Ø 40311901

STATEMENT OF **ORGANIZATION**

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cro 21 AM 9: 32

. 011111				2014 FEB 21 MT 5 Option Use Opty.
NAME OF COMMITTEE (in	full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5
JASON,	LESCH	FOR CO	NGRESS	
			<u> </u>	
ADDRESS (number a	nd street)	10, BOX 11	160	
(Check if	address į			
is changed	<u>A</u>	U.BU.R.N		N.4 1.3.0.2 - ZIP CODE!
COMMITTEE'S E-MA	AIL ADDRESS			
⟨Check if is changed	address ;	asonlesq	h@roadrunner.	com
	Op L	tional Second E-Mail Ad	ddress	1
	<u>L</u>		<u> </u>	
				·
COMMITTEE'S WEB			r	
⟨Check if a is changed		yasonlesch	tor. Congress, G	91
	1	.	J	
	L	<u> </u>		
2. DATE Ö	ä′ 67	2014		
3. FEC IDENTIFIC	CATION NUMB	ER ▶ C		·
4. IS THIS STATE	MENT X	NEW (N) OR	AMENDED (A)	
I certify that I have	examined this St	atement and to the bes	st of my knowledge and belief	it is true, correct and complete.
Time or Drint Name	of Transcript	Jason	lesch	
Type or Print Name	of freasurer	7 43011		
Signature of Treasure	er	Jasun J	Usu-	Date 02 18 2014
NOTE: Submission of			n may subject the person signing	this Statement to the penalties of 2 U.S.C. §437g. WITHIN 10 DAYS.
Office Use Only			For further Information Federal Election Commiss Toll Free 800-424-9530 Local 202-694-1100	

FEC Form 1 (Revised 02/2009)	Page 3
Write or Type Committee Name	
6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Le	eadership PAC Sponsor
Malling Address	
	لـنــا-لـنـا
CITY STATE	ZIP CODE
Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative	Leadership PAC Sponsor
 Custodian of Records: Identify by name, address (phone number optional) and position of the person books and records. 	in possession of committee
Full Name JASON LESCH	
Mailing Address [325,1, E., GENESEE, ST., RD	
AUBURN I	3.02
Title or Position CITY STATE	ZIP CODE
TREASURER 13.15	1-12551-1021,2
 Treasurer: List the name and address (phone number optional) of the treasurer of the committee; and any designated agent (e.g., assistant treasurer). 	the name and address of
Full Name JASON LESCH	
Mailing Address [3,2,5,1, E. GENESEE, ST, RD,	
AUBURN	1302 1-1 - 1 - 1
CITY STATE	ZIP CODE
Title or Position TREASURER Telephone number 3,15	9-2551-1021,2

CITY

STATE

ZIP CODE

Page 4

FEC Form 1 (Revised 02/2009)

Full Name of Designated Agent

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G	2/21/14
PREPARER	DATE PREPARED

(8/2013)