PAGE 1 / 4 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) Cobham Holdings Inc Political Action Committee 'Cobham PAC' 2121 Crystal Drive ADDRESS (number and street) (Check if address is changed) Arlington 22202 VACITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS mward@wardlawless.com (Check if address is changed) Optional Second E-Mail Address iulie.sutton@cobham.com COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 01 2014 C00457051 FEC IDENTIFICATION NUMBER 3. X 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. Julie Sutton Type or Print Name of Treasurer Julie Sutton [Electronically Filed] 04 2014 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 Toll Free 800-424-9530 Only Local 202-694-1100

(Revised 06/2012)

	EEC Ec	rm 1 (Revised 02/2009)	Page 2
		OMMITTEE	raye Z
Car	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. (Cominformation below.)	nplete the candidate
Nam Can	e of didate		
	didate y Affiliati	on Office Sought: House Senate President	State
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Nam Can	e of didate		
Par	ty Con	nmittee:	
(d)		This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.
Poli	itical A	ction Committee (PAC):	
(e)	\times	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con-	nnected organization is a:
		X 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 so committee. (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.)	
Join	t Fund	Iraising Representative:	
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for to committees/organizations, at least one of which is an authorized committee of a federal candidate.	wo or more political
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for to 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.		

Title or Position Treasurer

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FEC Form 1 (Rev	rised 02/2009)	Page 3
Write or Type Committee	Name	
Cobham Hol	dings Inc Political Action Committe	e 'Cobham PAC'
6. Name of Any Connec	cted Organization, Affiliated Committee, Joint Fundraising Representation	entative, or Leadership PAC Sponsor
Cobham Holdings	Inc	
Mailing Address	10 Cobham Drive	
	Orchard Park	NY 14127
	CITY	STATE ZIP CODE
Relationship: X Con	nected Organization	epresentative Leadership PAC Sponsor
books and records.	: Identify by name, address (phone number optional) and position 2 Sutton	or the person in possession of committee
Full Name	2121 Crystal Drive	
Mailing Address		
	Arlington	VA 22202 - - - -
Title or Position	CITY	TATE ZIP CODE
Treasurer		er 703 - 414 - 5300
	ne and address (phone number optional) of the treasurer of the co e.g., assistant treasurer).	ommittee; and the name and address of
Full Name Julie of Treasurer	Sutton	
Mailing Address	2121 Crystal Drive	
	T.	
	Arlington	VA 22202 -

703

Telephone number

414

5300

. 20 . 3	m 1 (Revised 02/2009)	Page 4
Full Name of Designated Agent		
Mailing Address		
	CITY STATE	ZIP CODE
Title or Position	Telephone number	
safety denocit h	ovas or maintains funds	
safety deposit be Name of Bank, I	Capital One Bank	
Name of Bank,	Depository, etc. Capital One Bank 1621-B Crystal Square Arcade	
Name of Bank,	Depository, etc. Capital One Bank 1621-B Crystal Square Arcade	
Name of Bank,	Capital One Bank 1621-B Crystal Square Arcade	ZIP CODE
Name of Bank,	Capital One Bank 1621-B Crystal Square Arcade Arlington CITY STATE	
Name of Bank,	Capital One Bank 1621-B Crystal Square Arcade Arlington CITY STATE	ZIP CODE
Name of Bank,	Capital One Bank 1621-B Crystal Square Arcade Arlington CITY STATE Depository, etc.	ZIP CODE
Name of Bank, Mailing Address Name of Bank,	Capital One Bank 1621-B Crystal Square Arcade Arlington CITY STATE Depository, etc.	ZIP CODE
Name of Bank, Mailing Address Name of Bank,	Capital One Bank 1621-B Crystal Square Arcade Arlington CITY STATE Depository, etc.	ZIP CODE