Only

PAGE 1/5

STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 COMMITTEE (in full) over the lines. is changed) Engineering and Software Systems Solutions Inc. PAC 550 West C Street Ste 1630 ADDRESS (number and street) (Check if address is changed) San Diego 92101 CA CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS fecinfo@pass1.com (Check if address is changed) Optional Second E-Mail Address lilian.flores@es3inc.com COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2021 C00446948 FEC IDENTIFICATION NUMBER 3. 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. Flores, Lilian, , , Type or Print Name of Treasurer Flores, Lilian, , , [Electronically Filed] 04 2021 Signature of 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 For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530

Local 202-694-1100

-	FC Fo	rm 1 (Revised 02/2009)	Page 2
		COMMITTEE	1 aye 2
Can	didate	e Committee:	
(a)	Ш	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. (Cominformation below.)	plete the candidate
Name Cand			
Cand Party	idate Affiliati	on Office Sought: House Senate President	State
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name Cand			
Part	y Con	nmittee:	/Dama austic
(d)		This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.
Polit	tical A	ction Committee (PAC):	
(e)	×	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its cor	nnected organization is a
		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 secommittee. (i.e., nonconnected committee)	egregated 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.)	
Joint	t Fund	Iraising 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.	vo or 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.	vo or more political
	Com	mittees Participating in Joint Fundraiser	
	1.	FEC ID number	
	2.	FEC ID number	
	3.	FEC ID number	
	4.		

FEC Form 1 (Revised	1 02/2009)	Page 3
Write or Type Committee Nar	ne	
Engineering ar	nd Software Systems Solutions Inc. PA	С
6. Name of Any Connected	Organization, Affiliated Committee, Joint Fundraising Representative, or	Leadership PAC Sponsor
Engineering and Soft	ware Systems Solutions Inc.	
Mailing Address	550 West C Street Ste 1630	
	San Diego CA	92101
	CITY STATE	ZIP CODE
	SINE	ZII CODE
Relationship: X Connect	ed Organization Affiliated Committee Joint Fundraising Representative	Leadership PAC Sponsor
 Custodian of Records: Id books and records. 	entify by name, address (phone number optional) and position of the perso	on in possession of committee
Flores, L	.ilian, , , 	
Mailing Address	550 West C Street Ste 1630	
Maning Madress		
	San Diego	92101
Title or Position	CITY STATE	ZIP CODE
Custodian of Records	Telephone number 619	
Treasurer: List the name a any designated agent (e.g.,	and address (phone number optional) of the treasurer of the committee; an assistant treasurer).	d the name and address of
Full Name Flores, L	ilian, , ,	ı
of Treasurer	550 West C Street Ste 1630	
Mailing Address		
		92101
Title or Position	CITY STATE	ZIP CODE
_I Treasurer	619	338 0370

Telephone number

	n 1 (Revised 02/2009)	Page 4
Full Name of Designated	Г., , , , , , , , , , , , , , , , , , ,	, , , , , ,
Agent		
Mailing Address		
	CITY STATE	ZIP CODE
Title or Position		1 1
	Telephone number	
Mailing Address	Bank of America 450 B Street Ste 680	
	San Diego CA 92101	. , 1_1
		7IP CODE
Name of Bank, I	CITY STATE	ZIP CODE
Name of Bank, I	CITY STATE	ZIP CODE
Name of Bank, I	CITY STATE	ZIP CODE
	CITY STATE	ZIP CODE
	CITY STATE	ZIP CODE

: 97 'A = G7 9 @ G5 B9 CI G'H9 LHF 9 @ 5 H98 'HC' 5 F9 DCF HZ G7 < 98 I @ 'CF' + H9 A = N5 H= CB

Form/Schedule: F1N Transaction ID:

This form is being filed to disclose the type of committee(5e), Connected Organization(6), Custodian of Records(7), Bank(9) and a new committee email address. Also, this is marked as New since it the first Form 1 filed electronically.

Form/Schedule: Transaction ID: