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2014 FEB 26 AM 11:26

FEC MAIL CENTER

Committee Name:

marijuanaismedicineSuperPac

If registered, FEC ID:

Today's Date:

2/25/2014

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

Re: Form 1, Statement of Organization—Unlimited Contributions

To Whom It May Concern:

This committee intends to make independent expenditures, and consistent with the U.S. Court of Appeals for the District of Columbia Circuit decision in *SpeechNow v. FEC*, it therefore intends to raise funds in unlimited amounts. This committee will not use those funds to make contributions, whether direct, in-kind, or via coordinated communications, to federal candidates or committees.

Respectfully submitted,



Treasurer's Name:

Daniel McLaughlin

, Treasurer

14031191102

For help completing Form 1, please double-click the  icon next to each line number.

**FEC
FORM 1**

**STATEMENT OF
ORGANIZATION**

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2014 FEB 25 AM 11:27
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Office Use Only

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

MarijuanaismedicineSuperPac

ADDRESS (number and street) 13221 Lawson Rd.

(Check if address is changed) Little Rock AR 72210

CITY STATE ZIP CODE

COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address) (Check if address is changed) djmlaw1@gmail.com

COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) www.marijuanaismedicine.com

2. DATE 02 25 2014

3. FEC IDENTIFICATION NUMBER C

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 Daniel McLaughlin

Signature of Treasurer  Date 02 25 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.

14031191103

14031191104

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

- (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 _____

Write or Type Committee Name

MarijuanaismedicineSuperPac

14031191105

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

Daniel McLaughlin

Mailing Address

13221 Lawson Rd.

Little Rock

AR

72210

Title or Position

CITY

STATE

ZIP CODE

President

Telephone number

501-516-1471

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

Daniel McLaughlin

Mailing Address

13221 Lawson Rd.

Little Rock

Ar

72210

Title or Position

CITY

STATE

ZIP CODE

Treasurer

Telephone number

501-516-1471

Full Name of Designated Agent

Stewart Holley

Mailing Address

941 Wilma Ave

Winter Park

CITY

FL

STATE

32789

ZIP CODE

Title or Position

Assistant Treasurer

Telephone number

352

434

1591

14031191106

- 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 England

Mailing Address

Little Rock

CITY

AR

STATE

72202

ZIP CODE

Name of Bank, Depository, etc.

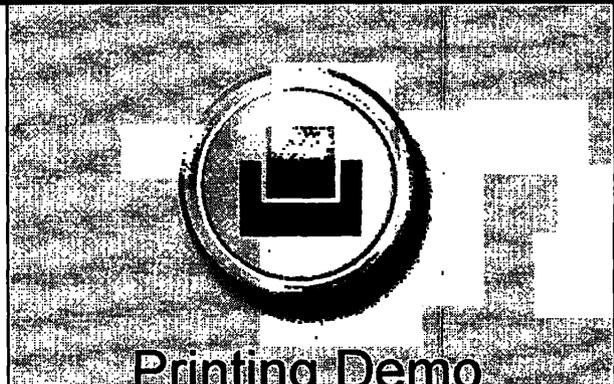
Mailing Address

CITY

STATE

ZIP CODE

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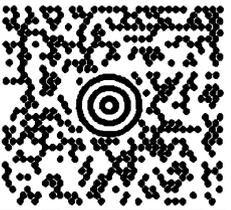
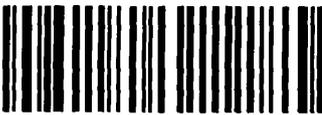
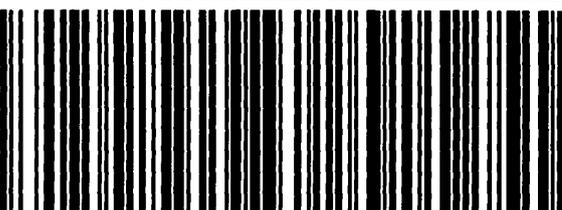
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Window Envelope

Use this envelope with shipping or inkjet printer on plain paper.

DAN MCLAUGHLIN 501-372-9800 BANKERS TITLE 2200 NORTH RODNEY PARHAM DR. LITTLE ROCK AR 72212		0.0 LBS LTR	1 OF 1
SHIP TO: SUPERPAC APPLICATIONS FEDERAL ELECTION COMMISSION 999 E. STREET, N.W. WASHINGTON DC 20463-0001			
	MD 201 9-83 		
UPS NEXT DAY AIR		1	
TRACKING #: 1Z 04W R74 01 9312 4330			
			
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wr: DT File #: DAN	CS 16.1.04. WNTINV50 48.0A 01/2014		

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2011 FEB 26 AM 11:21

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Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
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Overnight Delivery Service (Specify): **UPS** Shipping Date
2/25/14
Next Business Day Delivery

Received from House Records & Registration Office Date of Receipt

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Other (Specify): Date of Receipt or Postmarked


 PREPARER
 (8/2013)

2/26/14
 DATE PREPARED

14031191108