Only

STATEMENT OF

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FEC ORGANIZATION FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. PATRIOT VOICES PAC 315 Foxtail Lane ADDRESS (number and street) (Check if address is changed) Spring City 19475 PΑ CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS Nadine@patriotvoices.com (Check if address is changed) Optional Second E-Mail Address ted@kochandhoos.com COMMITTEE'S WEB PAGE ADDRESS (URL) www.patriotvoicespac.com (Check if address is changed) DATE 06 2019 C00528307 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. Maenza, Nadine, , , Type or Print Name of Treasurer Maenza, Nadine, , , [Electronically Filed] 05 06 2019 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

Local 202-694-1100

	FEC Fo	rm 1 (Revised 02/2009)	Page 2			
		OMMITTEE				
	naidate	idate Committee:				
(a)	Ш	This committee is a principal campaign committee. (Complete the candidate information below.)				
(b)	Ш	This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)				
	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			
(h)		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 (Davised 02/2000)	Dogg 2
FEC Form 1 (Revised 02/2009) Write or Type Committee Name	Page 3
PATRIOT VOICES PAC	
	Link Fordside Bornes and the sector by BACC
	ee, Joint Fundraising Representative, or Leadership PAC Sponsor
Santorum Patriot Voices Fund	
901 N Washington Street Mailing Address	
Suite 700	
Alexandria	VA 22314
CITY	STATE ZIP CODE
	SIAIL ZII CODE
Relationship: Connected Organization Affiliated Comm	nittee x Joint Fundraising Representative Leadership PAC Sponsor
 Custodian of Records: Identify by name, address (phone nu books and records. 	mber optional) and position of the person in possession of committee
Maenza, Nadine, , ,	
315 Foxtail Ln	
Mailing Address	
Spring City	, PA , 19475
Title or Position CITY	STATE ZIP CODE
Treasurer	Telephone number 610 - 948 - 4111
 Treasurer: List the name and address (phone number optional and designated agent (e.g., assistant treasurer). 	onal) of the treasurer of the committee; and the name and address of
Full Name Maenza, Nadine, , ,	
of Treasurer	
Mailing Address 315 Foxtail Ln	
Spring City	PA 19475
CITY Title or Position	STATE ZIP CODE
Treasurer	Telephone number 610 948 - 4111

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Full Name of Designated Agent Koch, T	heodore, V, ,						
Mailing Address	901 N Washington Street						
	Suite 700						
	Alexandria CITY	VA L 22 STATE	ZIP CODE				
Title or Position Assistant Treasurer		phone number 703					
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. PNC Bank							
PINC	825 N Washington St						
Mailing Address							
		.,	2244				
	Alexandria	VA	2314				
	CITY	STATE	ZIP CODE				
Name of Bank, Depository, etc.							
Mailing Address							
	CITY	STATE					