01/03/2022 10 : 56

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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) over the lines. is changed) AMERICAN SPEECH-LANGUAGE-HEARING ASSOCIATION PAC (ASHA PAC) 2200 RESEARCH BOULEVARD ADDRESS (number and street) (Check if address is changed) **ROCKVILLE** 20850 MD CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS Pac@asha.org (Check if address is changed) Optional Second E-Mail Address VDealWilliams@asha.org COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 03 2022 C00210666 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. Deal-Williams, Vicki, , , Type or Print Name of Treasurer Deal-Williams, Vicki,,, [Electronically Filed] 01 03 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

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	COMMITTEE 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 of Candidate				
Candidate Party Affilia	Office Sought: House Senate President	State		
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.			
Name of Candidate				
Party Co	ommittee: (National, State	Democratic,		
(d)		Republican, etc.) Party.		
Political	Action Committee (PAC):			
(e) x	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con-	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.)			
Joint Fur	ndraising Representative:			
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for tw 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		
Co	mmittees Participating in Joint Fundraiser			
1.	FEC ID number			
2.	FEC ID number			
3.	FEC ID number			
4				

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Write or Type Comn	nittee Name	
AMERICAN	I SPEECH-LANGUAGE-HEARING ASSOCIATION PAC (ASHA PAC
6. Name of Any Co	onnected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadershi	ip PAC Sponsor
AMERICAN SI	PEECH-LANGUAGE-HEARING ASSOCIATION PAC (ASHA PAC)	
Mailing Address	2200 RESEARCH BOULEVARD	
Mailing Address	ROCKVILLE MD 20850	
	CITY STATE Z	ZIP CODE
Relationship:	Connected Organization Affiliated Committee Joint Fundraising Representative Lead	dership PAC Sponso
 Custodian of Re books and record 	cords: Identify by name, address (phone number optional) and position of the person in poss s. Kankam-Boadu, Yvonne, , ,	ession of committee
Full Name		
Mailing Address	2200 Research Blvd	
	Rockville MD 20850	
Title or Position	CITY STATE Z	IP CODE
Director of Finan	ce	96 8648
	e name and address (phone number optional) of the treasurer of the committee; and the nam gent (e.g., assistant treasurer).	e and address of
Full Name of Treasurer	Deal-Williams, Vicki, , ,	
Mailing Address	2200 Research Blvd	
-		
	Rockville	
Title or Position	CITY STATE Z	IP CODE
Treasurer	301 29	96 5703

Telephone number

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Full Name of Designated Agent	Best-Bradford, Liz, , ,	<u></u>				
Mailing Address	2200 Research Boulevard					
	Rockville MD 20850 CITY STATE ZIP					
Title or Position Assistant Treasi	urer	_ 5952				
 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. 						
Mailing Address	SunTrust Bank P.O. Box 85024					
Maining Address	Richmond VA 23285-5024					
	CITY STATE ZIP	CODE				
Name of Bank, [Depository, etc.					
Mailing Address						
	CITY STATE ZIP	CODE				