PAGE 1 / 4

STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) over the lines. is changed) American Ethiopian Public Affairs Committee P.O. Box 636 ADDRESS (number and street) (Check if address is changed) Kennett Square 19348 PA CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS rogerseb@ballardspahr.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2021 C00772673 FEC IDENTIFICATION NUMBER > 3. 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. Degefu, Tilahun, , , Type or Print Name of Treasurer Degefu, Tilahun, , , [Electronically Filed] 03 16 2021 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

	FEC Fo	rm 1 (Revised 02/2009)	Page 2			
		OMMITTEE				
	naidate	idate Committee: This committee is a principal campaign committee. (Complete the candidate information below.)				
(a)						
(b) This committee is an authorized committee information below.)		This committee is an authorized committee, and is NOT a principal campaign committee. (Compinformation below.)	plete the candidate			
	ne of didate					
	didate y Affiliatio	Office Sought: House Senate President	State			
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	District			
	ne of didate					
Par	ty Con	nmittee:				
(d)		· · · · · · · · · · · · · · · · · · ·	Democratic, Republican, etc.) Party.			
Pol	itical A	ction Committee (PAC):				
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its cont	nected organization is a			
		Corporation Corporation w/o Capital Stock	Labor Organization			
		Membership Organization Trade Association	Cooperative			
(5)		In addition, this committee is a Lobbyist/Registrant PAC.				
(f)	×	This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)				
		In addition, this committee is a Lobbyist/Registrant PAC.				
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)				
Joir	nt 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.	o or more political			
		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.	FEC ID number				
	2.	FEC ID number				
	3.	FEC ID number				
	4.					

FEC Form 1 (Revised 02	2/2009)	Page 3				
Write or Type Committee Name		. ago e				
American Ethion	oian Public Affairs Committee					
•	ganization, Affiliated Committee, Joint Fundraising Representative, or	r Leadership PAC Sponsor				
NONE						
Mailing Address						
	CITY STATE	ZIP CODE				
Relationship: Connected	Organization Affiliated Committee Joint Fundraising Representativ	Leadership PAC Sponsor				
. Custodian of Records: Identi books and records.	ify by name, address (phone number optional) and position of the pers	son in possession of committee				
Fesseha, Yo	oum, Abey, ,					
	P.O. Box 636					
Mailing Address						
	Kennett Square PA	19348				
Title or Position	CITY STATE	ZIP CODE				
Secretary	Telephone number	5 527 5405				
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 Degefu, Tila	hun, , ,	ı				
of Treasurer	1129 Putnam Blvd					
Mailing Address						
l	Wallingford	110006				
	Wallingford PA CITY STATE	ZIP CODE				
Title or Position Treasurer	CITY STATE 215 Telephone number					

FEC Form 1 (R	Revised 02/2009)		Page 4				
Full Name of Designated Agent	enu, Mesfin, , ,						
Mailing Address	650 Naamans Road						
	Suite 209						
	Claymont	DE 1 STATE	19703 ZIP CODE				
Title or Position Chairman		phone number 302	524 4179				
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. Bank of America							
Mailing Address	100 North Tryon Street						
Ÿ							
	Charlotte	NC 2	28255				
	CITY	STATE	ZIP CODE				
Name of Bank, Depository, etc.							
Mailing Address							