Image# 201512109004171453				
FEC FORM 1	STATEMEN ORGANIZ		Office	PAGE 1 / 5
1. NAME OF	(Check if name	Example: If typing, type	12FE4M5	
	is changed)			-
ADDRESS (number and street)	1900 WEST OAKLAND PARK	KBLVD.		
(Check if address	# 9961			
is changed)	FORT LAUDERDALE		FL 33310	
			L STATE ▲	
COMMITTEE'S E-MAIL ADDRE	SS			
(Check if address is changed)	USPoliticalActionCom	nittees@gmail.com		
	Optional Second E-Mail Add	dress		
COMMITTEE'S WEB PAGE AD (Check if address is changed)	DRESS (URL)			
2. DATE 12				
3. FEC IDENTIFICATION N		00595249		
4. IS THIS STATEMENT	NEW (N) OR	AMENDED (A)		
I certify that I have examined the	his Statement and to the best	of my knowledge and belief it	is true, correct and co	omplete.
Type or Print Name of Treasure	r JOSHUA LAROSE			
Signature of Treasurer	IUA LAROSE	[Electronically Filed]	Date 12	10 / Y Y Y Y 10 2015
NOTE: Submission of false, erron		may subject the person signing to N SHOULD BE REPORTED W		nalties of 2 U.S.C. §437g.
Office Use Only		For further information c Federal Election Commissi Toll Free 800-424-9530 Local 202-694-1100	on F	EC FORM 1 Revised 06/2012)

12/10/2015 22 : 10

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FEC Form 1 (Revised 02/2009)	Page 2
TYPE OF COMMITTEE	
Candidate Committee:	
(a) This committee is a principal campaign committee. (Complete the candidate infor	mation below.)
(b) This committee is an authorized committee, and is NOT a principal campaign co information below.)	mmittee. (Complete the candidate
Name of Candidate	
Candidate Office Sought: House Senate	State President District
(c) This committee supports/opposes only one candidate, and is NOT an authorized	committee.
Name of Candidate I	
Party Committee:	
(d) This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Pa
Political Action Committee (PAC):	
(e) This committee is a separate segregated fund. (Identify connected organization on	line 6.) Its connected organization i
Corporation Corporation w/o Capital Stock	Labor Organizatior
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 committee. (i.e., nonconnected committee)	a separate segregated fund or pa
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 committees/organizations, at least one of which is an authorized committee of a federation.	
(h) This committee collects contributions, pays fundraising expenses and disburses net committees/organizations, none of which is an authorized committee of a federal car	
Committees Participating in Joint Fundraiser	
1 FEC ID numb	er C
2 FEC ID numb	er C
3 FEC ID numb	er C
4.	er C

FEC Form 1 (Revised 02/2009)

Write or Type Committee Name

CHINESE CHAMBER OF COMMERCE OF AMERICA

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

Mailing Address				
	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.

JOSHUA I	AROSE
Full Name	
Mailing Address	1900 WEST OAKLAND PARK BLVD.
	# 9961
	FORT LAUDERDALE FL 33310 - - - -
Title or Position	CITY STATE ZIP CODE
	Telephone number 850 443 4269

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	JOSHUA LAROSE
of Treasurer	
Mailing Address	1900 WEST OAKLAND PARK BLVD.
	# 9961
	FORT LAUDERDALE FL 33310 -
	CITY STATE ZIP CODE
Title or Position	Telephone number 850 - 443 - 4269

Full Name of Designated Agent	
Mailing Address	1900 WEST OAKLAND PARK BLVD.
	# 9961
	FORT LAUDERDALE FL 33310
	CITY STATE ZIP CODE
Title or Position	DR 850 443 4269 Telephone number 1 1 1

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 o	f Bank,	Depository,	etc.
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BANK			
Mailing Address	401 LAS OLAS BLVD		
			33301
	CITY	STATE	ZIP CODE
Name of Bank, Depository,	etc.		
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: