Image# 13940024917				01/11/2013 17 : 51
			1	PAGE 1 / 5
	STATEMEN	T OF		
FEC FORM 1	ORGANIZA	TION		
			Offic	ce Use Only
1. NAME OF	(Check if name	Example: If typing, type	12FE4M5	-
COMMITTEE (in full)	is changed)	over the lines.		
American Psychologica	Association Practice (Organization Political		tee (APAPO-PAC)
1				
	PO Box 65353			· · · · · · · · · · · · · · · · · · ·
ADDRESS (number and street)				
is changed)				
	Washington			5
	CITY 🔺		STATE A	ZIP CODE▲
COMMITTEE'S E-MAIL ADDRES	SS			
(Check if address	satterfield.david@arentfo	ox.com		1
is changed)				
	Optional Second E-Mail Addre	9SS		
COMMITTEE'S WEB PAGE ADD	DRESS (URL)			
 (Check if address is changed) 				
	1			
2. DATE 01 10				
3. FEC IDENTIFICATION NU	IMBER ► C COO	522094		
4. IS THIS STATEMENT	NEW (N) OR	AMENDED (A)		
I certify that I have examined th	is Statement and to the best of	f my knowledge and belief it	is true, correct and o	complete.
		, ,		
Type or Print Name of Treasurer	Craig Engle			
- · ·			M M /	D D / Y Y Y Y
Signature of Treasurer	Engle	[Electronically Filed]	Date 01	11 2013
NOTE: Submission of false, errone	ous, or incomplete information ma	ay subject the person signing t	his Statement to the p	enalties of 2 U.S.C. \$437a
	ANY CHANGE IN INFORMATION			
Office		For further information c Federal Election Commissi		EC FORM 1
Use Only		Toll Free 800-424-9530		(Revised 06/2012)

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	FEC Fo	rm 1 (Revised 02/2009)	Page 2
TYF	PE OF C	OMMITTEE	
Ca	ndidate	e 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. (Complein information below.)	te the candidate
	me of ndidate		
	ndidate ty Affiliation	on Office Sought: House Senate President	State
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
	me of ndidate		
Ра	rty Con	nmittee:	
(d)			emocratic, publican, etc.) Party.
Ро	litical A	ction Committee (PAC):	
(e)	\times	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its conne	cted organization is a:
		Corporation Corporation w/o Capital Stock	abor Organization
		Membership Organization X 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 segre committee. (i.e., nonconnected committee)	egated fund or party
		In addition, this committee is a Lobbyist/Registrant PAC.	
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Joi	nt Fund	raising 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.	or more political
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or committees/organizations, none of which is an authorized committee of a federal candidate.	or more political
	Com	mittees Participating in Joint Fundraiser	
	1.	FEC ID number	
	2.	FEC ID number	
	3.	FEC ID number	
	4.	FEC ID number	

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FEC Form 1 (Revised 02/2009)

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Write or Type Committee Name

American Psychological Association Practice Organization Political Action Committee (APAPO-PAC)

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

A	merican Psychologic	al Association Practice	Organization (
	Mailing Address	750 First Street NE				
		Washington		DC	20002	
		CITY		STATE	ZIP CODE	
	Relationship: X Connected	Organization Affiliated Comn	nittee Joint Fund	Iraising Representat	ive Leadership PAC Spon	ISOr
7.	Custodian of Records: Iden books and records.	tify by name, address (phone nu	mber optional) and	d position of the pe	rson in possession of commit	tee
	David Satt	erfield				
	Full Name					
	Mailing Address	1050 Connecticut Ave NW				
		1				1

	Washington		20036
Title or Position	CITY	STATE	ZIP CODE
Assistant Treasurer		Telephone number	02 857 6467

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	Craig Engle
Mailing Address	1050 Connecticut Ave NW
	Washington DC 20036
	CITY STATE ZIP CODE
Title or Position	Telephone number = = 6467

FEC Form 1 (Revised 02/2009)

Full Name of Designated Agent						I								I				I										
Mailing Address																												
		1					1		1			I	1								1				-[1	
					СП	ΓY										STA	ΤE						ZIP	С	DDE	-		
Title or Position																												
											Tele	eph	one	e nu	ımt	ber] –				- [

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	Fargo		
Mailing Address	1100 Connecticut Ave NW		
	Washington		20036
	CITY	STATE	ZIP CODE
Name of Bank, Depository,	etc.		
Mailing Address			
	CITY	STATE	ZIP CODE

FORM 1S -STATEMENT OF ORGANIZATION (Supplemental Page)

FEC Form 1G (Revise	ed 06/2011)		Page 5
Banks or Other Depositor safety deposit boxes or mai Name of Bank, Depository,	intains funds.		olds accounts, rents
Mailing Address			
	CITY 🗖	STATE 🗖	ZIP CODE 🔺
	Organization, Affiliated Committee, Joint Fundraising IOLOGY FOR LEGISLATIVE ACTIOI		ADDITIONA
	P.O. BOX 38129		
Mailing Address			
	COLORADO SPRINGS		0937 1 1 1 1 - L 1 1
	CITY	STATE 🖨	ZIP CODE 📥
stionahin.			
tionship: Connected Organization	X Affiliated Committee	_	dership PAC Sponsor
Connected Organization		_	
Connected Organization		_	
Connected Organization Designated Agent		_	
Connected Organization Designated Agent Full Name		_	
Designated Agent Full Name		_	
Connected Organization Designated Agent Full Name Mailing Address	Affiliated Committee Joint Fundraising	g Representative	[ADDITIONAL]