Only

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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 COMMITTEE (in full) over the lines. is changed) SOUTH AMERICA CONTINENT PROFESSIONAL JUDO LEAGUE 1900 WEST OAKLAND PARK BLVD. ADDRESS (number and street) # 9961 (Check if address is changed) FORT LAUDERDALE 33310 FL CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS USPoliticalActionCommittees@gmail.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) www.UnitedStatesPoliticalActionCommitteesDirectory.com (Check if address is changed) DATE 2015 C00598201 FEC IDENTIFICATION NUMBER 3. X 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. JOSHUA LAROSE Type or Print Name of Treasurer JOSHUA LAROSE [Electronically Filed] 12 18 2015 Signature of Treasurer Date 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 For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012)

Toll Free 800-424-9530

Local 202-694-1100

ŗ	FFC Fo	rm 1 (Revised 02/2009)	Page 2			
TYPE	E OF C	OMMITTEE	1 49 6 4			
Can	didate	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. (Complinformation below.)	ete the candidate			
Name Cand	e of lidate					
	lidate Affiliatio	Office Sought: House Senate President	State			
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.				
Name Cand						
Part	y Con	nmittee:				
(d)			emocratic, epublican, etc.) Party			
Poli	tical A	ction Committee (PAC):				
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization on line 6.)	ected 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 segrecommittee. (i.e., nonconnected committee)	regated 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.)				
Join	t Fund	raising 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.	or more political			
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	or more political			
	Committees Participating in Joint Fundraiser					
	1.	FEC ID number				
	2.	FEC ID number				
	3.	FEC ID number				
	4.					

Title or Position TREASURER

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Write or Type Committee Nar	me		
SOUTH AMER	RICA CONTINENT PR	OFESSIONAL J	UDO LEAGUE
6. Name of Any Connected	Organization, Affiliated Committee, Joint	Fundraising Representative, o	r Leadership PAC Sponsor
NONE			
	<u> </u>		
Mailing Address			
	CITY	STATE	ZIP CODE
books and records.	entify by name, address (phone number of A LAROSE 1900 WEST OAKLAND PARK BLVD. # 9961	optional) and position of the pers	son in possession of committee
	FORT LAUDERDALE	, , FL ,	,33310
	TORT EAGLERDALE		
Title or Position	CITY	STATE	ZIP CODE
PRESIDENT		Telephone number 80	0 768 6650
 Treasurer: List the name a any designated agent (e.g., 	and address (phone number optional) of the assistant treasurer).	ne treasurer of the committee; a	nd the name and address of
Full Name JOSHUA of Treasurer	LAROSE		
Mailing Address	1900 WEST OAKLAND PARK BLVD.		
	 # 9961		
	FORT LAUDERDALE	, , , , FL	33310
	CITY	STATE	ZIP CODE

768 |-|

6650

800

Telephone number

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Full Name of Designated Agent	JOSHUA LAROSE	
Mailing Address	1900 WEST OAKLAND PARK BLVD.	
	# 9961	
	FORT LAUDERDALE CITY STATE Z	ZIP CODE
Title or Position CEO		768 - 6650
Banks or Other safety deposit bo Name of Bank, D	Depositories: List all banks or other depositories in which the committee deposits funds, holds oxes or maintains funds. Depository, etc. BANK OF AMERICA	accounts, rents
Mailing Address	701 BRICKELL AVENUE	
3 : :::::::::::::::::::::::::::::::::::		
3 1 1 2 2 3 3		
, J. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	MIAMI FL 33131	
3 1122 200		ZIP CODE
Name of Bank, D	CITY STATE 2	ZIP CODE
	CITY STATE 2	ZIP CODE
	CITY STATE 2	ZIP CODE
Name of Bank, D	CITY STATE 2	ZIP CODE
Name of Bank, D	CITY STATE 2	ZIP CODE

: 97 A = G7 9 @ G5 B9 CI G H9 L H F 9 @ 5 H9 8 HC 5 F 9 DC F H Z G7 < 98 I @ C F → H9 A = N 5 H = C B

Form/Schedule: F1N 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: