FEC

Only

STATEMENT OF

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ORGANIZATION FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. ORELOGIC INC PAC 40 PACIFICA AVENUE ADDRESS (number and street) SUITE 900 (Check if address is changed) **IRVINE** 92618 CA CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS imcintyre@corelogic.com (Check if address X is changed) Optional Second E-Mail Address dahayes@corelogic.com COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2016 C00416693 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. Pratt, Stuart, , , Type or Print Name of Treasurer Pratt, Stuart,,, [Electronically Filed] 15 2016 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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TYPE OF C	OMMITTEE 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. (Corinformation below.)	nplete the candidate
Name of Candidate		
Candidate Party Affiliation	Office Sought: House Senate President	State
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate		
Party Com	mittee: (National, State	(Democratic,
(d)	This committee is a or subordinate) committee of the	Republican, etc.) Party
Political A	ction Committee (PAC):	
(e) x	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its co	nnected 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 s committee. (i.e., nonconnected committee)	egregated 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 Fund	raising Representative:	
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for t	wo 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 to committees/organizations, none of which is an authorized committee of a federal candidate.	wo or more political
Com	mittees Participating in Joint Fundraiser	
1.	FEC ID number	
2.	FEC ID number	
3.		
٥.		

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Write or Type Committee Name	. ago C
CORELOGIC INC PAC	
6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leaders	hip PAC Sponsor
CoreLogic, Inc.	
40 Pacifica Avenue Mailing Address	
Suite 900 Irvine	
CITY STATE	ZIP CODE
Relationship: x Connected Organization Affiliated Committee Joint Fundraising Representative Lea	adership PAC Sponsor
. Custodian of Records: Identify by name, address (phone number optional) and position of the person in pos books and records.	session of committee
McIntyre, James, Russell, , Full Name	1
1420 New York Avenue NW	
Mailing Address Suite 800	
Washington DC 20005	
Title or Position CITY STATE	ZIP CODE
Policy Researcher Telephone number	969 - 8606
3. Treasurer: List the name and address (phone number optional) of the treasurer of the committee; and the name any designated agent (e.g., assistant treasurer).	me and address of
Full Name Pratt, Stuart, , , of Treasurer	
Mailing Address 1420 New York Avenue NW	
Suite 800	
Washington DC 20005	
CITY STATE Title or Position	ZIP CODE
0/10 / 0 4// :	969 8595

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Full Name of Designated	Hayes, David, , ,	
Agent	140 Pacifica Avenue	
Mailing Address	-01 dollida Avenue	
	Suite 900	
	Irvine	[-] [
	CITY STATE	ZIP CODE
Title or Position Assistant Treas	surer 949 -	214 - 1115
safety deposit be	r Depositories: List all banks or other depositories in which the committee deposits funds, holooxes or maintains funds. Depository, etc.	ds accounts, rents
Name of Balk,	Bank of America	
Mailing Address	,PO Box 25118	
	,PO Box 25118	
	,PO Box 25118	5118
	PO Box 25118	5118
	PO Box 25118 Tampa FL 33622- CITY STATE	
Mailing Address	PO Box 25118 Tampa FL 33622- CITY STATE	
Mailing Address	PO Box 25118 Tampa FL 33622- CITY STATE Depository, etc.	
Mailing Address Name of Bank,	PO Box 25118 Tampa FL 33622- CITY STATE Depository, etc.	
Mailing Address Name of Bank,	PO Box 25118 Tampa FL 33622- CITY STATE Depository, etc.	