FEC FORM 1

STATEMENT OF ORGANIZATION

FORM 1		(See instruction			Office use only
NAME OF COMMITTEE (in	full)	(Check if name is changed)	Example: If typying, type over the lines	12FE4M5	
BOOT PAC ak	a Building Our O	pportunities Tog	ether PAC	1 1 1 1 1 1	
				1 1 1 1 1 1	
ADDRESS (number and	street)	ox 40118			
X (Check if address is changed)		ington		PC L	20016
COMMITTEE'S E MAN	II ADDDECC		CITY▲	STATE	ZIP CODE 📥
COMMITTEE'S E-MAI	IL ADDRESS				1
	DAGE ARRESO (U	<u></u>			
COMMITTEE'S WEB	PAGE ADDRESS (UI	RL)			
COMMITTEE'S FAX N 7034258352	IUMBER	ل			
2. DATE 0 2	1 / D D / Y	2006°			
3. FEC IDENTIFICA	TION NUMBER	(C C00393603		
4. IS THIS STATEM	IENT NEW	(N) OR	X AMENDED (A)		
I certify that I have exami	ned this Statement and	to the best of my know	vledge and belief it is true, correct a	and complete	
Type or Print Name of	TreasurerC	hristopher J. W	ard		
Signature of Treasurer	Electronically Filed	by Christophe	er J. Ward	Date 0 2	22 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
NOTE: Submission of fal		•	subject the person signing this Sta	•	s of 2 U.S.C. S437g.
Office Use Only			For further information Federal Election Commis Toll Free 800-424-9530		FEC FORM 1 (Revised 02/2003)

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5. TYPE OF COMMITTEE (Check One)							
	(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 the complete the compl	andidate					
	Name of Candidate						
	Candidate Party Affiliation Office Sought: House Senate President	State District					
	(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.						
	Name of Candidate						
		emocratic, publican,etc.) Party.					
	(e) This committee is a separate segregated fund						
	(f) X This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fur committee.	nd or party					
6.	S. Name of Any Connected Organization or Affiliated Committee						
L	None						
l		.					
	Mailing Address						
	1	.					
	CITY▲ STATE ▲	ZIP CODE 🛦					
	Relationship						
	Type of Connected Organization:						
	Corporation Corporation w/o Capital Stock Labor Organization	ion					
	Membership Organization Trade Association Cooperative						

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rite or Type Committee Name			
	Our Opportunities Together PAC		
Custodian of Records: Ident possession of Committee bo	tify by name, address, (phone number ooks and records.	optional), and position of th	ne person in
Full Name Christop	her J. Ward		
Mailing Address _	6302 Massachusetts Ave		
-	Bethesda	MD	20816
Title or Position ▼	CITY A	STATE	ZIP CODE A
Treasurer		Telephone number	
name and address of any de	nd address (phone number optional) of esignated agent (e.g., assistant treasurer		ittee; and the
name and address of any de			ittee; and the
Full Name of Treasurer Christop	esignated agent (e.g., assistant treasurer		ittee; and the
rame and address of any definition of Treasurer Christop	esignated agent (e.g., assistant treasurer her J. Ward 6302 Massachusetts Ave).	
rame and address of any definition of Treasurer Mailing Address	esignated agent (e.g., assistant treasurer her J. Ward 6302 Massachusetts Ave Bethesda CITY A		20816
name and address of any definition of Treasurer Mailing Address — Title or Position ▼	esignated agent (e.g., assistant treasurer her J. Ward 6302 Massachusetts Ave Bethesda CITY A		20816
name and address of any definition of Treasurer Mailing Address Title or Position Treasurer Full Name of Designated	esignated agent (e.g., assistant treasurer her J. Ward 6302 Massachusetts Ave Bethesda CITY A		20816
rame and address of any definition of Treasurer Mailing Address Title or Position Treasurer Full Name of Designated Agent	esignated agent (e.g., assistant treasurer her J. Ward 6302 Massachusetts Ave Bethesda CITY A		20816

Telephone number

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9.	safety deposit boxes or maintains funds.								
	Name of Bank, Depository, etc.								
	Nation	al City Bank							
	Mailing Address	3580 West Maple Rd							
		Bloomfield Hills 483	301 _						
		CITY A STATE A ZI	P CODE △						