FEC FORM 1	_	IENT OF IZATION ructions)	Offic	e use only
1. NAME OF COMMITTEE (in f	ull) (Check if nan is changed)	ne Example: If typying, type over the lines	12FE4M5	1
Tucker Arensb	erg Political Action Commi	ttee 		
ADDRESS (number and s	treet) 1500 One PPG F	Place		
(Check if addre	ss			
is changed)	Pittsburgh			15222
		CITY	STATE	ZIP CODE
COMMITTEE'S E-MAI				
COMMITTEE'S WEB I	PAGE ADDRESS (URL)			
COMMITTEE'S FAX N	UMBER			
ليا لينا				
2. DATE 0 1	/ D D / Y Y Y Y 16 2007			
3. FEC IDENTIFICA	TION NUMBER	C C00150151		
4. IS THIS STATEM	ENT X NEW (N)	OR AMENDED (A)		
I certify that I have examin	ned this Statement and to the best of n	ny knowledge and belief it is true, correct	and complete	
Type or Print Name of ⁻	Treasurer J. Kent Cull	ey		
Signature of Treasurer	Electronically Filed by J. Ke	nt Culley	Date 01	D D / Y Y Y Y Y 16 / 2007
NOTE: Submission of fals		on may subject the person signing this St RMATION SHOULD BE REPORTED		2 U.S.C. S437g.
Office Use Only		For further information Federal Election Comm Toll Free 800-424-9530 Local 202-694-1100	ission	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 car information below.) 	ndidate
	Name of Candidate	_
	Party Affiliation Sought: House Senate President	State
	(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.	
	Name of Candidate]
	(d) This committee is a (National, State (or subordinate) committee of the (Dem Reputer Reputer (or subordinate) committee of the (e) X This committee is a separate segregated fund (f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund committee.	nocratic, Iblican,etc.) Party. I or party
6.	Name of Any Connected Organization or Affiliated Committee	
0.		
	Mailing Address	
	CITYA STATEA ZI	P CODE 🛦
	Relationship	
	Type of Connected Organization:	
	Corporation Corporation w/o Capital Stock Labor Organization	1
	Membership Organization Trade Association Cooperative	

FEC Form 1 (Revised 02/2003	3)		Page 3
Vrite or Type Committee Name			
Tucker Arensberg Political A	Action Committee		
Custodian of Records: Identify possession of Committee book	by name, address, (phone number s and records.	 optional), and position of th 	e person in
Full Name			
Mailing Address			
Title or Position ♥	CITY A	STATE	ZIP CODE
		Telephone number	
name and address of any desig	address (phone number optional) o gnated agent (e.g., assistant treasure	r).	tee; and the
of Treasurer			
of Treasurer Mailing Address			
	CITY A		
Mailing Address			
Mailing Address			
Mailing Address Title or Position ▼ Full Name of Designated			
Mailing Address Title or Position ▼ Full Name of Designated Agent			
Mailing Address Title or Position ▼ Full Name of Designated Agent			
Mailing Address Title or Position ♥ Full Name of Designated Agent Mailing Address		STATE▲ Telephone number	

	FEC Form	1 (Rev	/ise	ed C)2/2	200)3)																													Pa	age	4		
9.	Banks or Other safety deposit bo Name of Bank, D	xes	or n	nai	nta	ins		List nds	ba	nks	or	[.] otł	ner	de	pos	sito	ries	s in	ı wł	nich	1 th	e c	om	mit	tee	de	po	sits	s fu	nds	s, h	old	Is a	icc	our	nts,	, re	nts	i		
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	Mailing Address													1	1	1							[1										1						
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