

# FEC FORM 1

# STATEMENT OF ORGANIZATION

Office Use Only

1. NAME OF COMMITTEE (in full)  (Check if name is changed) Example: If typing, type over the lines. 12FE4M5

## Correct the Record

ADDRESS (number and street) 455 Massachusetts Avenue NW  
 (Check if address is changed) Ste. 600  
Washington DC 20001  
CITY ▲ STATE ▲ ZIP CODE ▲

## COMMITTEE'S E-MAIL ADDRESS

(Check if address is changed) operations@correctrecord.org  
Optional Second E-Mail Address  
smele@mbacg.com

## COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address is changed) correctrecord.org

2. DATE 11 / 12 / 2015

3. FEC IDENTIFICATION NUMBER ▶ C C00578997

4. IS THIS STATEMENT  NEW (N) OR  AMENDED (A)

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Elizabeth Cohen

Signature of Treasurer Elizabeth Cohen [Electronically Filed] Date 11 / 12 / 2015

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.