FEC

## STATEMENT OF **ORGANIZATION**

RECEIVED 7

FORM 1		J11G7 (1 (1				FEC MAIL CENTER
1. NAME OF COMMITTEE (in	ı full)	(Check if name is changed)		mple:If typing, type the lines.	12FE4M	55
FLIENDS	SOFST	EPHAN	BRO	DHEAD		
	·D o	0 0 1	796			
ADDRESS (number a	nd street)	18:0X: 2	1/120			
(Check if a is changed)	٠ .	11580	4011		OR	9.71.23-
			CITY		STATE	ZIP CODE
COMMITTEE'S E-MA	AIL ADDRESS (Plea	se provide only or	ne e-mail add	dress)		
NKOWER.	I N		_	+ PFORCON	6 LES	S.COM
(Check if add is changed)	address	1 1 1 1 1 1	_ [ ] ]	.1.1.1.1.1		
	<del></del>					
COMMITTEE'S WEB		`	Nr -41	15 2 2 2 4 4	0000	
(Check if is change	address	<u> W.  5403</u>	1H1 E1 M1	)FURCOM6	14 <u>6</u> 15151	<u> </u>
2. DATE (1 09 2.011						
3. FEC IDENTIFICATION NUMBER  Cools of the contract of the con						
4. IS THIS STATE	MENT NE	W (N) OR	X	AMENDED (A)		
I certify that I have	examined this State	ment and to the l	pest of my l	knowledge and belief it	is true, corre	ct and complete.
Type or Print Name of Treasurer STEPHAN BROOHEAD  Signature of Treasurer Suplan Burlheal Date (1 09 2011)						
Signature of Treasure	er	lan Ber	Theat		Date (	[ 2011
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 co Federal Election Commissio Toll Free 800-424-9530 Local 202-694-1100		FEC FORM 1 (Revised 02/2009)

FEU	Form I (Hevisea 02/2009)	Page 2
	COMMITTEE	
Candid	ate 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. (Com information below.)	plete the candidate
Name of Candidat	STEPHAN BROOHEAD	
Candidat Party Aff		State O.C.
(c) <b>(</b>	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidat	STEPHAN BROOMERS	
Party C	ommittee:	
(d)		(Democratic, Republican, etc.) Party.
Politica	I Action Committee (PAC):	
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its cor	nected 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 se committee. (i.e., nonconnected committee)	egregated fund or party
	In addition, this committee is a Lebbyist/Registrant PAC.	
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Joint F	indraising Representative:	
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate.	vo or more political
(h)	This committee collecis contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	vo or more political
C	ommittees Participating in Joint Fundraiser	
1	FEC ID number	gan ang mangan na ganang na nggana ng Banasan ang na na nganang na nggana
2	FEC ID number	
3		
4		Second

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-		***	
Full Name of Designated Agent		<del>                                     </del>	
Mailing Address			
		1111111	
	CITY	STATE	ZIP CODE
Title or Position		Telephone number	
safety deposit boxes or n Name of Bank, Depositor	ry, etc.	th the committee deposits f	unds, holds accounts, rents
B, Ex	$\mathcal{A}_{\perp}$		
Mailing Address	10 BOX 97050		
		1 1 1 1 1 1 1 1	
	BEATTLE	COM	98124-19750
	CITY	STATE	ZIP CODE
Name of Bank, Depositor	ry, etc.		
Mailing Address		<u> </u>	
	CITY	STATE	ZIP CODE

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Write or Type Committee Nam		Page 3
6. Name of Any Connected	Organization, Affiliated Committee, Joint Fundraising Representative, or Leadersh	ip PAC Sponsor
Mailing Address		
		<u></u> -[
	CITY STATE 2	ZIP CODE
Relationship: Connecte	ed Organization Affiliated Committee Joint Fundraising Representative Lead	dership PAC Sponsor
<ol> <li>Custodian of Records: Ide books and records.</li> </ol>	entify by name, address (phone number optional) and position of the person in poss	ession of committee
Full Name	PHAN BRODHEAP	
Mailing Address	180 BOK 2725	
	Hills Boro 1971	23-
Title or Position	CITY STATE Z	ZIP CODE
CAMO DATE	Telephone number 253 J- 20	5-5795
3. Treasurer: List the name ar any designated agent (e.g.,	nd address (phone number optional) of the treasurer of the committee; and the name assistant treasurer).	ne and address of
Full Name of Treasurer	HAN BROOKEAD	
Mailing Address	P.O. B.O.X. 2725	
	CITY STATE Z	23
Title or Position  CAN PILEDIATE	Telephone number 2531-120	5-5195

(3/2005)

## **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 Postmarked USPS First Class Mail** 11/9/11 Postmarked (R/C) **USPS** Registered/Certified **Postmarked USPS Priority Mail** Delivery Confirmation™ or Signature Confirmation™ Label **Postmarked USPS Express Mail** 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): DATE PREPARED