Image# 11972771228 PAGE 1 / 4

FEC FORM 1			TATEM RGAN								Offi	ice Use	Only			
1. NAME OF COMMITTEE (in	full)	,	Check if name changed)		Exampl over the		ng, typ	e	12F	E4M			]			
Janice Hal	nn for	Cong	ress													
		One Par	. Pow													
ADDRESS (number and street)																
(Check if ac		Fifth Floo														
is changed)		Provide	nce 						LRI L		0290	J3 		- 🖳		
				CIT	Υ				STATI	E		Z	IP CO	DE		
COMMITTEE'S E-MA  X (Check if is change	address		provide only ompaignfinance		nil addres	ss)										
COMMITTEE'S WEB	PAGE ADI	DRESS (UI	RL)													
(Check if is change																Ш
2. DATE 12	M / D 22		2011													
3. FEC IDENTIFIC	CATION NU	JMBER	C	; C004	93023											
4. IS THIS STATEM	MENT X	NEW	(N) OI	R		AMEN	IDED (	A)								
I certify that I have ε	examined th	is Stateme	nt and to the	best of	my kno	wledge	and be	lief it	is true,	corre	ct and	compl	ete.			
Type or Print Name	of Treasure	Brett P.	Smiley													
Signature of Treasure	Brett P.	Smiley			[E	lectronic	ally File	ed]	Date	1	2 /	22	/	2	2011	Y
NOTE: Submission of			omplete informa									oenaltie	s of 2	. U.S.0	C. §43	7g.
Office					For	further	informat		ntact:			FEC	FO	RM	1	

L	Office Use Only				For further information contact: Federal Election Commission Toll Free 800-424-9530 Local 202-694-1100	FEC FORM 1 (Revised 02/2009)
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FEC F	form 1 (Revised 02/2009)	Page <b>2</b>
	COMMITTEE	
	te Committee:	
(a) X	This committee is a principal campaign committee. (Complete the candidate information below	<i>i</i> .)
(b)	This committee is an authorized committee, and is NOT a principal campaign committee. (Con information below.)	mplete the candidate
Name of Candidate	Janice Hahn	
Candidate	Office Sought: Y House Senate President	State
Party Affilia	tion Sought: X House Senate President	District 44
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate		
Party Co	mmittee:	
(d)	This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.
Political	Action Committee (PAC):	
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its co	nnected 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 scommittee. (i.e., nonconnected committee)	segregated fund or party
	In addition, this committee is a Lobbyist/Registrant PAC.	
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Joint Fur	draising Representative:	
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for 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 t committees/organizations, none of which is an authorized committee of a federal candidate.	wo or more political
Co	mmittees Participating in Joint Fundraiser	
1.	FEC ID number	
2.	FEC ID number	
3.	FEC ID number	
4.		

Write or Type Committee Nan		
Janica Hahn fo		
	or Congress	
Name of Any Connected	Organization, Affiliated Committee, Joint Fundraising Representative, or Lea	ndership PAC Sponsor
Mailing Address		
	CITY STATE	ZIP CODE
Relationship: Connecte	ed Organization Affiliated Committee Joint Fundraising Representative	Leadership PAC Sponso
Custodian of Records: Ide books and records.	entify by name, address (phone number optional) and position of the person in	n possession of committee
Brett P. S	Smiley	
Full Name Mailing Address	One Park Row	
ag . taa. see	Fifth Floor	
	Providence RI 029	903
Title or Position	CITY STATE	ZIP CODE
Custodian of Records	Telephone number	
<b>Treasurer:</b> List the name a any designated agent (e.g.,	nd address (phone number optional) of the treasurer of the committee; and the assistant treasurer).	ne name and address of
Full Name Brett P. S	Smiley	
Mailing Address	One Park Row	
	Fifth Floor	
	Providence RI 029 CITY STATE	03   -   ZIP CODE

. 20 . 0111	<b>1</b> (Revised 02/2009)	Page 4
Full Name of Designated Agent		
Mailing Address		
	CITY STATE	ZIP CODE
Title or Position		
	Telephone number	
	ixes or maintains funds.  Denository, etc.	
Name of Bank, I	California Bank & Trust  550 Hope Street	
Name of Bank, [	Depository, etc.  California Bank & Trust	
Name of Bank, [	California Bank & Trust  550 Hope Street	ZIP CODE
Name of Bank, [	California Bank & Trust  550 Hope Street  Los Angeles  CITY  STATE	ZIP CODE
Name of Bank, [	California Bank & Trust  550 Hope Street  Los Angeles  CITY  STATE	ZIP CODE
Name of Bank, [	California Bank & Trust    550 Hope Street	ZIP CODE