Committee Name:

RECEIVED FEC MAIL CENTER

2015 OCT -7 AM 7: 17

A New Direction USA
If registered, FEC ID:
Today's Date:
O O
9/30/15
110
Federal Election Commission
999 E Street, N.W.
Washington, D.C. 20463
Washington, D.C. 20403
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,
Jany Mohner
Treasurer's Name:
1/1/2011
Carry 76/11/25, Treasurer

en en ekke de eksplent og begøde et byrenden mulikat dag et engened og til

## **FEC** FORM 1

## STATEMENT OF **ORGANIZATION**

FEC MAIL CENTER 2015 OCT -7 AM 7: 17

			Office Use Only
NAME OF     COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5
A NEW DITTE	ction USA		
ADDRESS (number and street)	PO BOX 1/3	90	
(Check if address is changed)			
	IS/a MIDITAR	da	FL 33a36-LI STATE & ZIP CODE A
OMMITTEE'S E-MAIL ADDRE	ESS	*5/	
(Check if address is changed)	INFOGANCE	wdirectionUSA	C. Com
,	Optional Second E-Mail A	ddress	
OMMITTEE'S WEB PAGE AD	DDRESS (URL)		·
(Check if address is changed)			
2. DATE 70 0	11/20/3		
. FEC IDENTIFICATION N	umber ▶ [C]		
4. IS THIS STATEMENT	NEW (N) OR	AMENDED (A)	
I certify that I have examined t	his Statement and to the be	st of my knowledge and belief i	t is true, correct and complete.
Type or Print Name of Treasure	er Larry Holmes		
Signature of Treasurer	any Holmes		Date 70 67 2015
NOTE: Submission of false, error		on may subject the person signing ATION SHOULD BE REPORTED	this Statement to the penalties of 52 U.S.C. §30109 WITHIN 10 DAYS.
Office Use Only		For further information Federal Election Commiss Toll Free 800-424-9530	

	COMMITTEE ate Committee:					
(a)	7					
(b) [	This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)					
Name of Candidat						
Candidat Party Aff						
(c) [	This committee supports/opposes only one candidate, and is NOT an authorized committee.					
Name of Candidat						
Party C	Committee:					
(d)	(National, State (Democratic, ror subordinate) committee of the Republican, etc.) Party.					
Politica	al 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 F	undraising 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.					
C	ommittees Participating in Joint Fundraiser					
1	FEC ID number					
2	FEC ID number					
3	FEC ID number					
. 4	.					

FEC Form 1 (Re	evised 02/2009)	Page 3
Vrite or Type Committee	e Name	
Name of Any Conne	ected Organization, Affiliated Committee, Joint Fundraising Representative, or Lea	dership PAC Sponsor
VONE		
		111111
44-11 Addroop	<del>~</del>	111111
Mailing Address		<del></del>
		11
	CITY STATE	ZIP CODE
_		_
Relationship: Co	onnected Organization Affiliated Committee Joint Fundraising Representative	Leadership PAC Spor
Custodian of Record	ds: Identify by name, address (phone number optional) and position of the person in	n possession of commi
books and records.		
Full Name	<u></u>	1 1 1 1 1 1 1
Mailing Address		— — — 
Title or Position	CITY STATE	ZIP CODE
VICEASIUM	Telephone number	
		· · · · · · · · · · · · · · · · · · ·
	ame and address (phone number optional) of the treasurer of the committee; and the tensor of the committee; and the treasurer of the committee; and the tensor of tensor of tensor of th	ie name and address o
Full Name	1. Try 4-1000	
T	arry Holmes	
of Treasurer	1 <i>0</i>	
Mailing Address	POBOX/390	<del></del>
	Is/amorada FL 13	30361-1
	IS/amorada FL 13 CITY STATE	30361-1 ZIP CODE

CITY

STATE

ZIP CODE

Page 4

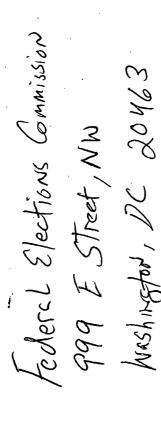
FEC Form 1 (Revised 02/2009)

Full Name of

Designated

SECTION OF SECTION

TEMPORTO LEGISLA



71:7 MA

Z012 OC1 - 1

FEC MAIL CENTER

ՈՒԺԻԴՎԿՈՒՈՄՈՒՈՒԳԻԿԻՈՒՊԱԿԻԿԻԿԻՄ

7
δl
1
5
4
Ö
_
7
$\cdot \tau$
03
-
0
ž
Κ
€
5
2
ģ
Ó
Ania,

PREPARER /

(3/2015)

## **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. Date of Receipt Hand Delivered Date of Receipt Postmarked **USPS First Class Mail USPS** Registered/Certified Postmarked **USPS Priority Mail** Postmarked **USPS Priority Mail Express** Postmark Illegible No Postmark **Shipping Date** Overnight Delivery Service (Specify): Next Business Day Delivery Date of Receipt Received from House Records & Registration Office Date of Receipt Received from Senate Public Records Office Date of Receipt Received from Electronic Filing Office Date of Receipt or Postmarked Other (Specify):