)		This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.
Polit	tical A	ction Committee (PAC):	
(e)	X	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con-	nnected organization is a
		Corporation Corporation w/o Capital Stock	Labor Organization
		Membership Organization X 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 scommittee. (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	t Fund	raising 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.	wo or more political
(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.	vo or more political
	Com	mittees 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			. 3
National Automatic	Merchandising Association I	Political Action Con	nmittee (NAMA-PAC)
	Organization, Affiliated Committee, Joint F		
National Automatic Me	erchandising Association		
Mailing Address Relationship: X Connecte	20 North Wacker Drive Suite 3500 Chicago CITY d Organization Affiliated Committee	IL STATE Joint Fundraising Representat	60606 ZIP CODE Leadership PAC Sponsor
Custodian of Records: Ide books and records.	ntify by name, address (phone number op	tional) and position of the pe	rson in possession of committee
Full Name			
Mailing Address			
Title or Position	CITY	STATE	ZIP CODE
		Telephone number	
Treasurer: List the name an any designated agent (e.g.,	d address (phone number optional) of the assistant treasurer).	treasurer of the committee;	and the name and address of
Full Name Mr. Dan H	. Mathews Jr.		
Mailing Address	20 North Wacker Drive		
	Suite 3500		
	Chicago		60606
Title or Position	CITY	STATE	ZIP CODE
		Telephone number	

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Full Name of Designated		
Agent		
Mailing Address		
	CITY STATE	E ZIP CODE
Title or Position		
	Telephone number	
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