FEC FORM 1

STATEMENT OF ORGANIZATION

RECEIVED -

2012 OCT -9 AM H: 48

FORM 1	ORGANIZATION				TEO MAN ATTENT		
	L					FEC MAIL I	CENTER
1. NAME OF COMMITTEE (in	n full)	(Check if name is changed)		ple:If typing, type he lines.	12FE4	15	
UNITED S	TATE	S SENATE CA		IGN FUND	FORL	-OUISIAN	IA
		1111111				1.1.1.1.1	
ADDRESS (number a	nd street)	PO BOX 681	337				
(Check if address is changed)		MIAMI			FL 33168		 J
			CITY		STATE	ZIP (CODE
COMMITTEE'S E-MA	AIL ADDRE	SS (Please provide only one	e-mail addr	ess)			
(Check if	addrage	USsenateCa	ımpaiç	nFundPA	Çs@gn	nail.com	
is change						 	
COMMITTEE'S WEE	PAGE AD	DRESS (URL)					
(Check if							1-1-1-1-1
is change	ю)		111		1111		
2. DATE 10) 4	° ′ 20 12					
3. FEC IDENTIFIC	CATION N	UMBER C					
4. IS THIS STATE	MENT 🔀	NEW (N) OR		AMENDED (A)			
I certify that I have	examined ti	his Statement and to the be	est of my kn	owledge and belief	it is true, corr	ect and complete.	
Type or Print Name	of Tononium	STANLEY	SATES	3			
type or Print Name	or treasure			·			
Signature of Treasure	er	Starley Gar	les		Date 1	0 ′ 04 °	′ 2012
NOTE: Submission of	false, erron	eous, or ineumplelecinformation	• •			-	f 2 U.S.C. §437g.
Office Use Only			F	or further information ederal Election Commis oil Free 800-424-9530		FEC F(- 1

I 	F	EC For	m 1 (Revised 02/2009)	Page 2
5.			OMMITTEE	
	Can	didate	Committee:	
	(a)		This committee is a principal campaign committee. (Complete the candidate information below	2.)
	(b)		This committee is an authorized committee, and is NOT a principal campaign committee. (Coninformation below.)	mplete the candidate
	Name Cand			
	Cand	lidate Affiliatio	Office Sought: House Senate President	State
	ranty	Aimau	on Sought: House Senate President	District
	(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
	Name Cand			
	Part	y Con	imittee:	(Dama a a a A) a
	(d)		(National, State This committee is a or subordinate) committee of the	(Democratic, Republican, etc.) Party.
	Polit	tical A	ction Committee (PAC):	
	(e)	П	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its co	nnected organization is a
		لبيا	Corporation Corporation w/o Capital Stock	Labor Organization
			Membership Organization Trade Association	Cooperative
			In addition, this committee is a Lobbyist/Registrant PAC.	
	(f)	\boxtimes	This committee supports/opposes more than one Federal candidate, and is NOT a separate scommittee. (i.e., nonconnected committee)	segregated fund or party
			In addition, the committee is a Lebbyist/Registrant PAC.	
			In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
	Join	t 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	two or more political
	(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for a committees/organizations, none of which is an authorized committee of a federal candidate.	two or more political
		Com	mittees Participating in Joint Fundraiser	
		1.	FEC ID number C	
		2.	FEC ID number C	
		3.	FEC ID number C	
		A	1	

Write or Type	Committee	Name
---------------	-----------	------

UNITED STATE	S SENATE CAMPAIGN FUND FOR LOUISIANA
6. Name of Any Connected C	Organization, Affiliated Committee, Joint Fundralsing Representative, or Leadership PAC Sponsor
NONEIIII	
Mailing Address	
	CITY STATE ZIP CODE
Relationship: Connected	d Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor
. Custodian of Records: Idea books and records.	ntify by name, address (phone number optional) (and position of the person in possession of committee
Full Name STAN	ILEY GATES.
Mailing Address	P. O. BOX 681337
•	
	MIAMI FL 33168 -
Title or Position	CITY STATE ZIP CODE
LEGISLATIVE D	Telephone number 305 - 761 - 0002
3. Treasurer: List the name an any designated agent (e.g.,	d address (phone number optional) of the treasurer of the committee; and the name and address of assistant treasurer).
Full Name of Treasurer	ILEY GATES
Mailing Address	P. O. BOX 681337
	MIAMI FL 33168 -
Title or Position	CITY STATE ZIP CODE Telephone number 305 761 0002

FEC Form 1 (Revised 02/2009)		Page 4
		 	
Full Name of Designated Agent		<u> </u>	
Mailing Address			
	СПУ	STATE	ZIP CODE
Title or Position			
	Telephone no	ımber	
 Banks or Other Dep safety deposit boxes 	ositories: List all banks or other depositories in which the comm or maintains funds.	ittee deposits	funds, holds accounts, rents
Name of Bank, Depo	sitory, etc.		
ΙC	ITIBANK	1.1.1.1	
Mailing Address	10800 BISCAYNE BLVD		
	MIAMI	FL	33161
	СПҮ	STATE	ZIP CODE
Name of Bank, Depo	sitory, etc.	·····	
ı			1
		· L	
Mailing Address			
		 	
	CITY	STATE	ZIP CODE

12030894005

Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS The FEC added this page to the end of this filing to indicate how it was received.				
Hand Delivered	Date of Receipt			
USPS First Class Mail	Postmarked			
USPS Registered/Certified	Postmarked (R/C)			
USPS Priority Mail	Postmarked			
Delivery Confirmation™ or Signature 0	Confirmation™ Label			
USPS Express Mail	Postmarked			
Postmark Illegible				
No Postmark				
Overnight Delivery Service (Specify):	Shipping Date			
Next Bu	usiness Day Delivery			
Received from House Records & Registration Office	Date of Receipt			
Received from Senate Public Records Office	Date of Receipt			
Received from Electronic Filing Office	Date of Receipt			
Other (Specify):	e of Receipt or Postmarked			
Si /	10/9/12			
PREPARER (2005)	DATE PREPARED			

(3/2005)