Image# 11952761850 PAGE 1 / 5

FEC FORM 1		STATE								Offi	ce Use	Only			
NAME OF COMMITTEE (in	n full)	(Check if is changed			le:If typi e lines.	ng, type	[	12FI	Ξ4M5	_					
Kennamet	al Inc.	Employee	es for	Effec	tive	Gov	ern	me	nt	1 1	1 1	1 1	1 1	ı	, I
ADDRESS (number a	nd street)	1600 Technology	Way												
(Check if a	ddress														
is changed)		Latrobe						PA		1565	50		- 🗀		
			C	CITY			9	STATE			ZI	P CC	DE		
COMMITTEE'S E-MA	AL ADDRES		-		ess)										
(Check if address		erica.wright@ken		)     _											
is change	ed)														
COMMITTEE'S WEB	PAGE ADD	RESS (URL)													
(Check if															
is change	d)														
2. DATE 10	M / D 1	2011													
3. FEC IDENTIFIC	CATION NU	MBER	C co	0409938											
4. IS THIS STATE	MENT	NEW (N)	OR	×	AMEN	IDED (A	۸)								
I certify that I have e	examined thi	s Statement and to	the best	of my kno	wledge	and beli	ief it is	true,	correct	t and	comple	ete.			
Type or Print Name	of Treasurer	Erica Clayton Wri	ght												
Signature of Treasure	Erica Cla er	ayton Wright		[H	Electronic	ally Filea	il Da	ate	10	M /	31	] ′	Y	2011	Y
NOTE: Submission of		ous, or incomplete in									enaltie	s of 2	2 U.S.	C. §4	437g.

	Office Use		For further information contact: Federal Election Commission Tell Free 200 424 0520	FEC FORM 1
<u> </u>	Only		Toll Free 800-424-9530 Local 202-694-1100	(Revised 02/2009)

	FEC Fo	rm 1 (Revised 02/2009)	Page 2
		COMMITTEE  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. (Compleinformation below.)	ete the candidate
Nam Can	e of didate		
	didate y Affiliati	on Office Sought: House Senate President	State
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Nam Cand	e of didate		
Par	ty Con	nmittee:	
(d)		· · · · · · · · · · · · · · · · · · ·	emocratic, epublican, etc.) Party.
Poli	itical A	action Committee (PAC):	
(e)	$\times$	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected	ected organization is a
		X Corporation Corporation w/o Capital Stock	_abor 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 segrecommittee. (i.e., nonconnected committee)	egated 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.)	
Join	t Fund	Iraising 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
	Com	mittees Participating in Joint Fundraiser	
	1.	FEC ID number C	
	2.	FEC ID number	
	3.	FEC ID number	
	Δ		

Г	-			_
_	FEC Form 1 (Revised 0			Page 3
	Vrite or Type Committee Name			
	Kennametal Inc	. Employees for Effective (	Government	
6.	Name of Any Connected C	rganization, Affiliated Committee, Joint Fundraisi	ng Representative, or Leaders	hip PAC Sponsor
K	ennametal Inc.		<u> </u>	
L				
	Mailing Address	1600 Technology Way		
	a.m.g / taa. eee			
		Latrobe	PA 15650	
		CITY	STATE	ZIP CODE
		CITT	SIAIE	ZIP CODE
	Relationship: X Connected	Organization Affiliated Committee Joint Fun	draising Representative Le	adership PAC Sponsor
7.		tify by name, address (phone number optional) ar	nd position of the person in pos	ssession of committee
	books and records.			
	Erica Clay	on Wright		
		1600 Technology Way		
	Mailing Address			
		Latrobe	PA 15650	
	Title or Position	CITY	STATE	ZIP CODE
	, Custodian		, 724 , ,	539   5645
		Telepho	one number	
_	Transcript List the many one		on of the committee or and the com	
8.	any designated agent (e.g., a	I address (phone number optional) of the treasure ssistant treasurer).	er of the committee; and the na	ime and address of
	Full Name Erica Clayt of Treasurer	on Wright	1   1   1   1   1   1   1	
	Mailing Address	1600 Technology Way		1
	Maining Address			
		Latrobe	1 1 00 1 115650	
		CITY	PA 15650	ZIR CODE
	Title or Position	CITY	STATE	ZIP CODE
	Treasurer	Telepho	one number	539 - 5645

	<b>n 1</b> (Revised 02/2009)	Page <b>4</b>
Full Name of Designated	Mark J Olyarnik	
Agent		
Mailing Address	1600 Technology Way	
	Latrobe PA 15650	ZIP CODE
Title or Position Assistant Treasu	urer Telephone number 724 –	539 - 5447
Banks or Other safety deposit bo Name of Bank, [		olds accounts, rents
	RBS Citizens Bank	
Mailing Address	525 William Penn Place	
	Pittsburgh PA 15219	·
	Pittsburgh PA 15219 CITY STATE	ZIP CODE
Name of Bank, [	CITY STATE	
Name of Bank, D	CITY STATE	
Name of Bank, [	CITY STATE  Depository, etc.	
	CITY STATE  Depository, etc.	
	CITY STATE  Depository, etc.	

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## : 97 'A = G7 9 @ G B9 CI G'H9 LH F9 @ 5 H98 'HC '5 'F9 DC FHZ G7 < 98 I @ 'C F' + H9 A = N5 H+ C B

Form/Schedule: F1A
Transaction ID:

This amendment is being filed to discloses 1) New Treasurer and her related information 2) New Committee email 3) Removes a bank. Please update your records accordingly.

Form/Schedule: Transaction ID: