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FEC FORM 1		STATEMEN ORGANIZA		Office Use	PAGE 1 / 5
1. NAME OF COMMITTEE (in t	full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5	
NEWT 2012					
ADDRESS (number and		Suite 900			
is changed)		Arlington		VA 22203 STATE ▲	
COMMITTEE'S E-MAI	L ADDRES	S			
(Check if ac is changed)	ldress	tswindle@newt.org			
, s		Optional Second E-Mail Add	lress lentons.com		
COMMITTEE'S WEB F (Check if ac is changed)		RESS (URL)			
2. DATE 08	/ D 25	2016			
3. FEC IDENTIFICA	ATION NU	MBER ► C cc	0496497		
4. IS THIS STATEM	ENT	NEW (N) OR	× AMENDED (A)		
I certify that I have ex	amined thi	s Statement and to the best	of my knowledge and belief it is	s true, correct and comp	ete.
Type or Print Name of	Treasurer	Taylor O. Swindle			
Signature of Treasurer	Taylor	O. Swindle	[Electronically Filed]	Date 08 / 25	2016
NOTE: Submission of fa			may subject the person signing th DN SHOULD BE REPORTED WI		es of 2 U.S.C. §437g.
Office Use Only			For further information con Federal Election Commission Toll Free 800-424-9530 Local 202-694-1100		FORM 1 sed 06/2012)

	FEC Fo	rm 1 (Revised 02/2009) Page 2
		OMMITTEE
Car	ndidate	e Committee:
(a)	X	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 Cano	ne of didate	
	didate y Affiliati	
(C)		District
Nam Cano	ne of didate	
Par	ty Con	nmittee:
(d)		This committee is a (National, State or subordinate) committee of the (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 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.)
Join	nt Func	Iraising 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 two or more political committees/organizations, none of which is an authorized committee of a federal candidate.
	Com	mittees Participating in Joint Fundraiser
	1.	
	2.	FEC ID number C
	3.	
	4.	

I

FEC Form 1 (Revised 02/2009)

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Write or Type Committee Name

NEWT 2012

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

Solutions Start in the H	louse			
Mailing Address	2470 Daniells BR Rd., Ste. 121			
	Athens		GA	30606
	CITY		STATE	ZIP CODE
Relationship: Connected	Organization Affiliated Committee X	Joint Fundraising	Representativ	e 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.

Taylor O. S	Swindle
Full Name	
Mailing Address	4501 N. Fairfax Dr.
	Suite 900
	Arlington VA 22203 Image: Ima
Title or Position	CITY STATE ZIP CODE
Treasurer	Telephone number 239 _ 280 _ 7463

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	Taylor O. Swindle
of Treasurer	
Mailing Address	4501 N. Fairfax Dr.
	Suite 900
	Arlington
	CITY STATE ZIP CODE
Title or Position Treasurer	Telephone number 239 280 7463

FEC Form 1 (Revised 02/2009)

Full Name of Designated Agent	Taylor O. Swindle
Mailing Address	4501 N. Fairfax Dr., Ste. 900
	Arlington
	CITY STATE ZIP CODE
Title or Position	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.

	WashingtonFirst Bank		
Mailing Address	4501 N. Fairfax Dr.		
		VA 22203	
	CITY	STATE ZIF	P CODE
Name of Bank, D	epository, etc.		
Mailing Address			
	CITY	STATE ZIF	P CODE

FORM 1S -STATEMENT OF ORGANIZATION (Supplemental Page)

FEC Form 1G	(Revised 06/2011)

Banks or Other Deposito	ries: List all banks or other depositories in which the	committee deposits funds,	holds accounts, rents
safety deposit boxes or ma			
Name of Bank, Depository	, etc.		[ADDITIONAL]
Mailing Address			
	CITY 🗖	STATE 🗖	ZIP CODE 🔺
Name of Any Connected	Organization, Affiliated Committee, Joint Fundraisin	a Poprosontativo, or Logo	[ADDITIONA
COMMITTEE FOR		ig Representative, or Lead	
Mailing Address	4501 N. Fairfax Dr.		
inaling / laar ooo	Suite 900		
			22203
	Arlington		///03
ationship: Connected Organization			
Connected Organization			ZIP CODE 4
Connected Organization Designated Agent			– – ZIP CODE 📥
Connected Organization			ZIP CODE 4
Connected Organization Designated Agent			ZIP CODE 4
Connected Organization Designated Agent Full Name			ZIP CODE 4
Connected Organization Designated Agent Full Name	CITY	L L L L L L L L L L L L L L L L L L L	Image: style="text-align: center;">Image: style="text-align: center;"/>Image: style="text-align: center;"//// Image: style="text-align: center;"/>Image: styl
Connected Organization Designated Agent Full Name Mailing Address			ZIP CODE 4
Connected Organization Designated Agent Full Name Mailing Address	CITY	L L L L L L L L L L L L L L L L L L L	Image: style="text-align: center;">Image: style="text-align: center;"/>Image: style="text-align: center;"//// Image: style="text-align: center;"/>Image: styl