

**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

COALITION FOR AMERICAN VETERANS POLITICAL ACTION COMMITTEE

ADDRESS (number and street)

PO BOX 790

☐ (Check if address is changed)

ALEXANDRIA

CITY ▲

VA

STATE ▲

22313

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

☐ (Check if address is changed)

INFO@COALITIONFORAMERICANVETERANS.ORG

Optional Second E-Mail Address

THOMAS@9SEVENFEC.COM

COMMITTEE'S WEB PAGE ADDRESS (URL)

☐ (Check if address is changed)

COALITIONFORAMERICANVETERANS.ORG

2. DATE

03 / 02 / 2020

3. FEC IDENTIFICATION NUMBER ►

C C00650168

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 EVANS, BRENT, , ,

Signature of Treasurer EVANS, BRENT, , ,

[Electronically Filed]

Date

03 / 02 / 2020

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
OnlyFor further information contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-694-1100**FEC FORM 1**
(Revised 06/2012)

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|----|-------------|---------------|--------------|-------------|
| 1. | <div></div> | FEC ID number | <div>C</div> | <div></div> |
| 2. | <div></div> | FEC ID number | <div>C</div> | <div></div> |
| 3. | <div></div> | FEC ID number | <div>C</div> | <div></div> |
| 4. | <div></div> | FEC ID number | <div>C</div> | <div></div> |

Write or Type Committee Name

COALITION FOR AMERICAN VETERANS POLITICAL ACTION COMMITTEE**6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor**

NONE

Mailing Address

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

EVANS, BRENT, , ,

Mailing Address

PO BOX 790

ALEXANDRIA

VA

22313

Title or Position

CITY

STATE

ZIP CODE

TREASURER

Telephone number

715

338

8544

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

EVANS, BRENT, , ,

Mailing Address

PO BOX 790

ALEXANDRIA

VA

22313

Title or Position
TREASURER

CITY

STATE

ZIP CODE

Telephone number

715

338

8544

Full Name of
Designated
Agent

Mailing Address

Title or Position

Telephone number

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.

PNC BANK

Mailing Address

1050 CONNECTICUT AVE NW

WASHINGTON

DC

20036

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

CITY

STATE

ZIP CODE

: 97 'A -G79 @G B9CI G'H9LH'F9 @H98 'HC '5 'F9DCFHŽG7 <98I @ 'CF 'H9A -N5 HCB
.

Form/Schedule: F1A

Transaction ID :

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.

Form/Schedule:

Transaction ID: