FEC FORM 1	STATEMEN ORGANIZ		PAGE 1 / 5
1. NAME OF COMMITTEE (in full)	(Check if name is changed)	Example:If typing, type over the lines.	12FE4M5
	1900 WEST OAKLAND PARK	K BLVD.	
ADDRESS (number and street) (Check if address is changed)	# 9961 FORT LAUDERDALE CITY ▲		FL 33310 STATE ▲ ZIP CODE ▲
COMMITTEE'S E-MAIL ADDR	ESS		
 (Check if address is changed) 	USPoliticalActionComn		
COMMITTEE'S WEB PAGE A (Check if address is changed)	DDRESS (URL) www.UnitedStatesPoliticalAct	ionCommitteesDirectory.com	
	27 / Y Y Y Y 2015		
3. FEC IDENTIFICATION N		00600205	
4. IS THIS STATEMENT	X NEW (N) OR	AMENDED (A)	
I certify that I have examined	this Statement and to the best	of my knowledge and belief i	t is true, correct and complete.
Type or Print Name of Treasu	er JOSHUA LAROSE		
Signature of Treasurer	SHUA LAROSE	[Electronically Filed]	Date 12 / 27 / 2015
NOTE: Submission of false, erro		may subject the person signing ON SHOULD BE REPORTED V	this Statement to the penalties of 2 U.S.C. §437g. VITHIN 10 DAYS.
Office Use Only		For further information of Federal Election Commiss Toll Free 800-424-9530 Local 202-694-1100	

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FEC FC	orm 1 (Revised 02/2009)	Page 2
TYPE OF C	COMMITTEE	
Candidate	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.)	lete the candidate
Name of Candidate		
Candidate Party Affiliat	ion Office Sought: House Senate President	State
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate		
Party Cor	nmittee:	
(d)		Democratic, epublican, etc.) Party
Political A	Action Committee (PAC):	
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its conn	ected 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)	This committee supports/opposes more than one Federal candidate, and is NOT a separate seg committee. (i.e., nonconnected committee)	regated fund or part
	In addition, this committee is a Lobbyist/Registrant PAC.	
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Joint Fund	draising 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
Corr	mittees Participating in Joint Fundraiser	
1.	FEC ID number	
2.	FEC ID number	
3.	FEC ID number	
4.		

FEC Form 1 (Revised 02/2009)

Write or Type Committee Name

BELGIAN CULTURE BUREAU OF AMERICA

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

Mailing Address					
	STATE	ZIP CODE			
Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor					

7. Custodian of Records: Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

JOSHUA L	AROSE	
Full Name		
Mailing Address	1900 WEST OAKLAND PARK BLVD.	
	# 9961	
	FORT LAUDERDALE FL 33310 - - -	
Title or Position	CITY STATE ZIP CODE	
	Telephone number 800 768 6650	

8. **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	JOSHUA LAROSE
of Treasurer	
Mailing Address	1900 WEST OAKLAND PARK BLVD.
	# 9961
	FORT LAUDERDALE FL 33310 - - -
	CITY STATE ZIP CODE
Title or Position	Telephone number 800 768 6650

Full Name of Designated Agent			
Mailing Address	1900 WEST OAKLAND PARK BLVD.		
	# 9961		
		FL 33310	
	CITY	STATE	ZIP CODE
Title or Position		Telephone number	768

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.

Mailing Address	200 SOUTH BISCAYNE BLVD.		
	MIAMI	FL 33131	
	CITY	STATE ZIP COI	DE
Name of Bank, D	Pepository, etc.		
Mailing Address			
	CITY	STATE ZIP COI	DE

:97 `A=G79 @@5 B9CIG`H9LH`F9 @5 H98 `HC`5 `F9DCFHžG7<98 I@9 `CF`+H9A=N5 H=CB

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: