## **STATEMENT OF**

FORM 1	ORGANIZATIO (See instructions)	N	Q**
1. NAME OF COMMITTEE (in 1	(Check if name Exar	nple: If typying, type the lines	Office use only  12FE4M5
	vision of URS Corporation Political Acti	ion Committee	
ADDRESS (number and s	Suite 708		
is changed)	Arlington CITY▲		<b>VA</b>
COMMITTEE'S E-MAI (Check if address is changed)	ADDRESS (Please provide only one e-mail addre	ess)	
COMMITTEE'S WEB (Check if address is changed)	PAGE ADDRESS (URL)		
2. DATE 0.3  3. FEC IDENTIFICA		097550	
4. IS THIS STATEM	ENT X NEW (N) OR  ned this Statement and to the best of my knowledge an	AMENDED (A)	complete
Type or Print Name of	Discrete Downs	u bellet it is tide, correct and	somplete
Signature of Treasurer	Electronically Filed by Ricardo Bernal	D	ate 03 / 27 / 2009
NOTE: Submission of fal	se, erroneous, or incomplete information may subject the ANY CHANGE IN INFORMATION SHO		•
Office Use Only		For further information collection Commission Toll Free 800-424-9530	

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5.			DMMITTEE (Check One) 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 Candi							
	Candi Party	idate Affiliatio	on Office House Senate President	State District				
	(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.					
	Name Candi							
	Party	Comm						
	(d)		This committee is a (National, State (or subordinate) committee of the	(Democratic, Republican,etc.) Party.				
	Political Action Committee (PAC):							
	(e)	X	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected	ed organization is a:				
			X Corporation Corporation w/o Capital Stock La	bor Organization				
			Membership Organization Trade Association Co	poperative				
			X 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 committee. (i.e., nonconnected committee)	d 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 F	Fundra	ising Representative:					
	(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.					
		Com	mittees Participating in Joint Fundraiser					
			1. FEC ID number C					
			2. FEC ID number					
			3. FEC ID number					
			FEC ID number C					

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W	rite or Type Committee Name					
	Washington Division of	URS Corporation Political Act	ion Committee			
6.	Name of Any Connected Org	ganization, Affiliated Committee, Joi	int Fundraising Representative, or	Leadership PAC Sponsor		
Ш	URS Corporation					
		1   1   1   1   1   1   1   1	<u> </u>			
	Mailing Address	2345 Crystal Drive	<b>;</b>	1 1 1 1 1 1 1 1 1 1 1		
		Suite 708		1 1 1 1 1 1 1 1 1 1 1		
		Arlington		22202		
		CITY▲	STATE A	ZIP CODE 🛦		
	Relationship:					
	X Connected Organization	Affiliated Committee	Joint Fundraising Representative	e 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.					
	Full Name Ricardo	Bernal				
	Mailing Address	2345 Crystal Drive	•			
		Suite 708				
		Arlington		22202		
	Title or Position ▼	CITY A	STATE	ZIP CODE A		
	Treasurer		Telephone number7	<u>703</u> – <u>236</u> – <u>2759</u>		
8.	name and address of any	and address (phone number o designated agent (e.g., assistan o Bernal		ommittee; and the		
	Mailing Address	2345 Crystal Drive, Suite 708				
		Arlington		22202		
	Title or Position ♥	CITY A	STATE	ZIP CODE A		
	Treasurer		Telephone number	703 236 2759		
			•			

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Full Name of Designated Agent	John Cohen				
Mailing Address	2345 Crystal Drive Suite 708				
	Arlington		22202 –		
Title or Position ♥	CITY A	STATE A	ZIP CODE A		
Assistar	nt Treasurer	Telephone number	236 2745		
safety deposit boxes or ma Name of Bank, Depository	, etc. nk of America				
Mailing Address	Capitol Branch				
	280 S. Capitol Street				
	Boise	<b>ID</b>	83702   _		
	CITY 🗖	STATE <b>⊿</b>	ZIP CODE 🛕		
Name of Bank, Depository	, etc.				
Mailing Address					
	CITY 🔼	STATE. <b>△</b>	ZIP CODE 🛕		