

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

TRUTH ACCOUNTABILITY AND COURAGE POLITICAL ACTION COMMITTEE (TACPAC)

ADDRESS (number and street) 4304 West Elgin Street

(Check if address is changed)

Broken Arrow CITY ▲ OK STATE ▲ 74012 ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

(Check if address is changed) jane.treat@gmail.com

Optional Second E-Mail Address

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address is changed)

2. DATE 06 / 26 / 2015

3. FEC IDENTIFICATION NUMBER ► C C00413070

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 Jane Treat

Signature of Treasurer Jane Treat [Electronically Filed] Date 06 / 26 / 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.