



Barry Gibes <barry.gibes@gmail.com> on 04/11/2016 06:06:11 PM

To: 2022190174@fec.gov,
cc:

Subject: 2016 Q1 report

Hello,

Please see the attached pdf containing Q1 report. FED ID number C00583385.

I fear this submission may be on the incorrect form. If so, I will submit the correct form shortly.

Ben Pinder

The Mythic History of America, For America Super PAC

citystateofamerica.info/superpac



*The Mythic History of America,
for America Super PAC*



april 2016.pdf

0123456789101112131415161718192021222324252627282930313233343536373839404142434445464748495051525354555657585960616263646566676869707172737475767778798081828384858687888990919293949596979899100

FEC FORM 5

REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

To Be Used by Persons (Other than Political Committees)

1. (a) Name of Individual, Organization or Corporation <i>Ben Pinder c/o The Mythic History of America For America Super PAC</i>		 3. FEC Identification Number C00583385
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported <i>6383 Mill St PO BOX 525</i>		
(c) City, State and ZIP Code <i>Rhinebeck, NY 12572</i>		
2. Occupation and Name of Employer (for Individual Filers Only) <i>Artist/High Priest</i>		

NON-PROFIT ORGANIZATION



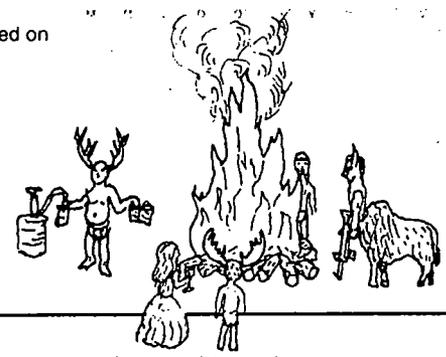
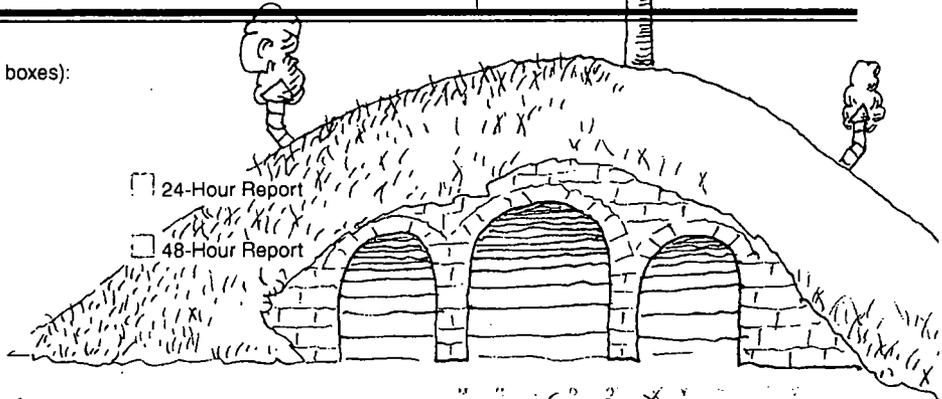
4. TYPE OF REPORT (check appropriate boxes):

- (a) April 15 Quarterly Report
- July 15 Quarterly Report
- October 15 Quarterly Report
- January 31 Year-End Report

- 24-Hour Report
- 48-Hour Report

b) Is this Report an amendment? No Yes, it amends the report filed on

5. COVERING PERIOD: FROM *01 01 2016*
THROUGH *03 31 2016*



6. TOTAL CONTRIBUTIONS..... *000*

7. TOTAL INDEPENDENT EXPENDITURES *333.89*

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or any political party committee or its agent.

TYPE OR PRINT NAME OF PERSON COMPLETING FORM

SIGNATURE

DATE

Ben Pinder

John Ben Pinder

4/10/16

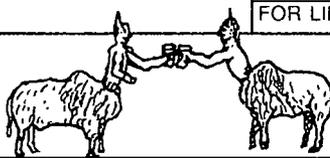
NOTE: Submission of false, erroneous or incomplete information may subject the person signing this report to the penalties of 52 U.S.C. § 30109.

For further information, contact: Federal Election Commission, 999 E Street, N.W., Washington, D.C. 20463 Toll Free 800-424-9530, Local 202-694-1100



**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
Ben Pinder



Full Name (Last, First, Middle Initial) of Payee <i>Ben Pinder</i>		Date of Public Distribution/Dissemination <i>01 25 2016</i>	
Mailing Address <i>1471 Centre Rd</i>		Amount <i>21241</i>	
City <i>Rhinebeck</i>	State <i>NY</i>	Zip Code <i>12572</i>	
Purpose of Expenditure <i>Pamphlets</i>	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure:		Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

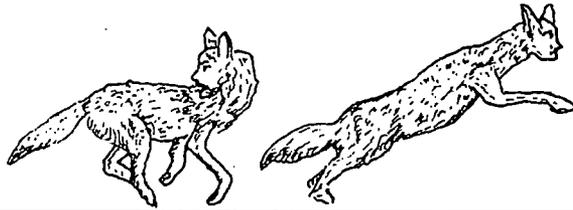
Full Name (Last, First, Middle Initial) of Payee <i>Pinder, Ben</i>		Date of Public Distribution/Dissemination <i>01 29 2016</i>	
Mailing Address <i>1471 Centre Rd</i>		Amount <i>50.00</i>	
City <i>Rhinebeck</i>	State <i>NY</i>	Zip Code <i>12572</i>	
Purpose of Expenditure <i>Website hosting for CitystateofAmerica.ny</i>	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure:		Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee <i>Pinder, Ben</i>		Date of Public Distribution/Dissemination <i>03 16 2016</i>	
Mailing Address <i>1471 Centre Rd</i>		Amount <i>11.48</i>	
City <i>Rhinebeck</i>	State <i>NY</i>	Zip Code <i>12572</i>	
Purpose of Expenditure <i>Art mailing envelopes</i>	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure:		Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	<i>27389</i>
(b) SUBTOTAL of Unitemized Independent Expenditures.....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

2016-01-14 10:40:10 AM

**SCHEDULE 5-A
ITEMIZED RECEIPTS**



PAGE OF

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF FILER (In Full)
Ben Pinder

A. Full Name (Last, First, Middle Initial) _____ Date of Receipt _____

Mailing Address _____

City _____ State _____ Zip Code _____

FEC ID number of contributing federal political committee. **C** Amount of Each Receipt this Period **0 0 0**

Name of Employer _____ Occupation _____

B. Full Name (Last, First, Middle Initial) _____ Date of Receipt _____

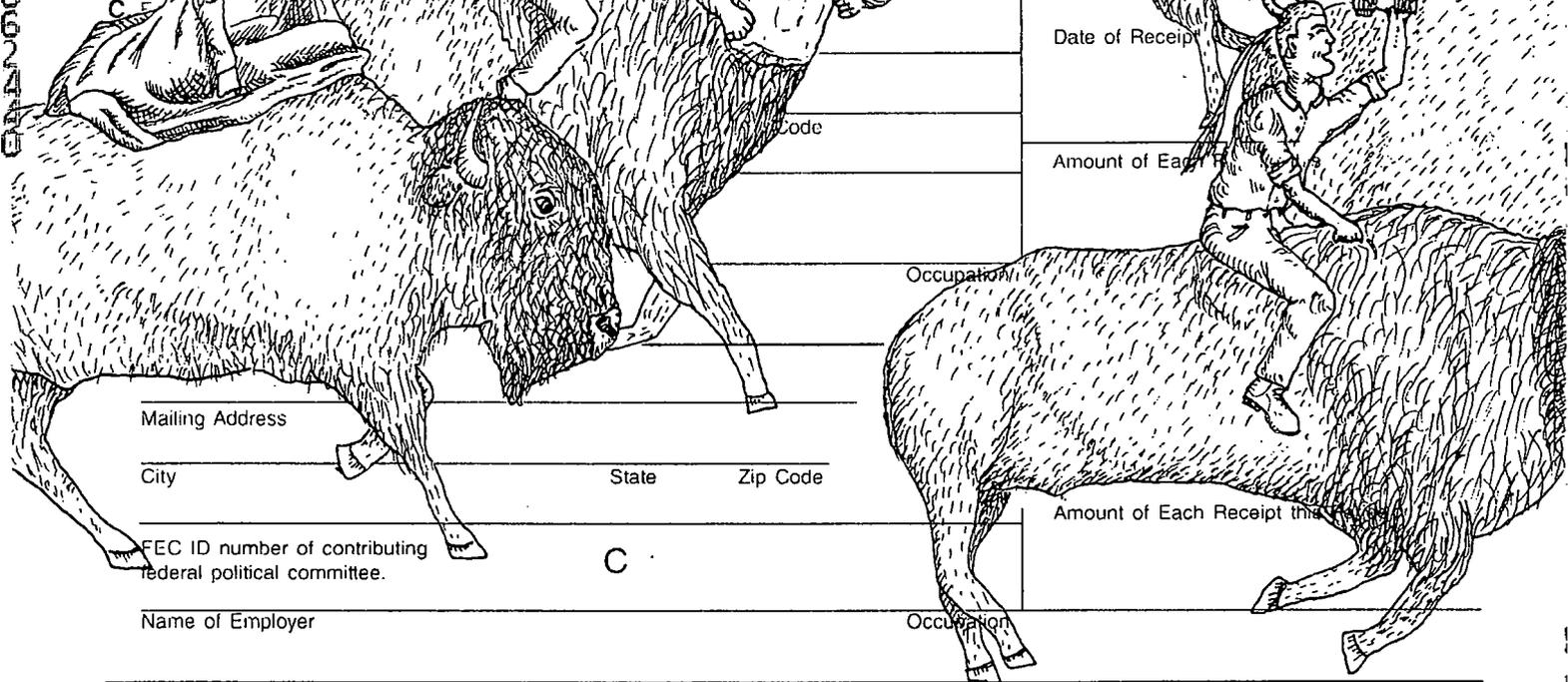
Mailing Address _____

City _____ State _____ Zip _____

FEC ID number of contributing federal political committee. _____

Name _____ Occupation _____

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SUBTOTAL of Receipts This Page (optional) ▶ **0 0 0**

TOTAL This Period (last page carry total to Line 6) ▶ **0.00**

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
 The FEC added this page to the end of this filing to indicate how it was received.

Hand Delivered Date of Receipt

USPS First Class Mail Postmarked 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
Next Business Day Delivery

Received from House Records & Registration Office Date of Receipt

Received from Senate Public Records Office Date of Receipt

Received from Electronic Filing Office Date of Receipt

Other (Specify): E-Mail Date of Receipt or Postmarked
4/11/16


 PREPARER

4/12/16
 DATE PREPARED

20160411 09:01:00