FEC FORM 1

2016-06-06-03-00076486

Use

Only

STATEMENT OF **ORGANIZATION**

RECEIVER
PEC MAIL CENTER
Office Use Only

(Revised 06/2012)

NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4MB16 JUN-6 AM 8: U4	
YAKETY -	XAK,	<u></u>		
ADDRESS (number and street)	POBOX 4	0277		
(Check if address is changed)				
is sittinger,	WASHING T		STATE A ZOOIG-LINE STATE A ZIP CODE A	
COMMITTEE'S E-MAIL ADDRE	SS			
(Check if address is changed)	DENOSED	FROGMA	ul, com	
ie ona igou,	Optional Second E-Mail Address DSPCE F (4) (CLOWID COM)			
COMMITTEE'S WEB PAGE AD	DRESS (URL)			
(Check if address is changed)	MWW. YAK	ETY-YAKF	AC.COM	
	1	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	· 	
2. DATE 05'3	ð Í QÓ16			
3. FEC IDENTIFICATION N	UMBER ▶ CC	P3971300		
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 complete.	
Type or Print Name of Treasure	CONSTANT	THE SEDE	-R	
Signature of Treasurer	rotantino Sed	lr	Date 05 30 2016	
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 52 U.S.C. §30109 ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.				
Office		For further Information	contact: FEC FORM 1	

Federal Election Commission

Toll Free 800-424-9530

Local 202-694-1100

	FEC Fo	orm 1 (Revised 02/2009)	Page 2				
		COMMITTEE					
Car	ndidate	e 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.)					
Nam Can	e of didate	L					
	didate y Affiliat	ion Office Sought: House Senate President	State				
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.					
Nam Can	e of didate		·				
Par	ty Cor	nmittee:					
(d)			Democratic, epublican, etc.) Party.				
Poli	itical A	Action Committee (PAC):					
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its conn	ected 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.	- Состоя				
(f)		This committee supports/opposes more than one Federal candidate, and is NOT a separate seg	regated 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.)	·				
Join	nt Fund	draising Representative:					
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate.	or more political				
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	or more political				
	Con	nmittees Participating in Joint Fundraiser					
	1.						
	1. 2.						
	3.						
	4						
	4.						

FEC Form 1 (Revise	ed 02/2009)	Page 3
Write or Type Committee N	ame	
	<u> </u>	
6. Name of Any Connecte	d Organization, Affiliated Committee, Joint Fundralsing Representative, or L	eadership PAC Sponsor
MOINEIIII	111111111111111111111111111111111111111	11111111
Mailing Address		
	CITY STATE	ZIP CODE
Relationship: Conne	cted Organization Affiliated Committee Joint Fundraising Representative	Leadership PAC Sponsor
	(beat)	
 Custodian of Records: books and records. 	Identify by name, address (phone number optional) and position of the person	n in possession of committee
Full Name	NSTANTINE SEPER	
Mailing Address	16900 SEVEN LOCKS ROAD	
3		
	CABINITORN MD &	10/8/8/01
Title or Position	CITY STATE	ZIP CODE
TREASURE	Telephone number	1-320-0385
8. Treasurer: List the name any designated agent (e.g.	and address (phone number optional) of the treasurer of the committee; and g., assistant treasurer).	the name and address of
Full Name of Treasurer	4STA WITTUE SEDER	
Mailing Address	16900 SEVEN LOCKS ROAD	
		<u> </u>
	CABOU JOHN	208181-[
Title or Position	CITY STATE	ZIP CODE
MAXXE	Telephone number	J-L52010505

Constantine Deno Seder 6900 Seven Locks Roed Cabin John, MD 20818

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2016 JUN -6 AM 8: 04

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Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOM The FEC added this page to the end of this filing to indic				
Hand Delivered	Date of Receipt			
USPS First Class Mail Postmarked 6/1/16	Date of Receipt			
USPS Registered/Certified	Postmarked (R/C)			
USPS Priority Mail	Postmarked			
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Postmark Illegible				
No Postmark				
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Next Bus	iness Day Delivery			
Date of Receipt Received from House Records & Registration Office				
Received from Senate Public Records Office	Date of Receipt			
Received from Electronic Filing Office	Date of Receipt			
Other (Specify):	of Receipt or Postmarked			
PDEDAGED.	6/6/16			
(3/2015)	DATE PREPARED			