FEC FORM 1

STATEMENT OF ORGANIZATION

FORM 1		ORGA	NIZA	HOI	V						
		(See	instructions	;)				Of	fice use only		
NAME OF COMMITTEE	(in full)	(Check if is change		Exam over t	ple: If typying, he lines	type	12FE4	M5			
MODERATI	DEMOC	RATS PAC		11				111			
	шш							ш		ш	
ADDRESS (number	and street)	303 Massach	usetts Av	enue,	NE 					ш	
(Check if add is changed)	ress	WASHINGTO	N				PC	 	20002]-L	
			(CITY			STATE		ZIP (ODE 4	•
COMMITTEE'S E-	MAIL ADDR	ESS (Please provide o									
(Check if addition is changed)	ress	holly@camp	aigncomp	oliance	.net					ш	
										ш	
COMMITTEE'S W	EB PAGE A	DDRESS (URL)									
(Check if add	Iress	none	<u> </u>					1 1 1			
is changed)						1 1 1			111		
2. DATE	0 3 / I	14 / Y Y Y Y Y 2011	Y								
3. FEC IDENTIF	ICATION N	JMBER	C	C004	136022						
4. IS THIS STAT	TEMENT	X NEW (N)	OR		AMENDE	O (A)					
I certify that I have ex	camined this	Statement and to the best	of my knowl	edge and	belief it is true,	correct and	d complete				
•		Ot a selection	Pattersor	J			·				
Type or Print Name	e of Treasure	Stephen	ratter 501	<u> </u>							
Signature of Treas	urer El <u>ec</u>	tronically Filed by St	ephen Pa	ttersor	1		Date	0 3 /	15	Y	2 0 1 1
NOTE: Submission	of false, erron	eous, or incomplete infor							of 2 U.S.C.	§437g.	
Office Use Only					For further info Federal Election Toll Free 800-42 Local 202-694-1	Commissi 24-9530			FEC F		

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5.	TYPE OF C	OMMITTEE (Check One)	
	Candidate	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 information below.)	the candidate
	Name of Candidate		
	Candidate Party Affiliat	ion Office Sought: House Senate President	State District
	(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
	Name of Candidate		
	Party Com		
	(d)	(National, State This committee is a (or subordinate) committee of the	(Democratic, Republican,etc.) Party.
	Political Ac	tion Committee (PAC):	
	(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connec	ted organization is a:
		Corporation Corporation w/o Capital Stock	abor Organization
		Membership Organization Trade Association	Cooperative
	(n)	In addition, this committee is a Lobbyist/Registrant PAC.	
	(f) X	This committee supports/opposes more than one Federal candidate, and is NOT a separate segregat committee. (i.e., nonconnected committee)	ed fund or party
		X In addition, this committee is a Lobbyist/Registrant PAC.	
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
	Joint Fundra	aising 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.	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.	or more political
	Con	nmittees Participating in Joint Fundraiser	
		1. FEC ID number	
		2. FEC ID number C	
		3. FEC ID number C	0 0 0 0
		4. FEC ID number C	

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W	rite or Type Committee Name					
	MODERATE DEMOCRA	TS PAC				
6.	Name of Any Connected Org	anization, Affiliated Committee,	Joint Fundraising Represen	tative, or Leade	rship PAC Sponsor	
	NONE					
	Mailing Address					
						ш
		CITY▲		STATE A	ZIP CODE	
	Relationship:					
	Connected Organization	Affiliated Committee	Joint Fundraising Repr	esentative	Leadership PAC Spor	nsor
	Full Name Holly G Mailing Address	iarraputo 3242 Cummins	Way			
		Missoula		<u>MT</u>	59802	
	Title or Position ▼ Comptrolle	CITY A	Telephone num	STATE A	ZIP CODE A - <u>498</u> - 71	23
8.		and address (phone number designated agent (e.g., assist		of the commit	tee; and the	
	Full Name of Treasurer Stephe	n Patterson				
	Mailing Address	124 West Capit	ol Ave			
		Suite 1630				
		Little Rock		_AR	72201 –	
	Title or Position ♥	CITY A		STATE	ZIP CODE A	
	Treasurer		Telephone num	501	_ 537 _ 01	190

Full Name of Designated Agent Mailing Address								
Mailing Address								
Title or Decition W								
Title or Position ▼ CITY ▲ STATE ▲ ZIP CODE	: A							
Telephone number								
 Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rensafety deposit boxes or maintains funds. 	ts							
Name of Bank, Depository, etc.								
Wells Fargo								
Mailing Address 234 W. Main St.								
Mișsoula								
CITY A STATE A ZIP CODI	E Δ							
CITY △ STATE △ ZIP CODI	E Δ							
	E <u> </u>							
Name of Bank, Depository, etc.								
Name of Bank, Depository, etc.								