Image# 14941856264				07/17/2014 20 : 32
FEC FORM 1	STATEMEN ORGANIZA			PAGE 1 / 4
1. NAME OF	(Check if name	Example: If typing, type	12FE4M5	
		over the lines.		
ADDRESS (number and street)	10 G Street NE Suite 710			
(Check if address is changed)				
is changed)	Washington			0002
	CITY A		STATE A	ZIP CODE A
COMMITTEE'S E-MAIL ADDRI	ESS			
(Check if address is changed)	jointcompliance@gmail	.com		
	Optional Second E-Mail Add	Iress		
COMMITTEE'S WEB PAGE AD (Check if address is changed)	DRESS (URL)			
	7 / Y Y Y Y 2014			
3. FEC IDENTIFICATION N		00417733		
4. IS THIS STATEMENT	NEW (N) OR	X AMENDED (A)		
I certify that I have examined t	this Statement and to the best	of my knowledge and belief it	is true, correct an	d complete.
Type or Print Name of Treasure	er Joe Williams			
Signature of Treasurer	Williams	[Electronically Filed]	Date 07	/ D D / Y Y Y Y 17 2014
NOTE: Submission of false, error	neous, or incomplete information r ANY CHANGE IN INFORMATIO			e 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)

07/17/2014 20 : 32

FEC Form 1 (Revised 02/2009)	Page 2
TYPE OF COMMITTEE	
Candidate Committee:	
(a) This committee is a principal campaign committee. (Complete	e the candidate information below.)
(b) This committee is an authorized committee, and is NOT a pri information below.)	incipal campaign committee. (Complete the candidate
Name of Candidate	
Candidate Office Party Affiliation Sought: House	Senate President District
(c) This committee supports/opposes only one candidate, and is	NOT an authorized committee.
Name of Candidate	
Party Committee:	
(d) This committee is a (National, State or subordinate) comm	mittee of the (Democratic, Republican, etc.) Party
Political Action Committee (PAC):	
(e) This committee is a separate segregated fund. (Identify conne	ected organization on line 6.) Its connected organization is
Corporation	n w/o Capital Stock
Membership Organization Trade Asso	ociation Cooperative
In addition, this committee is a Lobbyist/Registra	ant PAC.
(f) This committee supports/opposes more than one Federal car committee. (i.e., nonconnected committee)	ndidate, and is NOT a separate segregated fund or party
In addition, this committee is a Lobbyist/Registrant PAC	
In addition, this committee is a Leadership PAC. (Identif	fy sponsor on line 6.)
Joint Fundraising Representative:	
(g) This committee collects contributions, pays fundraising expense committees/organizations, at least one of which is an authorized	
(h) This committee collects contributions, pays fundraising expenses committees/organizations, none of which is an authorized comm	
Committees Participating in Joint Fundraiser	
1.	FEC ID number
2.	FEC ID number
3.	FEC ID number
4	FEC ID number

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FEC Form 1 (Revised 02/2009)

Page 3

Write or Type Committee Name

DEMOCRATS FOR EDUCATION REFORM

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

CITY	STATE	ZIP CODE
Organization Affiliated Committee Jo	nint Fundraising Representa	tive 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.

Joe Williar	S
Full Name	
Mailing Address	928 Broadway Suite 505
	New York NY 10010
Title or Position	CITY STATE ZIP CODE
Treasurer	Telephone number

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 of Treasurer	Joe Williams
Mailing Address	928 Broadway Suite 505
	New York NY 10010 - <
	CITY STATE ZIP CODE
Title or Position Treasurer	Telephone number

FEC Form 1 (Revised 02/2009)

Full Name of Designated Agent																									
Mailing Address																									
																							-		
							CI	ΓY									STA	ΤE			ZIP	С	ODI	Ξ	
Title or Position																									
												Tele	eph	ione	e ni	umt	ber						-[

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.

Citibar	1 k		
Mailing Address	399 Park Avenue		
	New York	NY	10043
	CITY	STATE	ZIP CODE
Name of Bank, Depository,	etc.		
Mailing Address			
	CITY	STATE	ZIP CODE