## 2018 - 01 - 10 - 05 - 00184180

FEC FORM 1

## STATEMENT OF ORGANIZATION

RECEIVED FEC MAIL CENTER

2018 JAN 10 AM 11: 50

						<u> </u>	An of	fice Use Or	nly	
NAME OF     COMMITTEE (in full)		(Check if name is changed)	Example over the	e:If typing, type e lines.	12	FE4M	5			
AŞIAN AMERICAN GOP ÇOA	ι <u>ι</u> τιρη <sub>ι</sub>	PAC L L L L	<u> </u>	1 1 1 1 1	1 1			<u> </u>		ليب
					1 1	1 1 1		1.1.1	11	لسب
ADDRESS (number and street)	346 N	linηeola St	1		11		11			لببب
(Check if address is changed)	ىبا		1111	11111	1 1	<u> </u>		.1.1.1		لسب
	Hinsd	ale IIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII	<del>                                     </del>		[IL STA	 ATE ▲	605		_ -   P COI	DE 🛦
COMMITTEE'S E-MAIL ADDRE	ss									
(Check if address is changed)	cypth	ia.hopkins@asjango	p.org			1 1 1		<u> </u>		
<b>3</b> ,	Option	al Second E-Mail Add	ldress							,
	لــــــا		<del></del>		1 1		1 1			
(Check if address is changed)	· L					<u>                                     </u>		1 1 1		
2. DATE 01 05		2018								
3. FEC IDENTIFICATION NU	JMBER	► C 000	659847							
4. IS THIS STATEMENT	NE	W (N) OR	$\boxtimes$	AMENDED (A)						
certify that I have examined th	nis State	ment and to the best	t of my kno	wledge and belief	it is tru	e, corre	ct and	complete	Э.	
Type or Print Name of Treasure	r Xiad	oting Hopkins								
Signature of Treasurer		my	>		Date	01	<b>М</b>	05 05	20	)18
NOTE: Submission of false, errone		incomplete information HANGE IN INFORMAT						penalties	of 52 L	J.S.C. §3010
Office Use			Fe	r further information deral Election Commis Il Free 800-424-9530				FEC F		

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5.	–		OMMITTEE  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. (Complinformation below.)	ete the candidate		
	Name Candi					
	Cand Party	idate Affiliatio	Office Sought: House Senate President	State		
	(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	<u></u>		
	Name Candi					
	Part	y Com	mittee:			
(	( <b>d)</b>			Democratic, epublican, etc.) Party.		
	Polit	tical A	ction Committee (PAC):			
	(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization on line 6.)	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)	$\overline{\mathbf{X}}$	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.)					
	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 committees/organizations, none of which is an authorized committee of a federal candidate.	or more political		
		Com	mittees Participating in Joint Fundraiser			
		1.		<del></del>		
		2.				
		3.				
		4.				

Title or Position

Treasurer

FEC Form 1 (Revised	02/2009)	Page 3
Write or Type Committee Nam	e	
6. Name of Any Connected (	Organization, Affiliated Committee, Joint Fundraising Representative, or L	eadership PAC Sponsor
Non e		
		·
Mailing Address		
	CITY STATE	ZIP CODE
Relationship: Connecte	d Organization Affiliated Committee Joint Fundraising Representative	Leadership PAC Sponso
<ol> <li>Custodian of Records: Ide books and records.</li> </ol>	ntify by name, address (phone number optional) and position of the persor	n in possession of committe
Full Name Xiaoting	Hopkins   [	
Mailing Address	346 Minneola St.	
	1	

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).

CITY

STATE

Telephone number

ZIP CODE

|- |318 |

Full Name of Treasurer	Xiaoting Hopkins
Mailing Address	346 Minneola St.
	Hinsdale IIL 60521
	CITY STATE ZIP CODE
Title or Position	
Treasurer	Telephone number 917 - 318 - 8553

9.

FEC Form 1 (Rev	ised 02/2009)		Page 4
Full Name of Designated Agent			
Mailing Address			
	CITY	STATE	ZIP CODE
Title or Position	Telephone	e number	
Banks or Other Deposit safety deposit boxes or n Name of Bank, Depositor		mmittee deposits f	unds, holds accounts, rents
Evergr	reen Bank Group		
Mailing Address	15,15 W 22nd St #100		
		1 1 1 1 1 1 1	
	Oak Brook		60523
	CITY	STATE	ZIP CODE
Name of Bank, Depositor	ry, etc.		
نب	<u> </u>		
Mailing Address		<u> </u>	
		لــا لـ	
	CITY	STATE	ZIP CODE

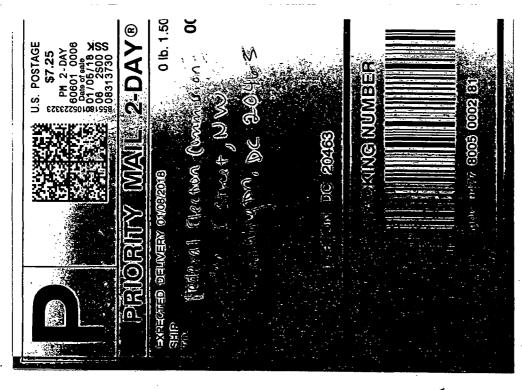
## 2018 - 01 - 10 - 0M - 00184184

FEC Form 1S (Revised 02/2017)

## Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

Page \_\_\_ **of** \_\_\_

5(g) or (h).	Joint Fundraising	g Participant:		
1.			FEC ID number	
2.			FEC ID number	
3.			FEC ID number	C
4.			FEC ID number	
6. Name	e of Any Connected	Organization, Affiliated Committee, Joint Fundr	aising Representativ	e, or Leadership PAC Sponsor
Lı		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
لــــــــــــــــــــــــــــــــــــــ				
	Mailing Address			
				<u> </u>
			· L	
	Relationship:	CITY ▲	STATE A	ZIP CODE ▲
	Connected	Organization Affiliated Committee oint	Fundraising Represent	ative Leadership PAC Sponsor
	nated Agent: Identify	by name, address (phone number – optional)		
М	failing Address		11111	
7	TITLE OR POSITION	▼ CITY ▲	STATE ▲	ZIP CODE ▲
L		Te	elephone Number	
safety Name	deposit boxes or mae of Bank, sitory, etc.	ries: List all banks or other depositories in which intains funds.	the committee deposi	ts funds, holds accounts, rents
	Mailing Address			<u> </u>
				<u> </u>
		CITY ▲	STATE A	ZIP CODE A



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

Federal Election Commission  ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS  The FEC added this page to the end of this filing to indicate how it was received.				
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Postmark Illegible				
No Postmark				
Overnight Delivery Service (Specify):	Shipping Date			
N.	ext Business Day Delivery			
Received from House Records & Registration	Date of Receipt Office			
Received from Senate Public Records Office	Date of Receipt			
Received from Electronic Filing Office	Date of Receipt			
Other (Specify):	Date of Receipt or Postmarked			
PREPARER (A)	10   18 DATE PREPARED			
(3/2015)	DATE PREPARED			