PAGE 1/4 STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) over the lines. is changed) Center for Sportfishing Policy Political Action Committee aka Center PAC 1201 Pennsylvania Avenue ADDRESS (number and street) Suite 800 (Check if address is changed) Washington 20004 DC CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS mklesher@wms-jen.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2019 C00435024 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. Lesher, Meredith, , , Type or Print Name of Treasurer Lesher, Meredith, , , [Electronically Filed] 80 16 2019 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. FEC FORM 1

Office			For further information contact:
Use			Federal Election Commission
Only			Toll Free 800-424-9530 Local 202-694-1100
,			LUCAI 202-094-1100

FEC F	Form 1 (Revised 02/2009)	Page <b>2</b>				
	COMMITTEE te 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 of Candidate						
Candidate Party Affilia	ation Sought: House Senate President	State				
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.					
Name of Candidate						
Party Co	ommittee:  (National, State (Dem	nocratic,				
(d)		iblican, etc.) Party				
Political	Action Committee (PAC):					
(e) <b>x</b>	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected	ed organization is				
	Corporation Corporation w/o Capital Stock Lat	oor Organization				
	Membership Organization Trade Association Co	operative				
	In addition, this committee is a Lobbyist/Registrant PAC.					
(f)	This committee supports/opposes more than one Federal candidate, and is NOT a separate segreg-committee. (i.e., nonconnected committee)	ated 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 Fur	ndraising Representative:					
(g)	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 committees/organizations, none of which is an authorized committee of a federal candidate.	more political				
Co	mmittees Participating in Joint Fundraiser					
1.	FEC ID number C					
2.						
۷.						
3.						

Title or Position Treasurer

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FEC <b>Form 1</b> (Revise	ed 02/2009)	Page <b>3</b>
Write or Type Committee Na		
Center for Spo	rtfishing Policy Political Action Committee	aka Center PAC
<del>-</del>	d Organization, Affiliated Committee, Joint Fundraising Representative, or	
Center for Sportfishi	ng Policy	
Mailing Address	855 Audubon Avenue	
	Baton Rouge LA	70806
	CITY STATE	ZIP CODE
Relationship: x Connec	cted Organization Affiliated Committee Joint Fundraising Representative	e Leadership PAC Sponsor
books and records.	dentify by name, address (phone number optional) and position of the pers	son in possession of committee
Mailing Address	701 8th Street, NW Suite 500	
	Washington	20001
Title or Position	CITY STATE	ZIP CODE
	Telephone number	2 659 8201
3. <b>Treasurer:</b> List the name any designated agent (e.g	and address (phone number optional) of the treasurer of the committee; arg., assistant treasurer).	nd the name and address of
Full Name Lesher, of Treasurer	Meredith, , ,	
Mailing Address	701 8th Street, NW	
	Suite 500	
	Washington	20001

659 |-[

8201

202

Telephone number

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Full Name of Designated		- 1
Agent		
Mailing Address		
	CITY STATE	ZIP CODE
Title or Position		1 1
	Telephone number	
Mailing Address	Chain Bridge Bank  1445-A Laughlin Avenue  McLean  VA 22101	
	CITY STATE	ZIP CODE
Name of Bank,		
Mailing Address		