FEC FORM 1	STATEMEN ORGANIZA		Office Use	PAGE 1 / 4
1. NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5	
Let's Get To Wor	k PAC			-
	PO Box 9891			
ADDRESS (number and street)				
(Check if address is changed)	Arlington		VA 22219 STATE ▲	
COMMITTEE'S E-MAIL ADDRE	SS			
(Check if address is changed)	salpurpura2010@gmail	.com		
	Optional Second E-Mail Add	ress		
COMMITTEE'S WEB PAGE AD	DRESS (URL)			
2. DATE 12	^D / Y Y Y Y 2018			
3. FEC IDENTIFICATION N	UMBER ► C co	0692335		
4. IS THIS STATEMENT	NEW (N) OR	AMENDED (A)		
I certify that I have examined t	his Statement and to the best	of my knowledge and belief it	is true, correct and comple	te.
Type or Print Name of Treasure	r Purpura, Salvatore, , ,			
Signature of Treasurer	ura, Salvatore, , ,	[Electronically Filed]	Date 12 / 03	/ Y Y Y Y 2018
NOTE: Submission of false, erron	eous, or incomplete information r ANY CHANGE IN INFORMATIO			s of 2 U.S.C. §437g.
Office Use Only		For further information c Federal Election Commissi Toll Free 800-424-9530 Local 202-694-1100		FORM 1 ed 06/2012)

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TYPE OF	COMMITTEE
Candidat	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. (Complete the candidate information below.)
Name of Candidate	
Candidate Party Affilia	tion Office Sought: House Senate President District
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.
Name of Candidate	
Party Co	mmittee:
(d)	This committee is a (National, State or subordinate) committee of the (Democratic, Republican, etc.) Part
Political /	Action Committee (PAC):
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is
	Corporation Corporation w/o Capital Stock Labor Organization
	Membership Organization
	In addition, this committee is a Lobbyist/Registrant PAC.
(f) x	This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or part 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.)
Joint Fun	draising Representative:
(g)	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.
(h)	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.
Cor	nmittees Participating in Joint Fundraiser
1.	FEC ID number
2.	FEC ID number
3.	FEC ID number
4.	FEC ID number

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Write or Type Committee Name

Let's Get To Work PAC

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

Scott, Rick, , ,			
Mailing Address	PO Box 9891		
		VA	22219
	CITY	STATE	ZIP CODE
Relationship: Connected	Organization Affiliated Committee Joint Fund	raising Representativ	ve x 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.

Purpura, S	Salvatore, , ,
Full Name	
Mailing Address	6334 Pumpernickel Lane
-	
	Monroe NC 28110
Title or Position	CITY STATE ZIP CODE
Treasurer	Telephone number 704 668 1993

8. **Treasurer:** 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 of Treasurer	Purpura, Salvatore, , ,
Mailing Address	6334 Pumpernickel Lane
	Monroe
	CITY STATE ZIP CODE
Title or Position	

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Full Name of Designated Agent																		1	1									
Mailing Address		L																										
		L																										
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Title or Position							CI	ΙΥ									517	41 E				ZI	P	JUL	JE			
												Tele	eph	one	e ni	umt	ber											

9. 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.

Chain I	Bridge Bank		
Mailing Address	1445-A Laughlin Ave		
	McLean	VA 22101	
	CITY	STATE	ZIP CODE
Name of Bank, Depository, e	etc.		
Mailing Address			
	CITY	STATE	ZIP CODE