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## **STATEMENT OF**

FORM 1	ORGANIZATION	ı	Office Use Only
NAME OF COMMITTEE (in full)	(Check if name Example is changed) over the	:If typing, type lines.	FE4M5
Services Grou	up of America Political A	ction Commit	tee (SGA PAC)
ADDRESS (number and stre	16100 N. 71st Street		
	Suite 501		
is changed)	Scottsdale	AZ	85254
	CITY	STA	TE ZIP CODE
	DRESS (Please provide only one e-mail address terry_thomason@sgagroup.com	s)	
(Check if addre is changed)	SS		
COMMITTEE'S WEB PAGE	E ADDRESS (URL)		
(Check if addre			
is changed)			
2. DATE 10	18 / 2011		
3. FEC IDENTIFICATIO	N NUMBER C C00224618		
4. IS THIS STATEMENT	NEW (N) OR X	AMENDED (A)	
I certify that I have examin	ned this Statement and to the best of my know	rledge and belief it is true	e, correct and complete.
Type or Print Name of Trea	asurer Terry L. Thomason		
Signature of Treasurer	Terry L. Thomason [Ele	ectronically Filed] Date	10 18 2011
NOTE: Submission of false,	erroneous, or incomplete information may subject the ANY CHANGE IN INFORMATION SHOULD		
Office Use Only	Fede Toll I	further information contact: eral Election Commission Free 800-424-9530 al 202-694-1100	FEC FORM 1 (Revised 02/2009)

	EEC Ea	rm 1 (Pavisad 02/2000)	Page <b>2</b>
		om 1 (Revised 02/2009) OMMITTEE	raye <b>Z</b>
Car	ndidate	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. (Cominformation below.)	nplete the candidate
Nam Can	e of didate		
	didate y Affiliati	on Office Sought: House Senate President	State
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Nam Can	e of didate		
Par	ty Con	nmittee:	
(d)		This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.
Poli	itical A	ction Committee (PAC):	
(e)	$\times$	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con-	nnected organization is a:
		X 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 separate scommittee. (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.)	
Join	t Fund	Iraising Representative:	
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for troommittees/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 to committees/organizations, none of which is an authorized committee of a federal candidate.	wo or more political
	Com	mittees 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 Na		. 3.
Services Grou	p of America Political Action Committee (So	GA PAC)
6. Name of Any Connected	d Organization, Affiliated Committee, Joint Fundraising Representative, or Leaders	ship PAC Sponsor
Services Group of A	merica	
Mailing Address	PO Box 25109	
v		
	Scottsdale AZ 85255	-
	CITY STATE	ZIP CODE
Relationship: X Connec	eted Organization Affiliated Committee Joint Fundraising Representative Le	eadership PAC Sponsor
	so eigenments. Premiere committee Programme Programme Programme	
books and records.  Terry L.  Full Name	. Thomason	1 1 1 1 1 1 1
Mailing Address	PO Box 25109	
	Scottsdale AZ 85255	
Title or Position	CITY STATE	ZIP CODE
Treasurer		927   -   4531
8. <b>Treasurer:</b> List the name a any designated agent (e.g.	and address (phone number optional) of the treasurer of the committee; and the na ., assistant treasurer).	ame and address of
	Thomason	1
of Treasurer	PO Box 25109	
Mailing Address		
	Scottsdale   AZ   85255	
	CITY STATE	ZIP CODE
Title or Position Treasurer		927   4531

480

Telephone number

927

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Full Name of Designated Agent	Steven J. Twist	
	<sub>1</sub> 13870 N. 98th Pl.	
Mailing Address		
	Scottsdale	85260
	CITY STATE	ZIP CODE
Title or Position Chairman		927 4544
safety deposit boxe	Depositories: List all banks or other depositories in which the committee deposits fundes or maintains funds.	ds, holds accounts, rents
Name of Bank, De	epository, etc.	
I	US Bank	
L		
	<sub>I</sub> P.O. Box 1800	
Mailing Address	P.O. Box 1800	
Mailing Address	P.O. Box 1800	
Mailing Address		55101
Mailing Address		55101 ZIP CODE
	St. Paul  CITY  STATE	
	St. Paul  CITY  STATE	
Name of Bank, De	St. Paul  CITY  STATE	
Name of Bank, De	St. Paul  CITY  STATE	
Mailing Address  Name of Bank, De  Mailing Address	St. Paul  CITY  STATE  epository, etc.	
Name of Bank, De	St. Paul  CITY  STATE	