Image# 14941340145		06/19/2014 12 : 11
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FEC FORM 1	STATEMENT OF ORGANIZATION	
		Office Use Only
1. NAME OF COMMITTEE (in full)	(Check if name Example: If typing, ty is changed) over the lines.	/pe 12FE4M5
1		
ADDRESS (number and street)	1101 K Street, NW Suite 400	
(Check if address is changed)		
<i>,</i> ,	WASHINGTON	DC 20005
	CITY A	STATE▲ ZIP CODE▲
COMMITTEE'S E-MAIL ADDRE	SS	
(Check if address is changed)	Imiller@susandavis.com	
	Optional Second E-Mail Address	
COMMITTEE'S WEB PAGE ADD (Check if address is changed)	DRESS (URL)	
2. DATE 05 / 02 3. FEC IDENTIFICATION NU		
4. IS THIS STATEMENT	NEW (N) OR X AMENDED	(A)
I certify that I have examined th	nis Statement and to the best of my knowledge and b	belief it is true, correct and complete.
Type or Print Name of Treasure	r Susan Davis	
Signature of Treasurer	Davis [Electronically Fil	ed] Date 06 19 2014
NOTE: Submission of false, errone	eous, or incomplete information may subject the person s ANY CHANGE IN INFORMATION SHOULD BE REPOR	
Office Use Only	For further inform Federal Election C Toll Free 800-424- Local 202-694-1100	ommission 9530 (Revised 06/2012)

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	FEC Fo	rm 1 (Revised 02/2009)	Page 2
TYP	E OF C	OMMITTEE	
Car	ndidate	e 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. (Comple information below.)	te the candidate
Nam Cano	ie of didate		
	didate y Affiliati	on Office Sought: House Senate President	State
(C)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Nam Cano	ie of didate		
Par	ty Con	nmittee:	
(d)			emocratic, publican, etc.) Party
Poli	itical A	ction Committee (PAC):	
(e)	X	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected	cted organization is a
		n n n	abor Organization
			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 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.)	
Join	t Func	Iraising 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	
	2.	FEC ID number	
	3.	FEC ID number	
	4.	FEC ID number	

FEC Form 1 (Revised 02/2009)

Write or Type Committee Name

IRISH BREAKFAST CLUB LEADERS POLITICAL ACTION COMMITTEE; THE

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

IRISH BREAKFAST C	LUB LEADERS POLITICAL ACTION COM	1MITTEE;	_ THE
Mailing Address	1101 K Street, NW Suite 400		
		DC	20005
	CITY	STATE	ZIP CODE
Relationship: Connected	d Organization Affiliated Committee Joint Fundraising	Representative	e X 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.

Susan Davi	3
Full Name	
Mailing Address	1101 K Street, NW Suite 400
	Washington DC 20005
Title or Position	CITY STATE ZIP CODE
	Telephone number

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	Susan Davis
Mailing Address	1101 K Street, NW Suite 400
	Washington DC 20005 -
	CITY STATE ZIP CODE
Title or Position	
	Telephone number

FEC Form 1 (Revised 02/2009)

Full Name of Designated Agent																									
Mailing Address																									
																							-		
							CI	ΓY									STA	ΤE			ZIP	С	ODI	Ξ	
Title or Position																									
												Tele	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.

Ľ		
Mailing Address	New York Avenue	
	Washington	
	CITY	STATE ZIP CODE
Name of Bank, Dep	pository, etc.	
L		
Mailing Address		
	CITY	STATE ZIP CODE