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	STATEME	NT OF		RECEIVED
FEC	ORGANIZ	ATION	2013	DEC 13' AM 10: 18
FORM 1			For	ipe Use Daly
1. NAME OF COMMITTEE (in fu	(Check if name is changed)	Example: If typing, type over the lines.	12FÉ4M5	CENTER
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RepresentUsNo	γ ν.ρrg <u>i i i i i i i i i i i i i i i i i i i</u>	1.1.1.1.1.1.1.1.1.		<u> </u>
		<u>, , , , , , , , , , , , , , , , , , , </u>		
ADDRESS (number and	street) 4431 W Shaw Butt			<u>, , , , , , , , </u>
(Check if add is changed)				
1	Glendale		AZ 85	304
	CITY A		STATE ▲	ZIP CODE▲
COMMITTEE'S E-MAIL	ADDRESS			
(Check if add is changed)	ress zadoc.paet@gmai	il.com		
l	Optional Second E-Mail Ad			I
	rob@representusr	Now.org		
COMMITTEE'S WEB PA	. ,	antusnow _i org <u>iiii</u>	. 	<u> </u>
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2. DATE 12	, DB , 2013			
3. FEC IDENTIFICAT		รั้ โรงเหรือเหตุดีหมายในการที่จะการโรงเกรา?	•	
4. IS THIS STATEME		AMENDED (A)		
I certify that I have exa	mined this Statement and to the best	t of my knowledge and belief i	it is true, correct and	complete.
	Treasurer Robert A. Vincigu			
Type or Print Name of				······
Signature of Treasurer	PK1.	\bigcirc	Date 12	03 / 2013
NOTE: Submission of fals	se, erroneous, or incomplete information ANY CHANGE IN INFORMAT	may subject the person signing		penalties of 2 U.S.C. §437g.
Office Use Only		For further information Federal Election Commiss Toll Free 800-424-9530 Local 202-694-1100		FEC FORM 1 (Revised 06/2012)

FEC Form 1 (Revised 02/2009)

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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 Candi		
Candie Party	date Affiliatio	on Office State State District
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.
Name Candid	-	
Party	y Com	mittee:
(d)		This committee is a (National, State or subordinate) committee of the Republican, etc.) Party.
Politi	ical A	ction 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)	X	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	Fund	raising Representative:
(g)	ŗ,	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.
	Comr	nittees Participating in Joint Fundraiser

1.	L	1	1											J	FEC	ID	number	C
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3.	L			1	1							L		L	FEC	ID	number	
4.	L			1										ļ	FEC	ID	number	C

<u> </u>	FEC Form 1 (Revised	02/2009)	Page 3
W	rite or Type Committee Nam	e ´	
	RepresentUs	Now.org	
6.	Name of Any Connected	Organization, Affiliated Committee, Joint Fundraising Representative, or Leadersh	ip PAC Sponsor
L			
L			
	Mailing Address		
			,]-] , , ,]
		CITY STATE	
	Relationship:	d Organization	dership PAC Sponsor
7.	Custodian of Records: Ide books and records.	ntify by name, address (phone number optional) and position of the person in poss	session of committee
	Full Name		<u> </u>
	Mailing Address	4107 E La Salle St	
		Phoenix	
	Title or Position	CITY STATE 2	
	IT Architect		
8.	Treasurer: List the name ar any designated agent (e.g.,	ad address (phone number optional) of the treasurer of the committee; and the nan assistant treasurer).	ne and address of
	Full Name Robert	A. Vinciguerra	<u>. I. I. I. I. I. I</u>
	Mailing Address	4431,Wi Shawi Butte,Dr	
		Glendale AZ 85304 CITY STATE Z	
1	Title or Position		<u>3</u> 3409

FEC Form 1 (F	Revised 02/2009)	- <u></u>	Page 4
Full Name of Designated Agent	ıştiņ Z. Hanşen , , , , , , , , , , , , , , , , , , ,	· 	
Mailing Address	11577 W _I Dµran Ave		
J.		3 1 1 1 1 1 1 1 1	
	ı Youngtown		85363 -
		STATE	
Title or Position	Pr _{1 1 1 1 1 1 1 1} . Telepho	one number 602	4020038_
Name of Bank, Depos	esert Schools Credit Union	┨╌┨╌┨╴┨╴┨╴┪╴┧╴	╶╆╼┷╶╃╼┊╼┊╴┦╼┨╼┨╴┛
Mailing Address	[P.Q. Box 2945		
			<u>i.i.l.l.l.i.l.</u>
			85062 2945
	СІТҮ	STATE	ZIP CODE
Name of Bank, Depos	itory, etc.		
L			
Mailing Address			
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