FEC FORM 1	STATEMENT OF ORGANIZATION	PAGE 1 / 5
1. NAME OF COMMITTEE (in full)	(Check if name Example: If typing, type is changed) over the lines.	12FE4M5
Elections Matte	er California	
ADDRESS (number and stree	POB 3297	
(Check if address is changed)	3	
is changed)	San Jose	CA 95156
		STATE ▲ ZIP CODE ▲
COMMITTEE'S E-MAIL AD	DRESS	
(Check if address is changed)	s talexander283@gmail.com	
с, ,	Optional Second E-Mail Address	
COMMITTEE'S WEB PAGE (Check if address is changed)		
2. DATE 08	28 / Y Y Y Y 2016	
3. FEC IDENTIFICATION	N NUMBER ► C C00624940	
4. IS THIS STATEMENT	× NEW (N) OR AMENDED (A)	
I certify that I have examine	ed this Statement and to the best of my knowledge and belief it	is true, correct and complete.
Type or Print Name of Trea	surer Anthony Wayne Alexander	
Signature of Treasurer	Anthony Wayne Alexander [Electronically Filed]	Date 08 / D D / Y Y Y Y 28 2016
NOTE: Submission of false, e	erroneous, or incomplete information may subject the person signing t ANY CHANGE IN INFORMATION SHOULD BE REPORTED W	· · · · · · · · · · · · · · · · · · ·
Office Use Only	For further information cd Federal Election Commissio Toll Free 800-424-9530 Local 202-694-1100	

08/28/2016 22 : 57

-		_
FEC F	orm 1 (Revised 02/2009)	Page 2
TYPE OF	COMMITTEE	
Candidat	e 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. (Com information below.)	plete the candidate
Name of Candidate		
Candidate Party Affilia	ion 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 Co		
(d)		(Democratic, Republican, etc.) Par
Political /	Action Committee (PAC):	
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its cor	nected organization is
	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)	egregated fund or par
	In addition, this committee is a Lobbyist/Registrant PAC.	
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Joint Fun	draising Representative:	
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for tw committees/organizations, at least one of which is an authorized committee of a federal candidate.	vo or more political
(h)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for tw committees/organizations, none of which is an authorized committee of a federal candidate.	o or more political
Cor	nmittees Participating in Joint Fundraiser	
1.	FEC ID number	
2.	FEC ID number	
3.	FEC ID number	
4.	FEC ID number	

FEC Form 1 (Revised 02/2009)

Page 3

Write or Type Committee Name

Elections Matter California

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

N																																
	Mailing Address																															
																			L				L	_	_	<u> </u>						
								С	ITY										S	TAT	Έ					ZI	ΡC	COE	ЭE			
	Relationship:	Connected	l Orga	aniza	tion		Affili	atec	d Co	omn	nitte	e		Joi	nt F	unc	Irais	sing	Rej	ores	sent	tativ	∕e		Le	ade	rsh	ıip F	PAC	Sp	ons	or
7.	Custodian of Rec books and records		tify by	y nai	ne, i	addr	ess	(ph	one	nu	mbe	er -	- 0	otio	nal)	an	d po	ositi	on (of t	he	per	son	n in	po	sse	ssic	on d	of co	omr	nitte	e
	Full Name	Anthony W	/ayne	Alex	ande	er							I		I	I					I		1	I	1		1					
			.128	45 M	t Ha	milto	n Ro	: :																								

Mailing Address			
	San Jose	CA	95140
Title or Position	CITY	STATE	ZIP CODE
Treasurer		Telephone number	

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	Anthony Wayne Alexander
Mailing Address	12845 Mt Hamilton Rd
	San Jose
	CITY STATE ZIP CODE
Title or Position Treasurer	I I

FEC Form 1 (Revised 02/2009)

Full Name of Designated Agent														1									1			
Mailing Address																										
																			L				_			
						C	:IT)	(STA	ΤE				ZII	ΡC	OD	ιE		
Title or Position																										
											Tele	eph	one	e ni	umt	ber										

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.

L	Bank of America	
Mailing Address	2650 Berryessa Rd	
	San Jose	CA 95132
	CITY	STATE ZIP CODE
Name of Bank, De	pository, etc.	
L		
Mailing Address		
	CITY	STATE ZIP CODE

:97 `A=G79 @@5 B9CIG`H9LH`F9 @5 H98 `HC`5 `F9DCFHžG7<98 I@9 `CF`+H9A=N5 H=CB

Form/Schedule: F1N Transaction ID :

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.

Form/Schedule: Transaction ID: