FEC FORM

## STATEMENT OF ORGANIZATION

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FEC MAIL CENTER

FORM 1	ORGANIZATION						FEC MAIL CENTER					
1. NAME OF COMMITTEE (in	ı full)		heck if name changed)		ple:If typing, type he lines.	12FE4M5	reference of consistence and					
Fowler Wh	ite Bo	ggs <sub>,</sub> B	anker Su	ınçoa	st Federal	PAC						
ADDRESS (number a	nd street)	501	East Ken	nedy	Blvd							
	(Check if address is changed)		oa Lili		FL	33602						
				CITY		STATE	ZIP CODE					
COMMITTEE'S E-MA	AL ADDRES	SS (Please p	provide only one e	-mail addr	ess)							
(Check if is change				<u> </u>			<del></del>					
COMMITTEE'S WEB	PAGE ADI	DRESS (UR	L)									
(Check if Is change	address d)			<u> </u>								
2. DATE	N / D	D / 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4	VIEW EVI									
3. FEC IDENTIFIC	CATION NU	JMBER	C 00	0230	516							
4. IS THIS STATE	MENT _	NEW (	N) OR	$\boxtimes$	AMENDED (A)							
I certify that I have e	examined th	is Statemen	t and to the bes	t of my kn	owledge and belief i	t is true, correct	and complete.					
Type or Print Name	of Treasure	Jam	es King	1/	)							
Signature of Treasure		ra	mes =	H	sur	Date O	6 92014					
NOTE: Submission of					ct the person signing. LD BE REPORTED W		the penalties of 2 U.S.C. §437g.					
Office Use				[ F	or further information of detail Election Commission Section Commission Section Commission Section Sec		FEC FORM 1					

	i	FEC Fo	orm 1 (Revised 02/2009)	Page 2
5.			COMMITTEE e Committee:	
	(a)	П	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	o the candidate
	Name		Information below.)	
	Cand	lidale		
	Cand Party	lidate Affiliati	Ilon Sought: House Senate President	State District
	(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	***************************************
	Name Cand			11111
	Part	y Con	nmittee:	
	(d)			nocratic, ublican, etc.) Party.
	Poli	tical A	Action Committee (PAC):	
	(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) its connect	ed organization is a
			Corporation Corporation w/o Capital Stock	bor Organization
			Membership Organization Trade Association Co	operative
			In addition, this committee is a Lobbyist/Registrant PAC.	
	(1)		This committee supports/opposes more than one Federal candidate, and is NOT a separate segrecommittee. (i.e., nonconnected committee)	gated 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	t Fund	draising Representative:	
	(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or committees/organizations, at least one of which is an authorized committee of a federal candidate.	more political
(	(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or committees/organizations, none of which is an authorized committee of a federal candidate.	more political
		Com	nmittees Participating in Joint Fundraiser	
		1,	FEC ID number C	personal personal personal que en el giptimo de la gi La compania de la co La compania de la co
		2.	FEC ID number C	pina ay in angan nagi nangsama g g kan nisang istin ni di amadabahan
		3.	FEC ID number C	alaman kangalan nya mahambah Manadhan kangalan at kana
		4.		a mengan sembah menghan dinggan dang B

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Write or Type Committee Nan	ne	
Fowler White B	oggs Banker Suncoast Federal PAC	
6. Name of Any Connected	Organization, Affiliated Committee, Joint Fundralsing Representative,	or Leadership PAC Sponsor
Buchanan Ingei	rsoll & Ropney PC Committee for Effec	rtive Government
"BIR+PC PAC "		
Mailing Address	One Oxford Centre,  20th Floor	
	301	
	Pittistourgh	11,5219, 1-1 , , , 1
	CITY STATE	ZIP CODE
Relationship: Connecto	ed Organization Affiliated Committee Joint Fundraising Representa	Leadership PAC Sponsor
7. Custodian of Records: Ide books and records.	ehilify by name, address (phone number optional) and position of the p	erson in possession of committee
Full Name		
Mailing Address		
		<u> </u>
Title or Position	CITY STATE	ZIP CODE
سننس	Telephone number	
8. Treasurer: List the name at any designated agent (e.g.,	and address (phone number optional) of the treasurer of the committee; assistant treasurer).	and the name and address of
Full Name of Treasurer		
Mailing Address		
	CITY STATE	ZIP CODE
Title or Position		
	Telephone number	

	n 1 (Revised	02/2009)										Pa	ge 4
Full Name of Designated Agent	L					<u></u>		لسلسا					
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Title or Position	<u> </u>		<u> </u>		ד	Telephone	a numb	er [		_]-[		_J-L	1.1
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Mailing Address	Depository, e	L. L		CITY				TATE	 		ZIP		
	Depository, e	Lto.		LIL				TATE			ZIP	CODE	
Name of Bank, I	Depository, e	L		CITY				TATE			ZIP		
	Depository, e	\\.		CITY				TATE			ZIP	CODE	
Name of Bank, I	Depository, e	tc.		CITY				TATE			ZIP	CODE	
Name of Bank, I	Depository, e	tc.		CITY				TATE			ZIP	CODE	





## Buchanan Ingersoll & Rooney PC

Attorneys & Government Relations Professionals

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Federal Election Commission 999 E. Street, N.W. Washington, DC 20463

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DATE PREPARED

PREPARER (8/2013)