

# FEC FORM 1

# STATEMENT OF ORGANIZATION

(See instructions)

Office use only

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

12FE4M5

ALLIED PILOTS ASSOCIATION POLITICAL ACTION COMMITTEE

ADDRESS (number and street)

14600 Trinity Blvd

(Check if address is changed)

Suite 500

Fort Worth

TX

76155

2512

CITY ▲

STATE ▲

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address)

(Check if address is changed)

SECRETARY-TREASURER@alliedpilots.org

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address is changed)

www.alliedpilots.org

2. DATE  /  /

3. FEC IDENTIFICATION NUMBER

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 SCOTT SHANKLAND, PAC TREASURER

Signature of Treasurer Electronically Filed by SCOTT SHANKLAND, PAC TREASURER Date

/  /

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

Office Use Only				
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For further information contact:  
Federal Election Commission  
Toll Free 800-424-9530  
Local 202-694-1100

**FEC FORM 1**  
(Revised 02/2009)

5. TYPE OF COMMITTEE (Check One)

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
- (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 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	<b>C</b> <input type="text"/>
2. _____	FEC ID number	<b>C</b> <input type="text"/>
3. _____	FEC ID number	<b>C</b> <input type="text"/>
4. _____	FEC ID number	<b>C</b> <input type="text"/>

Write or Type Committee Name

**ALLIED PILOTS ASSOCIATION POLITICAL ACTION COMMITTEE**

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

**ALLIED PILOTS ASSOCIATION**

Mailing Address **14600 TRINITY BLVD**  
**SUITE 500**  
**FORT WORTH** **TN** **76155**  
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 **JOHN LAWRENCE,- PAC ASST TREAS**  
Mailing Address **14600 TRINITY BLVD #500**  
**FT WORTH** **TX** **76155**  
Title or Position ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
**DIRECTOR OF FINANCE** Telephone number **817** - **302** - **2222**

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 **SCOTT SHANKLAND, PAC TREASURER**  
Mailing Address **14600 TRINITY BLVD**  
**SUITE 500**  
**FORT WORTH** **TN** **76155**  
Title or Position ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
**SECRETARY-TREASURER** Telephone number **817** - **302** - **2115**

Full Name of Designated Agent

JOHN LAWRENCE,- PAC ASST TREAS

Mailing Address

14600 TRINITY BLVD #500

FT WORTH

TX

76155 -

Title or Position ▼

CITY ▲

STATE ▲

ZIP CODE ▲

DIRECTOR OF FINANCE

Telephone number

817

302

2222

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.

JPMORGAN CHASE BANK

Mailing Address

2200 Ross Ave

8th Floor

DALLAS

TX

75201 -

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Bank, Depository, etc.

ALLIED FIRST BANK

Mailing Address

3201 ORCHARD RD

OSWEGO

IL

60543 -

CITY ▲

STATE ▲

ZIP CODE ▲

**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.

[ ADDITIONAL ]

VANGUARD INVESTMENTS-PAC

Mailing Address

455 DEVON PARK DR

WAYNE

PA

19087

1815

CITY ▲

STATE ▲

ZIP CODE ▲

[ ADDITIONAL ]

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

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship:

Connected Organization

Affiliated Committee

Joint Fundraising Representative

Leadership PAC Sponsor

[ ADDITIONAL ]

Designated Agent

Full Name

Mailing Address

Title or Position ▼

CITY ▲

STATE ▲

ZIP CODE ▲

Telephone number

Joint Fundraiser Participant

[ ADDITIONAL ]

FEC ID number

C