Image# 201906039149875907 FEC FORM 1	STATEMENT OF ORGANIZATION	06/03/2019 17 : 54 PAGE 1 / 4		
1. NAME OF COMMITTEE (in full)	(Check if name Example: If typing, type is changed) over the lines.	12FE4M5		
Mad 4 PA PAC				
ADDRESS (number and street) Image: Check if address is changed)	P.O. Box 444	PA 19038 		
COMMITTEE'S E-MAIL ADDRE	SS compliance@abconsultingdc.com Optional Second E-Mail Address			
COMMITTEE'S WEB PAGE ADI	DRESS (URL)			
2. DATE 06 / 03 / 2019				
3. FEC IDENTIFICATION NU	JMBER ► C C00670844			
4. IS THIS STATEMENT	NEW (N) OR AMENDED (A)			
I certify that I have examined th Type or Print Name of Treasure	Egner, John, , ,	is true, correct and complete.		
Signature of Treasurer	; John, , , [Electronically Filed]	Date 06 / 03 / 2019		
NOTE: Submission of false errone	pous or incomplete information may subject the person signing th	his Statement to the penalties of 2 U.S.C. \$437a		

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.

L	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)
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F	FEC Fo	rm 1 (Revised 02/2009) Page 2
TYPE	E OF C	OMMITTEE
Can	ndidate	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 Cand	e of didate	Dean, Madeleine, , ,
	didate / Affiliati	DEM Office Sought: X House Senate President District 04
(C)		This committee supports/opposes only one candidate, and is NOT an authorized committee.
Name Cand	e of didate	
Parl	ty Con	nmittee:
(d)		This committee is a(National, State or subordinate) committee of the(Democratic, Republican, etc.) Party.
Poli	tical A	ction 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.)
Join	t Fund	raising 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.
	Com	mittees Participating in Joint Fundraiser
	1.	
	2.	FEC ID number
	3.	FEC ID number
	4.	

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FEC Form 1 (Revised 02/2009)

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Write or Type Committee Name

Mad 4 PA PAC

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

Fab Four PAC				
Mailing Address	231 N. 3rd St.			
	Suite 406			
	Philadelphia		PA	19106
	CITY		STATE	ZIP CODE
Relationship: Connected Organization Affiliated Committee X 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.

Angerholze	er, Lindsay, F, ,
Full Name	
Mailing Address	499 S. Capitol St, SW
	Suite 422
	Washington DC 20003
Title or Position	CITY STATE ZIP CODE
Assistant Treasurer	Telephone number 202 403 0606

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	Egner, John, , ,		
Mailing Address	1717 Arch St.		
	Philadelphia PA 19103 – / <th <="" th=""> <th <="" th=""> /</th></th>	<th <="" th=""> /</th>	/
	CITY STATE ZIP CODE		
Title or Position Treasurer	Telephone number		

Full Name of An Designated An Agent	gerholzer, Lindsay, F, ,	
Mailing Address	499 S. Capitol St, SW	
	Suite 422	
	Washington DC 20003 Image: I	
	CITY STATE ZIP CODE	

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.

Wells	-argo		
Mailing Address	1101 Old York Rd		
		PA	
	CITY	STATE	ZIP CODE
Name of Bank, Depository,	etc.		
Mailing Address			
	CITY	STATE	ZIP CODE