FEC FORM 1

STATEMENT OF ORGANIZATION

FORM 1		ORGANIZATION							
. •	· ·		(See instruction	ns)			Office	e use only	
1. NAME OF COMMIT	TEE (in full)		(Check if name is changed)		nple: If typying, type the lines	12FE	4M5		
FRIEDM	IAN BILLIN	IGS RAMSEY	GROUP INC PO	PLITICA	L ACTION COMI	MITTE			ш
									ш
ADDRESS (nu	mber and street)	1001	19TH STREET	NORTH					ш
(Check i	f address ed)	ARLII	NGTON	<u> </u>				22209 _	ш ш
				CITY▲		STATE	•	ZIP CODE 📥	
COMMITTEE'	S E-MAIL AD	DRESS (Please	provide only one e-	mail addre	ess)				
`	f address	sarce	neaux@politic	alcompl	iance.com				لــــــ
X is chang	eu)			1 1 1	11111	1 1 1 1			
	f address	E ADDRESS (UF	RL)	<u> </u>					
2. DATE	M M /	1 3 / Y	^Y 2 0 1 1						
3. FEC IDEI	NTIFICATION	NUMBER	[C C00	391417				
4. IS THIS S	STATEMENT	NEW	(N) OR	X	AMENDED (A))			
I certify that I ha	ve examined t	his Statement and t	to the best of my kno	owledge an	d belief it is true, corre	ect and comple	te		
Type or Print N	lame of Trea	surer H	arriet Markowi	tz					
Signature of T	reasurer E	Electronically Filed	by Harriet Ma	arkowitz	:	Date	0 9 /	12 / 2	0 [°] 1 1
NOTE: Submiss	sion of false, e				ne person signing this			2 U.S.C. §437g.	
Offi Us On	е				For further informat Federal Election Com Toll Free 800-424-95 Local 202-694-1100	nmission	F	FEC FORM 1 (Revised 02/2009)	I

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5.			OMMITTEE (Check One) 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 Candid									
	Candid Party /	date Affiliati	Office Sought: House Senate President	State District						
	(c)	(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.								
	Name Candi									
	Party	Comn								
	(d)		This committee is a (National, State (or subordinate) committee of the	(Democratic, Republican,etc.) Party.						
	Political Action Committee (PAC):									
	(e)	X	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected	ed organization is a:						
			X Corporation Corporation w/o Capital Stock La	bor Organization						
			Membership Organization Trade Association C	ooperative						
			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)	d 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.)							
	Joint F	undra	alsing 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 committees/organizations, none of which is an authorized committee of a federal candidate.										
	Committees Participating in Joint Fundraiser									
			1. FEC ID number							
			2. FEC ID number							
			3. FEC ID number							
			EEC ID number C							

Write or Type Committee Name

	FRIEDMAN BILLINGS RAMSEY GROUP INC POLITICAL ACTION COMMITTE						
6.	Name of Any Connected Org	ganization, Affiliated Committee, Join	t Fundraising Representative, or L	eadership PAC Sponsor			
Ш	Friedman Billings Ramse	ey Group Inc.					
		1 1 1 1 1 1 1					
	Mailing Address	1001 19th Street No.	orth				
		Arlington	L VA	22209			
		CITY	STATE ▲	ZIP CODE 🛦			
	Relationship: Connected Organization	Affiliated Committee	Joint Fundraising Representative	Leadership PAC Sponsor			
7.	possession of Committee	entify by name, address, (phone nubooks and records. L Markowitz	umber optional), and position	of the person in			
	Mailing Address	1001 19th Street No	orth				
	Walling Address						
		Arlington		22209			
	Title or Position ▼	CITY A	STATE	ZIP CODE A			
	Treasurer		Telephone number	3 - 312 - 9500			
8.		and address (phone number opt designated agent (e.g., assistant		nmittee; and the			
	Full Name of Treasurer Harriet	Harriot I. Markowitz					
	Mailing Address	1001 19th Street North					
		Arlington		22209			
	Title or Position ♥	CITY 🛦	STATE ▲	ZIP CODE A			
	Treasurer		Telephone number	3 _ 312 _ 9500			
							

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	Full Name of Designated Agent								
	Mailing Address								
	Title or Position ▼	CITY A	STATE A	ZIP CODE A					
		Telephone n	umber						
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.								
		Chevy Chase Bank							
	Mailing Address	7501 Wisconsin Avenue							
			1 1 1 1 1						
		Bethesda	MD	20814					
		CITY 🛕	STATE △	ZIP CODE 🛕					
	Name of Bank, De	pository, etc.							
	Mailing Address								
		CITY 🙇	STATE △	ZIP CODE 🛕					