Only

PAGE 1/5

STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 COMMITTEE (in full) is changed) over the lines. Navient Corporation PAC (Navient PAC) 13865 Sunrise Valley Dr Suite 110 ADDRESS (number and street) (Check if address is changed) Herndon 20171 VACITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS fecinfo@pass1.com (Check if address is changed) Optional Second E-Mail Address Navient_PAC@navient.com COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2021 C00331835 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. Fisher, Joe, , , Type or Print Name of Treasurer Fisher, Joe,,, [Electronically Filed] 15 2021 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

FF	C Form 1 (Revised 02/2009)	Page 2			
TYPE (DF COMMITTEE	. 4,5 - 1			
	date 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 the candidate information below.)				
Name o Candida					
Candida Party A		State			
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.				
Name o					
Party	Committee:	(Domogratic			
(d)	This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.			
Politic	al Action Committee (PAC):				
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con	nnected 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 so committee. (i.e., nonconnected committee)	egregated 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	undraising Representative:				
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for to committees/organizations, at least one of which is an authorized committee of a federal candidate.	wo 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.	vo or more political			
(Committees Participating in Joint Fundraiser				
	1. FEC ID number C				
	2. FEC ID number C				
;	3. FEC ID number				
	4.				

FEC Form 1 (Revised	d 02/2009)	Page 3
Write or Type Committee Nar		
Navient Corpo	ration PAC (Navient PAC)	
·	Organization, Affiliated Committee, Joint Fundraising Represen	ntative, or Leadership PAC Sponsor
Navient Corporation	PAC (Navient PAC)	
Mailing Address	13865 Sunrise Valley Dr Suite 110	
	Herndon V/	A 20171 ATE ZIP CODE
Relationship: x Connect	ted Organization Affiliated Committee Joint Fundraising Repr	resentative Leadership PAC Sponsor
Custodian of Records: Id books and records.	lentify by name, address (phone number optional) and position of	the person in possession of committee
Fisher, J	Joe, , ,	
Mailing Address	13865 Sunrise Valley Dr Suite 110	
J		
	Herndon	A 20171
Title or Position	CITY STA	TE ZIP CODE
Custodian of Records	Telephone number	302 - 283 - 4075
. Treasurer: List the name a any designated agent (e.g.,	and address (phone number optional) of the treasurer of the com , assistant treasurer).	mittee; and the name and address of
Full Name Fisher, J	oe,,,	
Mailing Address	13865 Sunrise Valley Dr Suite 110	
		'A 20171 -
Title or Position Treasurer	CITY STAT Telephone number	TE ZIP CODE 302

FEC Form	n 1 (Revised 02/2009)		Page 4			
Full Name of Designated Agent	Lebens, Lucia, , ,					
Mailing Address	700 Pennsylvania Ave SE Suite 350					
Ů ·						
	Washington	DC 20003				
Tills and Do. 191	CITY	STATE	ZIP CODE			
Title or Position Assistant Treas	urer Telephone nu	umber 202 - L	969 - 8015			
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. SunTrust Bank						
Mailing Address	P.O. Box 622227					
	Orlando	FL 32862				
	CITY	STATE	ZIP CODE			
Name of Bank, Depository, etc.						
Mailing Address						

: 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:

This amended registration is being filed to disclose new Treasurer and Custodian of Records.

Form/Schedule: Transaction ID: