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2014 JAN 28 AM 8:59

FEC MAIL CENTER

Beverly Hires
18213 SE Fairview Cir
Tequesta, FL 33469
January 22, 2014

Federal Election Commission
999 E. Street N.W.
Washington, D.C. 20463

RE: Form 1 Beverly Hires - H4FL18084

Dear Sir/Madam:

Enclosed Please find and process Form 1 in your usual manner.

Sincerely,

A handwritten signature in cursive script, appearing to read "Beverly Hires", is written over the printed name.

Beverly Hires

Enclosure: Form 1

14031163096

FEC FORM 1

STATEMENT OF ORGANIZATION

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1. NAME OF COMMITTEE (in full)

(Check if name is changed)

Example: If typing, type over the lines.

12FE4M5

HIRES FOR CONGRESS

ADDRESS (number and street)

PO BOX 3297

(Check if address is changed)

STUART

CITY

FL

STATE

34995

ZIP CODE

COMMITTEE'S E-MAIL ADDRESS

(Check if address is changed)

bev hires for congress@gmail.com

Optional Second E-Mail Address

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address is changed)

bev hires.org

2. DATE

01 / 16 / 2014

3. FEC IDENTIFICATION NUMBER

C44FL18084

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

Roy Wiley

Signature of Treasurer

Roy Wiley

Date

01 / 16 / 2014

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 Use Only

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

FEC FORM 1 (Revised 06/2012)

14031163097

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 BEVERLY JOY HIRES

Candidate Party Affiliation REP Office Sought: House Senate President State FL District 18

- (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	<u>C</u> _____
2.	_____	FEC ID number	<u>C</u> _____
3.	_____	FEC ID number	<u>C</u> _____
4.	_____	FEC ID number	<u>C</u> _____

14031163098

Write or Type Committee Name

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

Grid for Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

Mailing Address

Grid 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

TREASURER

Mailing Address

Grid for Mailing Address

Title or Position

CITY

STATE

ZIP CODE

Grid for Title or Position

Telephone number

Grid for Telephone number

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

ROY WILEY

Mailing Address

Grid for Mailing Address

JUPITER

CITY

STATE

ZIP CODE

Title or Position

TREASURER

Telephone number

Grid for Telephone number

14031163099

Full Name of Designated Agent

Jennifer Foster

Mailing Address

711 W Indian town Rd

Jupiter

CITY

FL

STATE

33758

ZIP CODE

Title or Position

Administrative Assistant Treasurer

Telephone number

561-744-9549

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.

Seacoast National Bank

Mailing Address

710 N US Highway 1

Tequesta

CITY

FL

STATE

33469

ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

CITY

STATE

ZIP CODE

14031163100

14031163101

BHRES
8213 SE Fairview Cir
Tequesta FL 33469

WEST PALM BCH FL 33411
22 JAN 2014 PM 7:1



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999 E. Street, N.W.
Washington DC

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 The FEC added this page to the end of this filing to indicate how it was received.

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Overnight Delivery Service (Specify): Shipping Date
Next Business 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): Date of Receipt or Postmarked

ED
 PREPARER
 (8/2013)

1/28/14
 DATE PREPARED

14031163102