FEC

STATEMENT OF

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ORGANIZATION FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Partnership for America PO Box 7427 ADDRESS (number and street) (Check if address is changed) Alexandria 22307-7427 VACITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS partnership@electioncompliance.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 20 2016 C00494153 FEC IDENTIFICATION NUMBER > 3. X IS THIS STATEMENT NEW (N) OR AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. Wade Williams Type or Print Name of Treasurer Wade Williams [Electronically Filed] 07 20 2016 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530 Only

Local 202-694-1100

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TYPE OF (COMMITTEE e Committee:	. 250 -	
(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 of Candidate			
Candidate Party Affilia	Office Sought: House Senate President	State	
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.		
Name of Candidate			
Party Co		(Domooratio	
(d)	(National, State This committee is a or subordinate) committee of the	(Democratic, Republican, etc.) Party.	
Political A	Action Committee (PAC):		
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its co	nnected 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) X	This committee supports/opposes more than one Federal candidate, and is NOT a separate s committee. (i.e., nonconnected committee)	egregated 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 Fun	draising Representative:		
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for t 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 t committees/organizations, none of which is an authorized committee of a federal candidate.	wo or more political	
Con	nmittees Participating in Joint Fundraiser		
1.	FEC ID number		
2.	FEC ID number		
3.	FEC ID number		
4.			

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Write or Type Committee Nar		. ago c
Partnership for		
<u> </u>	l Organization, Affiliated Committee, Joint Fundraising Representative	e, or Leadership PAC Sponsor
Frank LoBiondo		
Mailing Address	PO Box 550	
	Vineland NJ CITY STATE	08362 ZIP CODE
Relationship: Connect	ted Organization Affiliated Committee Joint Fundraising Represen	tative X Leadership PAC Sponsor
. Custodian of Records: Id books and records.	lentify by name, address (phone number optional) and position of the	person in possession of committee
	itsourcing LLC	
Full Name LILL Mailing Address	5845 Richmond Highway	
	Suite 820	
	Alexandria	22303
Title or Position	CITY STATE	ZIP CODE
Custodian of Records	Telephone number	301 - 347 - 6551
. Treasurer: List the name a any designated agent (e.g.	and address (phone number optional) of the treasurer of the committee , assistant treasurer).	e; and the name and address of
Full Name Wade W	ïlliams	
Mailing Address	5845 Richmond Highway	
Č	Suite 820	
	Alexandria	22303
Title on Desiries	CITY STATE	ZIP CODE
Title or Position Treasurer	Telephone number	301 - 347 - 6551

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Full Name of Designated	Tamil Armah				
Agent					
Mailing Address	PO Box 7427				
	Alexandria VA 22303				
	CITY STATE	ZIP CODE			
Title or Position Assistant Treast	urer Telephone number 703 - 3	347 6551			
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 of America				
Mailing Address	6011 Oxon Hill Rd.				
	Oxon Hill MD 20745				
	CITY STATE	ZIP CODE			
Name of Bank, [Depository, etc.				
Mailing Address					
	CITY STATE	ZIP CODE			