PAGE 1/4 STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 COMMITTEE (in full) over the lines. is changed) GLOBAL BUSINESS TRAVEL ASSOCIATION PAC (Business Travel PAC) 1101 King Street ADDRESS (number and street) Suite 500 (Check if address is changed) ALEXANDRIA 22314 VACITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS dporter@gbta.org (Check if address is changed) Optional Second E-Mail Address cparana@politicalcompliance.com COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2019 C00373910 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. Porter, David, , , Type or Print Name of Treasurer Porter, David, , , [Electronically Filed] 06 18 2019 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:
Use			Federal Election Commission
			Toll Free 800-424-9530
Only			Local 202-694-1100

	FFC Fo	rm 1 (Revised 02/2009)	Page 2
		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	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		
GLOBAL BUSINE	ESS TRAVEL ASSOCIATION PAC (Business T	ravel PAC)
6. Name of Any Connected O	rganization, Affiliated Committee, Joint Fundraising Representative, or Leadership	PAC Sponsor
GLOBAL BUSINESS T	RAVEL ASSOCIATION	
Mailing Address	1101 King Street	
Ç .	Suite 500	
	Alexandria VA 22314	
	CITY STATE ZI	P CODE
Relationship: X Connected	Organization Affiliated Committee Joint Fundraising Representative Leade	ership PAC Sponsor
7. Custodian of Records: Identification books and records.	tify by name, address (phone number optional) and position of the person in posse	ssion of committee
Porter, Dav	<i>i</i> id, , ,	1
Mailing Address	1101 King Street	
Mailing Address	Suite 500	
	Alexandria VA 22314	
Title or Position	CITY STATE ZII	P CODE
Treasurer		4 0836
Treasurer: List the name and any designated agent (e.g., a	d address (phone number optional) of the treasurer of the committee; and the name ssistant treasurer).	and address of
Full Name Porter, Dav	rid, , ,	
of Treasurer	1101 King Street	
Mailing Address	Suite 500	
	Alexandria VA 22314 CITY STATE ZIF	P CODE
Title or Position Treasurer	703 68-	

Telephone number

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Full Name of Designated Agent		
Mailing Address		
-		
	CITY STATE	ZIP CODE
Title or Position		
	Telephone number	
Banks or Other	Depositories: List all banks or other depositories in which the committee deposits funds, hol	ds accounts, rents
	oxes or maintains funds.	
Name of Bank,	popularity, etc.	
Name of Bank,	HSBC Bank	
Name of Bank,	HSBC Bank ,415 John Carlyle Street	
	HSBC Bank ,415 John Carlyle Street	
	HSBC Bank 415 John Carlyle Street	
	HSBC Bank 415 John Carlyle Street Carlyle Place Office Alexandria	ZIP CODE
	HSBC Bank 415 John Carlyle Street Carlyle Place Office Alexandria CITY STATE	ZIP CODE
Mailing Address	HSBC Bank 415 John Carlyle Street Carlyle Place Office Alexandria CITY STATE	ZIP CODE
Mailing Address	HSBC Bank 415 John Carlyle Street Carlyle Place Office Alexandria VA 22314 CITY STATE Depository, etc.	ZIP CODE
Mailing Address Name of Bank,	HSBC Bank 415 John Carlyle Street Carlyle Place Office Alexandria VA 22314 CITY STATE Depository, etc.	ZIP CODE
Mailing Address Name of Bank,	HSBC Bank 415 John Carlyle Street Carlyle Place Office Alexandria VA 22314 CITY STATE Depository, etc.	ZIP CODE