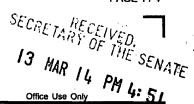
FEC FORM 1

STATEMENT OF ORGANIZATION



FORM 1			A11011		Office Use Only	4:51
1. NAME OF COMMITTEE (in	ı full)	(Check if name is changed)	Example: If typing, over the lines.	12FE4M	ar-allowands.co-Presont	
Cede No C	Fround I	PAC	<u> </u>	· 	_	
	<u> </u>	<u> </u>	<u> </u>	<u>. ! </u>		
ADDRESS (number a		PO Box 14022				
(Check if ac is changed)		Washington		DC	20044	
			CITY	STATE	ZIP CODE	
COMMITTEE'S E-MA (Check if is change	address	(Please provide only one e				
COMMITTEE'S WEB	PAGE ADDRE	:SS (URL)				
(Check if is change						
2. DATE	14 3	2013			CUISTAR 19	
3. FEC IDENTIFIC	CATION NUMB		gweigere (prosignary) - againg 100498089 harathanathan (bar Llagere) - a ag	4	A	
4. IS THIS STATE	MENT 🔀	NEW (N) OR	AMENDE	D (A)	1.4	
I certify that I have o	examined this	Statement and to the best	t of my knowledge and	belief it is true, corre	ect and complete.	
Type or Print Name	of Treasurer	Jim Gibbons				
Signature of Treasure	Jim Gibbon	S Jan M.	ll->	Date	North Property of Straight	de la constantina de La constantina de la
NOTE: Submission of		s, or incomplete information Y CHANGE IN INFORMATI	•		•	C. §437g.
Office Use Only			For further info Federal Election Toll Free 800-42 Local 202-694-1	4-9530	FEC FORM (Revised 02/2009	8

···	FEC Fo	rm 1 (Revised 02/2009)	Page 2
		OMMITTEE	
Cer	ndidate	e Committee:	
(a)	San	This committee is a principal campaign committee. (Complete the candidate information below.)	
(b)	3 3	This committee is an authorized committee, and is NOT a principal campaign committee. (Complinformation below.)	ete the candidate
Nam Can	e of didate		The state of the s
	didate y Affiliati	Office Sought: House Senate President	State District
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Nam Can	e of didate		
Par	ty Con	nmittee:	-
(d)	AND SECTION AND SE		emocratic, epublican, etc.) Party.
Pol	itical A	ction Committee (PAC):	
(e)	(a	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization on line 6.)	ected organization is a
		Corporation Corporation w/o Capital Stock	Labor Organization
			Cooperative
		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 seg committee. (i.e., nonconnected committee)	regated fund or party
		In addition, this committee is a Lebbyist/Registrant PAC.	
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Join	nt Fund	draising Representative:	
(g)	Constant of the Constant of th	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate.	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.	or more political
	Com	mittees Participating in Joint Fundraiser	
	1.	FEC ID number C	an garan agan sa ga an ay a ca a gan an garan saga an akan saga an an ay a ca an
	2.	FEC 1D number C	nanga on organisa ng mandanangan na maga on organisa ng mandangan na palaba
	3.	FEC ID number	
	4.		

1 20 1 01111 1 (11011		age o
Write or Type Committee	Name	
Cede No Gro	ound PAC	
6. Name of Any Connec	cted Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PA	AC Sponsor
NONE		
Mailing Address	<u> </u>	
Mailing Address		
		<u> </u>
	CITY STATE ZIP (CODE
Relationship:	nected Organization Affiliated Committee Joint Fundralsing Representative Leadersh	ip PAC Sponsor
Custodian of Records: books and records.	s: Identify by name, address (phone number optional) and position of the person in possession	on of committee
1	npaign Financial Services	1
Full Name	PO Box 30844	!
	Bethesda MD 20824]-[]
Title or Position	CITY STATE ZIP C	ODE
Custodian of Records	Telephone number 301 - 654]-[]
3. Treasurer : List the nam any designated agent (e	ne and address (phone number optional) of the treasurer of the committee; and the name ar e.g., assistant treasurer).	address of
Full Name Jim G	Gibbons	
Mailing Address	PO Box 827	
	Severna Park MD 21146	J
Title or Position	CITY STATE ZIP C	
I I I I I I I I I I I I I I I I I I I	Telephone number 301 - 654]-[

	FEC Form	m 1 (Revised	2/2009)		Page 4
	Full Name of Designated	•			1
	Agent				
	Mailing Address				
			<u> </u>		
			CITY	STATE	ZIP CODE
	Title or Position		1 -	1	
				lephone number	J
9.	Banks or Other safety deposit be Name of Bank,	oxes or maint		the committee deposits fun	ds, holds accounts, rents
		PNC Ba	1K 		
	Mailing Address		1k -		
	Mailing Address				
	Mailing Address				15230
	Mailing Address		PO Box 339	PA	15230
	Mailing Address		PO Box 339 Pittsburgh CITY		
			PO Box 339 Po Box 349 CITY		
	Name of Bank,	Depository, et	PO Box 339 Pittsburgh CITY TGO T901 Wisconsin Avenue	STATE	ZIP CODE
		Depository, et	PO Box 339 I I I I I I I I I I I I I I I I I I I	STATE	ZIP CODE
	Name of Bank,	Depository, et	PO Box 339 Pittsburgh CITY TGO 7901 Wisconsin Avenue MD 1010	STATE	ZIP CODE
	Name of Bank,	Depository, et	PO Box 339 Pittsburgh CITY . rgo 7901 Wisconsin Avenue	STATE	ZIP CODE

I control of the cont	Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS he FEC added this page to the end of this filing to indicate how it was received.			
Hand Delivered	Date of Receipt 3 /14/13			
USPS First Class Mail	Postmarked			
USPS Registered/Certified	Postmarked (R/C)			
USPS Priority Mail	Postmarked			
Delivery Confirmation™ or Signature Confir	rmation™ Label			
USPS Express Mail	Postmarked			
Postmark Illegible				
No Postmark				
Overnight Delivery Service (Specify):	Shipping Date			
Next Busines	ss Day Delivery			
Received from House Records & Registration Office	Date of Receipt			
Received from Senate Public Records Office	Date of Receipt			
Received from Electronic Filing Office	Date of Receipt			
Other (Specify):	Receipt or Postmarked			
h	3/20/19			
(3/2005)	DATE PREPARED			