Image# 202310139597648301				PAGE 1 / 4
FEC FORM 1	STATEMEI ORGANIZ			
				Office Use Only
I. NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5	
Shield Al Political A	Action Committee	(SAIPAC)		
	PO Box 30844			
ADDRESS (number and street)				
is changed)				
	Bethesda └ └ └ └ └ └ └ └ └ └ └ └		L <sup>MD</sup> L <sup>2</sup> STATE ▲	20824 
COMMITTEE'S E-MAIL ADDRE	.55 Linfo@campaignfinancial.co	m		
is changed)				
	Optional Second E-Mail Ad	dress		
<ul> <li>(Check if address is changed)</li> </ul>				
2. DATE 10 / 11				
3. FEC IDENTIFICATION N	UMBER ► C C	00782532		
IS THIS STATEMENT	NEW (N) OR	× AMENDED (A)		
certify that I have examined th	his Statement and to the best	of my knowledge and belief	it is true, correct a	nd complete.
-		, , , , , , , , , , , , , , , , , , , ,	, <u> </u>	·
ype or Print Name of Treasure	r McHale, Sterling, , ,			
Signature of Treasurer McH	ale, Sterling, , ,		Date 10	/ D D / Y Y Y 13 / 2023
NOTE: Submission of false, erron		may subject the person signing TION SHOULD BE REPORTE	-	he penalties of 52 U.S.C. §30
Office Use Only		For further information Federal Election Commis Toll Free 800-424-9530 Local 202-694-1100	contact:	FEC FORM 1 (Revised 06/2012)

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5.	TYPE OF COMMITTEE:	
	Candidate 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. (Complete information below.)	the candidate
	Name of Candidate	
	Candidate Office Party Affiliation Sought: House Senate President	State
	(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.	District
	Name of Candidate	
	Party Committee:       (National, State or subordinate) committee of the       (Democra Republica)	itic, in, etc.) Party
	Political Action Committee (PAC):	
	(e) X This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connect	ted organization is a:
		Organization
	Membership Organization Trade Association Coope	erative
	In addition, this committee is a Lobbyist/Registrant PAC.	
	(f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregation committee. (i.e., nonconnected committee)	ted 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.)	
	(g) This committee is an independent expenditure-only political committee (Super PAC).	
	In addition, this committee is a Lobbyist/Registrant PAC.	
	(h) This committee is a political committee with both contribution and non-contribution accounts (Hybrid	PAC).

## Joint Fundraising Representative:

(i) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.
 (j) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.
 Committees Participating in Joint Fundraiser
 1.
 2.

In addition, this committee is a Lobbyist/Registrant PAC.

Relationship:

X Connected Organization

	FEC Form 1 (Revised 0	2/2009)									Page <b>3</b>
۷	Vrite or Type Committee Name										
	Shield AI Politica	I Action Co	mmi	ttee	e (SA	AIP/	AC)				
6.	Name of Any Connected O	rganization, Affiliate	ed Cor	nmitte	e, Joiı	nt Fun	draisir	ng Repre	sentative, o	or Leadership	PAC Sponsor
	Shield Al										
	Mailing Address	600 W Broadway									
		San Diego							CA	92101	

7. **Custodian of Records:** Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

STATE **▲** 

Joint Fundraising Representative

ZIP CODE 🔺

Leadership PAC Sponsor

CITY

Affiliated Organization

CFS, Com	pliance, , ,			
Full Name				
Mailing Address	PO Box 30844			
	Bethesda		MD 20824	
	CITY A		STATE A	ZIP CODE
Title or Position ▼				
Custodian of Records		Telephone nu	mber 301 -	654 - 3220

8. **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	McHale, Sterling, , ,				
Mailing Address	PO Box 30844				
	Bethesda         MD         20824				
	CITY ▲ STATE ▲ ZIP CODE ▲				
Title or Position ▼					
Treasurer       301       -       654       -       3220         Telephone number       -					

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Full Name of Designated Agent		
Mailing Address		
	CITY A STATE A	ZIP CODE
Title or Position ▼		
	Telephone number	·

9. 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.

Well	s Fargo Bank		
Mailing Address	8302 Woodmont Ave		
	Bethesda	MD 20814	4
	CITY 🔺	STATE A	ZIP CODE
Name of Bank, Deposito	ory, etc.		
Mailing Address			
	CITY 🔺	STATE ▲	ZIP CODE