Only

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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) over the lines. is changed) OHIO GUN COLLECTORS ASSOCIATION POLITICAL ACTION COMMITTEE (SSF) PO BOX 406 ADDRESS (number and street) (Check if address is changed) SAGAMORE HILLS 44067 ОН CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS dgrant@dennisgrantlaw.com (Check if address is changed) Optional Second E-Mail Address ogca@ogca.com COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2019 C00316455 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. Wos, Robert, , Mr., Type or Print Name of Treasurer Wos, Robert, , Mr., [Electronically Filed] 04 02 2019 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

Toll Free 800-424-9530 Local 202-694-1100

(Revised 06/2012)

	FEC Fo	rm 1 (Revised 02/2009)	Page 2
		OMMITTEE	
	aidate	Committee:	
(a)	ш	This committee is a principal campaign committee. (Complete the candidate information below.)	
(b)	Ш	This committee is an authorized committee, and is NOT a principal campaign committee. (Compinformation below.)	lete the candidate
Nam Can	e of didate		
	didate y Affiliatio	Office on Sought: House Senate President	State
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	District
Nam Cand	e of didate		
Par	ty Con	nmittee:	
(d)		· · · · · · · · · · · · · · · · · · ·	Democratic, epublican, etc.) Party.
Poli	itical A	ction Committee (PAC):	
(e)	×	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its conn	ected 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 seg committee. (i.e., nonconnected committee)	regated 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.)	
Join	ıt Fund	raising Representative:	
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate.	or more political
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	or more political
	Com	mittees Participating in Joint Fundraiser	
	1.	FEC ID number	
	2.	FEC ID number	
	3.	FEC ID number C	
	4.		

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Write or Type Commit	ttee Name	_
OHIO GUN C	COLLECTORS ASSOCIATION POLITICAL ACTION	COMMITTEE (SSF)
	nnected Organization, Affiliated Committee, Joint Fundraising Representative,	
OHIO GUN CO	LLECTORS ASSOCIATION	
Mailing Address	P.O. BOX 406	
Mailing / tadi ess		
	SAGAMORE HILLS OH	44067
	CITY STATE	ZIP CODE
Relationship:	Connected Organization Affiliated Committee Joint Fundraising Representat	tive Leadership PAC Sponsor
7. Custodian of Reco	${f ords:}$ Identify by name, address (phone number optional) and position of the pe	erson in possession of committee
	Wos, Robert, J., ,	I
Full Name	,1877 Cypress Point Lane	
Mailing Address		
		0.400.4
	Sarasota	34234
Title or Position	CITY STATE	ZIP CODE
Treasurer		
	name and address (phone number optional) of the treasurer of the committee; ent (e.g., assistant treasurer).	and the name and address of
Full Name of Treasurer	Wos, Robert, , Mr.,	
Mailing Address	1877 Cypress Point Lane	
	Sarasota	34234-3020
Title or Position	CITY STATE	ZIP CODE
Treasurer	9. Telephone number	41 822 0642

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Full Name of Designated	grant, dennis, , , Esq.	
Agent		
Mailing Address	445 Hutchison Ave, Ste 840	
	Columbus OH 43235	
	CITY STATE Z	IP CODE
Title or Position Counsel		26 4927
Name of Bank, I		
Mailing Address	Huntington National PO Box1558 EA1 W37	
Mailing Address		
Mailing Address		58
Mailing Address	PO Box1558 EA1 W37  Columbus  OH 43216-155	58   -
Mailing Address  Name of Bank, I	PO Box1558 EA1 W37  Columbus  CITY  STATE  Z	
	PO Box1558 EA1 W37  Columbus  CITY  STATE  Z	
	PO Box1558 EA1 W37  Columbus  CITY  STATE  Z  Depository, etc.	
Name of Bank, [	PO Box1558 EA1 W37  Columbus  CITY  STATE  Z  Depository, etc.	
Name of Bank, [	PO Box1558 EA1 W37  Columbus  CITY  STATE  Z  Depository, etc.	