Image# 202103309442615182				03/30/2021 10 : 44
FEC FORM 1	STATEMEI ORGANIZ		Of	PAGE 1 / 4
1. NAME OF	(Check if name	Example: If typing, type	12FE4M5	
COMMITTEE (in full)	is changed)	over the lines.	IZLEHU2	
The Surety & Fig	delity Association	of America Polit	ical Action	Committee
ADDRESS (number and street)	1140 19th St NW			
(Check if address is changed)	Suite 500			
is changed)	Washington	· · · · · · · · · · · · · · · · · · ·	DC 200	36
			L L_⊥ STATE ▲	
	ESS			
COMMITTEE'S E-MAIL ADDR	ddefendis@surety.org			
(Check if address is changed)				
	Optional Second E-Mail Ad			
	ddefendis@gmail.co	m		
COMMITTEE'S WEB PAGE AI	DDRESS (URL)			
2. DATE 03 / D	30 ⁷ 2021			
3. FEC IDENTIFICATION N	NUMBER ► C c	00691618		
4. IS THIS STATEMENT	NEW (N) OR	X 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.
Type or Print Name of Treasur	rer Defendis, Dalton, , ,			
Signature of Treasurer	endis, Dalton, , ,	[Electronically Filed]	Date 03	D D / Y Y Y Y 30 2021
NOTE: Submission of false, erro	neous, or incomplete information ANY CHANGE IN INFORMATI	may subject the person signing to N SHOULD BE REPORTED W		penalties of 2 U.S.C. §437g.
Office Use Only		For further information c Federal Election Commissi Toll Free 800-424-9530		FEC FORM 1 (Revised 06/2012)

F	FEC Fo	rm 1 (Revised 02/2009)	Page 2
TYPE	E OF C	OMMITTEE	
Can	didate	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. (Compleinformation below.)	te the candidate
Name Cand			
Cand Party	lidate Affiliati	on Office Sought: House Senate President	State
(C)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name Candi			
Part	ty Con	nmittee:	
(d)			emocratic, publican, etc.) Party.
Polit	tical 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	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.)	
Joint	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 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)

Write or Type Committee Name

The Surety & Fidelity Association of America Political Action Committee

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

The Surety & Fidelity A	ssociation of America									
Mailing Address	1140 19th Street NW									
	Suite 500									
	Washington		DC	20036						
	CITY		STATE	ZIP CODE						
Relationship: 🕱 Connected Organization 🚺 Affiliated Committee 🚺 Joint Fundraising Representative 🚺 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.

Defendis, I	lton, , ,	
Full Name		
Mailing Address	1140 19TH STREET NW	
	SUITE 500	
	WASHINGTON DC 20036	
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	Defendis, Dalton, , ,
Mailing Address	1140 19TH STREET NW
	CITY STATE ZIP CODE
Title or Position	Telephone number 559 907 5360

FEC Form 1 (Revised 02/2009)

Full Name of Designated Agent																				1			I		1			_
Mailing Address																												
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									CI	ΓY								ST/	λΤΕ				ZI	> C	OD	Ε		
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.

Wells	⁻ argo		
Mailing Address	2000 L Street NW		
	Washington		δ −−
	CITY	STATE	ZIP CODE
Name of Bank, Depository,	etc.		
Mailing Address			
	CITY	STATE	ZIP CODE