## **Immigrant Voters Win PAC**

RECEIVED FEC MAIL CENTER

2016 MAR 24 PM 2: 03

March 24, 2016

Federal Election Commission 999 E Street, NW Washington, DC 20463

Re:

Form 1, Statement of Organization—Unlimited Contributions

To Whom It May Concern:

This political 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. The committee will not use those funds to make contributions, whether direct, in-kind, or via coordinated communications, to federal candidates or committees.

Respectfully submitted,

**Edwin Booth** 

Treasurer

## 2016 - 0M - 24 - 0M - 00057416

Only

**FEC** FORM 1

## STATEMENT OF **ORGANIZATION**

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Office Use Only

NAME OF     COMMITTEE (in full)	(Check if r is changed		mple:If typing, type the lines.	ZUID MAR 12FE4M5	·
Immigrant Voters Win F	<b>'A</b> G		111111	11111	
<u> </u>				<u> </u>	
ADDRESS (number and street)	1536 U Street	LNW	111111		
(Check if address is changed)			1 1 1 1 1 1 1	1 1 1 1 1 1 1 1	
	Washington CITY ▲	<u> </u>		DC 20	0091
COMMITTEE'S E-MAIL ADDRES	SS				
(Check if address is changed)	ryoung@cqca				
COMMITTEE'S WEB PAGE ADD	DRESS (URL)				•
(Check if address is changed)	N/A				
			1 1 1 1 1 1	1 1 1 1 1	
2. DATE $03^{\text{M}}$ $24^{\text{D}}$	2016	<i>:</i>			
3. FEC IDENTIFICATION NU	MBER ▶	C			
4. IS THIS STATEMENT X	NEW (N)	OR	AMENDED (A)		
I certify that I have examined th	is Statement and to	the best of my k	nowledge and belief it is	s true, correct and	complete.
Type or Print Name of Treasurer	Edwin Boot	ih n			
Signature of Treasurer	Edwar	Books		Date 03	24 2016
NOTE: Submission of false, errone			ject the person signing thi DULD BE REPORTED W		penalties of 52 U.S.C. §30109.
Office Use			For further information cor Federal Election Commission Toll Free 800-424-9530		FEC FORM 1 (Revised 06/2012)

Local 202-694-1100

<b></b>	2
Jane.	~

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<b>5</b> .			DMMITTEE  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 Candi		
	Candi Party	idate Affiliatio	Office State Sought: House Senate President District
	(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.
	Name Candi		
	Part	y Com	mittee:
	(d)		This committee is a (National, State or subordinate) committee of the (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 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)	$\mathbf{x}$	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	Fund	raising 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.
		Comr	mittees Participating in Joint Fundraiser
		1.	FEC ID number
	,	2.	FEC ID number
		3.	FEC ID number
		4.	FEC ID number C

FEC Form 1 (R	evised 02/2009) Page 3
Write or Type Committe	e Name
6. Name of Any Conn	ected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor
Center for Comm	unity  Change Action
Mailing Address	153/6 U Stifedt NW
·	Washington DC 20009 -
	, CITY STATE ZIP CODE
Relationship: X Co	nnected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor
<ol> <li>Custodian of Record books and records.</li> </ol>	ls: Identify by name, address (phone number optional) and position of the person in possession of committee
Full Name	yan Young
Mailing Address	1526 U St <sub>1</sub> NW
	Washington DC 20009 -
Title or Position	CITY STATE ZIP CODE
Assistant Treas	urer:
	me and address (phone number – optional) of the treasurer of the committee; and the name and address of (e.g., assistant treasurer).
Full Name of Treasurer E	lwin Booth
Mailing Address	1,536 U Street NW
Title or Penition	Washington DC 20009 - STATE ZIP CODE
Title or Position Treasurer	Telephone number 202 - 339 - 9300 -

Full Name of Designated Agent Ryan	Y qung, , , , , , , , , , , , , , , , , , ,	
Mailing Address	1536 U Street NW	
	Washington   CITY ST	DC 20009 - ITATE ZIP CODE
Title or Position		
Assistant Treasurer	Telephone numbe	er [202 <sub>1</sub> ] - [339 <sub>1</sub> ] - [9300 <sub>1</sub>
Banks or Other Depository Safety deposit boxes or management of Bank, Depository		deposits funds, holds accounts, rents
Amal	gamated Bank	
Mailing Address	1825 K Street NW, #1450	<u> </u>
		<u> </u>
	Washington	DC 20006 -

CITY

STATE

ZIP CODE

2016:05:24:05:00057419

Mailing Address

## **Hand Delivered**

Federal Election Com ENVELOPE REPLACEMENT PAGE FOR The FEC added this page to the end of this filing	INCOMING DOCUMENTS
Hand Delivered	Date of Receipt 3/24/16
Postmarked USPS First Class Mail	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
1	Next Business Day Delivery
Received from House Records & Registration	Date of Receipt Office
Received from Senate Public Records Office	Date of Receipt
Received from Electronic Filing Office	Date of Receipt
Other (Specify):	Date of Receipt or Postmarked
PREPARER	3/24/16
(3/2015)	DATE PREPARED