2017 - 05 - 01 - 05 - 00142952

FEC FORM 1

STATEMENT OF **ORGANIZATION**

REUEIVEU

IDERAL FLECTION

COMMISSION

PUBLIC DISCLOSURE

DIVISION

			2011 MAR -1 AM 9: 24
NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5
Tom Prigg	Floiri Cloinigirie	SISI I I I I I I I I	
ADDRESS (number and street)	9,0,1,7, W10,00	1, v, , e, w, , D, r, , v, e	
(Check if address is changed)			
	CITY A	Aprilia Market	[PA] [1,5,2,3,7]-[4,1,6,2] STATE ▲ ZIP CODE ▲
COMMITTEE'S E-MAIL ADDRE	SS		
(Check if address is changed)	[TomPiringial	-ioiricionique icisis	,@,q,m,a,i,1,.,c,o,m
G ,	Optional Second E-Mail Ad	ddress	
•	Kiaitinilieieini.	ipiri) igigi@igimiaii	11 1000m
COMMITTEE'S WEB PAGE AD			
(Check if address is changed)	Www.TomPr	inggfor Gong	reisisioiciom
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2. DATE 0 2 / 2	0/2011		
3. FEC IDENTIFICATION N	JMBER ▶ C		
4. IS THIS STATEMENT	NEW (N) OR	AMENDED (A)	
I certify that I have examined the	nis Statement and to the bes	at of my knowledge and belief it	is true, correct and complete.
Type or Print Name of Treasure	, Kathleen P	lansell-Prigg	
Signature of Treasurer	Hansell-Pru	oc	Date 0 2 / 2 0 / 2 0 1]
NOTE: Submission of false, erron	·	n may subject the person signing to	this Statement to the penalties of 52 U.S.C. §30109. WITHIN 10 DAYS.
Office Use Only		For further information c Federal Election Commissi Toll Free 800-424-9530 Local 202-694-1100	

	FEC Fo	orm 1 (Revised 02/2009)	Page 2
		COMMITTEE	
Can		e Committee:	
(a)		This committee is a principal campaign committee. (Complete the candidate information below.)	
(b)	0	This committee is an authorized committee, and is NOT a principal campaign committee. (Comple information below.)	te the candidate
Nam Cano	e of lidate	Thomas Lee Prigg	
	lidate Affiliati	ion DEM Office Sought: House D Senate President	State PA District
(c)	D	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Nam Cano	e of lidate		
Pari	ty Cor	nmittee:	
(d)	0		emocratic, oublican, etc.) Party.
Poli	tical A	Action Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connec	cted organization is a:
		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 segre committee. (i.e., nonconnected committee)	gated 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.)	•
Join	t Fund	draising 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)	O	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.	r more political
	Com	nmittees Participating in Joint Fundraiser	
	1.		<u> </u>
	2.	FEC ID number C	
	3.	FEC ID number	
	4.		A A A A A A A A A A A A A A A A A A A

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Write or Type Committee N		
Tom Priga F	or Congress	
33	ed Organization, Affiliated Committee, Joint Fundraising Representative, or Lead	dership PAC Sponsor
	·	
Mailing Address		
	CITY STATE	ZIP CODE
Relationship: Conne	ected Organization Affiliated Committee Joint Fundraising Representative	Leadership PAC Sponsor
 Custodian of Records: books and records. 	Identify by name, address (phone number optional) and position of the person in	possession of committee
Full Name Ka	this even Hamsell-Piringg	
Mailing Address	9.01.71 MIDIOIDIVITIEM IDEILIVIE	
	Pirthishurgh 115	5,2371-41162
Title or Position	CITY STATE	ZIP CODE
Bioloikikieleip	Telephone number 7,2,4,-	15,8,4]-[4,0,13]
Treasurer: List the name any designated agent (e.	e and address (phone number optional) of the treasurer of the committee; and the g., assistant treasurer).	name and address of
Full Name of Treasurer	timi elem illiamsien n-Piringigi	
Mailing Address	8:011.71 Wololdwie en Dirive	
	Printitisteringhi IPA LIS	5237-4162
Title or Position	CITY STATE	ZIP CODE
Treasure	1 Telephone number 7 2 4 -	15,841-40,13

FEC Form 1 (R	levised 02/2009)		Page 4
<u> </u>			
Full Name of Designated Agent			
Mailing Address			
	CITY	STATE	ZIP CODE
Title or Position	Telephone	number <u> </u>	
		:	funds, holds accounts, rents
safety deposit boxes or Name of Bank, Deposit	tory, etc.		
safety deposit boxes or Name of Bank, Deposit	r maintains funds. tory, etc. I CIQIY IVII I I EIWI I FIEIDIEI CIQII I I I CICIED	111711010	1 10 10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
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Federal Election Commission 1999 E Street, NW Washington, DC 20463

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Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS The FEC added this page to the end of this filing to indicate how it was received. Date of Receipt Hand Delivered Date of Receipt Postmarked USPS First Class Mail Postmarked (R/C) USPS Registered/Certified Postmarked **USPS Priority Mail** Postmarked **USPS Priority Mail Express** Postmark Illegible No Postmark **Shipping Date** Overnight Delivery Service (Specify): **Next Business Day Delivery** Date of Receipt Received from House Records & Registration Office **Date of Receipt** Received from Senate Public Records Office Date of Receipt Received from Electronic Filing Office

Date of Receipt or Postmarked Other (Specify): **PREPARER** DATE PREPARED (3/2015)