FEC FORM 1	STATEMENT OF ORGANIZATION	Office Use Only
1. NAME OF COMMITTEE (in ful	(Check if name Example: If typing, type over the lines.	12FE4M5
	ongress	
ADDRESS (number and s	2950 NEWMARKET PL #101-203	
(Check if addreis changed)	· · · · · · · · · · · · · · · · · · · ·	WA98226
	CITY	STATE ZIP CODE
COMMITTEE'S E-MAIL / (Check if add is changed)	DDRESS (Please provide only one e-mail address) marty@andersforcongress.com ess	
COMMITTEE'S WEB PA	andersforcongress.com	
2. DATE 03	22 / Y Y Y Y 22 2012	
3. FEC IDENTIFICAT	ON NUMBER C C00496877	
4. IS THIS STATEMEN	T X NEW (N) OR AMENDED (A)	
I certify that I have exar Type or Print Name of T	easurer MARTIN MOSKOWITZ	it is true, correct and complete.
Signature of Treasurer	MARTIN MOSKOWITZ [Electronically Filed]	Date 03 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
NOTE: Submission of false	, erroneous, or incomplete information may subject the person signing ANY CHANGE IN INFORMATION SHOULD BE REPORTED	
Office Use Only	For further information Federal Election Commis Toll Free 800-424-9530 Local 202-694-1100	

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03/22/2012 13 : 30

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F	EC Fo	rm 1 (Revised 02/2009)	Page <b>2</b>
		OMMITTEE	-
Can	didate	e 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. (Comp information below.)	lete the candidate
Name Cand		Greg Anders	
Cand Party	lidate Affiliati	on REP Office Sought: X House Senate President	State WA District 01
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name Cand			
Part	y Con	nmittee:	
(d)			Democratic, Republican, etc.) Party.
Polit	tical 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	t Func	Iraising 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.	o 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	
	4.	FEC ID number	

FEC Form 1 (Revised 02/2009)

Write or Type Committee Name

## Anders for Congress

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

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.

Martin	Moskowitz	
Full Name		
Mailing Address	2950 NEWMARKET PL #101-203	
Mailing Address		
	Bellingham	WA 98226
Title or Position	CITY	STATE ZIP CODE
Treasurer	Telephone	number 818 903 - 3713

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	Martin Moskowitz
of Treasurer	
Mailing Address	2950 NEWMARKET PL #101-203
	Bellingham
	CITY STATE ZIP CODE
Title or Position Treasurer	Telephone number     818     903     3713

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Full Name of Designated Agent																		I										
Mailing Address																												
																					L							
								CI	ΓY								ST/	λΤΕ					ZI	ΡC	DE			
Title or Position																												
												Tel	eph	ione	e ni	umt	ber											

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.

Busine	ess Bank		
Mailing Address	2417 Meridian Street		
	Suite 104		
	Bellingham	WA	<sup>98225</sup>
	CITY	STATE	ZIP CODE
Name of Bank, Depository,	etc.		
Mailing Address			
	CITY	STATE	ZIP CODE