Only

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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) WOMEN'S ACTION FOR NEW DIRECTIONS INC (WAND) 810 7th Street NE ADDRESS (number and street) 14th Floor (Check if address is changed) Washington 20002 DC CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS sboutrs@wand.org (Check if address X is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) wandpac.org (Check if address is changed) DATE 2018 C00170316 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. Boutrs, Sara, , , Type or Print Name of Treasurer Boutrs, Sara, , , [Electronically Filed] 04 13 2018 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

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		OMMITTEE • 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. (Con information below.)	nplete the candidate
Namo Cano	e of didate		
	didate / Affiliati	on Office Sought: House Senate President	State DC District
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	District
Name Cand	e of lidate		
Parl	ty Con	nmittee:	
(d)		This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.
Poli	tical A	ction 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 s 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.)	
Join	t Fund	raising Representative:	
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for t 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 to committees/organizations, none of which is an authorized committee of a federal candidate.	wo or more political
	Com	mittees Participating in Joint Fundraiser	
	1.	FEC ID number	
	2.	FEC ID number	
	3.	FEC ID number	
	4.		

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Write or Type Committee Nam	е	
WOMEN'S AC	TION FOR NEW DIRECTIONS INC (W	AND)
6. Name of Any Connected	Organization, Affiliated Committee, Joint Fundraising Representative, or L	eadership PAC Sponsor
WOMEN'S ACTION F	FOR NEW DIRECTIONS INC (WAND)	
Mailing Address	101 Main Street	
	Cambridge MA 0	2142
	CITY STATE	ZIP CODE
Dalatia nalina ali Canana	d Constitution	Landardhin DAC Cannaga
Relationship: X Connected	d Organization Affiliated Committee Joint Fundraising Representative	Leadership PAC Sponsor
Boutrs, S Full Name  Mailing Address	810 7th Street NE	20002
Title or Position	CITY STATE	ZIP CODE
	Telephone number	459 4769
8. <b>Treasurer:</b> List the name ar any designated agent (e.g.,	nd address (phone number optional) of the treasurer of the committee; and assistant treasurer).	the name and address of
Full Name Boutrs, Sa of Treasurer	ara, , ,	
Mailing Address	810 7th Street NE	
	Washington DC 2	0002
Title or Position	CITY STATE	ZIP CODE

459 |-|

4769

202

Telephone number

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7 20 1 011	(	. age •
Full Name of Designated Agent		
Mailing Address		
T0 5 0	CITY STATE	ZIP CODE
Title or Position	Telephone number	
Banks or Other	Depositories: List all banks or other depositories in which the committee deposits funds, hoxes or maintains funds.	
Name of Bank, I		
Name of Bank, I	Depository, etc.  Bank Of America	
Name of Bank, I	Depository, etc.  Bank Of America  P.O. Box 25118	22-5118 
Name of Bank, I	Depository, etc.  Bank Of America  P.O. Box 25118	22-5118 ZIP CODE
Name of Bank, I	P.O. Box 25118  Tempa  FL 3362  CITY  STATE	
Name of Bank, I	P.O. Box 25118  Tempa  FL 3362  CITY  STATE	ZIP CODE
Name of Bank, I	Depository, etc.    Bank Of America	ZIP CODE
Name of Bank, I	Depository, etc.    Bank Of America	ZIP CODE
Name of Bank, I	Depository, etc.    Bank Of America	ZIP CODE