FEC FORM 1

STATEMENT OF ORGANIZATION

Office Use Only

2007 JAN 19 P 4:00

12FE4M5

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

Born Fighting PAC

ADDRESS (number and street) (Check if address is changed)

1607 14th Street, NW
Suite 800

Washington | DC | 20005-

CITY ▲ STATE ▲ ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

ashley@bornfighting.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

www.bornfighting.com

COMMITTEE'S FAX NUMBER

202-354-5356

2. DATE 01 17 2007

3. FEC IDENTIFICATION NUMBER ▶ C00430819

4. IS THIS STATEMENT NEW (N) OR X 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 KIM ANDERSON

Signature of Treasurer Kim Anderson Date 01 18 2007

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 Use Only				

For further information contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-694-1100

FEC FORM 1
(Revised 02/2003)

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5. TYPE OF COMMITTEE (Check One)

(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

(d) This committee is a (National, State or subordinate) committee of the (Democratic, Republican, etc.) Party.

(e) This committee is a separate segregated fund.

(f) X This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee.

6. **Name of Any Connected Organization or Affiliated Committee**

none

Mailing Address

CITY ▲ STATE ▲ ZIP CODE ▲

Relationship

Type of Connected Organization:

Corporation | Corporation w/o Capital Stock | Labor Organization

Membership Organization | Trade Association | Cooperative

Write or Type Committee Name

Born Fighting PAC

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: Kim Anderson

Mailing Address: Born Fighting PAC
426 C Street, NE
Washington DC 20002-

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: Kim Anderson

Mailing Address: Born Fighting PAC
426 C Street NE
Washington DC 20002-

Title or Position ▼ | CITY ▲ | STATE ▲ | ZIP CODE ▲

Treasurer

Telephone number ___-___-___

Full Name of Designated Agent: Ashley Flanagan

Mailing Address: 426 C Street, NE

Washington DC 20002-

Title or Position ▼ | CITY ▲ | STATE ▲ | ZIP CODE ▲

Asst. Treasurer

Telephone number 202-546-5004

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.

City Bank FSB

Mailing Address 1400 G Street NW

Washington DC 20005-

CITY ▲ STATE ▲ ZIP CODE ▲

Name of Bank, Depository, etc.

Mailing Address

CITY ▲ STATE ▲ ZIP CODE ▲

Federal Election Commission
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Next Business Day Delivery ☐	
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PREPARER	1/19/07 DATE PREPARED

(3/2005)

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