## 1203070132

**FEC** 

## STATEMENT OF **ORGANIZATION**

RECEIVED

2012 JAN -3 AM 8: 28

FORW 1		Office Use Only					
1. NAME OF COMMITTEE (in	full) (Check if name Example: If typing over the lines.	type 12FE4M5					
AFRICA FO	OR OBAMA (AFO)						
ADDRESS (number an	7857 LEONA STREET						
(Check if ad is changed)	ST. LOUIS	ST. LOUIS MO 63123					
	CITY	STATE ZIP CODE					
COMMITTEE'S E-MAI	L ADDRESS (Please provide only one e-mail address)						
(Check if a	AFRIÇANFEDERAL@A	AFRIÇANFEDERAL@AFRIKI.INFO					
is changed							
COMMITTEE'S WEB	PAGE ADDRESS (URL)						
COMMITTEES WED	WWW.AFRICA40BAMA	.ORG					
(Check if a is changed	ddress						
2. DATE 11	4. 2011.	·					
3. FEC IDENTIFIC	ATION NUMBER C 00505784						
4. IS THIS STATEM	ENT NEW (N) OR AMEND	ED (A)					
I certify that I have ex	amined this Statement and to the best of my knowledge an	d belief it is true, correct and complete.					
Type or Print Name of	Treasurer IBRAHIMA COULIBALY	•					
,,-	771						
Signature of Treasure	Coulsison /	Date 111 \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \					
NOTE: Submission of f	alse, erroneous, or incomplete information ritay subject the person						
Office Use Only	For further inf Federal Election Toll Free 800-4	24-9530 (Revised 02/2009)					

	FEC Fo	orm 1 (Revised 02/2009)	Page 2					
TYP	E OF COMMITTEE							
Cen	ndidate	idate Committee:						
(a)		This committee is a principal campaign committee. (Complete the candidate information below.)						
(b)	<u> </u>	This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)						
	ne of indidate in the control of the							
	didate y Affiliati	tion Sought: House Senate President	ate					
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	-					
Name Cano	e of didate							
Pari	ty Con	mmittee:						
(d)		This committee is a (National, State or subordinate) committee of the Republ	cratic, ican, etc.) Party.					
Poli	tical A	Action Committee (PAC):						
(e)	$\boxtimes$	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected	organization is a:					
\- <i>\</i>	نے		_					
		Corporation Corporation w/o Capital Stock Labo	r Organization					
		Membership Organization Trade Association Coop	erative					
		In addition, this committee is a Lobbyist/Registraot PAC.						
<b>(f)</b>		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	draising Representative:						
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or mocommittees/cirganizations, at least one of which is an authorized committee of a federal candidate.	ore political					
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or mocommittees/organizations, none of which is an authorized committee of a federal candidate.	ore political					
	Com	ninittees Participating in Joint Fundraiser						
•	1.	FEC ID number						
	2.	FEC ID number						
	3.							
	4.							

Page 3 FEC Form 1 (Revised 02/2009) Write or Type Committee Name AFRICA FOR OBAMA (AFO) Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor Mailing Address CITY STATE ZIP CODE Connected Organization Affiliated Committee Joint Fundraising Representative eadership PAC Sponsor. Custodian of Records: Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records. Full Name Mailing Address Title or Position CITY STATE ZIP CODE 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 of Treasurer Mailing Address LQUIS IMO ZIP CODE CITY STATE Title or Position 1-19243 įPRĘSIDEŅT/TRĘASŲREŖ

Telephone number

•	FEC Forr	m 1 (Revised	1 02/2009)			Page 4			
	Full Name of Designated Agent	ΙΨΑΤΑ	М АНМЕР СОИГІВ	<b>ALY</b> , , , , ,					
	Mailing Address		17857 LEONA STREET						
			ST.LOUIS CITY		MO] STATE	63123   -			
	Title or Position	IT, TREA	SUŖĘR.	<sup>*</sup> Telephon	e number [31	4[544] - [9243]			
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.								
	,	USBA	NK	<u> </u>	1 1 1 1 1				
	Mailing Address		10 N HANLEY RD						
					1111				
			CLAYTON		MO	63105 _   3426 _			
			CITY	•	STATE	ZIP CODE			
	Name of Bank, [	Depository, e	tc.			-			
		ш	<del></del>						
	Mailing Address								
				1 1 1 1 1 1	1111				
				<del></del>					
			CITY		STATE	ZIP CODE			

## **Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS** The FEC added this page to the end of this filing to indicate how it was received. **Date of Receipt Hand Delivered Postmarked USPS First Class Mail** Postmarked (R/C) **USPS** Registered/Certified Postmarked **USPS Priority Mail** Delivery Confirmation™ or Signature Confirmation™ Label **Postmarked USPS Express Mail** Postmark Illegible No Postmark **Shipping Date** Overnight Delivery Service (Specify): **Next Business Day Delivery Date of Receipt** Received from House Records & Registration Office **Date of Receipt** Received from Senate Public Records Office **Date of Receipt** Received from Electronic Filing Office **Date of Receipt or Postmarked** Other (Specify):

DATE PREPARED

(3/2005)

PREPARER