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. GANNETT FLEMING, INC PAC 207 SENATE AVE ADDRESS (number and street) (Check if address is changed) CAMP HILL 17011 PA CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS gfpac@gfnet.com (Check if address is changed) Optional Second E-Mail Address mhoff@gfnet.com COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 04 2020 C00141382 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. Kessler, Jon, H, Mr., Type or Print Name of Treasurer Kessler, Jon, H, Mr., [Electronically Filed] 09 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	raye z				
Can	didate	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.)					
Nam Cand	e of didate						
	didate / Affiliati	Office Sought: House Senate President	State				
(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.							
Name Cand	e of didate						
Par	ty Con	nmittee:	(Damas and the				
(d)		(National, State (Democratic, This committee is a or subordinate) committee of the Republican, etc.) Party					
Poli	tical A	ction Committee (PAC):					
(e)	×	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con-	nnected organization is a				
		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 segregated fund or par 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.)					
Join	t Fund	Iraising 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 to committees/organizations, none of which is an authorized committee of a federal candidate.	vo or more political				
	Com	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 Name						
GANNETT FLE	MING, INC PAC					
6. Name of Any Connected O	Organization, Affiliated Committee, Joint Fundraising Representative, or L	Leadership PAC Sponsor				
Gannett Fleming, Inc. Mailing Address Relationship: Connected	207 Senate Ave Camp Hill CITY STATE Corganization Affiliated Committee Joint Fundraising Representative	17011 ZIP CODE Leadership PAC Sponsor				
books and records. Kessler, Jo	Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of commbooks and records. Kessler, Jon, H, Mr.,					
Mailing Address	1625 Bow Tree Dr					
	West Chester PA	19380				
Title or Position	CITY STATE	ZIP CODE				
Treasurer	Telephone number 717					
Treasurer: List the name and any designated agent (e.g., a	d address (phone number optional) of the treasurer of the committee; and assistant treasurer).	the name and address of				
Full Name Kessler, Jon of Treasurer Mailing Address	1625 Bow Tree Dr					
Title or Position	CITY STATE	ZIP CODE				
Treasurer	717 Telephone number					

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Full Name of Designated	Scaer, Robert, M, Mr.,						
Agent	208 Dunbar Dr						
Mailing Address							
	Mechanicsburg PA 1705	50					
	CITY STATE	ZIP CODE					
Title or Position Chairman	Telephone number 717 –	763 - 7211					
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. PNC Bank							
	₁ 4242 Carlisle Pike						
Mailing Address							
	Camp Hill PA 1701	1					
	CITY STATE	ZIP CODE					
Name of Bank,	Depository, etc.						
Mailing Address							
	CITY STATE	ZIP CODE					

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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or(h). Joint Fundraisir	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
		FEC ID number	C
Name of Any Connected	Organization, Affiliated Committee, Join	t Fundraising Representativ	re, or Leadership PAC Sponsor
Mailing Address			
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
Nowicki, Full Name	Paul, D, Mr.,		
Mailing Address	56 Jeanine Ct		
Maining / Idai 000			
	Manalapen	NI .	, 07726
TITLE OR POSITION	▼ CITY ▲	STATE ▲	ZIP CODE ▲
ViceChr_Secy_AsstTrs		Telephone Number	717 - 763 - 7211
Banks or Other Deposito safety deposit boxes or ma	ories: List all banks or other depositories in aintains funds.	n which the committee deposi	ts funds, holds accounts, rents
Name of Bank, Depository, etc.			
Mailing Address			