Only

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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) is changed) over the lines. TERM LIMITS SUPERPAC 1420 WALNUT STREET ADDRESS (number and street) **SUITE 1011** (Check if address is changed) **PHILADELPHIA** 19102 PA CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS bobcostello54@gmail.com (Check if address X is changed) Optional Second E-Mail Address habegg@wc-b.com COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2020 C00688580 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. Costello, Robert, , , Type or Print Name of Treasurer Costello, Robert, , , [Electronically Filed] 10 2020 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

Local 202-694-1100

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		OMMITTEE				
	naidate	idate Committee:				
(a) This committee is a principal campaign committee. (Complete the candidate information below.)						
(b)	Ш	This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)				
	ne of didate					
	didate y Affiliatio	Office Sought: House Senate President	State			
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	District			
	ne of didate					
Par	ty Con	nmittee:				
(d)		· · · · · · · · · · · · · · · · · · ·	Democratic, Republican, etc.) Party.			
Pol	itical A	ction Committee (PAC):				
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its cont	nected organization is a			
		Corporation Corporation w/o Capital Stock	Labor Organization			
		Membership Organization Trade Association	Cooperative			
(5)		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 fund or party committee. (i.e., nonconnected committee)				
		In addition, this committee is a Lobbyist/Registrant PAC.				
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)				
Joir	nt 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.	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			
	Committees Participating in Joint Fundraiser					
	1.	FEC ID number				
	2.	FEC ID number				
	3.	FEC ID number				
	4.					

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Write or Type Committee Na		<u> </u>
TERM LIMITS	SUPERPAC	
6. Name of Any Connected	d Organization, Affiliated Committee, Joint Fundraising Representati	ve, or Leadership PAC Sponsor
NONE		
		<u> </u>
Mailing Address		
	CITY STATE	ZIP CODE
Relationship: Connec	cted Organization Affiliated Committee Joint Fundraising Represe	entative Leadership PAC Sponsor
. Custodian of Records: le books and records.	dentify by name, address (phone number optional) and position of the	e person in possession of committee
	Heidi, , ,	
Full Name Mailing Address	1747 Pennsylvania Ave NW	
Mailing Address	Suite 1000	
	Washington	20006
Title or Position	CITY STATE	ZIP CODE
Attorney	Telephone number	202 785 9500
8. Treasurer: List the name any designated agent (e.g	and address (phone number optional) of the treasurer of the committ J., assistant treasurer).	ee; and the name and address of
Full Name Costello	o, Robert, , ,	
Mailing Address	PO Box 1971	
	Alexandria	22313
Title or Position Treasurer	CITY STATE Telephone number	ZIP CODE 847 - 707 - 9636

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Full Name of Designated Agent Abe	egg, Heidi, , ,					
Mailing Address	1747 Pennsylvania Ave NW					
	Suite 1000					
	Washington CITY	DC 20006 STATE	ZIP CODE			
Title or Position Assistant Treasurer		er	299 - 8570			
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. Bank of America						
	600 N Washington St					
Mailing Address						
	Alexandria	VA 22314				
	CITY					
	CITY	STATE	ZIP CODE			
Name of Bank, Depos		STATE ———————————————————————————————————	ZIP CODE			
Name of Bank, Depos		STATE	ZIP CODE			
Name of Bank, Depos Mailing Address	sitory, etc.	STATE	ZIP CODE			
	sitory, etc.	STATE	ZIP CODE			
	sitory, etc.	STATE	ZIP CODE			