FEC

Only

STATEMENT OF **ORGANIZATION**

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FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. WOOLPERT, INC. PAC 4454 IDEA CENTER BLVD. ADDRESS (number and street) (Check if address is changed) Beavercreek 45430-1500 OH CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS (Check if address outsourcing@aristotle.com is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2023 C00479899 FEC IDENTIFICATION NUMBER > 3. X OR IS THIS STATEMENT NEW (N) 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. Type or Print Name of Treasurer Konkus, John,, Date 10 18 2023 Signature of Treasurer Konkus, John, , , NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 52 U.S.C. §30109. 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

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TYPE OF COMMITTEE:				
Candidate Committee:				
(a) This committee is a principal campaign committee. (Complete the candidate in	nformation below.)			
(b) This committee is an authorized committee, and is NOT a principal campaign information below.)	committee. (Complete the candidate			
Name of Candidate				
Candidate Party Affiliation Office Sought: House Senate	State President District			
(c) This committee supports/opposes only one candidate, and is NOT an authorized				
Name of Candidate				
Party Committee:				
(d) This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party			
Political Action Committee (PAC):				
(e) X This committee is a separate segregated fund. (Identify connected organization	on on line 6.) Its connected organization is a:			
X Corporation Corporation w/o Capital Stock	Labor Organization			
Membership Organization Trade Association	Cooperative			
X In addition, this committee is a Lobbyist/Registrant PAC.				
(f) This committee supports/opposes more than one Federal candidate, and is N committee. (i.e., nonconnected committee)	IOT a separate segregated fund or party			
In addition, this committee is a Lobbyist/Registrant PAC.				
In addition, this committee is a Leadership PAC. (Identify sponsor o	n line 6.)			
(g) This committee is an independent expenditure-only political committee (Super PAC).				
In addition, this committee is a Lobbyist/Registrant PAC.				
(h) This committee is a political committee with both contribution and non-contrib	ution accounts (Hybrid PAC).			
In addition, this committee is a Lobbyist/Registrant PAC.				
Joint Fundraising Representative:				
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.				
(j) 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.	C			

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V	Vrite or Type Committee Name					
	WOOLPERT, IN	C. PAC				
6.	Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor					
	Woolpert, Inc.					
	Mailing Address	4454 Idea Center Blvd				
		1				
		Beavercreek	OH	45430-1	500	
		CITY ▲	STATE	A	ZIP CODE ▲	
	Relationship: X Connected	Organization Affiliated Organization Joint Fund	draising Repres	sentative L	eadership PAC Sponso	
7.	Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of committee books and records.					
	Internation Full Name	al, Aristotle, , ,				
	Mailing Address	205 Pennsylvania Ave SE				
		Washington	DC	20003-1	164	
		CITY ▲	STATE		ZIP CODE ▲	
	Title or Position ▼	5 =	0,,,,_			
	Custodian of Records		ne number	202	543 - 8345	
8.	Treasurer: List the name and address (phone number optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).					
	Full Name Konkus, Jo	ohn, , ,				
	of Treasurer	4454 Idea Center Blvd				
	Mailing Address	TTOT IGGG GOTTLOT DIVG				
		Beavercreek	OH	45430-1	500	
		CITY ▲	STATE		ZIP CODE ▲	
	Title or Position ▼					
	Treasurer		ne number	850 -	443 - 5193	

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	Full Name of Designated	(101000 02/2000)		. ago .		
	Agent					
ľ	Mailing Address					
٦	Title or Position ▼	CITY ▲	STATE ▲	ZIP CODE ▲		
		Telephone num	mber			
		Depositories: List all banks or other depositories in which the committees or maintains funds.	ee deposits fui	nds, holds accounts, rents		
Ν	Name of Bank, D	epository, etc.				
		KeyBank	1 1 1 1	1		
N	Mailing Address	10 West 2nd Street				
	-					
		Dayton	OH	45402		
		CITY A	STATE ▲	ZIP CODE ▲		
Name of Bank, Depository, etc.						
N	Mailing Address					
		CITY ▲	STATE ▲	ZIP CODE ▲		

: 97 'A = G7 9 @ G B9 CI G'H9 LH F9 @ 5 H98 'HC '5 'F9 DC FHZ G7 < 98 I @ 'C F' + H9 A = N5 H+ C B

Form/Schedule: F1A Transaction ID:

Amended to update treasurer, remove bank and to confirm lobbyist-registrant PAC status

Form/Schedule: Transaction ID: