Image# 15970002114				PAGE 1 / 4
FEC FORM 1	STATEMEI ORGANIZ			
			Offic	ce Use Only
1. NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5	
PolicyMatters U	SA			
1				
	1204 Village Market Place			
ADDRESS (number and street)	106			
is changed)				
			NC 2756	
	CITY A		STATE A	ZIP CODE▲
COMMITTEE'S E-MAIL ADDF	IESS			
(Check if address is changed)	frankr@policymattersu	sa.com		
	Optional Second E-Mail Ad	dress		
	fxr3464@yahoo.com			
COMMITTEE'S WEB PAGE A (Check if address is changed)	www.policymattersusa.com			<u></u>
	06 / Y Y Y Y 2015			
3. FEC IDENTIFICATION	NUMBER ► C c	00565440		
4. IS THIS STATEMENT	X 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 o	complete.
Type or Print Name of Treasu	rer Frank Roche			
Signature of Treasurer	ink Roche	[Electronically Filed]	Date 01	06 / Y Y Y Y 06 2015
NOTE: Submission of false, erro	oneous, or incomplete information ANY CHANGE IN INFORMATI	may subject the person signing ON SHOULD BE REPORTED V		enalties of 2 U.S.C. §437g.
Office Use Only		For further information of Federal Election Commiss Toll Free 800-424-9530		FEC FORM 1 (Revised 06/2012)

F	EC Fo	rm 1 (Revised 02/2009)	Page <b>2</b>
TYPE	OF C	OMMITTEE	
Cano	didate	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. (Compleinformation below.)	te the candidate
Name Candi			
Candi Party	date Affiliatio	on Office Sought: House Senate President	State
(C)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name Candi			
Party	y Con	nmittee:	
(d)			emocratic, publican, etc.) Party.
Polit	ical A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its conne	cted organization is a
		Corporation Corporation w/o Capital Stock	abor 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 segre committee. (i.e., nonconnected committee)	egated 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.	or more political
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or 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	
	2.	FEC ID number	
	3.	FEC ID number	
	4.	FEC ID number	

FEC Form 1 (Revised 02/2009)

Page 3

Write or Type Committee Name

## PolicyMatters USA

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

Mailing Address			
	CITY	STATE	ZIP CODE
Relationship: Connected	Organization Affiliated Committee	loint Fundraising Represent	ative Leadership PAC Sponsor

7. **Custodian of Records:** Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Frank Roc	he
Full Name	
Mailing Address	827 Berwick Valley Lane
	Cary NC 27513
Title or Position	CITY STATE ZIP CODE
Treasurer	Telephone number 919 621 3345

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 of Treasurer	Frank Roche
Mailing Address	827 Berwick Valley Lane
	Cary
	CITY STATE ZIP CODE
Title or Position Treasurer	Telephone number

FEC Form 1 (Revised 02/2009)

Full Name of Designated Agent																	I										
Mailing Address																											
																				L							
							CI	ΓY								ST/	λΤΕ					ZI	ΡC	DE			
Title or Position																											
											Tel	eph	ione	e ni	umt	ber											

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.

Wells	Fargo		
Mailing Address	998 High House Rd		
	Cary		27513
	CITY	STATE	ZIP CODE
Name of Bank, Depository,	etc.		
Mailing Address			
	CITY	STATE	ZIP CODE