T 13 AM 11: 13

Committee Name:			•
browth	opportunity	Prosperity	PAC
If registered, FEC	ID:]	
Today's Date:			
09/19/2	015	,	

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:				
Altred	Silva		, Treasurer	

FEC

Office

Use

Only

STATEMENT OF **ORGANIZATION**

RECEIVED FEC MAIL CENTER

2015 OCT 13 AM 11: 14 FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Crowth Opportunity Prosperty Poll ACTION COMMITTER ADDRESS (number and street) (Check if address is changed) COMMITTEE'S E-MAIL ADDRESS (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE FEC IDENTIFICATION NUMBER > 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 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 52 U.S.C. §30109

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. For further information contact: FEC FORM 1

Federal Election Commission Toll Free 800-424-9530 Local 202-694-1100

(Revised 06/2012)

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	F	EC Fo	m 1 (Revised 02/2009)	Page 2
			OMMITTEE	
		ildate	Committee: This committee is a principal campaign committee. (Complete the candidate information below.)	
	(a)	n		
	(b) Name	L	This committee is an authorized committee, and is NOT a principal campaign committee. (Compinformation below.)	plete the candidate
	Candi	-		
	Candi Party	date Affiliati	Office Sought: House Senate President	State
	(0)	П	This committee supports/opposes only one candidate, and is NOT an authorized committee.	District
	(c) Name	L.I	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
	Candi			
	Part	y Con	nmittee:	
	(d)			Democratic, Republican, etc.) Party.
	Polit	ical A	ction Committee (PAC):	
	(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con	nected 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)	X	This committee supports/opposes more than one Federal candidate, and is NOT a separate se committee. (i.e., nonconnected committee)	gregated 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.)	
	loint	Func	Iraising Representative:	
	(g)	П	This committee collects contributions, pays fundraising expenses and disburses net proceeds for tw	o or more political
	(3)		committees/organizations, at least one of which is an authorized committee of a federal candidate.	pomoca.
((h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	o or more political
		Com	mittees Participating in Joint Fundraiser	
		1.	FEC ID number	· · · · · · · · · · · · · · · · · · ·
		2.	FEC ID number C	
		3.	FEC ID number	
		4.		

i		
FEC Form 1 (Revised	1 02/2009)	Page 3
Write or Type Committee Na	me	
6. Name of Any Connected	Organization, Affiliated Committee, Joint Fundraising Representative, or Lea	adership PAC Sponsor
Mailing Address		
	CITY STATE	ZIP CODE
Relationship: Connec	ted Organization Affiliated Committee Joint Fundraising Representative	Leadership PAC Sponso
riciationship.	y minuted Committees C	Zeadership 1710 openso
Custodian of Records: lo books and records.	dentify by name, address (phone number optional) and position of the person	in possession of committee
Full Name ANG	EL CARDENIAS	
Mailing Address	304, CEDAR ST	
,	REDWOOD CITY 1	4,0,6,3-
Title or Position	CITY STATE	ZIP CODE
CED	Telephone number 6,50	- [70] - [57,20
. Treasurer: List the name any designated agent (e.g	and address (phone number optional) of the treasurer of the committee; and t	he name and address of
Full Name of Treasurer	red Silva .	
Mailing Address	24,26 Cudahy 15+111111111	!!!!
	Walling to Practike 1 18 A 19	0,255-
Title or Position	Walnut Park 9	012 55 - ZIP CODE

9.

FEC Form 1 (Revis	sed 02/2009)		Page 4
Full Name of Designated Agent	9.8. viillareal		
Mailing Address	4318 continental	0,7,1,1,0,0	
	CITY	TX 7.7	₹0:7: Z]-[ZIP CODE
Title or Position			
Exercion + 11 VIE	2 Director Telephi	one number [7,13]-	181841-172861
Banks or Other Deposito safety deposit boxes or ma	ories: List all banks or other depositories in which the	committee deposits funds, h	olds accounts, rents
Name of Bank, Depository			
			
Mailing Address			
		با ليا ليـ	
	CITY	STATE	ZIP CODE
Name of Bank, Depository	y, etc.		
ــــــــــــــــــــــــــــــــــــــ			
Mailing Address			
		با لبا لب	
	CITY	STATE	ZIP CODE

Br ANGEL CAPDENAS 304 Cedarst,

999 E Street, N.W.

Washington D.C. 20463

Federal Election Commiss Redwood City C.A., 94063

Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMI The FEC added this page to the end of this filing to indic	
Hand Delivered	Date of Receipt
USPS First Class Mail Postmarked /0/5	Date of Receipt
USPS Registered/Certified	Postmarked (R/C)
USPS Priority Mail	Postmarked
USPS Priority Mail Express	Postmarked
Postmark Illegible	
No Postmark	
Overnight Delivery Service (Specify):	Shipping Date
Next Busi	ness Day Delivery
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
Other (Specify):	of Receipt or Postmarked
PREPARER MP	10/13 DATE PREPARED
(3/2015)	