Only

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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) over the lines. is changed) WYOMING REGIONAL CHAMBER OF COMMERCE 1900 WEST OAKLAND PARK BLVD. ADDRESS (number and street) # 9961 (Check if address is changed) FORT LAUDERDALE FL 33310 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) (Check if address is changed) DATE 2015 C00595090 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. JOSH LAROSE Type or Print Name of Treasurer JOSH LAROSE [Electronically Filed] 12 10 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

	FFC Fo	rm 1 (Revised 02/2009)	Page 2
TYP	E OF C	OMMITTEE	1 ago 2
Car	ndidate	e 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. (Cominformation below.)	plete the candidate
Nam Cand	e of didate		
	didate y Affiliati	Office Sought: House Senate President	State
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Nam Cand	e of didate		
Par	ty Con	nmittee:	/Damaau-+!-
(d)		This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.
Poli	itical A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its cor	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 secommittee. (i.e., nonconnected committee)	egregated 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 Func	Iraising Representative:	
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for to committees/organizations, at least one of which is an authorized committee of a federal candidate.	vo 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.	vo or more political
	Com	mittees Participating in Joint Fundraiser	
	1.	FEC ID number	
	2.	FEC ID number	
	3.	FEC ID number	
	4.		

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	/rite or Type Committee Name		
\	WYOMING RE	GIONAL CHAMBER OF COMMERCE	
6.	Name of Any Connected C	Organization, Affiliated Committee, Joint Fundraising Representative, or Leadersh	ip PAC Sponsor
N	ONE		
	Mailing Address		
			-
		CITY STATE :	ZIP CODE
	Relationship: Connected	d Organization Affiliated Committee Joint Fundraising Representative Lead	dership PAC Sponsor
' .	Custodian of Records: Ider books and records.	ntify by name, address (phone number optional) and position of the person in poss	session of committee
	JOSH LAF	ROSE	
	Full Name	1900 WEST OAKLAND PARK BLVD.	
	Mailing Address	ı# 9961	
		FORT LAUDERDALE , FL , 33310	
		1 SICI EXOSERSACE	
	Title or Position	CITY STATE Z	ZIP CODE
	PRESIDENT	Telephone number 850 - 2	4269
3.	Treasurer: List the name and any designated agent (e.g., a	d address (phone number optional) of the treasurer of the committee; and the namessistant treasurer).	ne and address of
	Full Name JOSH LAR of Treasurer	ROSE	
	Mailing Address	1900 WEST OAKLAND PARK BLVD.	
		# 9961	
		FORT LAUDERDALE FL 33310	
	Title or Desition	CITY STATE Z	IP CODE
	Title or Position TREASURER		43 - 4269

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Full Name of Designated JOS Agent	SH LAROSE	
Mailing Address	1900 WEST OAKLAND PARK BLVD.	
	# 9961	
	FORT LAUDERDALE CITY STATE	ZIP CODE
Title or Position ADMINISTRATOR		443 - 4269
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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: