Only

PAGE 1 / 4 =

FEC FORM 1		_	RGANIZ		· -			Office	Use Only	ı,		•
1. NAME OF COMMITTEE (ir	n full)	x	(Check if name is changed)		ple:If typing, type the lines.	12	FE4M5		OGC CITY	<u>'</u>		_
Hatch PAC	;											
	1 1 1 1										1 1	_
ADDRESS (number a	nd street)	100 WE	EST BUTLER AVE									
(Check if a		1		1 1 1		1 1 1		1 1 1	1 1			ı
is changed)		AMBLE	ER DITY A			L PA	A ATE A	19002	ZIP	- L	A	_
COMMITTEE'S E-MA	AII ADDRE	:55										
(Check if address is changed)			oleam@hatch.co	om 								
			l Second E-Mail A er,li@hatch,cor				1 1 1		1 1		1 1	1
2. DATE 0			2022									
3. FEC IDENTIFIC	CATION N	UMBER	C	C00236968								
4. IS THIS STATEM	MENT	NEV	V (N) OR	×	AMENDED (A	۸)						
certify that I have e	examined t	his Statem	ent and to the bes	st of my kr	owledge and beli	ef it is true	e, correct	and co	mplete.			
Type or Print Name	of Treasure	Bleam,	Jody, , ,									
Signature of Treasure	er <i>Blean</i>	n, Jody, , ,		[.	Electronically Filed]	Date	09	M / [16		9 Y Y 2022	Υ
NOTE: Submission of	false, erron		complete information		-	_			nalties of	52 U.S	3.C. §30)109.
Office Use					For further information Federal Election Comm Foll Free 800-424-953	mission			EC F(Revised			_

Local 202-694-1100

FEC Form 1 (Revised 03/2022)		Page 2
. TYPE OF COMMITTEE:		
Candidate Committee:		
(a) This committee is a principal campa	aign committee. (Complete the candidate information below.)	
(b) This committee is an authorized con information below.)	ommittee, and is NOT a principal campaign committee. (Comple	ete the candidate
Name of Candidate		
Candidate Offi Party Affiliation Sou	fice ught: House Senate President	State District
(c) This committee supports/opposes of	only one candidate, and is NOT an authorized committee.	
Name of Candidate		
Party Committee:		
(d) This committee is a		ocratic, olican, etc.) Party
Political Action Committee (PAC):		
(e) This committee is a separate segre	egated fund. (Identify connected organization on line 6.) Its con	nected organization is a:
Corporation	Corporation w/o Capital Stock	bor Organization
Membership Organization	Trade Association Co	ooperative
In addition, this committee	e is a Lobbyist/Registrant PAC.	
(f) This committee supports/opposes m committee. (i.e., nonconnected committee)	nore than one Federal candidate, and is NOT a separate segrential mittee)	egated fund or party
In addition, this committee	e is a Lobbyist/Registrant PAC.	
In addition, this committee	e is a Leadership PAC. (Identify sponsor on line 6.)	
(g) This committee is an independent e	expenditure-only political committee (Super PAC).	
In addition, this committee	e is a Lobbyist/Registrant PAC.	
(h) This committee is a political commit	ittee with both contribution and non-contribution accounts (Hyb	orid PAC).
In addition, this committee	e is a Lobbyist/Registrant PAC.	
Joint Fundraising Representative:		
(I)	ns, pays fundraising expenses and disburses net proceeds for some of which is an authorized committee of a federal candidate	·
(1)	ns, pays fundraising expenses and disburses net proceeds for which is an authorized committee of a federal candidate.	two or more political
Committees Participating in Joint Fundra	aiser	
t [C	

	FEC Form 1 (Revised 0)	2/2009)	Page 3
V	/rite or Type Committee Name	,	. ugo 🗸
	Hatch PAC		
6.		ganization, Affiliated Committee, Joint Fundraising Representative, or Lea	adership PAC Sponsor
	Mailing Address		
		CITY ▲ STATE ▲	ZIP CODE ▲
	Relationship: Connected	Organization Affiliated Organization Joint Fundraising Representative	Leadership PAC Sponso
7.	Custodian of Records: Identi books and records.	fy by name, address (phone number optional) and position of the person in pos	ssession of committee
	Bleam, Jody	·	
	Full Name	 	
	Mailing Address	125 Dolly Lane	
		Chalfont PA 18	914
		CITY ▲ STATE ▲	ZIP CODE ▲
	Title or Position ▼	5	332_
	Finance Director	Telephone number	- 641 - 8890
8.	Treasurer: List the name and any designated agent (e.g., a	I address (phone number optional) of the treasurer of the committee; and the ssistant treasurer).	he name and address of
	Full Name Bleam, Jody	<i>(</i> , , ,	
	of Treasurer		
	Mailing Address	125 Dolly Lane	
		Chalfont PA 18	914
		CITY ▲ STATE ▲	ZIP CODE ▲
	Title or Position ▼		
	Finance Director	Telephone number	- [641

	FEC Form 1	(Revised 02/2009)		Page 4
Full	Name of signated	(1.61.662 02.2666)		
Age				
Mai	ling Address			
Title	e or Position •	CITY ▲	STATE ▲	ZIP CODE ▲
		Telephone num	nber	
Ban safe	ks or Other ty deposit bo	Depositories: List all banks or other depositories in which the committed es or maintains funds.	ee deposits fu	nds, holds accounts, rents
Nam	ne of Bank, D	epository, etc.		
		Truist		
Mail	ling Address	200 West Second Street		
		Winston-Salem	NC	27101
		CITY ▲	STATE ▲	ZIP CODE ▲
Nam	ne of Bank, D	epository, etc.		
Mail	ling Address			
		CITY ▲	STATE ▲	ZIP CODE ▲