FEC

STATEMENT OF

| FORM 1 | ORGANIZ | ATION | | |
|------------------------------------|--|---|----------------------|---------------------------------|
| 1 Olliwi 1 | (See instruction | ons) | | Office use only |
| NAME OF COMMITTEE (in f | ull) (Check if name is changed) | Example: If typying, type over the lines | 12FE4M5 | |
| PMI Mortgage | Insurance Company Federal PA | .с | 11111 | |
| | | | | |
| ADDRESS (number and s | treet) 3003 Oak Road | | | |
| (Check if address | | | 11111 | |
| is changed) | Walnut Creek | | CA L | 94597 _ 2098 |
| | | CITY | STATE | ZIP CODE 📥 |
| COMMITTEE'S E-MAII | _ ADDRESS (Please provide only one e | , | | |
| (Check if address x is changed) | ray.chang@pmigrou | ıp.com | | |
| | | | | |
| COMMITTEE'S WEB F | PAGE ADDRESS (URL) | | | |
| (Check if address | 1 | | | |
| is changed) | | | | |
| | | | | |
| 2. DATE M M M 11 | 16 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y | | | |
| 3. FEC IDENTIFICATION | TION NUMBER | C C00347112 | | |
| 4. IS THIS STATEM | ENT NEW (N) OR | X AMENDED (A) | | |
| I certify that I have examin | ned this Statement and to the best of my kno | owledge and belief it is true, corre | ct and complete | |
| , | · | , | · | |
| Type or Print Name of | Freasurer Ray Chang | | | |
| Signature of Treasurer | Electronically Filed by Ray Chan | og | Date 12 ^M | 01 2009 |
| NOTE: Submission of fals | se, erroneous, or incomplete information ma | ay subject the person signing this | | |
| Office Use Only | | For further informati Federal Election Com Toll Free 800-424-95 | mission | FEC FORM 1 (Revised 02/2009) |

| | F | EC F | Form 1 (Revised 02/2009) | Page 2 | |
|--|--|-------------------|--|---|--|
| 5. | | | OMMITTEE (Check One) 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. (Complete t information below.) | he candidate | |
| | Name Candid | | | | |
| | Candid Party / | date Affiliati | Office Sought: House Senate President | State District | |
| | (c) | | This committee supports/opposes only one candidate, and is NOT an authorized committee. | | |
| | Name Candi | | | | |
| | Party | Comn | | | |
| | (d) | | This committee is a (National, State (or subordinate) committee of the | (Democratic, Republican,etc.) Party. | |
| | Politic | cal Act | tion Committee (PAC): | | |
| | (e) X This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a: | | | | |
| | | | X Corporation Corporation w/o Capital Stock La | bor Organization | |
| | | | Membership Organization Trade Association C | ooperative | |
| | | | In addition, this committee is a Lobbyist/Registrant PAC. | | |
| | (f) | (f) | This committee supports/opposes more than one Federal candidate, and is NOT a separate segregate committee. (i.e., nonconnected committee) | d 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 F | undra | alsing 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. | | | | |
| Committees Participating in Joint Fundraiser | | | | | |
| | | | 1. FEC ID number | | |
| | | | 2. FEC ID number | | |
| | | | 3. FEC ID number | | |
| | | | EEC ID number C | | |

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|------------------------------|---|---|-----------------------------|
| Write or Type Committee Name | | | |
| PMI Mortgage Insuran | ce Company Federal PAC | | |
| 6. Name of Any Connected C | Organization, Affiliated Committee, Joint Fundraisir | ng Representative, or Lead | ership PAC Sponsor |
| PMI Mortgage Insuranc | e Company | | 1 1 1 1 1 1 1 1 1 |
| | | | 1 1 1 1 1 1 1 1 1 |
| Mailing Address | 3003 Oak Road | | |
| | | | |
| | Walnut Creek | CA | 94597 _ 2098 |
| | CITY | STATE ▲ | ZIP CODE |
| Relationship: | | | |
| X Connected Organization | n Affiliated Committee Joint Fund | draising Representative | Leadership PAC Sponsor |
| possession of Committe | dentify by name, address, (phone number ope books and records. AVID H. KATKOV 3003 OAK ROAD | Julian, and position of the | |
| | WALNUT CREEK | CA | 94596 |
| Title or Position ▼ Chairper | CITY A son Te | STATE | ZIP CODE 14 - 658 - 6429 |
| name and address of ar | e and address (phone number optional) of the ny designated agent (e.g., assistant treasurer). | | ttee; and the |
| Mailing Address | 3003 Oak Road | | |
| | Walnut Creek | CA | 94597 2098 |
| Title or Position ♥ | CITY | STATE ▲ | ZIP CODE A |
| Treasure | er Te | elephone number | _ 658 _ 6204 |

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|--|---------------------------|------------------|--------------|
| Full Name of Designated Agent | Jill Showell | | |
| Mailing Addres | 2126 Connecticut Avenue, | NW | |
| | #21 | | |
| | Washington | DC | 20008 – |
| Title or Position | CITY A | STATE ▲ | ZIP CODE A |
| | Assistant Treasurer | Telephone number | |
| 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. Bank of America | | | |
| | PO Box 37176 | | |
| Mailing Address | | | |
| | San Francisco Main Branch | | |
| | San Francisco | ÇA _ | 94137 _ 0176 |
| | CITY 🗖 | STATE △ | ZIP CODE 🛕 |
| Name of Bank, D | repository, etc. | | |
| | | | |
| Mailing Address | | | |
| | | | |
| | | | |
| | CITY 🗖 | STATE △ | ZIP CODE 🛕 |

| Banks or Other Depositories safety deposit boxes or maintain | | in which the committee de | eposits funds, hold | ds accounts, rents | |
|---|---------------------------------------|----------------------------|---------------------|--------------------|----------|
| Name of Bank, Depository, etc. | | | | [ADDITIONA | AL] |
| | | | | | |
| Mailing Address | | | | | |
| | | | | | |
| | | | | | |
| | CITY 🗖 | : | STATE_ | ZIP CODE | Δ |
| Name of Any Connected Org | anization, Affiliated Committee, Joir | nt Fundraising Represen | tative, or Leader | [ADDIT | - |
| | | | | | |
| | | | | | |
| Mailing Address | | | | | |
| | | | | | |
| | | | | | |
| Relationship: | CITY▲ | | STATE A | ZIP CODE | A |
| Connected Organization | Affiliated Committee Jo | oint Fundraising Represent | tative Lead | dership PAC Spon | sor |
| Designated Agent | | | | [ADDITION | IAL] |
| | SEALY | | | | |
| Mailing Address | 3003 OAK ROAD | | | | |
| | WALNUT CREEK | | CA | 94597 | |
| Title or Position ▼ | CITY A | | STATE | ZIP COD | E A |
| Asst. Ger | neral Counse | Telephone nu | 215 mber | | 3661 |
| Joint Fundraiser Participant | | FECID | | [ADDITION | IAL] |

| Banks or Other Depositories: safety deposit boxes or maintain | | e deposits funds, holds a | ccounts, rents |
|---|--|---------------------------|------------------------------|
| Name of Bank, Depository, etc. | | [A | DDITIONAL] |
| | | | |
| Mailing Address | | | |
| | | | |
| | | | |
| | CITY 🛕 | STATE ⊿ | ZIP CODE 🛕 |
| Name of Any Connected Orga | anization, Affiliated Committee, Joint Fundraising Repre | sentative, or Leadershij | [ADDITIONAL] p PAC Sponsor |
| | | | |
| | | | |
| Mailing Address | | | |
| | | | |
| | | | |
| Relationship: | CITY▲ | STATE A | ZIP CODE |
| Connected Organization | Affiliated Committee Joint Fundraising Repre | sentative Leaders | hip PAC Sponsor |
| Designated Agent | | [| ADDITIONAL] |
| | t Hayes | | |
| Mailing Address | 3003 Oak Road | | |
| | Walnut Creek | CA | 94597 |
| Title or Position ▼ | CITY A | STATE. ▲ | ZIP CODE A |
| Assistant | Treasurer Telephone | 925 e number = | 658 6445 |
| Joint Fundraiser Participant | | [, | ADDITIONAL] |
| 1 | FEC | ID number C | |