

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

Squire Patton Boggs Political Action Committee (Squire Patton Boggs PAC)

ADDRESS (number and street) 2550 M Street N.W.

(Check if address is changed)

Washington DC 20037 CITY STATE ZIP CODE

COMMITTEE'S E-MAIL ADDRESS

(Check if address is changed) edward.newberry@squirepb.com

Optional Second E-Mail Address jeffrey.weber@squirepb.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address is changed)

2. DATE 08 / 08 / 2022

3. FEC IDENTIFICATION NUMBER C C00401083

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 Newberry, Edward, J., Mr.,

Signature of Treasurer Newberry, Edward, J., Mr., [Electronically Filed] Date 08 / 08 / 2022

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 52 U.S.C. §30109. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

5. TYPE OF COMMITTEE:

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. (Complete the candidate information below.)

Name of Candidate _____

Candidate Party Affiliation Office Sought: House Senate President State District

- (c) This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate _____

Party Committee:

- (d) This committee is a (National, State or subordinate) committee of the (Democratic, Republican, etc.) Party

Political Action 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 Labor Organization

Membership Organization Trade Association Cooperative

In addition, this committee is a Lobbyist/Registrant PAC.

- (f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)

In addition, this committee is a Lobbyist/Registrant PAC.

In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)

- (g) This committee is an independent expenditure-only political committee (Super PAC).

In addition, this committee is a Lobbyist/Registrant PAC.

- (h) This committee is a political committee with both contribution and non-contribution accounts (Hybrid PAC).

In addition, this committee is a Lobbyist/Registrant PAC.

Joint Fundraising Representative:

- (i) 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.
- (j) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.

Committees Participating in Joint Fundraiser

1. _____

2. _____

C _____

C _____

Write or Type Committee Name

Squire Patton Boggs Political Action Committee (Squire Patton Boggs PAC)

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor
Squire Sanders (US) LLP Political Action Committee (Squire Sanders PAC)

Mailing Address 1200 19th Street
Suite 300
Washington DC 20036
CITY STATE ZIP CODE

Relationship: [] Connected Organization [x] Affiliated Organization [] 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 Newberry, Edward, J., Mr.,
Mailing Address 2550 M Street N.W.
Washington DC 20037
CITY STATE ZIP CODE

Title or Position
Treasurer Telephone number 202 457 5285

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 Newberry, Edward, J., Mr.,
Mailing Address 2550 M Street N.W.
Washington DC 20037
CITY STATE ZIP CODE

Title or Position
Treasurer Telephone number 202 457 5285

Full Name of Designated Agent | Newberry, Edward, J., Mr., |

Mailing Address | 2550 M Street N.W. |
| |
| Washington | DC | 20037 | - |
CITY ▲ STATE ▲ ZIP CODE ▲

Title or Position ▼ | | Telephone number | 202 | - | 457 | - | 5285 |

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 | 1850 K Street, NW |
| |
| Washington | DC | 20006 | - |
CITY ▲ STATE ▲ ZIP CODE ▲

Name of Bank, Depository, etc.

BB&T Bank |
Mailing Address | 601 13th Street |
| NW |
| Washington | DC | 20005 | - |
CITY ▲ STATE ▲ ZIP CODE ▲

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

FEC Form 1S (Revised 02/2017)

5(g) or (h). Joint Fundraising Participant:

1.	<input type="text"/>	FEC ID number	<input type="text" value="C"/>
2.	<input type="text"/>	FEC ID number	<input type="text" value="C"/>
3.	<input type="text"/>	FEC ID number	<input type="text" value="C"/>
4.	<input type="text"/>	FEC ID number	<input type="text" value="C"/>

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

Mailing Address

Relationship: CITY ▲ STATE ▲ ZIP CODE ▲

Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor

8. Designated Agent: Identify by name, address (phone number – optional)

Full Name Mahon, Stephen, , ,

Mailing Address

TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲
Telephone Number - -

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.

Mailing Address

CITY ▲ STATE ▲ ZIP CODE ▲

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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4.	<input type="text"/>	FEC ID number	<input type="text" value="C"/>

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

Mailing Address

Relationship: CITY ▲ STATE ▲ ZIP CODE ▲

Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor

8. Designated Agent: Identify by name, address (phone number – optional)

Full Name Ruehlman, Mark, , ,

Mailing Address

TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲
Telephone Number - -

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.

Mailing Address

CITY ▲ STATE ▲ ZIP CODE ▲