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•		NEW (Paul Scallette)		
FEC FORM 1	STATEMENT OF ORGANIZATION	RECEIVED TO 2012 JAN 30 PM 1. 00 FEC MAIL CENTER		
1. NAME OF COMMITTEE (in	(Check if name Example:If typing, type over the lines.	12FE4M5		
ADDRESS (number a is changed	doress Providence Con	nt 1 10002 0001		
COMMITTEE'S E-M/	AIL ADDRESS (Please provide only one e-mail address)	STATE ZIP CODE		
is change		idema Dyuhoo, com		
(Check if is change		pulaci yumoo i cem		
2. DATE 0.1 2012 C00510420				
 FEC IDENTIFI IS THIS STATE 	CATION NUMBER G155755 0 10 EMENT NEW (N) OR AMENDED (A)			
I certify that I have	examined this Statement and to the best of my knowledge and belief to the statement and to the best of my knowledge and belief to the statement and to the best of my knowledge and belief to the statement and to the best of my knowledge and belief to the statement and to the best of my knowledge and belief to the statement and to the best of my knowledge and belief to the statement and to the best of my knowledge and belief to the statement and to the best of my knowledge and belief to the statement and to the best of my knowledge and belief to the statement and to the best of my knowledge and belief to the statement and to the best of my knowledge and belief to the statement and to the best of my knowledge and belief to the statement and	it is true, correct and complete. ASSISTANT ACCOUNTANT BLATK COFFMAN FOR		

Γ	STATEMENT OF	RECEIVER	コ
FEC ORGANIZATION	2012 JAN 30 PM 1 00		
		FEC MAIL CENTER	
1. NAME OF COMMITTEE (in	(Check if name Example:If ty n full) is changed) over the lines		
Cam	paison 3000 US ECHI FNC (N	SAITNC (NEP)	لبا
ADDRESS (number a	and street) 1 West Exch	songe St. (28th F	(001)
(Check if a is changed	\ \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	ounty 029.03-28	04
	CITY	STATE ZIP CODE	•
COMMITTEE'S E-MA	AIL ADDRESS (Please provide only one e-mail address)		1
(Check if is change		son 3000 USA WYU Brive iidemia Wyl	hob, con Unbo, cm
COMMITTEE'S WEE	B PAGE ADDRESS (URL)		
(Check if is change		inepubo yuhoo.	<u>clm</u>
2. DATE Z	COO 510 CATION NUMBER G-3.52.58	0420	
4. IS THIS STATE	MENT NEW (N) OR AM	NENDED (A)	

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.

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L	Office Use Only			For further Information contact: Federal Election Commission Toll Free 800-424-9530 Local 202-694-1100	FEC FORM 1 (Revised 02/2009)	

FEC Form 1 (Revised 02/2009)	Page 2				
5. TYPE OF COMMITTEE					
Candidate Cetnmittae: (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.					
information below.)	mines. (Sumplete the sandidate				
Name of Candidate	700 Dad 18				
Candidate Office	State				
Party Affiliation Sought: House Senate	President District				
(c) This committee supports/opposes only one candidate, and is NOT an authorized or	ommittee.				
Name of Candidate Paul ScaleMal					
Party Committee: (National, State	(Democratic,				
(d) This committee is a first or subordinate) committee of the	Republican, etc.) Party.				
Political Action Committee (PAC):					
(e) This committee is a separate segregated fund. (Identify connected organization on li	ine 6.) Its connected organization is a:				
Corporation / V T 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 committee. (i.e., ποιοσιπεστεσ committee)	a separate segregated fund or party				
In addition, this committee is a Lebbyist/Rogistrant PAC.					
In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	J=13				
Joint Fundraising Representative: Specialist of M	ovidence PIDO				
(g) This committee collects contributions, pays fundraising expenses and disburses net procommittees/organizations, at least one of which is an authorized committee of a federal					
(h) This committee collects contributions, pays fundraising expenses and disburses net pr	oceeds for two or more political				
committees/organizations, none of which is an authorized committee of a federal cand	idate.				
Committees Participating in Joint Fundraiser					
	รีการและเลือนการและใจการและใจการและโดย และเลยีกรากกระว่า และเลยเรื่องการและใจการและใ ผู้เลย การกรุงการกรรมการและเลย เรียกการาชุดการการกระว่า และการกรมการเลย การกรรมการกร				
2. FEC ID number	CI				
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01/22	2012				
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_ Committee Corp, Names NFP
FEC Form-1-(Revised 02/2009) (MM) COMPANY Rage 3
Write or Type Committee Name States Co / HYTech Inc (NFP)
6. Name of Any Connected Organization, Affiliated Committee, Joint Fundralsing Representative, or Leadership PAC Sponsor
Coumpaign USA BOOD FFNO (NFA)
Mailing Address Mailing Address
LITTOMIDENCE MALEUM TAILI LITTOMIDENCE STATE ZIP CODE
Relationship: Connected Organization Miliated Committee Joint Fundraising Representative Leadership PAC Sponsor
 Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of committee books and records.
Full Name Sarah Rebecca Rockefuller
Mailing Address
Poul dence RT 188909-12B
Title or Position CITY STATE ZIP CODE
CIO/Chief-TheoOfficer Telephone number 401-837-13407
 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 School School (Brother): 1749 FAST ALS MIG MILLER
Mailing Address Mailing Address Mailing Address
Providence BI 02907-4B
Title or Position Eusene Telephone number 401-8311-13407
L Secretary RE J

	FEC Form 1 (Revised 02/2009)	Page 4
	Full Name of Designated Agent Pool Can Doo Can Doo Co	heller
	Mailing Address	
	Providence Daton By CITY STATE	1909-1B) ZIP CODE
	The or Position Land Action Telephone number Line 1991 1991 1991	J-LI-LI-LIII
	Paulo or Other Percellantes List all hardes or other described in which the committee describe for	ate helds assume under
9.	Banks or Other Depositories: List all banks or other depositories in which the committee deposits fu safety deposit boxes or maintains funds.	nds, noids accounts, rents
	Name of Bank, Depository, etc.	79t
	Lenniterial Dank (8081946-1400
	Mailing Address 4132 BIShop Street	t, Suite 2200
	Henolulu, It 9681	3
	Dountown the the	96813-22-00
	CITY STATE	ZIP CODE
	Name of Bank, Depository, etc.	
	Wells Fahra Bant	(202) 842 1042
	Mailing Address Lenders 1701 Penn Syl Vanio	WA DO
	Review BD, TS+ 14/hNW M	STREAT
	WASHING-TON DC DO	
	CITY	ZIP CODE
=	0-1100111C BANK (3 (A)	274-9820
	0 TO [1] Shine	$DWM(\pm 17)$
	Beverly Hulls THE WORLD BANK (200) 1818 H STreet NW FAX Washington DC, 20433 USI	CA 90210
	Sever 1200 CON	13478-1100
	L THE WORLD BAVIR (20)	1477 1741
	1818 H Street NW FAX	117651
	1. Inchiatetra DC, 20433 451	7
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	Federal Election Commis LACEMENT PAGE FOR INc de to the end of this filing to	
Hand Delivered		Date of Receipt
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Received from Senate	e Public Records Office	Date of Receipt
Received from Electro	onic Filing Office	Date of Receipt
Other (Specify):		Date of Receipt or Postmarked
W		1/30/12

(3/2005)