

4/8/13

Dear Federal Elections Commission,
Wade Elements may not be filed electronically,
due to being subjected to Title 42
U.S.C. Sec. 1983. My freedom
along with my wife, jeopardized.

U.S. Government employee India name
Baca under FAMS Gov, local authorities
& courts. illegally forced us out of
our home over 2 years, without any
recourse through municipal, state
or federal court. Until now.

Therefore, would you kindly file
an Statement of Organization

(1)

13031063212

of Wade Elements as a Party Committee
Directed organization is WE & Corp.

We've reached applicable thresholds
& shall operate under all municipal,
state & Federal laws. Upon filing
statement of organization. Would
you please forward one (1) filed copy
to address below?

Marinka Tacuma Wade Mofe
Hall of Justice
850 Bryant Street 6th Floor
San Francisco, California 94103
CJ3-K-7
S.F. #546517
J#12679486

Thank you
Wade
Treasurer

FEC FORM 1

STATEMENT OF ORGANIZATION

RECEIVED 2013 APR 25 AM 11:37

Office Use Only CENTER

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

12FE4M5

WADE ELEMENTS

ADDRESS (number and street)

HURDLE ESTATE

(Check if address is changed)

42 PARSON STREET

SAN FRANCISCO CA 94118

CITY STATE ZIP CODE

COMMITTEE'S E-MAIL ADDRESS

(Check if address is changed)

STNREVENGE@YAHOO.COM

Optional Second E-Mail Address

N/A

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address is changed)

MOYEFINANCIALSERVICES.COM

N/A

2. DATE 04 06 2013

3. FEC IDENTIFICATION NUMBER C

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

Malinka Tacoma Wade Moye

Signature of Treasurer

Malinka Tacoma Wade Moye

Date

04 06 2013

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.

Office Use Only

For further information contact: Federal Election Commission Toll Free 800-424-9530 Local 202-694-1100

FEC FORM 1 (Revised 06/2012)

13031063214

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 of Candidate

Candidate Party Affiliation

Office Sought:

House

House

Senate

President

President

State

District

- (c) This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate

SENATOR DIANNE FEUERSTEIN

Party Committee:

- (d) This committee is a **STA** (National, State or subordinate) committee of the **BLA** (Democratic, Republican, etc.) Party.

Political 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 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 or more political committees/organizations, none of which is an authorized committee of a federal candidate.

Committees Participating in Joint Fundraiser

1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	C

13031063215

Write or Type Committee Name:

WADE ELEMENTS

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

~~NOT AFFILIATED~~ HURDIE NE Z CORPORATION
HURDIE ESTATE

Mailing Address

~~40~~ 40 PARSON STREET
~~40~~ SAN FRANCISCO CA 94118
CITY STATE ZIP CODE

Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor

7. Custodian of Records: Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Full Name

BRANDY CARMELA REED

Mailing Address

116 CASTILLO STREET
SAN FRANCISCO CA 94134

Title or Position

CO FOUNDER

CITY

STATE

ZIP CODE

Telephone number

415-921-4935

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).

Full Name of Treasurer

MALINKA TACUMA WADE MOYE

Mailing Address

HURDIE ESTATE
42 PARSON STREET
SAN FRANCISCO CA 94118

Title or Position

TREASURER

CITY

STATE

ZIP CODE

Telephone number

415-921-4935

13031063216

Full Name of Designated Agent

N/A

Mailing Address

N/A

N/A

N/A

CITY

STATE

ZIP CODE

Title or Position

N/A

Telephone number

N/A

N/A

N/A

9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

BETHEL AVE CREDIT UNION

Mailing Address

916 LAGUNA STREET

SAN FRANCISCO

CA

94115

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

N/A

Mailing Address

N/A

N/A

N/A

CITY

STATE

ZIP CODE

13031063217

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.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input checked="" type="checkbox"/> USPS First Class Mail	Postmarked 4/18/13
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<input type="checkbox"/> USPS Express Mail	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
Next Business Day Delivery <input type="checkbox"/>	
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

Chm PREPARER 4/25/13
(3/2005) DATE PREPARED

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