PAGE 1 / 4 STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF Example: If typing, type (Check if name 12FE4M5 COMMITTEE (in full) is changed) over the lines. Mary Rose Wilcox For Congress PO Box 24507 ADDRESS (number and street) (Check if address is changed) Phoenix 85074 ΑZ CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS Darryl@commoncentsconsulting.net (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) www.MaryRoseWilcox.org (Check if address is changed) DATE 2014 C00559989 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. Aaron Kizer Type or Print Name of Treasurer Aaron Kizer [Electronically Filed] 05 19 2014 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 Only

Local 202-694-1100

F	EC Fo	rm 1 (Revised 02/2009)	Page 2
		COMMITTEE	
(a)	\times	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 Candi		Mary Rose Wilcox	
Candi Party	date Affiliati	on DEM Office Sought: X House Senate President	State AZ District 07
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name Candi			
Part	y Con	nmittee: (National, State	(Democratic,
(d)		This committee is a or subordinate) committee of the	Republican, etc.) Party.
Polit	ical A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its co	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 s committee. (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.)	
Joint	Func	Iraising 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.	•
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for to committees/organizations, none of which is an authorized committee of a federal candidate.	wo or more political
	Com	mittees Participating in Joint Fundraiser	
	1.	FEC ID number	
	2.	FEC ID number	
	3.	FEC ID number	
	4		

FEC Form 1 (Revised 0	2/2009)	Page 3
Write or Type Committee Name		
Mary Rose Wilc	ox For Congress	
6. Name of Any Connected O	rganization, Affiliated Committee, Joint Fundraising Representative, or Leadersh	nip PAC Sponsor
Mailing Address		
Maining 7.22.222		
		. _
	CITY STATE	ZIP CODE
Relationship: Connected	Organization Affiliated Committee Joint Fundraising Representative Lea	dership PAC Sponsor
. Custodian of Records: Ident books and records.	ify by name, address (phone number optional) and position of the person in poss	session of committee
Darryl Tattr	ie 	1 1 1 1 1 1
Mailing Address	PO Box 24507	
	Phoenix AZ 85074	
Title or Position	CITY STATE 2	ZIP CODE
Assistant Treasurer	Telephone number	
. Treasurer: List the name and any designated agent (e.g., as	address (phone number optional) of the treasurer of the committee; and the nan ssistant treasurer).	me and address of
Full Name Aaron Kizer of Treasurer		
Mailing Address	PO Box 24507	
	Phoenix CITY STATE Z	
Title or Position Treasurer		283 - 9858

Full Name of Designated	Darryl Tattrie	
Agent Mailing Address	PO Box 24507	
Mailing Address		
	Phoenix CITY STATE ZI	IP CODE
Title or Position Assistant Treasu		-
Ranks or Other	Panacitarias, List all hanks or other denocitaries in which the committee denocits funds, holds	accounts ronts
safety deposit bo	er Depositories: List all banks or other depositories in which the committee deposits funds, holds a poxes or maintains funds.	accounts, rents
safety deposit bo	poxes or maintains funds.	accounts, rents
safety deposit bo	poxes or maintains funds.	accounts, rents
safety deposit bo	Depository, etc. Wells Fargo, NA	accounts, rents
safety deposit bo Name of Bank, [Depository, etc. Wells Fargo, NA	accounts, rents
safety deposit bo Name of Bank, [Depository, etc. Wells Fargo, NA	
safety deposit bo Name of Bank, [Depository, etc. Wells Fargo, NA 100 W Washingtoin St Phoenix AZ 85003	IP CODE
safety deposit bo Name of Bank, [Depository, etc. Wells Fargo, NA 100 W Washingtoin St Phoenix CITY STATE Z	
safety deposit bo Name of Bank, I Mailing Address	Depository, etc. Wells Fargo, NA 100 W Washingtoin St Phoenix CITY STATE Z	
safety deposit bo Name of Bank, I Mailing Address	Depository, etc. Wells Fargo, NA 100 W Washingtoin St Phoenix CITY STATE Z Depository, etc.	
safety deposit bo Name of Bank, [Mailing Address Name of Bank, [Depository, etc. Wells Fargo, NA 100 W Washingtoin St Phoenix CITY STATE Z Depository, etc.	
safety deposit bo Name of Bank, [Mailing Address Name of Bank, [Depository, etc. Wells Fargo, NA 100 W Washingtoin St Phoenix CITY STATE Z Depository, etc.	