12030892523

FEC FORM 1

STATEMENT OF ORGANIZATION

RECEIVED

2012 OCT -5 AM 10: 08

FEC MAIL CENTER

			Office Use Only	
NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5	
Vision Coalition	PAC	1 1 1 1 1 1 1 1 1		
1				. 1
ADDRESS (number and street)		ni Trail North		
(Check if address	#132			
is changed)	Naples		FL 34110	لــــا
	,	CITY	STATE ZIP CODE	
COMMITTEE'S E-MAIL ADDRES	SS (Please provide only one e-	-mail address)		
	_l byrondonalds	@gmail.com	<u> </u>	
(Check if address is changed)				
COMMITTEE'S WEB PAGE ADI	ORESS (URL)			
OSMINIT PERSONNEL PION	I			. 1
(Check if address is changed)				
2. DATE 10 3 3. FEC IDENTIFICATION NO. 4. IS THIS STATEMENT	JMBER C	AMENDED (A)		
I certify that I have examined th	is Statement and to the best	of my knowledge and belief i	is true, correct and complete.	
Type or Print Name of Treasure	Byron Donald	ds		
Signature of Treasurer	1		Date 10" (03") 2012	Ž *
·	•	may subject the person signing ON SHOULD BE REPORTED W	this Statement to the penalties of 2 U.S.C. §	437g.
Office Use Only		For further information of Federal Election Commiss Toll Free 800-424-9530 Local 202-694-1100		

F	EC Fo	rm 1 (Revised 02/2009)	Page 2
		OMMITTEE	
Cenc	idate	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. (Con information below.)	nplete the candidate
Name Candi			pr. TFK.
Candi Party	date Affiliati	Office Sought: House Senate President	State District
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	,
Name Candi			
Party	y Con	mittee:	
(d)		This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party
Politi	ical 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 addition, this committee is a Lobbyist/Registrant PAC.	
(f)	\times	This committee supports/opposes more than one Federal candidate, and is NOT a separate s committee. (i.e., nonconnected committee)	egregated fund or party
		In addition, this committee is a Lobbyist/Rogistrant 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 t committees/organizations, at least one of which is an authorized committee of a federal eandidate.	
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for to committees/organizations, none of which is an authorized committee of a federal candidate.	wo or more political
	Com	mittees Participating in Joint Fundraiser	
	1.	FEC ID number C	an engana peresan Na banganan
	2.	FEC ID oumber C	
	3.	FEC ID number C	an in 1887 and a second second
	4.		English is the second of the

Treasurer

FEC Form 1 (Revised 02/2009) Page 3 Write or Type Committee Name Vision Coalition PAC Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor ane Mailing Address CITY STATE ZIP CODE Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor Custodian of Records: Identify by name, address (phone number -- optional) and position of the person in possession of committee 7. books and records. Byron Donalds Full Name 11216 Tamiami Trail North Mailing Address **Naples** Title or Position CITY STATE ZIP CODE President 9084 Telephone number 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 Byron Donalds of Treasurer Mailing Address Naples CITY Title or Position

Telephone number

Page 4

Name of Bank, Depository, etc.

FEC Form 1 (Revised 02/2009)

	سيا					ı			ı	1.				 	ı			 .1			_1_		⊥	ı		 1	1	L	1		L	
Mailing Address		L					1.		_i_	1.			1.	 ı		L		 _l_			1	ı			_1_	 	1		i	ı		لـــا
		L	1_			<u>.</u>				丄		i_	L_	 				 								 L_		1			1	لـــ
		L				1						i								L		J		L		 		- ل	L		1_	لـــ
	CITY													;	ST/	ATE	:				Z	P (COI	DΕ								

STATE

ZIP CODE

CITY

Φ

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** 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):

11/5/12

DATE PREPARED

(3/2005)

PREPARER