Image# 14941754861				07/09/2014 18 : 56
FEC FORM 1	STATEMEI ORGANIZ	-		PAGE 1 / 4
			Offic	e Use Only
1. NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5	
ADDRESS (number and street)	PO Box 5577			
(Check if address is changed)				
is changed)	New York		NY 10027	
	CITY A		STATE A	ZIP CODE
COMMITTEE'S E-MAIL ADD	RESS			
(Check if address is changed)	nationalleadershippac@	@gmail.com		
is changed)	Optional Second E-Mail Ad			
COMMITTEE'S WEB PAGE / (Check if address is changed)	ADDRESS (URL)			
2. DATE 06 /	30 / Y Y Y Y 2014			
3. FEC IDENTIFICATION	NUMBER ► C c	00302588		
4. IS THIS STATEMENT	× NEW (N) OR	AMENDED (A)		
I certify that I have examined	I this Statement and to the best	of my knowledge and belief it	is true, correct and c	omplete.
Type or Print Name of Treasu	Irer David A Paterson			
Signature of Treasurer	uvid A Paterson	[Electronically Filed]	Date 07 /	09 / Y Y Y Y 09 2014
NOTE: Submission of false, err	oneous, or incomplete information ANY CHANGE IN INFORMATI	may subject the person signing to ON SHOULD BE REPORTED W		enalties of 2 U.S.C. §437g.
Office Use Only		For further information co Federal Election Commissio Toll Free 800-424-9530 Local 202-694-1100	on F	EC FORM 1 (Revised 06/2012)

FEC Form 1 (Revised 02/2009)	Page 2
TYPE OF COMMITTEE	
Candidate Committee:	
(a) This committee is a principal campaign committee. (Complete the candidate information below	N.)
(b) This committee is an authorized committee, and is NOT a principal campaign committee. (Co information below.)	mplete the candidate
Name of Candidate	
Candidate Office Party Affiliation Office Sought: House Senate President	State District
(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate Image: Candidate <th< td=""><td></td></th<>	
Party Committee:	
(d) This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Part
Political Action Committee (PAC):	
(e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its ca	onnected organization is
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 committee. (i.e., nonconnected committee)	segregated 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.)	
Joint Fundraising Representative:	
(g) This committee collects contributions, pays fundraising expenses and disburses net proceeds for 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 committees/organizations, none of which is an authorized committee of a federal candidate.	two or more political
Committees Participating in Joint Fundraiser	
1 FEC ID number C	
2 FEC ID number C	
3 FEC ID number C	
4 FEC ID number C	

FEC Form 1 (Revised 02/2009)

Page 3

Write or Type Committee Name

National Leadership PAC

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

C	harles Rangel				
	Mailing Address	193 Lenox Avenue			
		New York		NY 10026	
		CITY		STATE	ZIP CODE
	Relationship: Connected	Organization Affiliated Committee	Joint Fundraising	Representative X Le	eadership PAC Sponsor
7.	Custodian of Records: Iden books and records.	tify by name, address (phone number o	ptional) and positi	on of the person in po	ossession of committee
	David A Pa				
	Mailing Address	PO Box 5577			
		New York		DC 10027	
	Title or Position	CITY		STATE	ZIP CODE
	Custodian		Telephone num	ıber –	
8.	Treasurer: List the name and any designated agent (e.g., a	address (phone number optional) of th ssistant treasurer).	e treasurer of the	committee; and the n	ame and address of

Full Name of Treasurer	David A Paterson
Mailing Address	PO Box 5577
	New York NY 10027 - <
	CITY STATE ZIP CODE
Title or Position Treasurer	Telephone number

FEC Form 1 (Revised 02/2009)

Full Name of Designated Agent																	I										
Mailing Address																											
																				L							
							CI	ΓY								ST/	λΤΕ					ZI	ΡC	DE			
Title or Position																											
											Tel	eph	ione	e ni	umt	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.

JP Mo	rgan Chase		
Mailing Address	322 West 125th Street		
	New York	NY 10027]-[]
	CITY	STATE ZIP C	CODE
Name of Bank, Depository,	etc.		
Mailing Address			
]-[]
	CITY	STATE ZIP C	CODE