Only

PAGE 1 / 4

STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 X COMMITTEE (in full) is changed) over the lines. Americans for Secure Elections PAC 1520 Belle View Blvd ADDRESS (number and street) **Suite 3438** (Check if address is changed) Alexandria 22307 VACITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS info@americansforsecureelections.org (Check if address is changed) Optional Second E-Mail Address info@feccompliancegroup.com COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2022 C00807065 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. McIntyre, Dustin, , , Type or Print Name of Treasurer McIntyre, Dustin, , , [Electronically Filed] 03 17 2022 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

FI	FC Fo	rm 1 (Revised 02/2009)	Page 2
TYPE	OF C	OMMITTEE	1 4go 2
Cano	didate	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 Candi			
Candid Party	date Affiliati	Office Sought: House Senate President	State
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name Candid			
Party	y Con	nmittee:	
(d)		· · · · · · · · · · · · · · · · · · ·	(Democratic, Republican, etc.) Party.
Politi	ical A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con	nected 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)	x	This committee supports/opposes more than one Federal candidate, and is NOT a separate se committee. (i.e., nonconnected committee)	gregated 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	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.	o 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.	o 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 02/200	19)	Page 3
Write or Type Committee Name		
Americans for Sec	ure Elections PAC	
6. Name of Any Connected Organi	zation, Affiliated Committee, Joint Fundraising Representative, or Lead	ership PAC Sponsor
NONE		
<u> </u>		
Mailing Address		
Mailing Address		
		-
	CITY STATE	ZIP CODE
Relationship: Connected Orga	nization Affiliated Committee Joint Fundraising Representative	Leadership PAC Sponsor
Custodian of Records: Identify by books and records.	y name, address (phone number optional) and position of the person in	possession of committee
McIntyre, Dustin,		
	D Belle View Blvd	
	e 3438	
Alex	xandria VA 2230	7
Title or Position	CITY STATE	ZIP CODE
Treasurer	Telephone number 804	591 - 0050
Treasurer: List the name and addr any designated agent (e.g., assista	ress (phone number optional) of the treasurer of the committee; and the ant treasurer).	name and address of
Full Name McIntyre, Dustin, of Treasurer	,, 	
Mailing Address) Belle View Blvd	
Suite	9 3438	
Alex	candria VA 22307	7
Title or Position	CITY STATE	ZIP CODE
	Telephone number 804 –	591 - 0050

FEC Form	1 (Revised 02/2009)	Page 4
Full Name of Designated Agent		
Mailing Address		
	CITY STATE	ZIP CODE
Title or Position		
	Telephone number	
safety deposit box	Depositories: List all banks or other depositories in which the committee deposits funds, holices or maintains funds. epository, etc.	
safety deposit box	xes or maintains funds.	
safety deposit box Name of Bank, D	chain Bridge Bank 1445-A Laughlin Ave	ZIP CODE
safety deposit box Name of Bank, D	Chain Bridge Bank 1445-A Laughlin Ave Mclean CITY STATE	
safety deposit box Name of Bank, D Mailing Address	Chain Bridge Bank 1445-A Laughlin Ave Mclean CITY STATE	
safety deposit box Name of Bank, D Mailing Address	Chain Bridge Bank 1445-A Laughlin Ave Mclean CITY STATE	
safety deposit box Name of Bank, D Mailing Address Name of Bank, D	Chain Bridge Bank 1445-A Laughlin Ave Mclean CITY STATE	
safety deposit box Name of Bank, D Mailing Address Name of Bank, D	Chain Bridge Bank 1445-A Laughlin Ave Mclean CITY STATE	