FEC

STATEMENT OF ORGANIZATION

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FORM 1		U	KGANIZ.	AHO	VIN .					
							(Office Use O	nly	
NAME OF COMMITTEE (ir	ı full)		Check if name s changed)		ple:If typing, type the lines.	12F	E4M5			
NATIONAL ASS	SOCIATIO	N OF F	PLUMBING-HE	EATING	-COOLING CO	NTRAC	TORS F	PAC AK	A PHCC	-PAC
ADDRESS (number a	nd street)	180 S W	ASHINGTON, Suite	100						
			CHURCH			VA STAT		2046 Z	IP CODE	
COMMITTEE'S E-MA	AIL ADDRES	S								
(Check if a is changed		staylor	@naphcc.org							
		Optional	Second E-Mail Ad	Idress						1
COMMITTEE'S WEB (Check if a is changed	address	RESS (UI	RL)							
2. DATE 1) / Y	2014							
3. FEC IDENTIFIC	CATION NUI	MBER ▶	C c	00157875						
4. IS THIS STATEM	MENT X	NEW	(N) OR		AMENDED (A)					
I certify that I have e	examined this	s Stateme	ent and to the best	t of my kr	owledge and belief	it is true,	correct an	id complete	Э.	
Type or Print Name	of Treasurer	David G	essner							
Signature of Treasure	ər <i>David</i> (Gessner		Į.	Electronically Filed]	Date	10	05)14
NOTE: Submission of					ect the person signing			e penalties	of 2 U.S.C	. §437g.
Office Use Only				-	For further information Federal Election Commis Foll Free 800-424-9530 Focal 202-694-1100				FORM 1 d 06/2012)	

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	COMMITTEE	i aye 🚣						
Candidat	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. (Complete the cainformation below.)							
Name of Candidate								
Candidate Party Affiliat	ion Office Sought: House Senate President	State						
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.							
Name of Candidate								
Party Cor	Committee:							
(National, State (Democ								
Political A	Action Committee (PAC):							
(e) X	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 X Trade Association	Cooperative						
	In addition, this committee is a Lobbyist/Registrant PAC.							
(f)	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	Committees Participating in Joint Fundraiser							
1.	FEC ID number							
2.	FEC ID number							
3.	FEC ID number							
4.								

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W	/rite or Type Committee Name		
١	NATIONAL ASSOCIATI	ON OF PLUMBING-HEATING-COOLING CONTRACTORS PAC AP	KA PHCC-PAC
6.	Name of Any Connected C	Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership	PAC Sponsor
N.	ATIONAL ASSOCIATIO	N OF PLUMBING-HEATING-COOLING CONTRACTORS PAC AKA F	PHCC-PAC
L	Mailing Address	180 S WASHINGTON, Suite 100	
		FALLS CHURCH VA 22046	
		CITY STATE ZIF	CODE
	Relationship: X Connected	d Organization Affiliated Committee Joint Fundraising Representative Leader	rship PAC Sponsor
'.	Custodian of Records: Ider books and records.	ntify by name, address (phone number optional) and position of the person in posses	ssion of committee
	Full Name		
	Mailing Address		
	Title or Position	CITY STATE ZIF	CODE
		Telephone number	
3.	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).	and address of
	Full Name David Gest of Treasurer	sner	
	Mailing Address	180 South Washington Street	
		Falls Church VA 22046	
	Title or Position	CITY STATE ZIP	CODE
_	CFO		8100

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Full Name of Designated Agent							
Mailing Address							
•							
	CITY STATE	ZIP CODE					
Title or Position	SIAIE						
	Telephone number						
	safety deposit boxes or maintains funds. Name of Bank, Depository, etc. Wells Fargo Bank 1970 Chain Bridge Road						
•							
	McLean VA 2210	02					
	CITY STATE	ZIP CODE					
Name of Bank,	Depository, etc.						
Mailing Address							
	CITY STATE	ZIP CODE					