Image# 10930856307

FEC

STATEMENT OF

FORM 1	ORGANIZ	ATION		
1 Olliwi 1	(See instructi	ons)		Office use only
NAME OF COMMITTEE (in f	(Check if name is changed)	Example: If typying, type over the lines	12FE4M5	
Solvay-Abbott	Employee Political Action Com	imittee 		
ADDRESS (number and s	treet) 100 Abbott Park Rd	<u> </u>		
(Check if address	D312 AP6D-2			<u> </u>
is changed)	Abbott Park		LL L	60064 -
		CITY▲	STATE▲	ZIP CODE ▲
COMMITTEE'S E-MAII	_ ADDRESS (Please provide only one e	e-mail address)		
(Check if address is changed)	outsourcing@aristo	otle.com		
is onangos,			11111	
COMMITTEE'S WEB F	PAGE ADDRESS (URL)			
(Check if address	1			
is changed)				
2. DATE 06	/ D D / Y Y Y Y Y Y 2 3 1 0			
		0 00000477	•	
3. FEC IDENTIFICA	TION NUMBER	C C00381475		
4. IS THIS STATEM	ENT NEW (N) OR	X AMENDED (A)		
Loortify that I have examin	ned this Statement and to the best of my kn	nowledge and helief it is true, corre	et and complete	
reetiny that rhave examin	led this Statement and to the best of my kn	lowledge and belief it is true, corre	st and complete	
Type or Print Name of	Freasurer Wayne Brown			
Signature of Treasurer	Electronically Filed by Wayne B	rown	Date 06	23 Y 2010
NOTE: Submission of fals	se, erroneous, or incomplete information m	ay subject the person signing this	•	
Office		For further informati		
Use Only		Federal Election Com Toll Free 800-424-95	mission	FEC FORM 1 (Revised 02/2009)

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5.			DMMITTEE (Check One) 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 t information below.)	he candidate	
	Name Candi				
	Candi Party	idate Affiliatio	on Office House Senate President	State District	
	(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.		
	Name Candi				
	Party	Comm			
	(d)		This committee is a (National, State (or subordinate) committee of the	(Democratic, Republican,etc.) Party.	
	Politic	cal Act	ion Committee (PAC):		
	(e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization				
	(e)	Х	X Corporation Corporation w/o Capital Stock La	bor Organization	
			Membership Organization Trade Association Co	poperative	
			X In addition, this committee is a Lobbyist/Registrant PAC.		
	(f)	(f)	This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated committee. (i.e., nonconnected committee)	d 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 F	Fundra	ising Representative:		
	(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two o committees/organizations, at least one of which is an authorized committee of a federal candidate.	r more political	
	(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two o committees/organizations, none of which is an authorized committee of a federal candidate.	r more political	
		Com	mittees Participating in Joint Fundraiser		
			1. FEC ID number C		
			2. FEC ID number		
			3. FEC ID number		
			FEC ID number C		

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W	rite or Type Committee Name				
	Solvay-Abbott Employe	e Political Action Committee			
6.	Name of Any Connected Org	ganization, Affiliated Committee, Joint Fu	undraising Representative, or Leade	ership PAC Sponsor	
	Abbott				
		<u> </u>		<u> </u>	
	Mailing Address	100 Abbott Park Rd.		1 1 1 1 1 1 1 1 1	
		D312 AP6D			
		Abbott Park		60064 _	
		CITY▲	STATE ▲	ZIP CODE	
	Relationship:				
	X Connected Organization	Affiliated Committee	loint Fundraising Representative	Leadership PAC Sponsor	
7.	Custodian of Records: Identify by name, address, (phone number optional), and position of the person in possession of Committee books and records. Benjamin Oosterbaan Full Name				
Mailing Address 100 Abbott Park Rd.					
		D312 AP60-2			
		Abbott Park		60064	
	Title or Position ▼	CITY A	STATE	ZIP CODE A	
	Custodian	of Records	Telephone number 714	- <u>637</u> - <u>4901</u>	
8.	name and address of any	and address (phone number option designated agent (e.g., assistant treaters)		ttee; and the	
	Mailing Address	100 Abbott Park Rd.			
		D312 AP60-2			
		Abbott Park	<u>IL</u>	60064	
	Title or Position ♥	CITY &	STATE ▲	ZIP CODE A	
	Treasurer		Telephone number 714	_ 637 _ 4901	

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Full Name of Designated Agent						
Mailing Address						
Title or Position ▼	CITY A	STATE 🛦	ZIP CODE A			
	Tel	ephone number				
Banks or Other Depositori safety deposit boxes or main	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, 6	Jame of Bank, Depository, etc.					
Sun	Frust Bank					
Mailing Address	P.O. Box 622227					
	Orlando	FL _	32862			
	CITY 🗖	STATE⊿	ZIP CODE 🛕			
Name of Bank, Depository, e	etc.					
Mailing Address						
	CITY 🙇	STATE △	ZIP CODE 🛕			