Only

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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. AMERICAN SUBCONTRACTORS ASSOCIATION, INC., POLITICAL ACTION COMMITTEE AKA ASA-PAC 1004 DUKE ST. ADDRESS (number and street) (Check if address is changed) ALEXANDRIA 22314 VACITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS asapac@concentricoffice.com (Check if address is changed) Optional Second E-Mail Address beth@horanservices.com COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2018 C00359463 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. Carlin, Robert, F.,, Type or Print Name of Treasurer Carlin, Robert, F.,, [Electronically Filed] 06 26 2018 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

Local 202-694-1100

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		OMMITTEE	i aye Z			
Can	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. (Con information below.)	nplete the candidate			
Nam Cand	e of didate					
	didate / Affiliati	Office Sought: House Senate President	State			
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.				
Nam Cand	e of didate					
Par	ty Con	nmittee:	(Damas anatis			
(d)		This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.			
Poli	tical A	ction Committee (PAC):				
(e)	×	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con-	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)		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.)				
Join	t Fund	Iraising Representative:				
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for transmittees/organizations, at least one of which is an authorized committee of a federal candidate.	wo or more political			
(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	Committees 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 Name	
AMERICAN SUBCONTRACTORS ASSOCIATION, INC., POLIT	ICAL ACTION COMMITTEE AKA ASA-PAC
6. Name of Any Connected Organization, Affiliated Committee, Joint Fundrais	sing Representative, or Leadership PAC Sponsor
American Subcontractors Assocition, Inc.	
1004 Duke Street	
Mailing Address	
. Alexandria	VA 22314
Alexalula	
CITY	STATE ZIP CODE
Relationship: x Connected Organization Affiliated Committee Joint Fu	undraising Representative Leadership PAC Sponsor
. Custodian of Records: Identify by name, address (phone number optional) books and records.	and position of the person in possession of committee
Carlin, Sue, , ,	
Full Name	
Mailing Address 8136 Old Keene Mill Road	
Suite A300	
Springfield	VA 22152
Title or Position CITY	STATE ZIP CODE
Asst. Treasurer Telep	phone number 703 - 569 - 9481
3. Treasurer: List the name and address (phone number optional) of the treasurent any designated agent (e.g., assistant treasurer).	urer of the committee; and the name and address of
Full Name Carlin, Robert, F., , of Treasurer	
Mailing Address PO Box 2485	
Springfield	VA 22152
CITY Title or Position	STATE ZIP CODE
Treasurer	ohone number 703 - 569 - 9481

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Full Name of Designated Agent		
Mailing Address		
	CITY STATE	ZIP CODE
Title or Position	Telephone number	
safety deposit be	Depositories: List all banks or other depositories in which the committee deposits funds, oxes or maintains funds.	
Name of Bank,	Well Fargo Bank, NA	
Name of Bank, Mailing Address	Well Fargo Bank, NA	
	Well Fargo Bank, NA PO Box 6995	28-6995
	Well Fargo Bank, NA PO Box 6995	28-6995 ZIP CODE
	Well Fargo Bank, NA PO Box 6995 Portland OR 972	
Mailing Address	Well Fargo Bank, NA PO Box 6995 Portland OR 972	ZIP CODE
Mailing Address	Well Fargo Bank, NA PO Box 6995 Portland OR 972 CITY STATE	ZIP CODE
Mailing Address Name of Bank,	Well Fargo Bank, NA PO Box 6995 Portland OR 972 CITY STATE	ZIP CODE
Mailing Address Name of Bank,	Well Fargo Bank, NA PO Box 6995 Portland OR 972 CITY STATE	ZIP CODE