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FEC FORM 1	STATEMENT ORGANIZATIO (See instructions)		
			Office use only
1. NAME OF COMMITTEE (in	full) (Check if name Ex is changed) over	ample: If typying, type or the lines	2FE4M5
Lentz for Con	gress		
ADDRESS (number and	street) PO BOX 1846		
(Check if addres			
is changed)	MEDIA		
	CITY	ST/	TE ZIP CODE
COMMITTEE'S E-MA	IL ADDRESS (Please provide only one e-mail add	lress)	
(Check if addres is changed)	Info@VoteLentz.com		
is changed)			
COMMITTEE'S WEB	PAGE ADDRESS (URL)		
(Check if addres is changed)	http://www.VoteLentz.com		
2. DATE 05			
3. FEC IDENTIFICA	TION NUMBER C CC	0465195	
4. IS THIS STATE	IENT NEW (N) OR	X AMENDED (A)	
I certify that I have exam	ned this Statement and to the best of my knowledge	and belief it is true, correct and con	nplete
Type or Print Name of	Treasurer Joseph G Sauder		
Signature of Treasure	Electronically Filed by Joseph G Saude	er Date	
NOTE: Submission of fa	lse, erroneous, or incomplete information may subjec ANY CHANGE IN INFORMATION S		
Office Use Only		For further information conta Federal Election Commission Toll Free 800-424-9530 Local 202-694-1100	ct: FEC FORM 1 (Revised 02/2009)

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	FEC F	Form 1 (Revised 02/2009)	Page 2
5.	TYPE OF CO Candidate C	OMMITTEE (Check One) Committee:	
	(a) X	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 information below.)	ne candidate
	Name of Candidate	Bryan Roy Lentz	
	Candidate Party Affiliati	on Office X House Senate President	State PA District 07
	(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
	Name of Candidate	1	
	Party Comn	nittee:	
	(d)	This committee is a (National, State (or subordinate) committee of the	(Democratic, Republican,etc.) Party.
		tion Committee (PAC):	
	(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected	-
		Corporation Corporation w/o Capital Stock La	bor Organization
		Membership Organization Trade Association Co	ooperative
	(f)	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 committee. (i.e., nonconnected committee)	d 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 Fundra	ising Representative:	
	(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or committees/organizations, at least one of which is an authorized committee of a federal candidate.	r more political
	(h)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two o committees/organizations, none of which is an authorized committee of a federal candidate.	r more political
	Com	mittees Participating in Joint Fundraiser	
		1 FEC ID number C	
		2 FEC ID number	
		3 FEC ID number C	

4. FEC ID number

FEC Form 1 (Revised 0)	2/2009)		Page 3
Write or Type Committee Name			
Lentz for Congress			
6. Name of Any Connected Or	ganization, Affiliated Committee, Joint Fundraisi	ng Representative, or Lead	dership PAC Sponsor
Pennsylvania Victory Fu	nd		
Mailing Address	430 South Capitol Street, SE		
	2nd Floor		
	Washington		20003 _
	CITY	STATE 🛦	ZIP CODE
Relationship:	Affiliated Committee X Joint Fun	draising Representative	Leadership PAC Sponsor
 Custodian of Records: Ide possession of Committee 	entify by name, address, (phone number op books and records.	ptional), and position of	the person in
Full Name	h G. Sauder		
Mailing Address	361 W. Lancaster Ave		
	Haverford	PA	19041
Title or Position ▼		STATE	
		-	_

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).

Tre	asurer		Telephone number	645 4717
Title or Position ♥			STATE	
		Haverford	PA	<u>19041</u>
Mailing Address		361 Haverford Ave		
Full Name of Treasurer	Joseph G Sauder			

Telephone number

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Full Name of Designated Agent			
Mailing Address			
Title or Position ♥	CITY A	STATE 🛦	ZIP CODE A
	т	elephone number	
Banks or Other Deposit safety deposit boxes or m Name of Bank, Depositor	aintains funds. y, etc.	e committee deposits funds, ho	olds accounts, rents
safety deposit boxes or m Name of Bank, Depositor	aintains funds.	e committee deposits funds, ho	olds accounts, rents
safety deposit boxes or m Name of Bank, Depositor	aintains funds. y, etc. tizen's Bank 225 W Lancaster Ave		
safety deposit boxes or m Name of Bank, Depositor	aintains funds. y, etc. t izen's Bank		Dids accounts, rents
safety deposit boxes or m Name of Bank, Depositor	aintains funds. y, etc. 225 W Lancaster Ave Ardmore CITY _		 19003 [
safety deposit boxes or m Name of Bank, Depositor Mailing Address	aintains funds. y, etc. 225 W Lancaster Ave Ardmore CITY _		 19003 [
safety deposit boxes or m Name of Bank, Depositor Mailing Address	aintains funds. y, etc. tizen's Bank 225 W Lancaster Ave Ardmore CITY ▲ y, etc. unk of America		
safety deposit boxes or m Name of Bank, Depositor Mailing Address Name of Bank, Depositor	aintains funds. y, etc. 225 W Lancaster Ave 225 W Lancaster Ave Ardmore CITY A y, etc. ank of America		
safety deposit boxes or m Name of Bank, Depositor Mailing Address Name of Bank, Depositor	aintains funds. y, etc. 225 W Lancaster Ave 225 W Lancaster Ave Ardmore CITY A y, etc. ank of America		

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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, e	tc.		ADDITIONAL]
Bank	of America		
Mailing Address	111 Westminster Street		
	Providence	RI	02906
	CITY 🗖	STATE	ZIP CODE 🔺
Name of Any Connected C	rganization, Affiliated Committee, Joint Fundraising Re	presentative, or Leader	[ADDITIONAL] ship PAC Sponsor
SEPA Red to Blue			
Mailing Address	102 Waterman Street		
	Ste 2 Providence		02906
Relationship:	CITY	STATE 🛦	ZIP CODE 🔺
Connected Organization	Affiliated Committee X Joint Fundraising Re	epresentative	lership PAC Sponsor
Designated Agent			[ADDITIONAL]
Full Name			
Mailing Address			
0			
Ĵ			
Title or Position ▼	CITY A	STATE A	
		STATE▲	
	Telept		 ZIP CODE & [ADDITIONAL]