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FEC FORM

STATEMENT OF ORGANIZATION

2011 OCT 28 AM 10: 27 TFEC MAIL CENTER

PORIVI I				Office Use Only		
NAME OF COMMITTEE (in full)	(Check if name is changed)	Example:If typing, type over the lines.	12FE4M5			
FFEC PAC			· 			
ADDRESS (number and street)	GOD NEW H	IAMPISHI RIE A	1, VENUE,	νω, , , , , ,		
(Check if address	Bivit e 150 C	S. v. i t e. 150 0				
is changed)	WAS HI NOTO	N	1014	20037		
		CITY	STATE	ZIP CODE		
COMMITTEE'S E-MAIL ADDI	RESS (Please provide only one e	e-mail address)				
(Check if address	BIMBERGIAM	np pof whaw.	com			
is changed)						
COMMITTEE'S WEB PAGE	ADDRESS (URL)					
(Check if address	N/A					
is changed)						
2. DATE O / 12	27 201					
3. FEC IDENTIFICATION	NUMBER C	, an prog eogr apion of the progeographic services of the serv				
4. IS THIS STATEMENT	NEW (N) OR	AMENDED (A)				
I certify that I have examined	I this Statement and to the bes	t of my knowledge and belief	it is true, correct	and complete.		
Type or Print Name of Treason	urer Williamg.	Imbergamo				
Signature of Treasurer	103		Date L	Zż Zoi i		
NOTE: Submission of false, erro	oneous, or incomplete information ANY CHANGE IN INFORMATION	may subject the person signing		the penalties of 2 U.S.C. §437g.		
Office Use Only		For further Information Federal Election Commis Toll Free 800-424-9530 Local 202-694-1100		FEC FORM 1 (Revised 02/2009)		

TYPE OF COMMITTEE 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 the candidate information below.)				
	e of didate					
	didate: y Affiliat	Office reserving State				
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.				
Nam Can	e of didate					
Par	ty Cor	nmittee:				
(d)	(5°) Led	This committee is a (National, State (Democratic, Republican, etc.) Party.				
Pol	itical A	action Committee (PAC):				
(e)	X	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected 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)	14 (1) 14 (2)	This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)				
	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	draising Representative:				
(g)	1.0	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.				
(h)	Г ч Е	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.				
	Com	mittees Participating in Joint Fundraiser				
	1.	FEC ID number C				
	2.	FEC ID number C				
	3.	FEC ID number: C				
	4.	FEC ID number				

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Write or Type Committee Na	ame				
6. Name of Any Connecte	d Organization, Affiliated Committee, Joint Fundralsing Represe	entative, or Leadership PAC Sponsor			
FIEIDIELEAL IZ	plees the residual recommendation	om			
Mailing Address	600 NEW HAMPISHILLE AVE	e			
	SV11 HE B1001111111111				
	WASHINGTION	DC 20037-			
	***************************************	STATE ZIP CODE			
Relationship: Connec	cted Organization Affiliated Committee Joint Fundraising Re	presentative Leadership PAC Sponsor			
 Custodian of Records: I books and records. 	dentify by name, address (phone number optional) and position	of the person in possession of committee			
Full Name WI	-LIAM G. ILMBERGAMO				
Mailing Address	600 NEW HAMPSHILLE AVA	e NW			
	Sv.i.t. & 15,00				
	WASHINGTON,	PC 2003 7			
Title or Position	CITY ST	TATE ZIP CODE			
	Telephone number	202-518-6310			
3. Treasurer: List the name any designated agent (e.g.	and address (phone number optional) of the treasurer of the co	mmittee; and the name and address of			
Full Name of Treasurer	LI AM GI. I MUERSAMO				
Mailing Address	600 NEW HAMPSHIRE INV	<u> </u>			
	5 V 1 + C 500 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				
	<u> </u>	D_C			
Title or Position		, [2,0,2]-[5,1,8]-[6,3,1,0			

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Full Name of				
Designated Agent		111		
Mailing Address				
	CITY	STATE	ZIP CODE	
Title or Position				
	Telephone r	number		
Banks or Other Deposit safety deposit boxes or n	t orles: List all banks or other depositories in which the comr naintains funds.	nittee deposits	funds, holds accounts, rents	
Name of Bank, Depositor				
PN	Z BANK, , , , , , , , , , , , , , , , , , ,			
Mailing Address	ailing Address [2,6,6,0, 1,1,4,1,1,1,1,1,1,1,1,1,1,1,1,1,1,1,1,			
	WASHINGTON	Dia	20037	
	CITY	STATE	ZIP CODE	
Name of Bank, Depositor	ry, etc.			
Mailing Address				
		1 1 1 1		
			<u> </u>	
	CITY	STATE	ZIP CODE	

Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS The FEC added this page to the end of this filing to indicate how it was received. **Date of Receipt Hand Delivered Postmarked USPS First Class Mail** Postmarked (R/C) **USPS** Registered/Certified **Postmarked USPS Priority Mail** Delivery Confirmation[™] or Signature Confirmation[™] Label **Postmarked USPS Express Mail** Postmark Illegible No Postmark Shipping, Date Fed G Overnight Delivery Service (Specify): **Next Business Day Delivery Date of Receipt** Received from House Records & Registration Office **Date of Receipt** Received from Senate Public Records Office **Date of Receipt** Received from Electronic Filing Office **Date of Receipt or Postmarked** Other (Specify):

DATE PREPARED

(3/2005)