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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. Amentum Services, Inc. PAC 300 M Street, SE ADDRESS (number and street) Suite 400 (Check if address is changed) Washington 20003 DC CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS katie.piner@amentum.com (Check if address is changed) Optional Second E-Mail Address robin@sextonpac.com COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2022 C00731414 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. Gastright, John, , , Type or Print Name of Treasurer Gastright, John, , , [Electronically Filed] 01 2022 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

	FEC Fo	rm 1 (Revised 02/2009)	Page 2
		OMMITTEE	
	naidate	Committee:	
(a)	ш	This committee is a principal campaign committee. (Complete the candidate information below.)	
(b)	Ш	This committee is an authorized committee, and is NOT a principal campaign committee. (Compinformation below.)	lete the candidate
	ne of didate		
	didate y Affiliatio	Office Sought: House Senate President	State
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	District
	ne of didate		
Par	rty Con	nmittee:	
(d)		· · · · · · · · · · · · · · · · · · ·	Democratic, Republican, etc.) Party.
Pol	itical A	ction Committee (PAC):	
(e)	×	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization on line 6.	nected 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 secommittee. (i.e., nonconnected committee)	gregated 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.)	
Joir	nt Fund	raising Representative:	
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate.	o or more political
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	o 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 Name	2	
Amentum Servi	ces, Inc. PAC	
. Name of Any Connected C	Organization, Affiliated Committee, Joint Fundraising Representative, or Lead	dership PAC Sponsor
Amentum Services, In	c .	
Mailing Address	20501 Seneca Meadows Pkwy, #300	
Mailing Address		
	Germantown MD 2087	6
	CITY STATE	ZIP CODE
		,
Relationship: x Connected	d Organization	Leadership PAC Sponsor
Custodian of Records: Ider books and records. Piner, Kati	ntify by name, address (phone number optional) and position of the person in ie, , ,	possession of committee
	300 M Street, SE	
Mailing Address	Suite 400	
	Washington DC 2000)3
Title or Position	CITY STATE	ZIP CODE
Custodian of Record		462 7262
Treasurer: List the name an any designated agent (e.g., a	d address (phone number optional) of the treasurer of the committee; and the assistant treasurer).	name and address of
Full Name Gastright, of Treasurer	John, , ,	
Mailing Address	300 M Street, SE	
-	Suite 400	
	Washington DC 2000	 3
The or Position	CITY STATE	ZIP CODE
Title or Position Treasurer	Telephone number 703 –	462 - 7190

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Full Name of Designated	Piner, Katie, ,	,	
Agent	1	1700 Old Meadow Rd	
Mailing Address	Ľ	1700 Oid INICADUM NU	
	L		
	1	McLean VA 22102	
		CITY STATE	ZIP CODE
Title or Position Assistant Treas	surer	Telephone number 703 -	462 - 7262
Banks or Other safety deposit b Name of Bank,	oxes or maintain		s accounts, rents
	Eagle Ba	nk	
Mailing Address	.7	nk 7815 Woodmont Avenue	
Mailing Address	.7		
Mailing Address	[7]		
Mailing Address	[7]	7815 Woodmont Avenue	ZIP CODE
Mailing Address Name of Bank,		7815 Woodmont Avenue Bethesda CITY STATE	ZIP CODE
		7815 Woodmont Avenue Bethesda CITY STATE	ZIP CODE
	Depository, etc.	7815 Woodmont Avenue Bethesda CITY STATE	ZIP CODE
Name of Bank,	Depository, etc.	7815 Woodmont Avenue Bethesda CITY STATE	ZIP CODE
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