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FEC FORM 1

STATEMENT OF ORGANIZATION

RECEIVETT
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FEC MAIL CENTER

			Of	fice Use Only
1. NAME OF COMMITTEE (in full)	(Check if name is changed)	Example:If typing, type over the lines.	12FE4M5	
California for Lib	erty		111111	
<u> </u>	<u> </u>	11111111		
ADDRESS (number and street)	945 Fairway	Trails Ct	111111	
(Check if address is changed)	Brighton		MI 48	B116
		CITY	STATE	ZIP CODE
COMMITTEE'S E-MAIL ADDRE (Check if address is changed)		e-mail address) 2@yahoo.com		
io onangou,				
COMMITTEE'S WEB PAGE AD	DRESS (URL)			
(Check if address is changed)			1 1 1 1 1 1 1	
2. DATE 03° '19	9°′2012 `			
3. FEC IDENTIFICATION N	UMBER C			
4. IS THIS STATEMENT	NEW (N) OR	AMENDED (A)		
I certify that I have examined to	his Statement and to the be	st of my knowledge and belief	it is true, correct and	complete.
Type or Print Name of Treasure	, Douglas J E	dwards		
Signature of Treasurer	DJEdur	rls	Date Ö3°′	19° ′ 20′12 ′
NOTE: Submission of false, erron	•	n may subject the person signing		penalties of 2 U.S.C. §437g.
Office Use Only		For further information Federal Election Commis Toll Free 800-424-9530 Local 202-694-1100		FEC FORM 1 (Revised 02/2009)

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TYP	E OF C	OMMITTEE				
Cen	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. (Compinformation below.)	elete the candidate			
Nam Cano	e of didate		1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-			
	didate y Affiliatio	on Sought: House Senate President	State			
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.				
Nam Cano	e of didate					
(d)	ty Con	· · · · · · · · · · · · · · · · · · ·	Democratic, Republican, etc.) Party.			
Poli	itical A	ction Committee (PAC):				
(e)	П	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization on line 6.	nected organization is a:			
ν-,		Corporation Corporation w/o Capital Stock	Labor Organization			
			_			
			Cooperative			
		In additleα, this committee is a Lobbyist/Registrant PAC.				
(f)	\times	This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party 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.)				
Join	t Fund	fraising Representative:				
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for tw	o or more political			
		committees/organizations, at least one of which is an authorized committee of a faderal cardidate.				
(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.	o or more political			
	Com	mittees Participating in Joint Fundraiser				
	1.	FEC ID number .C	,			
	2.	FEC ID Humber C				
	3.					
	4					

Title or Position

FEC Form 1 (Revised 02/2009) Page 3 Write or Type Committee Name California for Liberty Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor Mailing Address ZIP CODE CITY STATE **Affiliated Committee** Joint Fundraising Representative Leadership PAC Sponsor Relationship: Connected Organization Custodian of Records: Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records. _IDouglas J Edwards Full Name Fairway Trails Ct Mailing Address **Brighton** Title or Position CITY STATE ZIP CODE reasurer Telephone number Treasurer: List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer). Full Name Douglas J Edwards of Treasurer **Fairway** Trails Ct Mailing Address righton

CITY

STATE

Telephone number

ZIP CODE

FEC Form 1 (Re	evised 02/2009)		Page 4
Full Name of Designated Agent	uglas J Edwards		
Mailing Address	945 Fairway Trails Ct		
		1	
	Brighton city	STATE	ZIP CODE
Title or Position Treasurer	Telephone nu	ımber	
Banks or Other Depos safety deposit boxes or Name of Bank, Deposite		ittee deposits	funds, holds accounts, rents
1 .			
Mailing Address	1	1 1 1 1 1	
-			
-			
-	CITY	STATE	ZIP CODE
Name of Bank, Deposit		STATE	ZIP CODE
		STATE	ZIP CODE
Name of Bank, Deposit		STATE	ZIP CODE
		STATE	ZIP CODE
Name of Bank, Deposit		STATE	ZIP CODE

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h		3/20/12			
PREPARER (3/2005)		DATE PREPARED			
•					