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2012 JUN 13 AM 8:51

FEC MAIL CENTER

Committee Name:

IMPROVING LIFE IN THE AMERICAS AND THE CARIBBEAN PAC

If registered, FEC ID:

Today's Date:

MAY 30, 2012

Federal Election Commission  
999 E Street, N.W.  
Washington, D.C. 20463

Re: Form 1, Statement of Organization—Unlimited Contributions

To Whom It May Concern:

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.

Respectfully submitted,

Treasurer's Name:

J. Bailey Morgan

, Treasurer

12030822332

FEC  
FORM 1

STATEMENT OF  
ORGANIZATION

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FEC MAIL CENTER  
Office Use Only

1. NAME OF COMMITTEE (in full) (Check if name is changed) Example: If typing, type over the lines. 12FE4M5

IMPROVING LIFE IN THE AMERICAS AND CARIBBEAN PAC

ADDRESS (number and street) 177 W 26 ST #200

(Check if address is changed) NEW YORK NY 10001

CITY STATE ZIP CODE

COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address)

(Check if address is changed) JB.MORGAN@ATTI.NET

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address is changed)

2. DATE May 30, 2012

3. FEC IDENTIFICATION NUMBER C

4. 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.

Type or Print Name of Treasurer J. BAILEY MORGAN

Signature of Treasurer *J Bailey Morgan* Date May 30, 2012

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.

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5. TYPE OF COMMITTEE

Candidate 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. (Complete the candidate information below.)

Name of Candidate \_\_\_\_\_

Candidate Party Affiliation \_\_\_\_\_ Office Sought:  House  Senate  President State \_\_\_\_\_ 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) committee of the  (Democratic, Republican, etc.) Party.

Political Action Committee (PAC):

- (e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected 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 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
3. \_\_\_\_\_ FEC ID number
4. \_\_\_\_\_ FEC ID number

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Write or Type Committee Name

IMPROVING LIFE IN THE AMERICAS AND CARIBBEAN PAC

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

[Empty grid lines for organization name]

Mailing Address

[Empty grid lines for mailing address]

CITY

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.

Full Name

W. BAILEY MORGAN

Mailing Address

177 W. 26 St # 200

NY

NY

10001

Title or Position

CITY

STATE

ZIP CODE

TREASURER

Telephone number

917-330-9132

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

W. BAILEY MORGAN

Mailing Address

177 W. 26 St # 200

NY

NY

10001

Title or Position

CITY

STATE

ZIP CODE

Telephone number

[Empty grid lines for telephone number]

12030822335

Full Name of Designated Agent

[Empty form line]

Mailing Address

[Empty form line]

[Empty form line]

[Empty form line]

CITY

STATE

ZIP CODE

Title or Position

[Empty form line]

Telephone number

[Empty form line]

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.

ITD BANK

Mailing Address

200 WEST 26 ST,

NY, NY 10001

[Empty form line]

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

[Empty form line]

Mailing Address

[Empty form line]

[Empty form line]

[Empty form line]

CITY

STATE

ZIP CODE

12030822336

Federal Election Commission  
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The FEC added this page to the end of this filing to indicate how it was received.

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<input checked="" type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
	Next Business Day Delivery <input type="checkbox"/>
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

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PREPARER  
(3/2005)

6/13/12  
DATE PREPARED