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) NetJets Association of Shared Aircraft Pilots PAC; NJASAP PAC 2740 Airport Drive ADDRESS (number and street) Suite 330 (Check if address is changed) Columbus 43219-2268 OH CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS pac@njasap.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) www.njasap-pac.com; www.njasap-pac.org; www.njasap-pac.net (Check if address is changed) DATE 2015 C00488262 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. Jason M. Layman Type or Print Name of Treasurer Jason M. Layman [Electronically Filed] 10 19 2015 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 Only Local 202-694-1100

FFC F	Form 1 (Revised 02/2009)	Page 2
	COMMITTEE	i aye 🚣
Candida	te 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 Affilia	Office Sought: House Senate President	State
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate		
Party Co	mmittee:	
(d)	This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.
Political	Action Committee (PAC):	
(e) X	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its co	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 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 Fur	ndraising 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 t committees/organizations, none of which is an authorized committee of a federal candidate.	wo or more political
Co	mmittees Participating in Joint Fundraiser	
1.	FEC ID number	
2.	FEC ID number	
3.	FEC ID number	
4.		

Title or Position Director of Finance

_		-
l FEC Form 1 (Revi	ised 02/2009)	Page 3
Write or Type Committee I	Name	J
NetJets Asso	ociation of Shared Aircraft Pilots	s PAC: NJASAP PAC
	ted Organization, Affiliated Committee, Joint Fundraising F	·
•		
Neldels Association	n of Shared Aircraft Pilots (NJASAP)	
Mailing Address	2740 Airport Drive	
J J	Suite 330	
	Columbus	OH 43219-2268
	CITY	STATE ZIP CODE
		SIAIE ZII CODE
Relationship: X Conn	nected Organization Affiliated Committee Joint Fundrai	ising Representative Leadership PAC Spon
books and records.	: Identify by name, address (phone number optional) and p by Tullos 2740 Airport Drive Suite 330 Columbus	OH 43219-2268
Title or Position	CITY	STATE ZIP CODE
Secretary	Telephone	number 614 - 863 - 2008
 Treasurer: List the nam any designated agent (e 	ne and address (phone number optional) of the treasurer of e.g., assistant treasurer).	f the committee; and the name and address of
Full Name Jason of Treasurer	n M. Layman	
Mailing Address	533 Warwick Lane	
	Pickerington	OH 43147
	CITY	STATE ZIP CODE

614

Telephone number

863

2008

TEC FOILIT (F	Revised 02/2009)	Page 4
Full Name of Designated Agent Cole	ey George	
Mailing Address	2740 Airport Drive	
	Suite 330	
	Columbus OH CITY STATE	43219-2268
Title or Position Asst. Dir. Finance		
safety deposit boxes o Name of Bank, Depos	sitory, etc.	ds, nolds accounts, rents
safety deposit boxes o Name of Bank, Depos	or maintains funds. sitory, etc. S. Bank	ds, nolds accounts, rents
safety deposit boxes on Name of Bank, Depos	or maintains funds.	ds, nolds accounts, rents
safety deposit boxes of Name of Bank, Depos	or maintains funds. sitory, etc. S. Bank 166 North Hamilton Road	
safety deposit boxes o Name of Bank, Depos	or maintains funds. sitory, etc. S. Bank 166 North Hamilton Road	43230
safety deposit boxes of Name of Bank, Depos	or maintains funds. sitory, etc. S. Bank 166 North Hamilton Road	
safety deposit boxes of Name of Bank, Depos U.S Mailing Address	or maintains funds. Sitory, etc. S. Bank 166 North Hamilton Road Gahanna OH CITY STATE	43230
safety deposit boxes of Name of Bank, Depos U.S Mailing Address	or maintains funds. Sitory, etc. S. Bank 166 North Hamilton Road Gahanna OH CITY STATE	43230
Name of Bank, Depos Mailing Address Name of Bank, Depos	or maintains funds. Sitory, etc. S. Bank 166 North Hamilton Road Gahanna OH CITY STATE	43230
Name of Bank, Depos Mailing Address Name of Bank, Depos	or maintains funds. Sitory, etc. S. Bank 166 North Hamilton Road Gahanna OH CITY STATE	43230
safety deposit boxes of Name of Bank, Depos	or maintains funds. Sitory, etc. S. Bank 166 North Hamilton Road Gahanna OH CITY STATE	43230