Image# 201804189110342592				PAGE 1 / 4
FEC FORM 1	STATEMEI ORGANIZ	_		
	(Chaok if nome	Example of turing ture		ffice Use Only
1. NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5	
Democracy, Dip	lomacy, Develop	ment, and Defen	se PAC (4[DPAC)
ADDRESS (number and street)	2815 11th Street, NW			
(Check if address is changed)				
	Washington			001
	CITY A		STATE A	ZIP CODE
COMMITTEE'S E-MAIL ADDI	RESS			
(Check if address	vwinpisinger@msn.cor	n		
is changed)	Optional Second E-Mail Ad	drage		
	mdpurzycki@gmail.c			
COMMITTEE'S WEB PAGE A	ADDRESS (UBL)			
(Check if address	http://www.4dpac.com			
is changed)				
2. DATE 04	17 2018			
3. FEC IDENTIFICATION	NUMBER ► C C	00396820		
	_			
4. IS THIS STATEMENT	NEW (N) OR	X AMENDED (A)		
I certify that I have examined	I this Statement and to the best	of my knowledge and belief in	t is true, correct and	complete.
Type or Print Name of Treasu	Irer Purzycki, Michael, D., ,			
Signature of Treasurer	rzycki, Michael, D., ,	[Electronically Filed]	Date 04	D D / Y Y Y Y 18 2018
NOTE: Submission of false, err	oneous, or incomplete information	may subject the person signing ON SHOULD BE REPORTED V		penalties of 2 U.S.C. §437g.
Office		For further information		
Use Only		Federal Election Commiss Toll Free 800-424-9530 Local 202-694-1100		FEC FORM 1 (Revised 06/2012)

04/18/2018 15 : 32

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FEC Form 1 (Revised 02/2009)	Page 2
TYPE OF COMMITTEE	
Candidate Committee:	
(a) This committee is a principal campaign committee. (Complete the candidate information	ו below.)
(b) This committee is an authorized committee, and is NOT a principal campaign committee information below.)	e. (Complete the candidate
Name of Candidate	
Candidate Office Sought: House Senate Pres	State sident District
(c) This committee supports/opposes only one candidate, and is NOT an authorized comm	nittee.
Name of Candidate Image: Candidate <th< td=""><td></td></th<>	
Party Committee:	
(d) This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Part
Political Action Committee (PAC):	
(e) This committee is a separate segregated fund. (Identify connected organization on line 6	b.) Its connected organization is
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 sep committee. (i.e., nonconnected committee)	parate segregated fund or part
In addition, this committee is a Lobbyist/Registrant PAC.	
In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Joint Fundraising Representative:	
(g) This committee collects contributions, pays fundraising expenses and disburses net proceed committees/organizations, at least one of which is an authorized committee of a federal ca	
(h) This committee collects contributions, pays fundraising expenses and disburses net proceed 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	
4.	

FEC Form 1 (Revised 02/2009)

Write or Type Committee Name

Democracy, Diplomacy, Development, and Defense PAC (4DPAC)

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

Mailing Address										
	CITY		STATE	ZIP CODE						
Relationship: Connected Organization Affiliated Committee 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.

Purzycki, I	Michael, D., ,
Full Name	
Mailing Address	2001 North Adams Street
	Room 1017
	Arlington VA 22201
Title or Position	CITY STATE ZIP CODE
Treasurer	908 227 6337 Telephone number 908 1

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	Purzycki, Michael, D., ,
Mailing Address	2001 North Adams Street
	Room 1017
	Arlington
	CITY STATE ZIP CODE
Title or Position Treasurer	Telephone number 908 227 6337

FEC Form 1 (Revised 02/2009)

Full Name of Designated Agent																									
Mailing Address																									
		L																							
															L			L							
						CI	TΥ								ST	ATE	Ξ			ΖI	PC		ЭЕ		
Title or Position																									
										Tel	eph	ione	e n	um	ber		L							<u> </u>	

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.

Bank o	f America		
Mailing Address	PO Box 15284		
	Wilmington		9850
	CITY	STATE	ZIP CODE
Name of Bank, Depository,	etc.		
Mailing Address			
	CITY	STATE	ZIP CODE