**FEC** 

Only

## STATEMENT OF

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**ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) over the lines. is changed) National Restaurant Association PAC (Restaurant PAC) 2055 L Street, NW ADDRESS (number and street) Suite 700 (Check if address is changed) Washington 20036 DC CITY A STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS (Check if address droehl@restaurant.org is changed) Optional Second E-Mail Address aholmes@restaurant.org COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2025 C00003764 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. Type or Print Name of Treasurer Roehl, Dan,, 11 18 2025 Signature of Treasurer Roehl, Dan, , , Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 52 U.S.C. §30109. 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

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	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 the cinformation below.)							
	Name of Candidate						
	Candidate Office Sought: House Senate President	State					
	(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.						
Name of Candidate							
	Party Committee:						
	(d) This committee is a (National, State or subordinate) committee of the Republican, e	tc.) Party					
	Political Action Committee (PAC):						
	(e) X This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected	organization is a:					
	Corporation Corporation w/o Capital Stock Labor Org	anization					
	Membership Organization Trade Association Cooperative	/e					
	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.)						
	(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	).					
	In addition, this committee is a Lobbyist/Registrant 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 C						

Treasurer

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W	Vrite or Type Committee Name					
		rant Association PAC (Res	•			
6.		rganization, Affiliated Committee, Joint Fur	ndraising Representative, or Lea	adership PAC Sponsor		
	National Restaurant	Association				
	Mailing Address	2055 L Street NW				
		Washington	DC   20	036		
		CITY ▲	STATE ▲	ZIP CODE ▲		
	Dalatianahin Y Camaatad			Leadership PAC Sponso		
	Relationship: X Connected	Organization Affiliated Organization	Joint Fundraising Representative	Leadership PAC Sponso		
7.	Custodian of Records: Ident books and records.	ify by name, address (phone number optiona	l) and position of the person in pos	ssession of committee		
	Schrader,	Alexandria, , ,				
	Full Name					
	Mailing Address	2055 L Street, NW				
		Suite 700				
		Washington	DC 20	036		
		OITV A	OTATE A	71D CODE A		
	Title or Position ▼	CITY ▲	STATE ▲	ZIP CODE ▲		
	Custodian of Records		Telephone number 202	-   331   -   5920		
8.	<b>Treasurer:</b> 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 Roehl, Dar	1, , ,				
		<sub>1</sub> 2055 L Street, NW				
	Mailing Address	Suite 700				
		Washington	DO	000		
		Washington	DC 20	036		
		CITY ▲	STATE ▲	ZIP CODE ▲		
	Title or Position ▼					

202

Telephone number

331

5928

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Full Name of Designated Agent	Kennedy, Sean, , ,				
Mailing Address	2055 L Street, NW				
	STE 700				
	Washington 	DC	20036		
Title or Position <b>▼</b>		ΓATE ▲		ZIP CODE ▲	
Assistant Treasur		r L	202	374   -   1363	
Banks or Other safety deposit box	<b>Depositories:</b> List all banks or other depositories in which the committee covers or maintains funds.	deposits	s funds, hold	s accounts, rents	
Name of Bank, D	epository, etc.				
	PNC Bank				
Mailing Address	800 Connecticut Ave				
	Washington	DC	20006		
	CITY ▲ ST.	ATE A		ZIP CODE ▲	
Name of Bank, Depository, etc.					
	<u> </u>				
Mailing Address					
	CITY ▲ ST.	ATE A		ZIP CODE ▲	

## : 97 'A = G7 9 @ G B9 C I G'H9 LH'F9 @ 5 H98 'HC' 5 'F9 DCF HŽ G7 < 98 I @ 'CF' ± H9 A ± N5 H± CB

Form/Schedule: F1N Transaction ID:

Changing custodian of records and updating contact information.

Form/Schedule: Transaction ID: