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FEC

STATEMENT OF **ORGANIZATION**

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NAME OF COMMITTEE (in	n full)	(Check if name is changed)	Example:If typing, type over the lines.	12FE4N	Managera injust deputera 15 Amerikan sebasandan pada
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ADDRESS (number a	ind street)	8,9,23 FIN	GERBOIARD R	2	
(Check if address is changed)		FREDERTC	<u>k</u>	VP)	21.70.4-
			CITY	STATE	ZIP CODE
COMMITTEE'S E-MA	AIL ADDRE	ESS (Please provide only one	e-mail address)		
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2. DATE	1 2	5 2012			
3. FEC IDENTIFIC	CATION N	IUMBER C.C.	0507017		
4. IS THIS STATE	MENT	NEW (N) OR	AMENDED (A)		
I certify that I have	examined t	this Statement and to the be	st of my knowledge and belief i	t is true, corr	ect and complete.
Type or Print Name	of Treasur	or Michael A. Mc	Ginley		
Signature of Treasur	er 👤	Mirhael A. Mis	2	Date 0	7 29 2011
NOTE: Submission of	false, error	•	n may subject the person signing		to the penalties of 2 U.S.C. §437g.
Office Use			For further information of Federal Election Commiss Toll Free 800-424-9530		FEC FORM 1 (Revised 02/2009)

Political Action Committee (PAC): (e)		FEC Fo	rm 1 (Revised 02/2009)	Page 2
(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 Corporation on line 6.) Its connected organization is a Lobbyte/Tegistrant PAC. (i) Candidate Candidate Candidate Condermittee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee) is a Lobbyte/Tegistrant PAC. (i) Candidate Candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee) is a Lobbyte/Tegistrant PAC. (i) Candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee) is a Lobbyte/Tegistrant PAC. (i) Candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee) is a Lobbyte/Tegistra				
(b)	С	endidate	Committee:	
Name of Candidate President District City This committee supports/opposes only one candidate, and is NOT an authorized committee. Name of Candidate Party Committee: (d)	(a		This committee is a principal campaign committee. (Complete the candidate information below	2.)
Candidate Parry Affiliation CE Candidate Parry Affiliation Ci Ci Ci 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 Republican, etc.) Party Political Action Committee (PAC): (e) This committee is a separate segregated fund. (identify connected organization on line 6.) Its connected organization or line 6.) Its connected organization or line 6.) Its connected organization or line 6.) In addition, this committee is a Lobbyist/Registrant PAC. In addition, this committee is a L	(b	o)	• • • • • • • • • • • • • • • • • • • •	nplete the candidate
Party Affiliation Committee Committee			DAVIO ROSS BRINKLEY	
Party Committee: (d)	_			06
Party Committee: (d) This committee is a	(c	;)	This committee supports/opposes only one candidate, and is NOT an authorized 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		_		
Political Action Committee (PAC): (e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a Corporation	P	arty Con		
(e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a Corporation	(d	n 🗌	5 9 ' 5	(Democratic, Republican, etc.) Party.
Corporation Corporation w/o Capital Stock Labor Organization Membership Organization Trade Association Cooperative	P	olitical A	ction Committee (PAC):	
Membership Organization	(e	»	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its co	nnected organization is a
In addition, this committee is a Lobbylst/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 Lobbylst/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 ie an authorized committee of a faderal 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 C FEC ID number C FEC ID number C			Corporation Corporation w/o Capital Stock	Labor Organization
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I	FEC Form	1 (Revised 0	2/2009)				Page 3
	Vrite or Type Com					×	. 490 0
6.	Name of Any (Connected O	rganization, A	ffiliated Committee	e, Joint Fundralsing	Representative, or	Leadership PAC Sponsor
ı	1						
L			1 1 1 1				
	Mailing Address			11111			
							<u> </u>
				CITY		STATE	ZIP CODE
	Relationship:	Connected	Organization	Affiliated Commit	tee Joint Fundra	ising Representative	Leadership PAC Sponsor
7.	Custodian of R books and recor		tify by name, a	ddress (phone num	ber optional) and p	position of the pers	on in possession of committee
		Mark	IAEI I	LHOOEN	MCGINLE	· y	
	Full Name			V. Patrick			
	Mailing Address		1			 	
			FRED.	RICK		1/1/0	12,1,7,0,1 - ,,,
	Title or Position		(1 - 1 - 1 - 1 - 1	CITY		STATE	ZIP CODE
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					relephone	number 5	
8.	Treasurer: List tany designated				al) of the treasurer o	f the committee; ar	nd the name and address of
	Full Name of Treasurer	Migh	ael A	Lndrew	Mc Ginley	<u>, , , , , , , , , , , , , , , , , , , </u>	
	Mailing Address		1365, N	1. Patrick	KIST		
			سب				
			FREDE				2 ₁ 70 -
	Title or Position	_		CITY		STATE	ZIP CODE
	1,5,69,5	45,67		<u> </u>	Telephone	number 50	1-694-741

FEC Form 1 (F	Revised 02/2009)		Page 4
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Full Name of Designated Agent			
Mailing Address		1_1_1_1	
	CITY	STATE	ZIP CODE
Title or Position		•	
	Telephone no	ımber <u> </u>	
D			
	ositories: List all banks or other depositories in which the comm	ittee deposits	funds, holds accounts, rents
safety deposit boxes of	or maintains funds.	ittee deposits	funds, holds accounts, rents
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Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DO The FEC added this page to the end of this filing to indicate ho	
Hand Delivered	Date of Receipt
USPS First Class Mail	Postmarked
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USPS Priority Mail	Postmarked
Delivery Confirmation™ or Signature Confirma	tion™ Label
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Overnight Delivery Service (Specify):	Shipping Date
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Received from Senate Public Records Office	Date of Receipt
Received from Electronic Filing Office	Date of Receipt
Other (Specify):	eipt or Postmarked
JM D	2/2/12
PREPARER (3/2005)	DATE PREPARED