

FEC FORM 1

STATEMENT OF ORGANIZATION

Office Use Only

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

12FE4M5

WE THE PEOPLE FOR CLARK 2016

ADDRESS (number and street)

P.O. BOX 0274

(Check if address is changed)

LAKE ARROWHEAD

CA

92352

CITY ▲

STATE ▲

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

(Check if address is changed)

BRITTANYCLARK@PRESIDENCY.COM

Optional Second E-Mail Address

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address is changed)

WWW.BRITTANYCLARK.COM

2. DATE

09 / 12 / 2015

3. FEC IDENTIFICATION NUMBER ►

C C00556951

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 BRITTANY CLARK

Signature of Treasurer

BRITTANY CLARK

[Electronically Filed]

Date

09 / 12 / 2016

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 06/2012)

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 **BRITTANY CLARK**

Candidate Party Affiliation PPY 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

Write or Type Committee Name

WE THE PEOPLE FOR CLARK 2016

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

DEMOCRACY FOR AMERICA

Mailing Address PO BOX 1717

BURLINGTON VT 05402
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 JOHN WICK

Mailing Address 28200 HIGHWAY 189, SUITE F-240

PO BOX 640
LAKE ARROWHEAD CA 92352
CITY STATE ZIP CODE

Title or Position 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 BRITTANY CLARK

Mailing Address PO BOX 0274

LAKE ARROWHEAD CA 92352-0274
CITY STATE ZIP CODE

Title or Position Telephone number

Full Name of Designated Agent

[Empty grid for Full Name of Designated Agent]

Mailing Address

[Empty grid for Mailing Address line 1]

[Empty grid for Mailing Address line 2]

[Empty grid for Mailing Address line 3]

CITY

STATE

ZIP CODE

Title or Position

[Empty grid for Title or Position]

Telephone number

[Empty grid for Telephone number]

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.

USC CREDIT UNION

[Grid for USC CREDIT UNION]

Mailing Address

FLOWER STREET BRANCH

3720 S. FLOWER ST., 4TH FLOOR

LOS ANGELES

CA

90007

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

BANK OF AMERICA

[Grid for BANK OF AMERICA]

Mailing Address

P.O. BOX 851001

[Empty grid for Mailing Address line 2]

DALLAS

TX

75285

CITY

STATE

ZIP CODE

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F1A

Transaction ID :

WE THE PEOPLE FOR CLARK IS ACTING AS A JOINT FUNDRAISING REPRESENTATIVE IN ADDITION TO BEING A PRINCIPAL CAMPAIGN COMMITTEE AND AUTHORIZED COMMITTEE. THE JOINT FUNDRAISING PARTICIPANT INCLUDE ALL OFFICIAL COMMITTEE NAMES THAT WISH TO PARTNER AS A JOINT FUNDRAISING PARTICIPANT.

Form/Schedule:

Transaction ID:

FORM 1S -STATEMENT OF ORGANIZATION (Supplemental Page)

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.

[ADDITIONAL]

Mailing Address

_____ - _____

CITY ▲

STATE ▲

ZIP CODE ▲

[ADDITIONAL]

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

RYAN FOR CONGRESS, INC.

Mailing Address

PO BOX 1488

JANESVILLE

WI

53547-1488

_____ - _____

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship:

Connected Organization

Affiliated Committee

Joint Fundraising Representative

Leadership PAC Sponsor

[ADDITIONAL]

Designated Agent

Full Name

Mailing Address

_____ - _____

Title or Position ▼

CITY ▲

STATE ▲

ZIP CODE ▲

Telephone number

____ - ____ - ____

Joint Fundraiser Participant

[ADDITIONAL]

FEC ID number

C _____