FEC

STATEMENT OF

FORM 1	ORGANIZ	ATION		
1 Olliw 1	(See instructi	ons)		Office use only
NAME OF COMMITTEE (in f	(Check if name is changed)	Example: If typying, type over the lines	12FE4M5	
JJJ PAC				
ADDRESS (number and s	street) 1831 BAY STREET	SE 		
(Check if address				11111111
is changed)	WASHINGTON		PC	20003 -
		CITY▲	STATE▲	ZIP CODE 📥
COMMITTEE'S E-MAI	L ADDRESS (Please provide only one e	e-mail address)		
(Check if address is changed)	jjjpac@gmail.com			
is changed)		1111111		11111111
(Check if address is changed)	PAGE ADDRESS (URL)			
2. DATE 0 6	/ D D / Y Y Y Y A 2011			
3. FEC IDENTIFICATION	TION NUMBER	C C00449413		
4. IS THIS STATEM	ENT NEW (N) OR	X AMENDED (A)		
I certify that I have examin	ned this Statement and to the best of my kn	owledge and belief it is true, corre	ct and complete	
Type or Print Name of ⁻	Treasurer Thomas Robert	Theado		
Signature of Treasurer	Electronically Filed by Thomas	Robert Theado	Date 06	/ 21 / 2011
NOTE: Submission of fals	se, erroneous, or incomplete information m.	ay subject the person signing this	·	
Office Use Only		For further informat Federal Election Com Toll Free 800-424-95	nmission	FEC FORM 1 (Revised 02/2009)

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	COMMITTEE (Check One) 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 information below.)	the candidate					
Name of Candidate							
Candidate Party Affilia	tion Office House Senate President	State District					
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.						
Name of Candidate							
Party Com							
(d)	(National, State This committee is a (or subordinate) committee of the	(Democratic, Republican,etc.) Party.					
Political Ad	ction Committee (PAC):						
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected	ed organization is a:					
	Corporation Corporation w/o Capital Stock La	abor Organization					
	Membership Organization Trade Association C	ooperative					
	In addition, this committee is a Lobbyist/Registrant PAC.						
(f) X	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.						
	X In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)						
	aising 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.	r 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					
Cor	nmittees Participating in Joint Fundraiser						
	1. FEC ID number						
	2. FEC ID number						
	3. FEC ID number						
	FEC ID number C						

Write or Type Committee Name JJJ PAC 6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership Parameters. Rep. Betty S. Sutton Mailing Address 3825 Royal Rock Road	AC Sponsor				
6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership P. Rep. Betty S. Sutton 3825 Royal Rock Road	AC Sponsor				
Rep. Betty S. Sutton 3825 Royal Rock Road	AC Sponsor				
3825 Boyal Bock Boad					
Mailing Address 3825 Royal Rock Road					
Mailing Address 3825 Royal Rock Road					
Copley	321 _ [
CITY▲ STATE ▲ Z	ZIP CODE A				
Relationship:					
Connected Organization Affiliated Committee Joint Fundraising Representative X Leader	rship PAC Sponsor				
7. Custodian of Records: Identify by name, address, (phone number optional), and position of the personal possession of Committee books and records. Full Name 620 South Main Street	on in				
Mailing Address ———————————————————————————————————	020 South Main Street				
Amhearst OH 446	001				
	ZIP CODE 4 85 - 3793				
8. Treasurer: List the name and address (phone number optional) of the treasurer of the committee; an name and address of any designated agent (e.g., assistant treasurer). Full Name of Treasurer Thomas Robert Theado	nd the				
Mailing Address 620 South Main Street	620 South Main Street				
Amhearst OH 44	<u> 1001</u> –				
Title or Position ♥ CITY ▲ STATE ▲	ZIP CODE A				

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Full Name of Designated Agent	Anthony Bucci						
Mailing Address	1836 North Nantucket Dr	1836 North Nantucket Drive					
	Lorain	OH	44053				
Title or Position ▼	CITY A	STATE A	ZIP CODE A				
As	st. Treasurer	Telephone number 440					
 Banks or Other De safety deposit boxes Name of Bank, Dep 	s or maintains funds. ository, etc. PNC Bank						
Mailing Address	1913 Massachusetts Avenue, NW	,					
	Washington	DC L	20036 _				
	CITY 🗖	STATE △	ZIP CODE 🛕				
Name of Bank, Dep	ository, etc.						
Mailing Address							
	CITY 🗖	STATE. ▲	ZIP CODE 🛕				