

**FEC
FORM 1****STATEMENT OF
ORGANIZATION**

Office Use Only

1. NAME OF COMMITTEE (in full) ☐ (Check if name is changed) Example: If typing, type over the lines.

12FE4M5

ArchiPAC -The American Institute of Architects

ADDRESS (number and street)

1735 New York Avenue, NW

☐ (Check if address is changed)

Washington

CITY ▲

DC

STATE ▲

20006

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

☐ (Check if address is changed)

archipac@aia.org

Optional Second E-Mail Address

COMMITTEE'S WEB PAGE ADDRESS (URL)

☐ (Check if address is changed)

2. DATE

MM / DD / YYYY
05 / 18 / 2021

3. FEC IDENTIFICATION NUMBER ►

C C00139071

4. 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 Perez, Wendy, , , Young

Signature of Treasurer

Perez, Wendy, , , Young

[Electronically Filed]

Date

MM / DD / YYYY
05 / 18 / 2021

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
Use
OnlyFor further information contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-694-1100**FEC FORM 1**
(Revised 06/2012)

1.  FEC ID number **C** 
2.  FEC ID number **C** 
3.  FEC ID number **C** 
4.  FEC ID number **C** 

Write or Type Committee Name

ArchiPAC -The American Institute of Architects**6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor**

The American Institute of Architects

Mailing Address

1735 New York Avenue, NW

Washington

DC

20006

CITY

STATE

ZIP CODE

Relationship: ☒ Connected Organization ☐ Affiliated Committee ☐ Joint Fundraising Representative ☐ 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.

Full Name

Outsourcing LLC, PAC, , ,

Mailing Address

5845 Richmond Hwy

Suite 820

Alexandria

VA

22303

Title or Position

CITY

STATE

ZIP CODE

Book Keeper

Telephone number

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

Perez, Wendy, , , Young

Mailing Address

1735 New York Avenue, NW

Washington

DC

20006

CITY

STATE

ZIP CODE

Title or Position
Manager, PAC

Telephone number

202

626

7381

Full Name of
Designated
Agent

Perez Young, Wendy, , ,

Mailing Address

1735 New York Ave., NW

Washington

CITY

DC

STATE

20006-5292

ZIP CODE

Title or Position

Custodian of Records

Telephone number

202

626

7381

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.

Capital Bank

Mailing Address

2275 Research Blvd.

Suite 600

Rockville

CITY

MD

STATE

20850

ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

CITY

STATE

ZIP CODE

FEC MISCELLANEOUS TEXT RELATED TO A REPORT, SCHEDULE OR ITEMIZATION

Form/Schedule: F1A

Transaction ID :

Updating Treasurer Information

Form/Schedule:

Transaction ID: