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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 COMMITTEE (in full) over the lines. is changed) Society for Relief of Distressed and Decayed Pilots Political Action Committee P.O. Box 15441 ADDRESS (number and street) (Check if address is changed) Washington 20003-DC CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS outsourcing@aristotle.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2015 C00240457 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. David M. Mason Type or Print Name of Treasurer David M. Mason [Electronically Filed] 09 17 2015 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 Only

Local 202-694-1100

FF	C Form 1 (Revised 02/2009)	Page 2
TYPE C	OF COMMITTEE	1 ago 2
Candid	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. (Cominformation below.)	plete the candidate
Name of Candida		
Candida Party Af		State
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candida		
Party (Committee:	/Dama avatis
(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 cor	nected 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 secommittee. (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.	vo 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.	o or more political
(Committees Participating in Joint Fundraiser	
1	L L L L L L L L L L L L L L L L L L L	
2	c. FEC ID number C	
3	3. FEC ID number C	
2	ı.	

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V	Vrite or Type Committee Name				
_;	Society for Relief	of Distressed and Dec	cayed Pilots	Political A	ction Committee
6.	Name of Any Connected C	Organization, Affiliated Committee, Jo	oint Fundraising Rep	resentative, or L	eadership PAC Sponsor
Т	he Society for Relief	of Distressed and Decayed	l Pilots		
ī					
		800 S Columbus Blvd			
	Mailing Address				
		Philadelphia		PA 19	9147-4305
		CITY		STATE	ZIP CODE
	Relationship: X Connected	d Organization Affiliated Committee	Joint Fundraising	Representative	Leadership PAC Sponsor
		_			
7.	Custodian of Records: Ider books and records.	atify by name, address (phone number	optional) and posit	ion of the person	in possession of committee
	Mr. J Ward	l Guilday		1 1 1 1 1	
		800 S Columbus Blvd			
	Mailing Address				
		Philadelphia		. PA1	9147-4305
	Title or Position	CITY		STATE	ZIP CODE
	Custodian of Records		Telephone nun	nber <u> </u>]
8.	Treasurer: List the name and any designated agent (e.g., a	d address (phone number optional) onesistant treasurer).	of the treasurer of the	e committee; and	the name and address of
	Full Name David M. No of Treasurer	lason			
	Mailing Address	205 Pennsylvania Ave SE			
		<u>.</u>			1
		Washington		DC 20	0003-1164
		CITY		STATE	ZIP CODE
	Title or Position Treasurer	1		. 202	543 8345
			Telephone nun	nber] - [] - []

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Full Name of Designated Agent	Roy C Pino	
Mailing Address	302 Callender Ln	
	Wallingford PA 19086-6405 CITY STATE ZIP (CODE
Title or Position Designated Ager	ent 	
Banks or Other	Depositories: List all banks or other depositories in which the committee deposits funds, holds accommodately acco	ounts, rents
safety deposit bo Name of Bank, D	oxes or maintains funds. Depository, etc.	
safety deposit bo	pxes or maintains funds. Depository, etc. PNC Bank	
safety deposit bo	oxes or maintains funds. Depository, etc.	
safety deposit bo. Name of Bank, D	PNC Bank 9th and Walnut Street	
safety deposit bo. Name of Bank, D	pxes or maintains funds. Depository, etc. PNC Bank	
safety deposit bo. Name of Bank, D	PNC Bank 9th and Walnut Street Philadelphia PA 19107	L L L L L L L L L L L L L L L L L L L
safety deposit bo. Name of Bank, D	PNC Bank 9th and Walnut Street Philadelphia PA 19107 CITY STATE ZIP 0	
safety deposit bo. Name of Bank, D. Mailing Address	PNC Bank 9th and Walnut Street Philadelphia PA 19107 CITY STATE ZIP 0	
safety deposit bo. Name of Bank, D Mailing Address Name of Bank, D	PNC Bank 9th and Walnut Street Philadelphia PA 19107 CITY STATE ZIP 0	
safety deposit bo. Name of Bank, D. Mailing Address	PNC Bank 9th and Walnut Street Philadelphia PA 19107 CITY STATE ZIP 0	
safety deposit bo. Name of Bank, D. Mailing Address Name of Bank, D.	PNC Bank 9th and Walnut Street Philadelphia PA 19107 CITY STATE ZIP 0	
safety deposit bo. Name of Bank, D. Mailing Address Name of Bank, D.	PNC Bank 9th and Walnut Street Philadelphia PA 19107 CITY STATE ZIP 0	

: 97 'A = G7 9 @ G B9 C I G'H9 LH'F9 @ 5 H98 'HC'5 'F9 DCF HZ G7 < 98 I @ 'CF' + H9 A = N5 H= CB

Form/Schedule: F1N Transaction ID:

This filing updates the treasurer and PAC address information.

Form/Schedule: Transaction ID: