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. American Psychological Association Practice Organization Political Action Committee (APAPO-PAC) PO Box 65353 ADDRESS (number and street) (Check if address is changed) Washington 20035-DC CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS Outsourcing@Aristotle.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 05 2016 C00522094 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. Mason, David, , , Type or Print Name of Treasurer Mason, David, , , [Electronically Filed] 12 08 2016 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

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		OMMITTEE					
	ididate	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.)	lete the candidate				
Nam Cand	e of didate						
	didate / Affiliation	Office Sought: House Senate President	State				
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	District				
Nam Cand	e of didate						
Par	ty Con	nmittee:	_				
(d)		· · · · · · · · · · · · · · · · · · ·	Democratic, Republican, etc.) Party.				
Poli	tical A	ction Committee (PAC):					
(e)	×	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization on line 6.	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)		This committee supports/opposes more than one Federal candidate, and is NOT a separate secommittee. (i.e., nonconnected committee)	gregated 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.)					
Join	t 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				
	Committees 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 Name	raye 3
American Psychological Association Practice Organization Political Action Committee	(ADADO-DAC)
	·
6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership	p PAC Sponsor
American Psychological Association Practice Organization (APAPO)	
750 1st St NE	
Mailing Address	
Washington DC 20002-424 CITY STATE Z	IP CODE
Relationship: X Connected Organization Affiliated Committee Joint Fundraising Representative Lead	ership PAC Sponsor
 Custodian of Records: Identify by name, address (phone number optional) and position of the person in posses books and records. 	ession of committee
Mason, David, , ,	1
Full Name205 Pennsylvania Avenue, SE	
Mailing Address	
Washington DC 20003-116	4
Title or Position CITY STATE ZI	P CODE
Custodian of Records Telephone number 202 - 54	8345
3. Treasurer: List the name and address (phone number optional) of the treasurer of the committee; and the name any designated agent (e.g., assistant treasurer).	e and address of
Full Name Mason, David, , , of Treasurer	
Mailing Address 205 Pennsylvania Avenue, SE	
Washington DC 20003-116	4
Title or Position	P CODE
Treasurer 202 54	3 8345

1 20 1011	n 1 (Revised 02/2	009)				Page 4
Full Name of Designated Agent						
Mailing Address						
		CITY		STATE		ZIP CODE
Title or Position						
			Telephone nu	mber		
Name of Bank, Mailing Address	BB&T 300	unds. S Washington St		VA VA	22314	
Name of Bank,	Depository, etc. BB&T 300	S Washington St		VA VA STATE		ZIP CODE
Name of Bank,	Depository, etc. BB&T 300 Alex	S Washington St				ZIP CODE
Name of Bank, Mailing Address	Depository, etc. BB&T 300 Alex	S Washington St				ZIP CODE
Name of Bank, Mailing Address	Depository, etc. BB&T 300 Alex	S Washington St				ZIP CODE
Name of Bank, Mailing Address Name of Bank,	Depository, etc. BB&T 300 Alex	S Washington St				ZIP CODE
Name of Bank, Mailing Address Name of Bank,	Depository, etc. BB&T 300 Alex	S Washington St				ZIP CODE

: 97 'A = G7 9 @ G B9 CI G'H9 LH F9 @ 5 H98 'HC '5 'F9 DC FHZ G7 < 98 I @ 'C F' + H9 A = N5 H+ C B

Form/Schedule: F1N Transaction ID:

This report is amended to disclose a change to the Committee's Treasurer and Custodian of Records.

Form/Schedule: Transaction ID: