PAGE 1 / 4 STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 COMMITTEE (in full) over the lines. is changed) TechFirst PAC LLC 611 Pennsylvania Ave SE ADDRESS (number and street) #433 (Check if address is changed) Washington 20003 DC CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS finance@techfirstpac.org (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) www.techfirstpac.org (Check if address is changed) DATE 06 2013 C00525683 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. Daniel M. Shapero Type or Print Name of Treasurer Daniel M. Shapero [Electronically Filed] 07 07 2013 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. **FEC FORM 1** (Revised 06/2012)

Office			For further information contact:
Use			Federal Election Commission
Only			Toll Free 800-424-9530
Offily			Local 202-694-1100

	FEC Fo	rm 1 (Revised 02/2009)	Page 2			
		OMMITTEE • Committee:				
(a)		This committee is a principal campaign committee. (Complete the candidate information below	<i>i.</i>)			
(b)		This committee is an authorized committee, and is NOT a principal campaign committee. (Co information below.)	mplete the candidate			
Nam Can	ne of didate					
	didate y Affiliati	on Office Sought: House Senate President	State			
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.				
Nam Can	ne of didate					
Par	ty Con	nmittee: (National, State	(Domogratio			
(d)		This committee is a or subordinate) committee of the	(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 connected 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 segregated committee. (i.e., nonconnected committee)			segregated 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	nt Fund	raising 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.				
	Com	mittees 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	·	- 3
TechFirst PAC L	LC	
	ganization, Affiliated Committee, Joint Fundraising Representative, or Lead	ership PAC Sponsor
NONE		
Mailing Address		
	CITY STATE	ZIP CODE
Relationship: Connected	Organization Affiliated Committee Joint Fundraising Representative	Leadership PAC Sponso
. Custodian of Records: Ident books and records.	ify by name, address (phone number optional) and position of the person in	possession of committee
Linas Danie	l Liutikas	
Full Name	₁ 205 E Butterfield Road	
Mailing Address		
	Elmhurst , IL , 6012	26
Title or Position	CITY STATE	ZIP CODE
Secretary	Telephone number	
3. Treasurer: List the name and any designated agent (e.g., as	address (phone number optional) of the treasurer of the committee; and the sistant treasurer).	name and address of
Full Name Daniel Shap	ero	
Mailing Address	3241 Crestwood Circle	
	Laguna Beach CA 9265	1
Title or Decition	CITY STATE	ZIP CODE
Title or Position Treasurer		275 - 2041

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Full Name of Designated Agent			
Mailing Address			
	CITY	STATE	ZIP CODE
Title or Position		none number	
safety deposit boxes of Name of Bank, Deposi	itory, etc.	committee deposits fun	nds, holds accounts, rents
Co	Jorgan Sorktown Center		
Mailing Address	Three Yorktown Center		
	Lombard		160148
	CITY	STATE	ZIP CODE
Name of Bank, Deposi	itory, etc.		
Mailing Address	yPal 2145 Hamilton Avenue		
	San Jose	CA C	95125