FEC FORM 1	-	TATEMEN RGANIZA			Office Use Only
1. NAME OF COMMITTEE (in		(Check if name s changed)	Example: If typing, type over the lines.	12FE4M5	
1					 
ADDRESS (number a	nd street)				
<ul> <li>(Check if a is changed</li> </ul>					
		 ITY ▲		L L STATE ▲	ZIP CODE
COMMITTEE'S E-MA	IL ADDRESS				
<ul> <li>(Check if a is changed</li> </ul>					
J. J		Second E-Mail Add	lress		
COMMITTEE'S WEB (Check if a is changed	address	RL)			
2. DATE					
3. FEC IDENTIFIC	CATION NUMBER	C			
4. IS THIS STATEM		(N) OR	AMENDED (A)		
I certify that I have e	examined this Stateme	ent and to the best	of my knowledge and belief it	is true, correct a	nd complete.
Type or Print Name	of Treasurer				
Signature of Treasure	ir			Date	
NOTE: Submission of			nay subject the person signing t DN SHOULD BE REPORTED W		he penalties of 2 U.S.C. §437g.
Office Use Only			For further information constrained Federal Election Commission Toll Free 800-424-9530 Local 202-694-1100		FEC FORM 1 (Revised 06/2012)

FEC Form 1 (Revised 02/2009)

5.	TYPE	OF C	OMMITTEE
	Cano	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.)
	Name Candi		
	Candi Party	date Affiliatio	on Office Sought: House Senate President District
	(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.
	Name Candi		
	Party	y Com	mittee:
	(d)		This committee is a(National, State or subordinate) committee of the(Democratic, Republican, etc.) Party.
	Polit	ical A	ction Committee (PAC):
	(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected 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 party 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.)
	Joint	Fund	raising 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 two or more political 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.	FEC ID number

Write or Type Committee Name

6. Name of Any Connected O	rganization, Affiliated Committee, Joint Fun	draising Representative, or Leadership PAC Sponsor
Mailing Address		
	CITY	STATE ZIP CODE
Relationship: Connected	Organization Affiliated Committee Joi	nt Fundraising Representative Leadership PAC Sponso
<ol> <li>Custodian of Records: Iden books and records.</li> </ol>	tify by name, address (phone number optio	nal) and position of the person in possession of committee
Full Name		
Mailing Address		
Title or Position	CITY	STATE ZIP CODE
		Telephone number
<ol> <li>Treasurer: List the name and any designated agent (e.g., a</li> </ol>		easurer of the committee; and the name and address of
Full Name of Treasurer		
Mailing Address		
Title or Position	CITY	STATE ZIP CODE
	т	elephone number

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Name of Bank, Depository, etc.

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Full Name of Designated Agent																															
Mailing Address																															
				1																L				L							
										CI	ΓY									ST	ATE	Ξ				Z	IP (	COL	DE		
Title or Position																															
															Tel	eph	ione	e n	um	beı		L									

9. 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.

Mailing Address				
		CITY	STATE	ZIP CODE
Name of Bank, Depositor	y, etc.			
Mailing Address				