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FEC FORM 1

STATEMENT OF ORGANIZATION

RECEIVED FEC MAIL CENTER

2009 MAR 30 A 8:15

_				Coldida Oder Pon) U A O 1 3			
1	NAME OF COMMITTEE (in full)	(Check If name is changed)	Example: If typing, type over the lines.	12FE4M5			
-				ERS ASSACIATION			
Ą	POGITICAL ACTION COMMITTEE						
A	DDRESS (number and street)						
	(Check if address	1.010 N GLEBE RD #450					
	is changed)	14-841, NO-70, N VA 122201-					
			CITY	STATE ZIP CODE			
С	OMMITTEE'S E-MAIL ADDRE	ESS (Please provide only one	e-mail address), ac-forces	1 N 1 9			
•	(Check if address	LD CRBINSC	MCMANST BL				
٠	is changed)			A production of the second of			
	OMMITTEE'S WEB PAGE AD		ए के श्वाप्तिक पुरुष देखकार सुदेशामी (प्राप्त क कार्यकार का कार्यक स्वाप्तिकारी				
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<u>.</u>	on the contract of the great of	*	. 				
2	. DATE 03 2	3 2009	ij	est to thought up, a			
3	. FEC IDENTIFICATION N	IUMBER C 0	0386157				
4	. IS THIS STATEMENT	NEW (N) OR	AMENDED (A)				
7	certify that I have examined	this Statement and to the bes	et of my knowledge and belief it	is true, correct and complete.			
) т	ype or Print Name of Treasur	Tom 2064	ing s				
	Signature of Treasurer 7 123 12009						
•	IOTE: Submission of false, error	his Statement to the penalties of 2 U.S.C. §437g.					
- 	Office Lie stoph Lie Use Only	[75] T.	For furths, information of Federal Election Commissi Toll Free 800-424-9530	FEC FORM 1 (Revised 02/2009)			

FEC FO	m 1 (Revised 02/2009) Page 2							
	COMMITTEE							
(a)	This committee is a principal campaign committee. (Complete the candidate information below.)							
(4)								
(b)	This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)							
Name of Candidate	<u> </u>							
Candidate Party Affiliati	Office State ion Sought: House Senate President District							
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.							
Name of Candidate								
Party Con	nmittee:							
(d)	(National, State (Democratic, This committee is a or subordinate) committee of the Republican, etc.) Party.							
Political A	ction Committee (PAC):							
(e) V	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.)							
Joint Fund	draising 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.	FEC ID number C							
2.	FEC ID number C							
3.	FEC ID number C							
4.	FEC ID number C							

Į	FEC Form 1 (Revise	d 02/2009)			Page 3	I
_	Write or Type Committee Na	ime				-
	American	compositer	Mænnsenter	ers Agroc	: MAN /	A2
6.	Name of Any Connected	d Organization, Affiliated Com	mittee, Joint Fundralsing Rep	resentative, or Lead	ership PAC Sponso	or
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L						
	Mailing Address	110/10/1N/GU	HEIBOP IN IN 144			لــــــــــــــــــــــــــــــــــــــ
						لك
		MAGUINGTOIN	/	1/A 122	42011-1	
		CIT		STATE	ZIP CODE	
	Relationship: Connec	cted Organization Affiliated C	Committee , Joint Fundraisin	g Representative	Leadership PAC Sp	onsor
7.	Custodian of Records: le	dentify by name, address (phon	e number optional) and posi	tion of the person in	possession of comm	—— mittee
	Full Name TLUL	NOTING NORTON	<i>,</i>	1'1 1 1 1 1 1 1	1 1 1 1 1 1 1	1
	Mailing Address	40.10 N 66	ERE LD #45	D		ـــــا
			1 1 1 1 4 4 4 1 1 1	<u> </u>		
		APLI NOTO A	4	MA 122	22011-	
	Title or Position	CIT	Y	STATE	ZIP CODE	
	FINANCE	MAR	Telephone nu	mber [703]-	15,25-105	74
8.	Treasurer: List the name any designated agent (e.g.	and address (phone number -	optional) of the treasurer of th	e committee; and the	name and address	of
	Full Name of Treasurer	M DOBBLAS	<u> </u>	<u> </u>	<u> </u>	لب
	Malling Address	110,10. N. O.B	685 R.D. 445	<u>a</u>		لــــا
		MALINGTON		NA 22	ZIP CODE	
	Title or Position	AFF EXECUTI	_ V] Telephone nu	mber 7.03.	15,25-105	74

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Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS The FEC added this page to the end of this filing to indicate how it was received.					
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(3/2005)	DATE PREPARED				