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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) GLOBAL BUSINESS TRAVEL ASSOCIATION PAC (Business Travel PAC) 1101 King Street ADDRESS (number and street) Suite 500 (Check if address is changed) ALEXANDRIA 22314 VACITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS htedla@gbta.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 20 2018 C00373910 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. Tedla, Henok,,, Type or Print Name of Treasurer Tedla, Henok,,, [Electronically Filed] 09 20 2018 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 Only

Local 202-694-1100

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		OMMITTEE	
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. (Complinformation below.)	ete the candidate
Nam Cand	e of didate		
	didate y Affiliatio	Office Sought: House Senate President	State
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Nam Cand	e of didate		
Par	ty Con	nmittee:	
(d)		· · · · · · · · · · · · · · · · · · ·	Democratic, epublican, etc.) Party.
Poli	itical A	ction Committee (PAC):	
(e)	×	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected	ected 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 seg committee. (i.e., nonconnected committee)	regated 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	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.	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.	or more political
	Com	mittees Participating in Joint Fundraiser	
	1.	FEC ID number C	
	2.	FEC ID number	
	3.	FEC ID number	
	4.		

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Write or Type Committee Name		a /a
GLOBAL BUSIN	ESS TRAVEL ASSOCIATION PA	C (Business Travel PAC)
6. Name of Any Connected C	Organization, Affiliated Committee, Joint Fundraising Rep	resentative, or Leadership PAC Sponsor
GLOBAL BUSINESS	FRAVEL ASSOCIATION	
Mailing Address	1101 King Street	
	Suite 500	
	Alexandria	VA 22314
	CITY	STATE ZIP CODE
Relationship: Connected	d Organization Affiliated Committee Joint Fundraising	Representative Leadership PAC Sponsor
 Custodian of Records: Identification books and records. 	ntify by name, address (phone number optional) and posit	ion of the person in possession of committee
Tedla, Her	nok, , ,	
	1101 King Street	
Mailing Address	Suite 500	
	Alexandria	VA , 22314
	Alexaliulia	
Title or Position	CITY	STATE ZIP CODE
Treasurer	Telephone nur	mber 703 - 684 - 0836
Treasurer: List the name an any designated agent (e.g., a	d address (phone number optional) of the treasurer of the assistant treasurer).	e committee; and the name and address of
Full Name Tedla, Her of Treasurer	ok, , ,	
Mailing Address	1101 King Street	
	Suite 500	
	Alexandria	VA 22314
Title or Position	CITY	STATE ZIP CODE

Telephone number

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Full Name of Designated		
Agent		
Mailing Address		
	CITY STATE	ZIP CODE
Title or Position		
	Telephone number	
Banks or Other safety deposit bo Name of Bank, D	Depositories: List all banks or other depositories in which the committee deposits funds, hold axes or maintains funds. Depository, etc.	is accounts, rents
safety deposit bo	xes or maintains funds.	s accounts, rents
safety deposit bo Name of Bank, D	Alexandria Nepository, etc. HSBC Bank Carlyle Street Alexandria VA 22314	zip code
safety deposit bo Name of Bank, D	Pepository, etc. HSBC Bank 415 John Carlyle Street Carlyle Place Office Alexandria CITY STATE	
safety deposit bo Name of Bank, E Mailing Address	Pepository, etc. HSBC Bank 415 John Carlyle Street Carlyle Place Office Alexandria CITY STATE	
safety deposit bo Name of Bank, D Mailing Address Name of Bank, D	Pepository, etc. HSBC Bank 415 John Carlyle Street Carlyle Place Office Alexandria CITY STATE	
safety deposit bo Name of Bank, E Mailing Address	Pepository, etc. HSBC Bank 415 John Carlyle Street Carlyle Place Office Alexandria CITY STATE	
safety deposit bo Name of Bank, D Mailing Address Name of Bank, D	Pepository, etc. HSBC Bank 415 John Carlyle Street Carlyle Place Office Alexandria CITY STATE	
safety deposit bo Name of Bank, D Mailing Address Name of Bank, D	Pepository, etc. HSBC Bank 415 John Carlyle Street Carlyle Place Office Alexandria CITY STATE	