## 20-6-06-20-05-00077762

FEC FORM 1

## STATEMENT OF ORGANIZATION

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2016 JUN 20 AM 7: 37

			<u> </u>	Office Use Only
NAME OF COMMITTEE (in full)	(Check if name is changed)	Example:If typing, type over the lines.	12FE4M	5
ENVIRONMEN'	TAL CHEMIC	CAL CORPORA	TION	(ECC) PAC
ADDRESS (number and street)	1240 BAYS	SHORE HIGHW	<b>V</b> AY	
(Check if address is changed)	BURLINGAN	<b>ДЕ</b> , , , , , , , ,	CA	[94 <sub>0</sub> 1 <sub>0</sub> ]-[1805]
		CITY	STATE	ZIP CODE
COMMITTEE'S E-MAIL ADDRE  (Check if address is changed)	SS (Please provide only one ECC-PAC@I	e-mail address) E <sub>L</sub> C <sub>1</sub> C <sub>1</sub> N <sub>1</sub> E <sub>1</sub> T <sub>1</sub>		
COMMITTEE'S WEB PAGE AD	DRESS (URL)			
(Check if address is changed)				
2. DATE 06 1	3 2016			
3. FEC IDENTIFICATION N	UMBER CC	00317735		
4. IS THIS STATEMENT	NEW (N) OR	AMENDED (A)		
I certify that I have examined to	his Statement and to the be	st of my knowledge and belief	it is true, corre	ect and complete.
Type or Print Name of Treasure	Tony Noler	n	<del></del>	
Signature of Treasure	by 1		Date <u>Ö</u>	6 (13 (2016)
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 Use Only		For further information Federal Election Commiss Toll Free 800-424-9530		FEC FORM 1 (Revised 02/2009)

			· · · · · · · · · · · · · · · · · · ·			
	TYPE	YPE OF COMMITTEE				
	Cand	lidate	te 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 Candid					
	Candid Party	date Affiliatio	Office State President District			
	(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.			
	Name Candid					
	Party	Party Committee:				
	(d)		This committee is a (National, State or subordinate) committee of the Republican, etc.) Party.			
	Politi	ical A	ction Committee (PAC):			
	(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected 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 segregated fund or party 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	Fund	raising Representative:			
ı	(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.			
		Comr	nmittees Participating in Joint Fundraiser			
		1.				
		2.	FEC ID number			
		3.				
		4.				
			<del>▘▕▗▗▙▗▘▘▗▄▗▗▗▄▗▄</del> ▗▃▗▃▗▃▗▃▗▃▗▃▗▃▗▃▗▃▗▃▗▃▗▃▗▃▗			

Write or Type Committee Name

6. Name of Any Connected C	Organization, Affiliated Committ	ee, Joint Fundraising Rep	resentative,	or Leadership PAC Spo	onsor
ENVIRONMENT	ralı (Chemica)	L ICORIPORA	NOI IT	( EQQ )    E	DΑS
Mailing Address	1240 BAYSH	ORE HIGHW	AY		
	BURLINGAME		[CA]	1940101-1	<u>805</u>
	CITY		STATE	ZIP CODE	
Relationship: Connected	d Organization Affiliated Comr	nittee	g Representat	tive Leadership PAC	Sponsor
<ol> <li>Custodian of Records: Ider books and records.</li> </ol>	ntify by name, address (phone nu	mber optional) and posi	tion of the pe	erson in possession of c	ommittee
Full Name [EVA	<u>LIMA, , , , , , , , , , , , , , , , , , , </u>				<u> </u>
Mailing Address	1,2,4,0, BAYSH	ORE HIGHW	ĮĄY, ,		
		<u> </u>	<u>L. I. I. I. I</u>	<u> </u>	<u> </u>
	BURLINGAME		CA	194010-1	<u>8,05</u>
Title or Position	CITY		STATE	ZIP CODE	
INTERNAL	COMPLIANCE	Telephone nu	mber [6,	5,0j- <u> 34,7</u> j- <u> 1</u>	5,5,5
8. Treasurer: List the name an	nd address (phone number option	onal) of the treasurer of th	e committee;	and the name and addi	ress of
any designated agent (e.g.,	assistant treasurer).				0.00
	assistant treasurer). $Y_{-}$ NOLEN	<u></u>	1 1 1 1 1		
any designated agent (e.g., a	Y, NOLEN	ORE HIGHW	IAY		
any designated agent (e.g., a Full Name of Treasurer $\prod_{i=1}^{n} \bigcap_{i=1}^{n} \bigcap_{j=1}^{n} \bigcap_{i=1}^{n} \bigcap_{j=1}^{n} \bigcap_{i=1}^{n} \bigcap_{j=1}^{n} \bigcap_{i=1}^{n} \bigcap_{j=1}^{n} \bigcap_{i=1}^{n} \bigcap_{j=1}^{n} \bigcap_{j=1}^{n}$	Y, NOLEN		IAY		
any designated agent (e.g., a Full Name of Treasurer $\prod_{i=1}^{n} \bigcap_{i=1}^{n} \bigcap_{j=1}^{n} \bigcap_{i=1}^{n} \bigcap_{j=1}^{n} \bigcap_{i=1}^{n} \bigcap_{j=1}^{n} \bigcap_{i=1}^{n} \bigcap_{j=1}^{n} \bigcap_{i=1}^{n} \bigcap_{j=1}^{n} \bigcap_{j=1}^{n}$	Y, NOLEN		IAY LCA STATE	94010-1 zip code	8,05

CITY

ZIP CODE

STATE

Mailing Address

PECHAIL CENTER

2018 JUN 20 AM 7: 36

Federal Election Commission E Street NW Washington, DC 999

13 JUN 2016

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Received from Electronic Filing Office  Date of Receipt or Postmarked  Other (Specify):    Column   Co	Received from Senate Pub	olic Records Office	Date of Receipt
Other (Specify):  6/20/16  PREPARER  DATE PREPARED	Received from Electronic F	Filing Office	Date of Receipt
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