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. PAYR Federal PAC 112 State Street ADDRESS (number and street) (Check if address is changed) Harrisburg 17101 PA CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS Pennsylvaniayrs@gmail.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2018 C00683003 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. Donohue, Thomas, , Mr., Type or Print Name of Treasurer Donohue, Thomas, , Mr., [Electronically Filed] 07 16 2018 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

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	orm 1 (Revised 02/2009)  COMMITTEE	Page <b>2</b>
	e 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. (Compinformation below.)	plete the candidate
Name of Candidate		
Candidate Party Affiliat	ion Office Sought: House Senate President	State District
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate		
Party Cor		_
(d)		Democratic, Republican, etc.) Party
Political A	Action Committee (PAC):	
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con-	nected organization is
	Corporation Corporation w/o Capital Stock	Labor Organization
	Membership Organization Trade Association	Cooperative
	In addition, this committee is a Lobbyist/Registrant PAC.	
(f) <b>x</b>	This committee supports/opposes more than one Federal candidate, and is NOT a separate secommittee. (i.e., nonconnected committee)	gregated 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 Fund	draising Representative:	
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for tw 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
Com	nmittees Participating in Joint Fundraiser	
1.	FEC ID number	
2.	FEC ID number	
3.	FEC ID number	
4.		

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Write or Type Committee I	Name	-
PAYR Federa	al PAC	
6. Name of Any Connect	ed Organization, Affiliated Committee, Joint Fundraising Representa	tive, or Leadership PAC Sponsor
NONE		
Mailing Address		
	CITY STAT	E ZIP CODE
Relationship: Conn	ected Organization Affiliated Committee Joint Fundraising Repres	sentative Leadership PAC Sponso
Custodian of Records: books and records.	Identify by name, address (phone number optional) and position of the	he person in possession of committee
Buett	ner, Meredith, , ,	
Mailing Address	70 Fahnestock Rd	
Ç		
	Malvern	19355
Title or Position	CITY STATE	ZIP CODE
PAC Chair/Asst Treas	Telephone number	610 - 585 - 7380
Treasurer: List the nam any designated agent (e	e and address (phone number optional) of the treasurer of the comming., assistant treasurer).	ittee; and the name and address of
Full Name Donol of Treasurer	nue, Thomas, , Mr.,	
Mailing Address	15 S. Church Street	
	West Chester PA	19382
Title or Position	CITY STATE	
	Telephone number	484 653 7189

FEC FOR	<b>n 1</b> (Revised 02/2009)	Page <b>4</b>
Full Name of Designated		
Agent		
Mailing Address		
	CITY STATE Z	ZIP CODE
Title or Position		
	Telephone number	
		accounts, rents
safety deposit bo	exes or maintains funds.	accounts, rents
safety deposit bo Name of Bank, I	Wells Fargo  17 N High Street  West Chester  PA 19382	accounts, rents
safety deposit bo Name of Bank, I	Wells Fargo  17 N High Street  West Chester  CITY  STATE	
safety deposit bo Name of Bank, I Mailing Address	Wells Fargo  17 N High Street  West Chester  CITY  STATE  Zepository, etc.	
safety deposit bo Name of Bank, I  Mailing Address  Name of Bank, I	Wells Fargo  17 N High Street  West Chester  CITY  STATE	
safety deposit bo Name of Bank, I Mailing Address	Wells Fargo  17 N High Street  West Chester  CITY  STATE  Zepository, etc.	
safety deposit bo Name of Bank, I  Mailing Address  Name of Bank, I	Wells Fargo  17 N High Street  West Chester  CITY  STATE  Zepository, etc.	
safety deposit bo Name of Bank, I  Mailing Address  Name of Bank, I	Wells Fargo  17 N High Street  West Chester  CITY  STATE  Zepository, etc.	