PAGE 1/4 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) CASSIDY & ASSOCIATES, INC. POLITICAL ACTION COMMITTEE 607 14th Street, NW ADDRESS (number and street) SUITE 400 (Check if address is changed) WASHINGTON 20005 DC CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS jbernstein@cassidy.com (Check if address is changed) Optional Second E-Mail Address rogerseb@ballardspahr.com COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2020 C00327593 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. Bernstein, Jordan, Mark, , Type or Print Name of Treasurer Bernstein, Jordan, Mark, , [Electronically Filed] 02 13 2020 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. FEC FORM 1 (Revised 06/2012)

Office			For further information contact:
Use			Federal Election Commission
			Toll Free 800-424-9530
Only			Local 202-694-1100

FEC Fo	rm 1 (Revised 02/2009)	Page <b>2</b>
	COMMITTEE  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. (Compinformation below.)	plete the candidate
Name of Candidate		
Candidate Party Affiliat	Office Sought: House Senate President	State
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate		
Party Cor		Democratic,
(d)		Republican, etc.) Party.
Political A	action Committee (PAC):	
(e) <b>x</b>	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con-	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 se committee. (i.e., nonconnected committee)	gregated 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 Fund	draising Representative:	
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for tw committees/organizations, at least one of which is an authorized committee of a federal candidate.	o or more political
(h)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for tw committees/organizations, none of which is an authorized committee of a federal candidate.	o or more political
Com	mittees Participating in Joint Fundraiser	
1.	FEC ID number	
2.	FEC ID number	
3.	FEC ID number	
4		

$\Gamma$			
FEC Form 1 (Revised Write or Type Committee Nan			Page 3
<b>3.</b>	SSOCIATES, INC. PO	LITICAL ACTION	ON COMMITTEE
	Organization, Affiliated Committee, Joint		
Cassidy & Associates	s, Inç.		
	<u> </u>		
	607 14th Street, NW		
Mailing Address			
	Suite 400		
	Washington	DC	20005 
	CITY	STATE	ZIP CODE
Relationship: <b>x</b> Connected	ed Organization Affiliated Committee	Joint Fundraising Represent	ative Leadership PAC Sponsor
books and records.	entify by name, address (phone number o	optional) and position of the p	person in possession of committee
Rogers, I Full Name	Emory, , ,		
Mailing Address	1909 K Street, NW		
<b>3</b>	12th Floor		
	Washington	DC	20006
Title or Position	CITY	STATE	ZIP CODE
Custodian of Records		Telephone number	202 - 661 - 7639
Treasurer: List the name a any designated agent (e.g.,	and address (phone number optional) of the assistant treasurer).	ne treasurer of the committee	; and the name and address of
Full Name Bernstein of Treasurer	n, Jordan, Mark, ,		
Mailing Address	607 14th Street, NW		
	Suite 400		
	Washington	DC	20005
	CITY	STATE	ZIP CODE
Title or Position Treasurer	, , , , , , , , , , , , , l	Telephone number	202  -  347  -  0773

Telephone number

FEC Forn	<b>1</b> (Revised 02/2009)	Page <b>4</b>
Full Name of Designated Agent		
Mailing Address		
	CITY STATE Z	ZIP CODE
Title or Position		1 1
Banks or Other safety deposit bo Name of Bank, [		
safety deposit bo		
safety deposit bo Name of Bank, [	Portland  Oepository, etc.  Wells Fargo Bank, N.A.  P.O. Box 6995  OR 97228-69	195 
safety deposit bo Name of Bank, [	Portland  CITY  STATE  Wells Fargo Bank, N.A.  P.O. Box 6995  OR 97228-69	
safety deposit bo Name of Bank, I Mailing Address	Portland  CITY  STATE  Wells Fargo Bank, N.A.  P.O. Box 6995  OR 97228-69	
safety deposit bo Name of Bank, I Mailing Address	Portland  City  State  Cepository, etc.	
safety deposit bo Name of Bank, I Mailing Address  Name of Bank, I	Portland  City  State  Cepository, etc.	
Name of Bank, I	Portland  City  State  Cepository, etc.	