PAGE 1/5 STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) over the lines. is changed) NEW AMERICA PAC NV 203 South Union Street ADDRESS (number and street) Suite 300 (Check if address is changed) Alexandria 22314 VACITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS leob@newam.org (Check if address is changed) Optional Second E-Mail Address michael@dbcapitolstrategies.com COMMITTEE'S WEB PAGE ADDRESS (URL) www.newam.org (Check if address is changed) DATE 06 2014 C00549006 FEC IDENTIFICATION NUMBER 3. X 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. Michael Gruccio Type or Print Name of Treasurer Michael Gruccio [Electronically Filed] 06 06 2014 Signature of Treasurer Date 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			For further information contact:
Use			Federal Election Commission
			Toll Free 800-424-9530
Only			Local 202-694-1100

	FEC Fo	rm 1 (Revised 02/2009)	Page <b>2</b>			
		OMMITTEE • 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 candidate information below.)				
Nam Can	ne of didate					
	didate y Affiliati	on Office Sought: House Senate President	State District			
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.				
Nam Cand	e of didate					
Par	ty Con	nmittee:	(Dama avatia			
(d)		· · · ·	(Democratic, Republican, etc.) Party.			
Poli	itical A	ction Committee (PAC):				
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its cor-	nected organization is a:			
		Corporation Corporation w/o Capital Stock	Labor Organization			
		Membership Organization Trade Association	Cooperative			
		In addition, this committee is a Lobbyist/Registrant PAC.				
(f)	$\times$	This committee supports/opposes more than one Federal candidate, and is NOT a separate secommittee. (i.e., nonconnected committee)	egregated 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	ıt Fund	Iraising Representative:				
(g)		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.	vo 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.	o or more political			
	Com	mittees Participating in Joint Fundraiser				
	1.	FEC ID number				
	2.	FEC ID number				
	3.					
	4.					
	•••	<b></b>				

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Write or Type Committee Nan		. ags s
NEW AMERIC	A PAC NV	
	Organization, Affiliated Committee, Joint Fundraising Representative, or Leadersh	ip PAC Sponsor
NONE		
Mailing Address		
		-
	CITY STATE Z	ZIP CODE
Relationship: Connecto	ed Organization Affiliated Committee Joint Fundraising Representative Lead	dership PAC Sponsor
7. Custodian of Records: Ide	entify by name, address (phone number optional) and position of the person in poss	ession of committee
books and records.		
Michael (	Gruccio	
	203 South Union Street	
Mailing Address	Suite 300	
	Alexandria , VA , 22314	
Title or Position	CITY STATE Z	ZIP CODE
Assistant Treasurer	Talanhana numbar   202   -   2	210   5431
	Telephone number	
8. <b>Treasurer:</b> List the name a any designated agent (e.g.,	nd address (phone number optional) of the treasurer of the committee; and the nam assistant treasurer).	ne and address of
Full Name Mr. Leo E	Bletnitsky	
of Treasurer	(2054 North Demont Blud	
Mailing Address	2251 North Rampart Blvd	
	#375	
	Las Vegas NV 89128	
Title or Position		IP CODE
Treasurer	Telephone number 202 - 2	10 - 5431

9.

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Full Name of Designated Agent  Michael Gr	uccio	1 1 1 1 1 1 1				
Mailing Address	203 South Union Street					
	Suite 300					
	Alexandria	VA 22314 STATE	ZIP CODE			
Title or Position Assistant Treasurer	Telephone nu	ımber <u>202</u> – <u> </u>	210 5431			
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.  Access National Bank						
Mailing Address	4221 Walney Road					
	Suite 120					
	Chantilly	VA 20151				
	CITY	STATE	ZIP CODE			
Name of Bank, Depository, etc.						
Mailing Address						
	CITY	STATE	ZIP CODE			

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## : 97 A = G7 9 @ 5 B9 CI G'H9 LHF9 @ 5 H98 'HC' 5 F9 DCFHz G7 < 98 I @ 'CF' ± H9 A ± N5 H± CB

Form/Schedule: F1A Transaction ID:

This amendment filed to update bank address. Consistent with the stipulated judgment in Carey v. FEC, this committee has established a separate bank account (a Carey Account) to deposit and withdraw funds raised in unlimited amounts from individuals, corporations, labor organizations, and/or other political committees (Carey Contributions). The Carey Contributions maintained in this Carey account will not be used to make contributions, whether direct, in-kind, or via coordinated communications, or coordinated expenditures, to federal candidates or committees.

Form/Schedule: Transaction ID: