FEC

STATEMENT OF

FORM 1	ORGANIZA	ATION		
1 011111 1	(See instruction	ns)		Office use only
NAME OF COMMITTEE (in f	(Check if name is changed)	Example: If typying, type over the lines	12FE4M5	
RenRe North A	merica Employee Services Inc.,	Political Action Committe	ee 	
				11111111
ADDRESS (number and s	rreet) 3200 Atlantic Avenue	e, <u> </u>		
(Check if address	Suite 114	1 1 1 1 1 1 1 1 1 1	11111	11111111
is changed)	Raleigh		Γ <mark>ν</mark> C] [27604 -
		CITY▲	STATE▲	ZIP CODE ▲
COMMITTEE'S E-MAIL	ADDRESS (Please provide only one e-	,		
(Check if address is changed)	RenRe@electioncom	ipliance.com		
COMMITTEE'S WEB F	PAGE ADDRESS (URL)			
(Check if address				
is changed)		<u> </u>		
2. DATE 0 3	/ D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
3. FEC IDENTIFICAT	TION NUMBER	C C00487033		
4. IS THIS STATEMI	ENT X NEW (N) OR	AMENDED (A)		
I certify that I have examin	ed this Statement and to the best of my kno	wledge and belief it is true, correct	and complete	
Time on Drint Name of 3	reasurer Stacey M. Hodge	25		
Type or Print Name of 1	reasurer			
Signature of Treasurer	Electronically Filed by Stacey M.	Hodges	Date 03	02 YY2011
NOTE: Submission of fals	ee, erroneous, or incomplete information may	y subject the person signing this St		
Office		For further information		
Use		Federal Election Comm Toll Free 800-424-9530	ission	FEC FORM 1 (Revised 02/2009)

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5.	5. TYPE OF COMMITTEE (Check One) 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. (Comp information below.)	lete the candidate		
	Name of Candida				
	Candida Party Af		Stateent District		
	(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.			
	Name of Candida				
	Party C	ommittee:			
	(d)	(National, State This committee is a (or subordinate) committee of the	(Democratic, Republican,etc.) Party.		
	Politica	Action Committee (PAC):			
	(e)	X This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:			
		X Corporation Corporation w/o Capital Stock	Labor Organization		
		Membership Organization Trade Association	Cooperative		
	(f)	X In addition, this committee is a Lobbyist/Registrant PAC.			
	(1)	This committee supports/opposes more than one Federal candidate, and is NOT a separate segre committee. (i.e., nonconnected committee)	gated 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.)			
_		in addition, this committee is a Leadership FAC. (Identity Sponsor on line 6.)			
	Joint Fu	ndraising 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 t committees/organizations, none of which is an authorized committee of a federal candidate.	wo or more political		
		Committees Participating in Joint Fundraiser			
		1. FEC ID number C			
		2. FEC ID number			
		3. FEC ID number			
		4. FEC ID number C			

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W	rite or Type Committee Name					
	RenRe North America E	mployee Services Inc., Polit	tical Action Committee (Re	enRe PAC)		
6.	Name of Any Connected Org	ganization, Affiliated Committee,	Joint Fundraising Representa	ntive, or Leade	ership PAC Sponsor	
	RenRe North America En	ployee Services Inc.				
	Mailing Address	3200 Atlantic A	venue			
		Suite 114				
		Raleigh,		NC _	27604 _ [
		CITY▲	S.	TATE 🛕	ZIP CODE 🛦	
	Relationship:					
	X Connected Organization	Affiliated Committee	Joint Fundraising Repres	sentative	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.					
	•	PAC Outsourcing LLC				
	Mailing Address	6192 Oxon Hill Rd				
		Suite 601				
		Oxon Hill		MD _	20745	
	Title or Position ♥	CITY A	s	TATE	ZIP CODE A	
	Custodian	of Records	Telephone numbe	er <u>301</u>	- <u>839</u> - <u>6510</u>	
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 Stacey M. Hodges					
	Mailing Address	3200 Atlantic A	Avenue,			
	gg	Suite 114				
		Raleigh		NC	27604	
	Title or Position ♥	CITY A	s	STATE A	ZIP CODE A	
	Treasurer		. Telephone numbe	919	_ 256 _ 8252	
	-		. Gophone numbe			

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Full Name of Designated Agent	Wade Williams			
Mailing Address	6192 Oxon Hill Road			
	Suite 601			
	Oxon Hill	MD	20745	
Title or Position ▼	CITY A	STATE ▲	ZIP CODE A	
Assistan	t Treasurer T	elephone number 301		
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.				
Ban	k of America			
Mailing Address	6011 Oxon Hill Road			
	Oxon Hill	MD	20745	
	CITY 🗻	STATE⊿	ZIP CODE 🛕	
Name of Bank, Depository,	etc.		_	
Mailing Address				
	CITY 🙇	STATE △	ZIP CODE 🛕	