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FEC FORM 1

STATEMENT OF ORGANIZATION

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omplete							_		-			_

	(See instructi	ons)	Office use only				
1. NAME OF COMMITTEE (in	full) (Check if name is changed)	Example: If typying, type over the lines	12FE4M5				
Decidedly Unhappy Mainstream Patriots Rejecting Evil-mongering Incompetent							
Democrats Pol	litical Action Committee	(DUMPREID PAC)					
ADDRESS (number and s	P.O. Box 77472						
(Check if address							
is changed)	Washington		OC 20013 - 7474				
		CITY	STATE ZIP CODE A				
COMMITTEE'S E-MAI	L ADDRESS (Please provide only one	e-mall address)					
(Check if address is changed)	chuck@chuckmuth.	com					
(
COMMITTEE'S WEB F	PAGE ADDRESS (URL)						
(Check if address	www.dumpreid.com) 					
is changed)		<u> </u>					
2. DATE MM / DD / YYYYY 3. FEC IDENTIFICATION NUMBER C C C00465526							
	f****	gr.vag					
4. IS THIS STATEM	ENT NEW (N) OR	X 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							
Charles Muth							
Type or Print Name of Treasurer Charles Muth							
Signature of Treasurer	LUIN THE	C	Date 0.9 29 200, 9				
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 Use Only		For further information co Federal Election Commissio Toll Free 800-424-9530 Local 202-694-1100					

FEC Form 1 (Revised 02/2009)

•	TYPE OF COMMITTEE (Check One)							
Candidate Committee:								
	(a)	(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. (Complete the candidate information below.)					
	Name Cand		<u> </u>					
	Cand Party	idate Affiliat	Office State Senate President District					
	(c)	· · · · · ·	This committee supports/opposes only one candidate, and is NOT an authorized committee.					
	Name Cand	-	<u> </u>					
_	Party	Comm	nittee:					
	(d)	Contractor of the second	This committee is a (National, State (Democratic, Republican, etc.) Party.					
	Politi	cal Act	tion Committee (PAC):					
	(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:					
		àd	Corporation Corporation w/o Capital Stock Labor Organization					
			Membership Organization Trade Association Cooperative					
			In addition, this committee is a Lobbyist/Registrant PAC.					
	(f)	X	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.)					
Joint Fundraising Representative:								
	(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political 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 two or more political committees/organizations, none of which is an authorized committee of a federal candidate.							
	Committees Participating in Joint Fundraiser							
			1. FEC ID number					
			2. FEC ID number C					
			3. FEC ID number					
			4. FEC ID number					

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	Mainstream Patriots Rejecti L Action Committee (DUMPRE)		ompetent
6. Name of Any Connected Or	rganization, Affiliated Committee, Joint Fu	indraising Representative, or Lead	ership PAC Sponsor
NONE			
Mailing Address			
			<u> </u>
		ا ليا لييب	
	CITYA	STATE A	ZIP CODE 🛦
Relationship: Connected Organization	n Affiliated Committee	oint Fundraising Representative	Leadership PAC Sponsor
possession of Committee PAC C	entify by name, address, (phone number books and records. Dutsourcing LLC 6192 Oxon Hill Road	er – optional), and position of the	e person in
Mailing Address	Suite 601		
	Oxon Hill	MD	20745
Title or Position ♥	CITY A	STATE	ZIP CODE A
Custodian	n of Records	Telephone number	- 839 - 6510
name and address of any	and address (phone number – optiona y designated agent (e.g., assistant trea es Muth		tee; and the
Mailing Address	DUMP REID PAC		
	767 Benedict Drive		
•	Las Vegas		89110
Title or Position ♥	CITY A	STATE	ZIP CODE A

Full Name of Designated Agent	Wade S. Williams						
Mailing Address	6192 Oxon Hill Road						
	Oxon Hill	MD	20745 -				
Title or Position ♥	CITY A	STATE A	ZIP CODE A				
Assistan	t Treasurer	Telephone number 301	8396510				
Sen	suite 190	NV	89123				
	CITY 4	STATE △	ZIP CODE A				
Name of Bank, Depository	etc.						
Ban Mailing Address	k of America 6011 Oxon Hill Road						
	Oxon Hiji	LATE LATER L	20745 -				
	CITY A	STATE 4	ZIP CODE A				

Federal Election Con ENVELOPE REPLACEMENT PAGE FO The FEC added this page to the end of this filing	R INCOMING DOCUMENTS
Hand Delivered	Date of Receipt
USPS First Class Mail	Postmarked
USPS Registered/Certified	Postmarked (R/C)
USPS Priority Mail	Postmarked
Delivery Confirmation™ or Sig	nature Confirmation™ Label
USPS Express Mail	Postmarked
Postmark Illegible	
No Postmark	
Overnight Delivery Service (Specify):	UPS Shipping Date 91669
	Next Business Day Delivery
Received from House Records & Registratio	Date of Receipt n Office
Received from Senate Public Records Office	Date of Receipt
Received from Electronic Filing Office	Date of Receipt
Other (Specify):	Date of Receipt or Postmarked
Er-	9/18/09
PREPARER (3/2005)	DATE PREPARED