FEC FORM 1		STATEME ORGANIZ		C	PAGE 1 / 4
1. NAME OF COMMITTEE (ir	n full)	(Check if name is changed)	Example:If typing, type over the lines.	12FE4M5	
American T	raffic \$	Safety Services	Association PAC	, ,   _	
ADDRESS (number a	nd street)	15 Riverside Parkway Suite	100		
(Check if a is changed					
Ū		Fredericksburg └ │ │ │ │ │ │ │ │ │ │ │ │ │ │ │ │ │ │ │		UA STATE ▲	406 
COMMITTEE'S E-MA	AIL ADDRES	SS			
★ (Check if a is changed		cameron.greene@ats	sa.com		
Ŭ	,	Optional Second E-Mail Ad	ldress		
COMMITTEE'S WEB	address	DRESS (URL)			
2. DATE 0	5 / D	D / Y Y Y Y 2023			
3. FEC IDENTIFIC	CATION NU	MBER ► C c	00281717		
4. IS THIS STATEM	MENT	NEW (N) OR	X AMENDED (A)		
I certify that I have e	examined thi	is Statement and to the best	t of my knowledge and belief it	is true, correct an	d complete.
Type or Print Name	of Treasurer	Greene, Cameron, , ,			
Signature of Treasure	er Greene	e, Cameron, , ,	[Electronically Filed]	Date 05	/ D D / Y Y Y Y 18 2023
NOTE: Submission of	false, errone		may subject the person signing the Nation SHOULD BE REPORTED		e penalties of 52 U.S.C. §30109
Office Use Only			For further information co Federal Election Commissio Toll Free 800-424-9530 Local 202-694-1100		FEC FORM 1 (Revised 06/2012)

Image# 202305189581548811

05/18/2023 18 : 44

FE	EC Form 1 (Revised 03/2022)	Page <b>2</b>												
5.	TYPE OF COMMITTEE:													
	Candidate 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													
	Candidate Office Sought: House Senate President	State District												
	(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.													
	Name of Candidate													
	Party Committee:   (National, State or subordinate) committee of the   (Democratic, Republican, etc.) Party													
	Political Action Committee (PAC):     (e)  This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization on line 6.)	organization is a:												
	Corporation Corporation w/o Capital Stock	anization												
	Membership Organization X Trade Association Cooperativ	e												
	✗ 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 f committee. (i.e., nonconnected committee)	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.)													
	(g) This committee is an independent expenditure-only political committee (Super PAC).													
	In addition, this committee is a Lobbyist/Registrant PAC.													
	(h) This committee is a political committee with both contribution and non-contribution accounts (Hybrid PAC)	).												
	In addition, this committee is a Lobbyist/Registrant PAC.													

## Joint Fundraising Representative:

(i) 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.
(j) 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.
Committees Participating in Joint Fundraiser
2.

FEC Form 1	(Revised 02/2009)
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Write or Type Committee Name

## American Traffic Safety Services Association PAC

6.	Name of Any Connected Or American Traffic Safe	•		oint F	undra	ising	Repre	senta	tive, o	r Lead	lership	PAC	Spon	sor	
	Mailing Address	15 Riverside Parkway S	Suite 100									<u>    </u>			
		Fredericksburg						VA		2240	06				
			CITY 🔺					STATE			ZIF	P COE	DE 🔺		
	Relationship: X Connected	Organization Affiliat	ted Organization	n	Join	t Fund	raising	Repre	sentati	ve	Lead	dershi	p PAC	Spon	sor

7. **Custodian of Records:** Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Greene, Ca	ameron, , ,		
Full Name			
Mailing Address	512 8th Street, SE		
	Washington	DC 20003	
		STATE 🔺 ZI	IP CODE 🔺
Title or Position ▼			
Treasurer	Telephone nu	umber 540 – 36	8 - 1701

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	Greene, Cameron, , ,										
of Treasurer											
Mailing Address	512 8th Street, SE										
	Washington     DC     20003										
	CITY ▲ STATE ▲ ZIP CODE ▲										
Title or Position ▼											
Treasurer	Telephone number										

FEC Form 1 (Revised 02	2/2	200	9)																						[	Pag	le 2	1	
Full Name of Designated Agent					1												1												
Mailing Address	L																												
	L																												
	L																												
								CI	ΤY								:	ST/	λΤΕ					ZI	P(		ЭЕ		
Title or Position ▼																													
													Tele	eph	one	ə n	umł	ber					- [						

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.

BI	B&T		
Mailing Address	760 Warrenton Road		
	Fredricksburg	VA22046	
	CITY 🔺	STATE A	ZIP CODE
Name of Bank, Depo	sitory, etc.		
Mailing Address			
	CITY 🔺	STATE A	ZIP CODE ▲