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FEC FORM 1		STATEMENT ORGANIZAT	Office L	PAGE 1 / 5	
1. NAME OF COMMITTEE (ir	n full)		Example: If typing, type over the lines.	12FE4M5	
ADDRESS (number a	nd street)	900 W. 48th Place			
(Check if a is changed		Suite 900			
	<i></i>	Kansas City CITY ▲		MO 64112 	– L
COMMITTEE'S E-MA	AIL ADDRES	SS			
(Check if a is changed	address d)	kblitz@polsinelli.com			
Ű	,	Optional Second E-Mail Address	S		
COMMITTEE'S WEB	address	DRESS (URL)			
2. DATE 0	6 / D 21	D / Y Y Y Y 2019			
3. FEC IDENTIFIC	CATION NU	MBER ► C C0044	5981		
4. IS THIS STATEM	MENT	NEW (N) OR	× AMENDED (A)		
I certify that I have a	examined th	is Statement and to the best of r	ny knowledge and belief it is	s true, correct and corr	nplete.
Type or Print Name	of Treasurer	Fletcher, Scott, , Mr.,			
Signature of Treasure	er <i>Fletch</i>	er, Scott, , Mr.,	[Electronically Filed]	Date 12	28 / Y Y Y Y 2020
NOTE: Submission of		ous, or incomplete information may ANY CHANGE IN INFORMATION			lties of 2 U.S.C. §437g.
Office Use Only			For further information co Federal Election Commissior Toll Free 800-424-9530 Local 202-694-1100	, FC	C FORM 1 evised 06/2012)

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F	FEC FO	7m 1 (Revised 02/2009)	Page 2
TYPE	E OF C	OMMITTEE	
Can	didate	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. (Compleinformation below.)	ete the candidate
Name Cand			
Cand Party	lidate Affiliati	on Office Sought: House Senate President	State
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name Cand			
Part	ty Con	nmittee:	
(d)			emocratic, epublican, etc.) Party
Poli	tical A	ction Committee (PAC):	
(e)	×	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization on line 6.)	cted organization is
		Corporation Corporation w/o Capital Stock	_abor 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 segrecommittee. (i.e., nonconnected committee)	egated fund or part
		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	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.	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.	or more political
	Com	mittees Participating in Joint Fundraiser	
	1.	FEC ID number	
	2.	EC ID number	
	3.	FEC ID number	
	4.	FEC ID number	

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FEC Form 1 (Revised 02/2009)

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Write or Type Committee Name

Polsinelli PAC

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

Polsinelli PAC		
Mailing Address	900 W. 48th Place	
	Suite 900	
	Kansas City	MO 64112
	CITY	STATE ZIP CODE
Relationship: x Connected	Organization Affiliated Committee Joint Fundraising	Representative Leadership PAC Sponsor

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

Fletcher, S	Scott, , ,
Full Name	
Mailing Address	2950 N Harwood Street
	Suite 2100
	Dallas TX 75201
Title or Position	CITY STATE ZIP CODE
Treasurer	Telephone number 214 661 5588

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 of Treasurer	Fletcher, Scott, , ,
Mailing Address	2950 N Harwood Street
	Suite 2100
	Dallas
	CITY STATE ZIP CODE
Title or Position Treasurer	Telephone number 214 - 661 - 5588

FEC Form 1 (Revised 02/2009)

Full Name of Designated Agent	Wheat, Alar	n, , , 																	1				I	
Mailing Address		1401 I Street, NW																						
		Suite 800																						
		Washington											C 		2	000)5 			_				
			CI	TΥ							\$	STA	ΤE					ZIF	۲ د	OD	Е			
Title or Position	ırer						Tele	eph	one	nu	ımb	ber		20	2] -		783	3] –		33	00	

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.

US Ba	nk		
Mailing Address	1201 Wyandotte		
	Kansas City	MO 641	106
	CITY	STATE	ZIP CODE
Name of Bank, Depository,	etc.		
n/a			
Mailing Address			
	CITY	STATE	ZIP CODE

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Form/Schedule: F1A Transaction ID :

Change of Agent

Form/Schedule: Transaction ID: