FEC FORM 1

## STATEMENT OF ORGANIZATION

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FORM 1	FORM 1 ORGANIZATION			CEC MAIL CENTER		
<del></del>				<u> </u>	rel	MAIL CENTER
1. NAME OF COMMITTEE (in	ı full)	(Check if name is changed)		mple:If typing, type the lines.	12FE4M	5
INDIANA	REPUI	BLICAN LEAD	PERS	HIP FEDER	AL CO	MMITTEE, , , ,
سسس						
ADDRESS (number a	nd street)	P. O. BOX 7	4127	<b>4</b>	<del>_                                    </del>	
(Check if address is changed)		BOYNTON E	BEAC	<del> </del>	FL	33474
			СПУ		STATE	ZIP CODE
COMMITTEE'S E-MA	address	SS (Please provide only one RepublicanL			ttees@	yahoo.com
COMMITTEE'S WEE	PAGE ADI	DRESS (URL)				
(Check if is change						
2. DATE 1	) ′ 24	° ′ 2012 `				
3. FEC IDENTIFIC	CATION N	JMBER C				
4. IS THIS STATE	MENT 🔀	NEW (N) OR		AMENDED (A)		
I certify that I have	examined th	nis Statement and to the be	est of my	knowledge and belief it	is true, corre	ct and complete.
Type or Print Name	of Treasure	EDWARD E	BUSH			
Signature of Treasur	er <u> </u>	Eduard	Bu	ol,	Date 1	0° ′ 24° ′ 20`12
NOTE: Submission of	•	eous, or incomplete information	•			to the penalties of 2 U.S.C. §437g. S.
Office Use Only				For further information co Federal Election Commission Toll Free 800-424-9530		FEC FORM 1 (Revised 02/2009)

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5.	TYPE OF Co	OMMITTEE  Committee:	
	(a)	This committee is a principal campaign committee. (Complete the candidate information below	<b>.</b> )
	(b)	This committee is an authorized committee, and is NOT a principal campaign committee. (Con	
	Name of Candidate	information below.)	
	Candidate Party Affiliation	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 Com		(Dama anakia
	(d)	(National, State  This committee is a or subordinate) committee of the	(Democratic, Republican, etc.) Party.
	Political A	ction Committee (PAC):	
	(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its co	nnected organization is a:
		Corporation Corporation w/o Capital Stock	Labor Organization
		Membership Organization Trade Association	Cooperative
		In artdition, this committee is a Lobbyist/Registrant PAC.	
	(f)	This committee supports/opposes more than one Federal candidate, and is NOT a separate committee. (i.e., nonconnected committee)	segregated fund or party
		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 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 committees/organizations, none of which is an authorized committee of a federal candidate.	two or more political
	Com	mittees Participating in Joint Fundraiser	
	1.	FEC ID number C	
	2.	FEC ID number C	
	<b>3</b> .	FEC ID number C	
	4.		

Write or Type Committee Name

INDIANA REPU	BLICAN LEA	DERSHIP	FEDERA	AL CO	MMITTEE
6. Name of Any Connected C	Organization, Affiliated Co	ommilitiee, Joint Fi	undraising Repre	sentative, o	r Leadership PAC'Sponsor
NONE					<u> </u>
Mailing Address					
				ليا	لــــا-لــــا
	(	CITY		STATE	ZIP CODE
Relationship: Connected	d Organization Affiliate	d Committee	loint Fundraising I	Representativ	re Leadership PAC Sponsor
<ol> <li>Custodian of Records: ider books and records.</li> </ol>	ntify by name, address (ph	rone number opt	tional) and position	n of the pen	son in possession of committee
Full Name EDW/	ARD BUSH				
Mailing Address	<sub> </sub> P. O. BOX 741	274		1.1 1.1	
•					
	BOYNTON BE	ACH ,		ıFL ı	33474    -
Title or Position	(	СПУ		STATE	ZIP CODE
POLITICAL AFF	AIRS DIRECTOR	3	Telephone num	per [561	
8. Treasurer: List the name an any designated agent (e.g.,		optional) of the	treasurer of the	committee; a	nd the name and address of
Full Name EDW	ARD BUSH	1 . I . I . I . I . I . I			
Mailing Address	P. O. BOX 741	274			
	BOYNTON BE	ACH		FL	33474 ZIP CODE
Title or Position TREASURER		لـــا	Telephone numb	per 561	

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		<del> </del>	
Full Name of Designated Agent			
Mailing Address			
		1_1_1_1_1	
	CITY	STATE	ZIP CODE
Title or Position			
	Telephone nu	mber	
safety deposit box Name of Bank, De	Depositories: List all banks or other depositories in which the comming or maintains funds.  BELLS FARGO BANK		لحسبب
Mailing Address	200 NORTH CONGRESS AVENUE		
	BOYNTON BEACH	FL	33426
	СПУ	STATE	ZIP CODE
Name of Bank, Do	epository, etc.		
!			
Mailing Address		1 1 1 1	
		ليا	<del></del>
	CITY	STATE	ZIP CODE

## **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. **Date of Receipt Hand Delivered** Postmarked **USPS First Class Mail** Postmarked (R/C) **USPS** Registered/Certified Postmarked **USPS Priority Mail** 10/26/2012 Delivery Confirmation™ or Signature Confirmation™ Label **Postmarked USPS Express Mail** Postmark Illegible No Postmark **Shipping Date** Overnight Delivery Service (Specify): **Next Business Day Delivery Date of Receipt** 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 or Postmarked Other (Specify):

DATE PREPARED

(3/2005)

**PREPARER**