Only

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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Break The Cycle PAC 424 Lamont St NW ADDRESS (number and street) (Check if address is changed) WASHINGTON 20010 DC CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS notyourdistrict@gmail.com (Check if address is changed) Optional Second E-Mail Address justin.w.robinson85@gmail.com COMMITTEE'S WEB PAGE ADDRESS (URL) http://www.notyourdistrict.com (Check if address is changed) DATE 2019 C00571349 FEC IDENTIFICATION NUMBER > 3. X 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. Robinson, Justin, Justin, , Type or Print Name of Treasurer Robinson, Justin, Justin, , [Electronically Filed] 02 13 2019 Signature of Treasurer Date 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 For further information contact: FEC FORM 1 Use

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

(Revised 06/2012)

Political Action Committee (PAC): (e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization	FEC	Form 1 (Revised 02/2009)	Page 2
(b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.) Name of Candidate Candidate Candidate Candidate Candidate Candidate Party Affiliation Committee supports/opposes only one candidate, and is NOT an authorized committee. Name of Candidate Party Committee: (d) This committee is a Candidate or subordinate) committee of the Republican, etc.) Fe Political Action Committee (PAC): (e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization on independent or subordinate is a Labbysit/Registrant PAC. (f) X This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or promittee. (i.e., nonconnected committee) In addition, this committee is a Lobbysit/Registrant PAC. In addition, this committee is a Lobbysit/Registrant PAC.			
Name of Candidate Candidate Party Affiliation City This committee supports/opposes only one candidate, and is NOT an authorized committee. Name of Candidate Party Committee: (d) This committee is a	(a)	This committee is a principal campaign committee. (Complete the candidate information below.)
Candidate Party Affiliation Office Sought: House Senate President District Co This committee supports/opposes only one candidate, and is NOT an authorized committee. Name of Candidate Party Committee: (d) This committee is a	(b)		nplete the candidate
Party Affiliation			
Party Committee: (d) This committee is a (National, State or subordinate) committee of the Republican, etc.) F Political Action Committee (PAC): (e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization Corporation Corporation No 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 procommittee. (i.e., nonconnected committee) In addition, this committee is a Lobbyist/Registrant PAC. 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. Committees Participating in Joint Fundraiser 1. FEC ID number C FEC ID number C		*****	
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2. FEC ID number			
3. FEC ID number		FEC ID number	
4.			

Break The Cycle PAC 6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Spons NONE Mailing Address CITY STATE ZIP CODE Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Spons Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of combooks and records. Robinson, Justin, W., Full Name 424 Lamont Street NW	
6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Spons NONE Mailing Address CITY STATE ZIP CODE Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Spons Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of combooks and records. Robinson, Justin, W, , Full Name Again of Records	
6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Spons NONE Mailing Address CITY STATE ZIP CODE Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Spons Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of combooks and records. Robinson, Justin, W, , Full Name Again of Records	
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CITY STATE ZIP CODE Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Space Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of combooks and records. Robinson, Justin, W, , Full Name 424 Lamont Street NW	ı
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7. Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of combooks and records. Robinson, Justin, W, , Full Name 424 Lamont Street NW	
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Full Name 424 Lamont Street NW	nittee
424 Lamont Street NW	1
Mailing Address	
Washington DC 20010	
Title or Position CITY STATE ZIP CODE	
Telephone number 301 - 919 - 23	37
8. Treasurer: List the name and address (phone number optional) of the treasurer of the committee; and the name and address any designated agent (e.g., assistant treasurer).	of
Full Name Robinson, Justin, Justin, , of Treasurer	
Mailing Address 424 Lamont Street NW	
Washington	
CITY STATE ZIP CODE	
Title or Position 301 919 23 Telephone number 101 919 - 101	

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Full Name of Designated	I	
Agent		
Mailing Address		
	CITY STATE Z	ZIP CODE
Title or Position		1 1
	Telephone number	
	Depositories: List all banks or other depositories in which the committee deposits funds, holds exes or maintains funds. Depository, etc. Signal Financial Credit Union	accounts, rents
safety deposit bo	Depository, etc. Signal Financial Credit Union 1391 Pennsylvania Ave SE	accounts, rents
safety deposit be Name of Bank, I	Depository, etc. Signal Financial Credit Union 1391 Pennsylvania Ave SE	accounts, rents
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