Image# 201608049022176575				08/04/2016 13 : 02
FEC FORM 1	STATEMEN ORGANIZ		Offic	PAGE 1 / 4
1. NAME OF	(Check if name	Example:If typing, type	12FE4M5	
COMMITTEE (in full)	is changed)	over the lines.	125674ND	
The Us Campaig	n Fund			
ADDRESS (number and street)	499 South Capitol Street, SW	,		
(Check if address	Suite 422			· · · · · · · · · · · · · · · · · · ·
is changed)	Washington			3
			SIALE	
COMMITTEE'S E-MAIL ADDR				
(Check if address is changed)		ultingDC.com		
	Optional Second E-Mail Add	dress		
COMMITTEE'S WEB PAGE AI	http://www.theuscampaign.co	m/ 		
	D4 / Y Y Y Y 2016			
3. FEC IDENTIFICATION N	IUMBER ► C C	00575662		
4. IS THIS STATEMENT	K NEW (N) OR	AMENDED (A)		
I certify that I have examined	this Statement and to the best	of my knowledge and belief i	t is true, correct and o	complete.
Type or Print Name of Treasur	er Lindsay F. Angerholzer			
Signature of Treasurer	lsay F. Angerholzer	[Electronically Filed]	Date	04 / Y Y Y Y 04 2016
NOTE: Submission of false, error	neous, or incomplete information ANY CHANGE IN INFORMATI	may subject the person signing ON SHOULD BE REPORTED \		enalties of 2 U.S.C. §437g.
Office Use Only		For further information Federal Election Commiss Toll Free 800-424-9530 Local 202-694-1100	sion	EC FORM 1 (Revised 06/2012)

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F	EC Fo	rm 1 (Revised 02/2009)	Page 2
TYPE	OF C	OMMITTEE	
Cano	didate	e 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 information below.)	e the candidate
Name Candi			
Candi Party	idate Affiliati	on Office Sought: House Senate President	State
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name Candi			
Party	y Con	nmittee:	
(d)			nocratic, ublican, etc.) Party
Polit	ical A	ction 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	ooperative
		In addition, this committee is a Lobbyist/Registrant PAC.	
(f)	Х	This committee supports/opposes more than one Federal candidate, and is NOT a separate segreg committee. (i.e., nonconnected committee)	pated 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	Func	Iraising 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	mittees Participating in Joint Fundraiser	
	1.	FEC ID number	
	2.	FEC ID number	
	3.	FEC ID number	
	4.	FEC ID number	

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Write or Type Committee Name

The Us Campaign Fund

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

Rep. John Sarbane	≥S 	
Mailing Address	499 South Capitol Street, SW	
	Suite 422	
	Washington	DC 20003
	CITY	STATE ZIP CODE
Relationship: Conne	ected Organization Affiliated Committee Joint Fundrais	sing Representative X Leadership PAC Spor
Custodian of Records: books and records.	Identify by name, address (phone number optional) and po	osition of the person in possession of commit
Full Name		
Mailing Address		
Title or Position	CITY	STATE ZIP CODE
	Telephone	number
Treasurer: List the name any designated agent (e	e and address (phone number optional) of the treasurer of .g., assistant treasurer).	the committee; and the name and address of
	ay F. Angerholzer	
Mailing Address	499 South Capitol Street, SW	
	Suite 422	
	Washington	DC 20003
	CITY	STATE ZIP CODE
Title or Position Treasurer	Telephone r	number 202 - 403 - 0606

FEC Form 1 (Revised 02/2009)

Full Name of Designated Agent														I									1			
Mailing Address																										
																			L				_			
						C	:IT)	(STA	ΤE				ZII	ΡC	OD	١E		
Title or Position																										
											Tele	eph	one	e ni	umt	ber										

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.

Bar	nk of America, N.A.		
Mailing Address	201 Pennsylvania Avenue, SE		
	Washington		20003
	CITY	STATE	ZIP CODE
Name of Bank, Deposit	tory, etc.		
Mailing Address			
			<u> </u>
	CITY	STATE	ZIP CODE