Image# 201601249004578513				01/24/2016 18 : 30
FEC FORM 1	STATEMEN ORGANIZA			PAGE 1 / 5
				ice Use Only
1. NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5	
	1900 WEST OAKLAND PARK	BLVD.		· · · · · · · · · · · · · · · · · · ·
ADDRESS (number and street)	<u># 9961</u>			
<ul> <li>(Check if address is changed)</li> </ul>				
	FORT LAUDERDALE		FL 333	10
	CITY A		STATE A	ZIP CODE
COMMITTEE'S E-MAIL ADDRE	ESS			
(Check if address	USPoliticalActionComm	nittees@gmail.com		
is changed)				
	Optional Second E-Mail Add	Iress		
COMMITTEE'S WEB PAGE AD	DRESS (URL)			
(Check if address	www.UnitedStatesPoliticalActi	onCommitteesDirectory.com		1
is changed)				
	22 / Y Y Y Y 2016			
3. FEC IDENTIFICATION N		00606558		
4. IS THIS STATEMENT	K NEW (N) OR	AMENDED (A)		
I certify that I have examined t	this Statement and to the best	of my knowledge and belief it	is true, correct and	complete.
Type or Print Name of Treasure	er JOSHUA LAROSE			
Signature of Treasurer	HUA LAROSE	[Electronically Filed]	Date	D D / Y Y Y Y 24 2016
NOTE: Submission of false, error	neous, or incomplete information i ANY CHANGE IN INFORMATIO	may subject the person signing t DN SHOULD BE REPORTED W		penalties 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		FEC FORM 1 (Revised 06/2012)

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FEC FC	orm 1 (Revised 02/2009)	Page <b>2</b>
TYPE OF (	COMMITTEE	
Candidat	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. (Comp information below.)	lete the candidate
Name of Candidate		
Candidate Party Affiliat	ion Office Sought: House Senate President	State
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate		
Party Co	nmittee:	
(d)		Democratic, epublican, etc.) Party
Political A	Action Committee (PAC):	
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its conn	ected organization is
	Corporation Corporation w/o Capital Stock	Labor Organization
	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 a separate seg committee. (i.e., nonconnected committee)	regated 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 Fun	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.	o 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.	FEC ID number	
2.	FEC ID number	
3.	FEC ID number	
4.	FEC ID number	

FEC Form 1 (Revised 02/2009)

Write or Type Committee Name

## UNIVERSE'S GREATEST BILLIONAIRE JOSHUA LAROSE PRINTING COMPANIES COMMITTEE

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 L	ROSE	
Full Name		
Mailing Address	1900 WEST OAKLAND PARK BLVD.	
	# 9961 / / _ / _ / _ / _ / _ / _ / _	
	FORT LAUDERDALE         FL         33310	
Title or Position	CITY STATE ZIP CODE	
	Telephone number     800     768     6650	)

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         FL       -       -
	CITY STATE ZIP CODE
Title or Position	Telephone number       800       768       6650

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Full Name of Designated	JOSHUA LAROSE
Agent	
Mailing Address	1900 WEST OAKLAND PARK BLVD.
	<b># 9961</b>
	FORT LAUDERDALE         FL         33310
	CITY STATE ZIP CODE
Title or Position	Telephone number 800 - 768 - 6650

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.

CHASE	<b>BANK</b>		
Mailing Address	1801 ALTON ROAD		
		FL 33139	
	CITY	STATE ZIF	P CODE
Name of Bank, Depository, e	etc.		
Mailing Address			
	CITY	STATE ZIF	P 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: