Image# 201808239121511404				PAGE 1 / 5
FEC FORM 1	STATEMEI ORGANIZ			
1. NAME OF	(Check if name	Example: If typing, type		ffice Use Only
COMMITTEE (in full)	is changed)	over the lines.	12FE4M5	
ADDRESS (number and street)	PO BOX 26141			
(Check if address				
is changed)			VA 223	313
			L⊥_ L⊥ STATE ▲	
COMMITTEE'S E-MAIL ADDF	CHRIS@ELECTIONC	FO.COM		
(Check if address is changed)				
	Optional Second E-Mail Ad BRENDA@ELECTI	dress ONCFO.COM		
COMMITTEE'S WEB PAGE A (Check if address is changed)	DDRESS (URL)			
	23 ⁷ Y Y Y Y 2018			
3. FEC IDENTIFICATION I	NUMBER ► C c	:00685941		
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	l complete.
-				
Type or Print Name of Treasu	rer MARSTON, CHRIS, , ,			
Signature of Treasurer	RSTON, CHRIS, , ,	[Electronically Filed]	Date	23 / Y Y Y Y 2018
NOTE: Submission of false, erro	neous, or incomplete information ANY CHANGE IN INFORMAT	may subject the person signing ION SHOULD BE REPORTED V		penalties of 2 U.S.C. §437g.
Office Use Only		For further information of Federal Election Commiss Toll Free 800-424-9530 Local 202-694-1100		FEC FORM 1 (Revised 06/2012)

08/23/2018 10 : 28

-			
F	FEC Fo	rm 1 (Revised 02/2009)	Page 2
TYPE	E OF C	COMMITTEE	
Can	didate	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 information below.)	ne candidate
Name Cand			
Cand Party	lidate Affiliati	on Sought: House Senate President	ate
(C)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name Cand			
Part	ty Con	nmittee:	
(d)		This committee is a (National, State or subordinate) committee of the (Demo Republic	cratic, ican, etc.) Party
Poli	tical A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected	organization is a
		Corporation Corporation w/o Capital Stock Labo	r Organization
		Membership Organization Trade Association Coop	erative
		In addition, this committee is a Lobbyist/Registrant PAC.	
(f)	×	This committee supports/opposes more than one Federal candidate, and is NOT a separate segregate committee. (i.e., nonconnected committee)	ed 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.)	
Join	t Fund	Iraising Representative:	
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or m committees/organizations, at least one of which is an authorized committee of a federal candidate.	ore political
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or m committees/organizations, none of which is an authorized committee of a federal candidate.	ore political
	Com	mittees Participating in Joint Fundraiser	
	1.	FEC ID number	
	2.	FEC ID number	
	3.	FEC ID number	
	4.	FEC ID number	

FEC Form 1 (Revised 02/2009)

Page 3

Write or Type Committee Name

AMERICAN POTENTIAL PAC

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

Mailing Address			
	CITY	STATE	ZIP CODE
Relationship: Connected	Organization Affiliated Committee Jo	int Fundraising Representative	Leadership PAC Sponsor
books and records.	ify by name, address (phone number optic	onal) and position of the perso	n in possession of committee
HANKINS, E	3RENDA, , ,		
Mailing Address	PO BOX 26141		
	ALEXANDRIA		22313
Title or Position	CITY	STATE	ZIP CODE
		Telephone number	
 Treasurer: List the name and any designated agent (e.g., as 	address (phone number optional) of the tassistant treasurer).	reasurer of the committee; and	d the name and address of
Full Name MARSTON, of Treasurer	CHRIS, , ,		
Mailing Address	PO BOX 26141		
Title or Position	ALEXANDRIA	VA 2 STATE	22313 ZIP CODE
		Telephone number	

FEC Form 1 (Revised 02/2009)

Full Name of Designated Agent										ĺ																	1		
Mailing Address																													
			L																										
								1											L			L			1			1	
	CITY													ST	ATE				ZI	р С	COD	θE							
Title or Position																													
														Tele	eph	ione	e ni	uml	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.
------	----	-------	-------------	------

EAGLE	BANK		
Mailing Address	2001 K ST NW		
		DC 20006	
	CITY	STATE ZIP	CODE
Name of Bank, Depository,	etc.		
Mailing Address			
	CITY	STATE ZIP	CODE

:97 `A=G79 @@5 B9CIG`H9LH`F9 @5 H98 `HC`5 `F9DCFHžG7<98 I@9 `CF`+H9A=N5 H=CB

Form/Schedule: F1N Transaction ID :

This committee intends to make independent expenditures, and consistent with the U.S. Court of Appeals for the District of Columbia Circuit decision in SpeechNow v. FEC, it therefore intends to raise funds in unlimited amounts. This committee will not use those funds to make contributions, whether direct, in-kind, or via coordinated communications, to federal candidates or committees.

Form/Schedule: Transaction ID: