

FEC FORM 1

STATEMENT OF ORGANIZATION

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

NBT PAC FEDERAL FUND

ADDRESS (number and street) 52 SOUTH BROAD STREET

(Check if address is changed)

NORWICH CITY NY 13815 ZIP CODE

COMMITTEE'S E-MAIL ADDRESS

(Check if address is changed) SHYLE@NBTBANK.COM

Optional Second E-Mail Address

KDEIERLEIN@NBTBCI.COM

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address is changed)

2. DATE

3. FEC IDENTIFICATION NUMBER C00207795

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 Shaunastar M. Hyle

Signature of Treasurer

[Handwritten Signature]

Date

03 / 01 / 2013

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.

Table with 5 columns and 1 row for 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)

13031043859

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 C _____

2. _____ FEC ID number C _____

3. _____ FEC ID number C _____

4. _____ FEC ID number C _____

13031043860

Write or Type Committee Name

NBT PAC FEDERAL FUND

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

Empty grid lines for organization name

Mailing Address

Empty grid lines for 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

SHAUNASTAR HYLE

Mailing Address

52 SOUTH BROAD STREET

NORWICH NY 13815

Title or Position

CITY

STATE

ZIP CODE

TREASURER

Telephone number

607-337-6069

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

SHAUNASTAR HYLE

Mailing Address

52 SOUTH BROAD STREET

NORWICH NY 13815

Title or Position

CITY

STATE

ZIP CODE

TREASURER

Telephone number

607-337-6069

13031043861

Full Name of Designated Agent

KATHIE DEIERLEIN

Mailing Address

52 SOUTH BROAD STREET

NORWICH NY 13815

CITY

STATE

ZIP CODE

Title or Position

ASST TREASURER

Telephone number

607-337-6246

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.

NBT BANK

Mailing Address

52 SOUTH BROAD STREET

NORWICH NY 13815

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

CITY

STATE

ZIP CODE

13031043862

Federal Election Commission
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The FEC added this page to the end of this filing to indicate how it was received.

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 3/7/13
PREPARER DATE PREPARED

13031043863