

FEC FORM 1

STATEMENT OF ORGANIZATION

RECEIVED

2013 APR 22 AM 10:50
Office Use Only

1. NAME OF COMMITTEE (in full) (Check if name is changed) Example: If typing, type over the lines. 12FE4M5 FEC MAIL CENTER

ABAMCIS SECURING THE SECOND AMENDMENT FOR AMERICA'S FUTURE

ADDRESS (number and street) 67 LONGHILL AVE

(Check if address is changed)

SHELTON CITY CT 06484- ZIP CODE

COMMITTEE'S E-MAIL ADDRESS

(Check if address is changed)

ABAMCIS@LIVE.COM

Optional Second E-Mail Address

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address is changed)

WWW.ABAMCIS.COM

2. DATE 04 ' 13 ' 2013

3. FEC IDENTIFICATION NUMBER C00519991

4. 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.

Type or Print Name of Treasurer Angel L. Cadena Jr.

Signature of Treasurer *Angel L. Cadena Jr.* Date 04 ' 13 ' 2013

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.

Table with 5 columns and 1 row. The first column is labeled 'Office Use Only'.

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

FEC FORM 1 (Revised 06/2012)

13031062049

5. TYPE OF COMMITTEE

Candidate 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 of Candidate _____

Candidate Party Affiliation	Office Sought:	House	Senate	President	State District
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- (c) This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate _____

Party Committee:

- (d) This committee is a _____ (National, State or subordinate) committee of the _____ (Democratic, Republican, etc.) Party.

Political Action 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 Fundraising 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.

Committees Participating in Joint Fundraiser

1. _____ FEC ID number C
2. _____ FEC ID number C
3. _____ FEC ID number C
4. _____ FEC ID number C

13031062050

Write or Type Committee Name

Abanci's Securing The Second Amendment For America's Future

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

[Empty grid lines for organization name]

Mailing Address

[Empty grid lines for mailing address]

CITY

STATE

ZIP CODE

Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor

7. Custodian of Records: Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Full Name

Michael P Swetz

Mailing Address

170 Brookside Drive

Stratford

CT

06614

Title or Position

CITY

STATE

ZIP CODE

Assistant Treasurer

Telephone number 203-260-4217

8. Treasurer: List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name of Treasurer

Angel L CADENA JR

Mailing Address

67 Longhill Ave

Shelton

CT

06404

Title or Position

CITY

STATE

ZIP CODE

Treasurer / CEO

Telephone number 203-450-7011

13031062051

Full Name of Designated Agent

Michael P Swetz

Mailing Address

170 Brookside Drive

Stratford

CITY

CT

STATE

06614

ZIP CODE

Title or Position

Assistant Treasurer

Telephone number

203-260-1427

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.

Bank of America

Mailing Address

2 Trap Falls Rd

Shelton

CITY

CT

STATE

06484

ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

CITY

STATE

ZIP CODE

13031062052

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

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No Postmark

Overnight Delivery Service (Specify): Shipping Date
Next Business Day Delivery

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Received from Senate Public Records Office Date of Receipt

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Other (Specify): Date of Receipt or Postmarked

Jm10
PREPARER

4/23/17
DATE PREPARED

13031062053