

FEC FORM 1

STATEMENT OF ORGANIZATION

Office Use Only

1. NAME OF COMMITTEE (in full) (Check if name is changed) Example: If typing, type over the lines.

12FE4M5

CONSERVATIVE AMERICA NOW PAC

ADDRESS (number and street) 424 EAST 10TH STREET

(Check if address is changed)

#3D

NEW YORK

CITY ▲

NY

STATE ▲

10009

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

(Check if address is changed)

whitneytd@gmail.com

Optional Second E-Mail Address

michael@dbcapitolstrategies.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address is changed)

conservativeamericanow.org

2. DATE

MM / DD / YYYY
06 / 06 / 2014

3. FEC IDENTIFICATION NUMBER ▶

C C00553313

4. 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.

Type or Print Name of Treasurer Michael Gruccio

Signature of Treasurer

Michael Gruccio

[Electronically Filed]

Date

MM / DD / YYYY
06 / 06 / 2014

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 Use Only

For further information contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-694-1100

FEC FORM 1
(Revised 06/2012)

5. 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.)

Name of Candidate _____

Candidate Party Affiliation 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 Committee:

- (d) This committee is a (National, State or subordinate) committee of the (Democratic, Republican, etc.) Party.

Political Action Committee (PAC):

- (e) 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) 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.)

Joint Fundraising 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 more political committees/organizations, none of which is an authorized committee of a federal candidate.

Committees Participating in Joint Fundraiser

1. _____ FEC ID number
2. _____ FEC ID number
3. _____ FEC ID number
4. _____ FEC ID number

Write or Type Committee Name

CONSERVATIVE AMERICA NOW PAC

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

NONE

Mailing Address

CITY

STATE

ZIP CODE

Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor

7. Custodian of Records: Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Full Name Michael Gruccio

Mailing Address 203 South Union Street

Suite 300

Alexandria VA 22314

Title or Position CITY STATE ZIP CODE

Assistant Treasurer Telephone number 202 210 5431

8. Treasurer: 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 Tyler Whitney

Mailing Address 424 East 10th Street

#30

New York NY 10009

Title or Position CITY STATE ZIP CODE

Treasurer Telephone number 517 420 3186

Full Name of Designated Agent Dan Backer

Mailing Address 203 South Union Street Ste 300 Alexandria VA 22314 CITY STATE ZIP CODE

Title or Position Telephone number 202 210 5431

9. 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, etc.

Access National Bank

Mailing Address 4221 Walney Road Suite 120 Chantilly VA 20151 CITY STATE ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F1A
Transaction ID :

This amendment filed to update bank address.

Form/Schedule:
Transaction ID:

FORM 1S -STATEMENT OF ORGANIZATION (Supplemental Page)

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, etc.

[ADDITIONAL]

Mailing Address

_____ - _____

CITY ▲

STATE ▲

ZIP CODE ▲

[ADDITIONAL]

Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

Mailing Address

_____ - _____

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship:

Connected Organization

Affiliated Committee

Joint Fundraising Representative

Leadership PAC Sponsor

[ADDITIONAL]

Designated Agent

Full Name

Michael Gruccio _____

Mailing Address

203 South Union Street _____

Suite 300 _____

Alexandria _____ VA 22314 - _____

Title or Position ▼

CITY ▲

STATE ▲

ZIP CODE ▲

Assistant Treasurer _____

Telephone number 202 - 210 - 5431

[ADDITIONAL]

Joint Fundraiser Participant

FEC ID number

C [_____]