FEC FORM 1	STATEMENT OF ORGANIZATION	2013 JUL -8 AM 10: 22
1. NAME OF COMMITTEE (in f	ull) (Check if name Example: If ty is changed) over the lines	
[Friilends	of Dan Logue for C	pngrass,
ADDRESS (number and	•	
is changed)	WILLONG	I I I I I I I I I I I I I I I I I I I
Committee's E-Mail	ADDRESS	
(Check if ad is changed)	tress Kellylawler 9 Shce	Jobal.net
	Optional Second E-Mail Address	.
Committee's web f	AGE ADDRESS (URL)	
(Check if ad is changed)	dress	
2. DATE	22 2013	
3. FEC IDENTIFICA		
4. IS THIS STATEME		ENDED (A)
I certify that I have example	amined this Statement and to the best of my knowledge	e and belief it is true, correct and complete.
Type or Print Name of	Treasurer Kelly Lawler	<u> </u>
Signature of Treasurer	Keely Baul	u Data 0.5 22 2013
NOTE: Submission of fa	se, erroneous, or incomplete information may subject the p ANY CHANGE IN INFORMATION SHOULD BE	erson signing this Statement to the penalties of 2 U.S.C. §437g. REPORTED WITHIN 10 DAYS.
Office Use Only	Federal E	er information contact: lection Commission 300-424-9530 694-1100

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FEC Form 1 (Revised 02/2009)

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5.	TYPE	OF CO	DMMITTEE
	Cenc	didate	Cammittee:
	(a)	X	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	-	Paniel, Cogue
	Candi Party	date Affiliatio	n REP Office Sought: X House Senate President District 0.3
	(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.
	Name Candi		
	Party	/ Com	mittee:
	(d)	Ω	This committee is a (National, State (Democratic, Republican, etc.) Party.
	Polit	ical Ac	ction Committee (PAC):
	(e)	П	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:
	(6)		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 Lebbyist/Registrant PAC.
			In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)
	Joint	Fund	raising Representative:
	(g)	D	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	nittees Participating in Joint Fundraiser
		Com	
		1.	
		2.	
		3.	
		4.	FEC ID number
I			

I	FEC Form 1 (Revised	02/2009)	Page 3
``	Nrite or Type Committee Nam Friends	of Dan Loque for congres	S
6.	Name of Any Connected	Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership	PAC Sponsor
L			
L			
	Mailing Address		
		CITY STATE ZIF	P CODE
	Relationship: Connecte	d Organization Affiliated Committee	rship PAC Sponsor
7.	Custodian of Records: Ide books and records.	ntify by name, address (phone number optional) and position of the person in posses	sion of committee
		14 Lawlar	
	Mailing Address	1 P.O. BOX 984	
		1	
		WILLOWS	<u>8</u> -L.
	Title or Position	CITY STATE ZIF	CODE
	TREASURER	Telephone number 530 - 93	4-15823
8.	Treasurer: List the name an any designated agent (e.g.,	d address (phone number optional) of the treasurer of the committee; and the name assistant treasurer).	and address of
	Full Name of Treasurer		
	Mailing Address	1PD, BOX, 984,	
		CITY STATE ZIP	
	Title or Position	T	
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Title or Position											Cľ	ΤY										ST/	ATE					ZI	P		ЭE			
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Mailing Address			L	1								_1_		_1_	1		1	1.	 	<u> </u>	1	1	1		 	_1_	1	1		1	1	_I	1	ப
Full Name of Designated Agent	L	 	1	<u> </u>				1	_1		1	1	_1_	I	1	1			 1					_1_	 	_1_	1	1		1	1	1	1	

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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.

Name of Bank, Depository, etc.

ITRI	L Coun	ties, Ban	$K_{11111111}$	
Mailing Address	1210	N. Tehi	PMAL	
	Willow	<u>S</u>		95988-
		CITY	STATE	ZIP CODE
Name of Bank, Depository, e	ətc.			
Mailing Address				
		CITY	STATE	ZIP CODE

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Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOM The FEC added this page to the end of this filing to indi	AING DOCUMENTS
Hand Delivered	Date of Receipt
USPS First Class Mail	Postmarked $\frac{25}{13}$
USPS Registered/Certified	Postmarked (R/C)
USPS Priority Mail	Postmarked
Delivery Confirmation [™] or Signature Co	onfirmation [™] Label
USPS Express Mail	Postmarked
Postmark Illegible	
No Postmark	
Overnight Delivery Service (Specify):	Shipping Date
Next Bus	siness 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
Date Other (Specify):	of Receipt or Postmarked
Jmp	7/8/13
(3/2005)	DATE PREPARED