FEC FORM 1		STATEMEN ORGANIZ		Offi	PAGE 1 / 4
1. NAME OF COMMITTEE (in f	ull)	(Check if name is changed)	Example:If typing, type over the lines.	12FE4M5	
Valor Super					
ADDRESS (number and	street)	3033 Wilson Bllvd Ste E218			
(Check if ad is changed)	dress				
				VA 2220)1
		CITY ▲		STATE A	ZIP CODE
COMMITTEE'S E-MAIL	ADDRES	SS			
(Check if ad is changed)	dress	valorsuperpac@gmail.c	com		
		Optional Second E-Mail Add	lienee eem		
COMMITTEE'S WEB F (Check if ad is changed)		PRESS (URL)			
2. DATE 04	/ D 14	D / Y Y Y Y 2016			
3. FEC IDENTIFICA	TION NU	MBER ► C co	00584755		
4. IS THIS STATEME	NT X	NEW (N) OR	AMENDED (A)		
I certify that I have exa	amined th	s Statement and to the best	of my knowledge and belief i	t is true, correct and	complete.
Type or Print Name of	Treasurer	Michelle Merlos			
Signature of Treasurer	Miche 	le Merlos	[Electronically Filed]	Date 04	D D / Y Y Y Y 14 2016
NOTE: Submission of fa			may subject the person signing DN SHOULD BE REPORTED V		penalties of 2 U.S.C. §437g.
Office Use Only			For further information of Federal Election Commiss Toll Free 800-424-9530 Local 202-694-1100		FEC FORM 1 (Revised 06/2012)

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FEG	C Form 1 (Revised 02/2009)	Page 2		
TYPE C	DF COMMITTEE			
Candi	date 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. (Con information below.)	nplete the candidate		
Name o Candida				
Candida Party At	01100	State		
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.			
Name o Candida				
Party	Committee:			
(d)	This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party		
Politic	al Action Committee (PAC):			
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con	nnected organization is		
	Corporation Corporation w/o Capital Stock	Labor Organization		
	Membership Organization Trade Association	Cooperative		
	In addition, this committee is a Lobbyist/Registrant PAC.			
(f)	X This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or p committee. (i.e., nonconnected committee)			
	In addition, this committee is a Lobbyist/Registrant PAC.			
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)			
Joint F	Fundraising Representative:			
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for t committees/organizations, at least one of which is an authorized committee of a federal candidate.	wo or more political		
(h)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for the committees/organizations, none of which is an authorized committee of a federal candidate.	wo or more political		
(Committees Participating in Joint Fundraiser			
	1 FEC ID number C			
2	2 FEC ID number C			
:	3 FEC ID number C			
4	4.			

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Write or Type Committee Name

Valor Super PAC

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

N	ONE		
	Mailing Address		
		CITY STATE ZIP CODE	
	Relationship: Connected	d Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Spo	nsor
	Custodian of Records: Iden books and records.	ntify by name, address (phone number optional) and position of the person in possession of comm	ittee
	Full Name		
	Mailing Address		
	Title or Position	CITY STATE ZIP CODE	
		Telephone number	
8.	nd address (phone number optional) of the treasurer of the committee; and the name and address of assistant treasurer).	of	
	Full Name Michelle Mo		
	of Treasurer		
	of Treasurer		

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Full Name of Designated Agent				
Mailing Address	3033 Wilson Blvd Ste E218			
			VA 222	
	CITY		STATE	ZIP CODE
Title or Position		Telephone nu	mbor	- -

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.

Sun	trust Bank	
Mailing Address	PO Box 4418	
	Atlanta	GA 30605
	CITY	STATE ZIP CODE
Name of Bank, Deposito	ry, etc.	
Mailing Address		
	CITY	STATE ZIP CODE