

FEC FORM 1

STATEMENT OF ORGANIZATION

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2016 JAN 15 AM 10:18

Office Use Only

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

12FE4M5

Engineering and Software System Solutions, Inc. Political Action Committee (ES3 PAC)

ADDRESS (number and street)

550 West C Street, Suite 1630

(Check if address is changed)

San Diego

CITY

CA

STATE

92101

ZIP CODE

COMMITTEE'S E-MAIL ADDRESS

(Check if address is changed)

teri.sgammato@es3inc.com

Optional Second E-Mail Address
lilian.flores@es3inc.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address is changed)

N/A

2. DATE

01 / 13 / 2016

3. FEC IDENTIFICATION NUMBER

C 00446948

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

LILIAN FLORES

Signature of Treasurer

[Handwritten Signature]

Date

01 / 13 / 2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 52 U.S.C. §30109. 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	C _____
2.	_____	FEC ID number	C _____
3.	_____	FEC ID number	C _____
4.	_____	FEC ID number	C _____

CONFIDENTIAL - NOT FOR DISTRIBUTION

Write or Type Committee Name

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

Two rows of empty grid boxes for entering the name of the organization.

Mailing Address

Three rows of empty grid boxes for entering the 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

One row of empty grid boxes for entering the full name.

Mailing Address

Three rows of empty grid boxes for entering the mailing address.

Title or Position

CITY

STATE

ZIP CODE

One row of empty grid boxes for entering the title or position.

Telephone number

Three rows of empty grid boxes for entering the telephone number.

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

LILIAN FLORES

Mailing Address

550 West C Street Suite 1630

San Diego

CA

92101

CITY

STATE

ZIP CODE

Title or Position
TREASURER

One row of empty grid boxes for entering the title or position.

Telephone number

619-338-0370

1-800-800-0000

Full Name of Designated Agent

[Grid for Full Name of Designated Agent]

Mailing Address

[Grid for Mailing Address Line 1]

[Grid for Mailing Address Line 2]

[Grid for Mailing Address Line 3]

CITY

STATE

ZIP CODE

Title or Position

[Grid for Title or Position]

Telephone number

[Grid for Telephone number]

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.

[Grid for Name of Bank, Depository, etc.]

Mailing Address

[Grid for Mailing Address Line 1]

[Grid for Mailing Address Line 2]

[Grid for Mailing Address Line 3]

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

[Grid for Name of Bank, Depository, etc.]

Mailing Address

[Grid for Mailing Address Line 1]

[Grid for Mailing Address Line 2]

[Grid for Mailing Address Line 3]

CITY

STATE

ZIP CODE

NONPROFIT CORPORATION

FEC MAIL CENTER
2016 JAN 15 AM 10:18

FedEx® Express

ORIGIN ID:SDMA (619) 338-0370
LILY FLORES
ES3
550 WEST C STREET
SUITE 1630
SAN DIEGO, CA 92101
UNITED STATES US

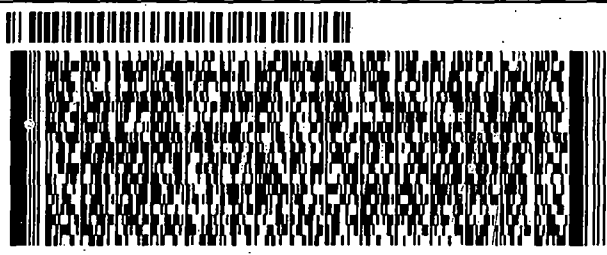
SHIP DATE: 14 JAN 16
ACTWGT: 0.50 LB
CAD: 7370947/INET3670

BILL SENDER

TO **LAURA SINRAM**
FEDERAL ELECTION COMMISSION
999 E ST NW

539110E6103100

WASHINGTON DC 20463
(202) 694-1157 REF: 300(U)
INV:
PO: DEPT:

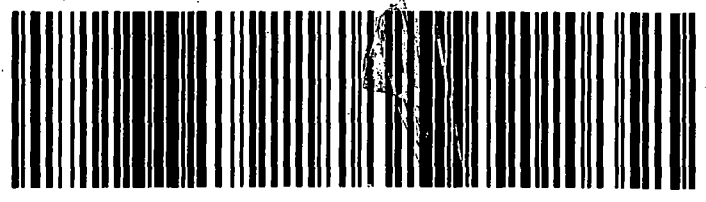


FRI - 15 JAN 10:30A
PRIORITY OVERNIGHT

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20463
DC-US IAD



Extremely Urgent

FZ
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Federal Election Commission
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<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

ER
 PREPARER

1/15/16
 DATE PREPARED

NON-PROFIT CORPORATION