**FEC** 

## **STATEMENT OF**

FORM 1	ORGANIZ	ZATION		
i Oitin i	(See instruct	tions)		Office use only
NAME OF COMMITTEE (in	full) (Check if name is changed)	Example: If typying, type over the lines	12FE4M5	1 1
INFORMATIO	N TECHNOLOGY INDUSTRY CC	PUNCIL POLITICAL ACTIO	N COMMITTEE	(1-
ADDRESS (number and	street) 1101 K Street, NW		<u> </u>	1111111
(Check if addres	Suite <sub>1</sub> 610			
X is changed)	WASHINGTON		PC	20005
		CITY▲	STATE▲	ZIP CODE ▲
COMMITTEE'S E-MA	IL ADDRESS (Please provide only one			
(Check if addressis changed)	s vwinpisinger@con	ncast.net		
,				
(Check if addres is changed)	PAGE ADDRESS (URL)  S  LIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII			
2. DATE <b>M</b> 0				
3. FEC IDENTIFICA	ATION NUMBER	C C00419036		
4. IS THIS STATEM	MENT NEW (N) OR	X AMENDED (A)		
I certify that I have exam	ined this Statement and to the best of my k	nowledge and belief it is true, corre	ct and complete	
·	Dust Winson		·	
Type or Print Name of	Treasurer Bret Wincup			
Signature of Treasure	Electronically Filed by <b>Bret Wir</b>	ncup	Date 0 6	/ 16 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
NOTE: Submission of fa	llse, erroneous, or incomplete information n	nay subject the person signing this		
Office		For further informat		
Use		Federal Election Com Toll Free 800-424-95	nmission	FEC FORM 1 (Revised 02/2009)

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5.			OMMITTEE (Check One) 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.)					
	Name Candi							
	Candi Party	idate Affiliatio	on Office House Senate President	State District				
	(c)	(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.						
	Name Candi							
	Party	Comm						
	(d)		This committee is a (National, State (or subordinate) committee of the	(Democratic, Republican,etc.) Party.				
	Political Action Committee (PAC):							
	(e) X	X	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected	d organization is a:				
			Corporation Corporation w/o Capital Stock La	bor Organization				
			X Membership Organization Trade Association Co	poperative				
			X In addition, this committee is a Lobbyist/Registrant PAC.					
	(f)		This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated committee. (i.e., nonconnected committee)	d 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.)					
	loint E	Eundra						
		Joint Fundraising Representative:						
	(g)	Ш	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)		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.					
		Comi	mittees Participating in Joint Fundraiser					
			1. FEC ID number					
			2. FEC ID number					
			3. FEC ID number					
			FEC ID number					

Write or Type Committee Name

	INFORMATION TECHNO	DLOGY INDUSTRY COUNCIL POLIT	FICAL ACTION COMMITTEE (	ITI PAC)		
6.	Name of Any Connected Org	ganization, Affiliated Committee, Joint Fu	undraising Representative, or Lead	dership PAC Sponsor		
L	INFORMATION TECHNOL	LOGY INDUSTRY COUNCIL POLITI	CAL ACTION COMMITTEE (I	TI <sub>,</sub> PAC)		
	Mailing Address	1101 K Street, NW				
	3	Suite 610				
		WASHINGTON		20005   _ [		
		CITY▲	STATE ▲	ZIP CODE A		
	Relationship:			1		
	X Connected Organization	Affiliated Committee	Joint Fundraising Representative	Leadership PAC Sponsor		
	possession of Committee  Full Name  Mailing Address	L. Winpisinger 315 Inspiration Lane				
		Gaithersburg		20878		
	Title or Position ▼  Bookkeepe	CITY A	STATE Telephone number 301	ZIP CODE <u>A</u> _ 947 _ 0278		
8.	<b>Treasurer:</b> List the name and address (phone number optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).					
	Full Name of Treasurer  Bret W	lincup				
	Mailing Address	1101 K Street, NW				
		Suite 610				
		Washington	DC	20005		
	Title or Position ♥	CITY	STATE <b>▲</b>	ZIP CODE A		
	Treasurer		Telephone number	626 5751		

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Full Name of Designated Agent						
Mailing Address						
Title or Position ▼	CITY A	STATE A	ZIP CODE A			
	Tele	ephone number				
Banks or Other Depositori safety deposit boxes or main	Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.					
Name of Bank, Depository, 6	Name of Bank, Depository, etc.					
Banl	k of America					
Mailing Address	PO Box 25118					
	Tampa	FL	33622   _ [			
	CITY 🗻	STATE⊿	ZIP CODE 🛕			
Name of Bank, Depository, e	etc.					
Mailing Address						