FEC FORM 1

STATEMENT OF ORGANIZATION

FORM 1	(See instructions)	
1. NAME OF	(Check if name Example: If typying, type	Office use only
COMMITTEE (in f	ull) is changed) over the lines	12FE4IVIO
New House Ind	lependent Expenditure Committee	
ADDRESS (number and s	700 13th Street, NW	
(Check if address	Suite 600	
X is changed)	Washington	DC 20005 - 1
	CITY▲	STATE▲ ZIP CODE ▲
COMMITTEE'S E-MAIL	_ ADDRESS (Please provide only one e-mail address)	
(Check if address is changed)	PLGroup@perkinscoie.com	
,		
(Check if address is changed) 2. DATE M M O 1	PAGE ADDRESS (URL)	
3. FEC IDENTIFICAT	TION NUMBER C C00488940	
4. IS THIS STATEM	ENT NEW (N) OR X AMENDED (A)	_
I certify that I have examin	ned this Statement and to the best of my knowledge and belief it is true, correct	and complete
Type or Print Name of 1	Treasurer Jim Gonzalez	
Signature of Treasurer	Electronically Filed by Jim Gonzalez	Date 01 / 01 / 2011
NOTE: Submission of fals	se, erroneous, or incomplete information may subject the person signing this St	
Office Use Only	For further information Federal Election Commi Toll Free 800-424-9530	ission FEC FORM 1

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5.	TYPE OF CO	DMMITTEE (Check One)					
	Candidate C	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 information below.)	candidate				
	Name of Candidate						
	Candidate Party Affiliati	on Office House Senate President	State District				
	(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.					
	Name of Candidate						
	Party Comm						
	(d)		emocratic, epublican,etc.) Party.				
	Political Action Committee (PAC):						
	(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected or	rganization is a:				
		Corporation Corporation w/o Capital Stock Labor	Organization				
		Membership Organization Trade Association Coop	erative				
		In addition, this committee is a Lobbyist/Registrant PAC.					
	(f) X	This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fu committee. (i.e., nonconnected committee)	ind or party				
		In addition, this committee is a Lobbyist/Registrant PAC.					
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)					
	Joint Fundra	ising Representative:					
	(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or m committees/organizations, at least one of which is an authorized committee of a federal candidate.	ore political				
	(h)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or m committees/organizations, none of which is an authorized committee of a federal candidate.	ore political				
	Com	mittees Participating in Joint Fundraiser					
		1. FEC ID number					
		2 FEC ID number C					
		3. FEC ID number					
		FEC ID number					

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Write or Type Committee Nan	ne					
New House Independ	dent Expenditure Committee					
6. Name of Any Connected	Organization, Affiliated Committee, Joint Fundraisin	ng Representative, or Lead	ership PAC Sponsor			
None						
Mailing Address						
	CITY▲	STATE ≜	ZIP CODE			
Relationship: Connected Organizat	ion Affiliated Committee Joint Fund	draising Representative	Leadership PAC Sponsor			
Connected Organization	Julia de Commune	uraising representative	Leadership I AO Oponson			
	Custodian of Records: Identify by name, address, (phone number optional), and position of the person in possession of Committee books and records.					
Full Name	Jim Gonzalez Full Name					
Mailing Address 700 13th Street, NW						
	Suite 600					
	Washington		20005			
Title or Position ▼	CITY A	STATE	ZIP CODE A			
Treasu	rer Te	elephone number	. –			
name and address of	lim Conzoloz					
Mailing Address	700 13th Street, NW					
	Suite 600					
	Washington	DC	20005			
Title or Position ♥	CITY A	STATE.▲	ZIP CODE A			
Treasu	rer	olophono number				
		elephone number				

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Full Name of Designated Agent					
Mailing Address					
Title or Position ▼	CITY A	STATE 🛦	ZIP CODE A		
		Telephone number			
9. Banks or Other Deposito safety deposit boxes or ma Name of Bank, Depository.	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.				
	Bank				
Mailing Address	605 14th Street, NW				
	Washington	pc	20005		
	CITY 🗖	STATE⊿	ZIP CODE 🛕		
Name of Bank, Depository	, etc.				
Mailing Address					
	CITY 🙇	STATE △	ZIP CODE 🛕		