FEC FORM 1	STATEMENT OF ORGANIZATION	PAGE 1 / 4
1. NAME OF COMMITTEE (in full)	(Check if name Example: If typing, type over the lines.	12FE4M5
Kleinfelder Grou	p Political Action Committee	
	1550 West C Street	
ADDRESS (number and street)		
 (Check if address is changed) 	Suite 1200	
	San Diego └── └── └── └── └── └── └── └── └── └──	CA 92101 STATE ▲ ZIP CODE ▲
COMMITTEE'S E-MAIL ADDR		
(Check if address is changed)	kleinfelder@electioncompliance.com	
	Optional Second E-Mail Address	
COMMITTEE'S WEB PAGE AD (Check if address is changed)	DRESS (URL)	
	4 / Y Y Y Y 2015	
3. FEC IDENTIFICATION N	UMBER ► C C00463943	
4. IS THIS STATEMENT	NEW (N) OR × AMENDED (A)	
I certify that I have examined	this Statement and to the best of my knowledge and belie	f it is true, correct and complete.
Type or Print Name of Treasur	er Joni Powell	
Signature of Treasurer	Powell [Electronically Filed]	Date 12 / 14 / 2015
NOTE: Submission of false, error	neous, or incomplete information may subject the person signir ANY CHANGE IN INFORMATION SHOULD BE REPORTED	
Office Use Only	For further informatio Federal Election Comm Toll Free 800-424-9530 Local 202-694-1100	ission FEC FURINI I

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TYPE OF	COMMITTEE
Candidat	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 the candidate information below.)
Name of Candidate	L
Candidate Party Affilia	tion Office Sought: House Senate President District
(C)	This committee supports/opposes only one candidate, and is NOT an authorized committee.
Name of Candidate	
Party Co	mmittee:
(d)	This committee is a(National, State or subordinate) committee of the(Democratic, Republican, etc.) Participation
Political	Action Committee (PAC):
(e) X	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization
	Corporation Corporation w/o Capital Stock Labor Organizatio
	Membership Organization
	In addition, this committee is a Lobbyist/Registrant PAC.
(f)	This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or pa committee. (i.e., nonconnected committee)
	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 two or more political 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 two or more political committees/organizations, none of which is an authorized committee of a federal candidate.
Cor	nmittees Participating in Joint Fundraiser
1.	FEC ID number
2.	FEC ID number
3.	FEC ID number
4.	FEC ID number

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FEC Form 1 (Revised 02/2009)

Kleinfelder Group Political Action Committee

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

Kleinfelder Group				
Mailing Address	550 West C Street			
	Suite 1200			
	San Diego		CA 921	101
	CITY		STATE	ZIP CODE
Relationship: X Connecte	d Organization	tee Joint Fundraisin	g Representative	Leadership PAC Sponsor
 Custodian of Records: Ide books and records. 	ntify by name, address (phone num	ber optional) and pos	ition of the person i	in possession of committee

	tsourcing LLC
Full Name	5845 Richmond Highway
Mailing Address	
	Suite 820
	Alexandria VA 22303
Title or Position	CITY STATE ZIP CODE
Custodian of Records	703 347 6551 Telephone number 1 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 Joni Pow	<i>r</i> ell
Mailing Address	3 AAA Boulevard
	Hamilton NJ 08691
	CITY STATE ZIP CODE
Title or Position Vice President/Princ	Image: Telephone number 609 238 2614

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Full Name of Designated Agent	Kerry Ruebelmann	
Mailing Address	849 West Levoy Drive	
	Suite 200	
	Taylorsville	84123
	CITY STATE	E ZIP CODE
Title or Position		801 - 263 - 3336

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.

US Ba	nk		
Mailing Address	4747 Executive Drive		
	San Diego	CA 92121	
	CITY	STATE ZIP CODE	
Name of Bank, Depository,	etc.		
Mailing Address			
	CITY	STATE ZIP CODE	