## 12030804533

FEC FORM 1

## STATEMENT OF ORGANIZATION

RECEIVE

FORIVI I			2012	HANGE US ON 11:29
NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4 <b>n</b> 5	EC MAIL CENTER
May November Gro	oup			<u></u>
ADDRESS (number and street	PO Box 441641			
(Check if address is changed)	Indianapolis		IN	46244 
	. c	RITY	STATE	ZIP CODE
COMMITTEE'S E-MAIL ADD	DRESS (Please provide only one e-n	•		
(Check if address	iohnaltman@msn.c	com		
is changed)				<u> </u>
COMMITTEE'S WEB PAGE	ADDRESS (URL)			
(Check if address				
is changed)				
2. DATE 05	2012			
3. FEC IDENTIFICATION	C004	86852 86852	•	
4. IS THIS STATEMENT	NEW (N) OR	AMENDED (A)		
I certify that I have examine	d this Statement and to the best of	of my knowledge and belief	it is true, correct	and complete.
Type or Print Name of Treas	John Altman			anns ann Phon Phon Phon ar an an Iosain Phon Phon Baser hann han an ann an an an an an an Airbeire
Signature of Treasurer			Date 05	101 12012
NOTE: Submission of false, en	roneous, or incomplete information m			
Office Use Only		For further information Federal Election Commis Toll Free 800-424-9530		FEC FORM 1 (Revised 02/2009)

FEC I	Form 1 (Revised 02/2009)	Page 2
TYPE OF	COMMITTEE	
Cendida	te 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. (Cominformation below.)	plete the candidate
Name of Candidate	<u> </u>	
Candidate Party Affili	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	ommittee:	
(d)		(Democratic, Republican, etc.) Party
Political	Action Committee (PAC):	
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con	nected 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 se committee. (i.e., nonconnected committee)	gregated 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 Fu	ndraising 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 fedoral eandidate.	o or more political
(h)	This committee collects contributions, pays fundralsing expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	o or more political
Co	ommittees Participating in Joint Fundraiser	
1.	FEC ID number	
2.	FEC tD number C	
3.	FEC ID number C	
4.	]	

FEC Form 1 (Revised	02/2009)	Page <b>3</b>
Write or Type Committee Nam		1 490 0
May November		
	Organization, Affiliated Committee, Joint Fundraising Representative, or Leadershi	p PAC Sponsor
•		•
Mailing Address		
		<u> </u>
	CITY STATE Z	IP CODE
Relationship: Connecte	ed Organization Affiliated Committee Joint Fundraising Representative Lead	ership PAC Sponsor
7. Custodian of Records: Ide books and records.	entify by name, address (phone number optional) and position of the person in posso	ession of committee
John	Altman	
ruii Name	<sub>J</sub> John,Altman, , , , , , , , , , , , , , , , , , ,	<del></del>
Mailing Address	IPO Box 441641	
	Indianapolis 146244	<del></del>
Title or Position	CITY STATE 2	IP CODE
Treasurer	Telephone number [317, ] - [989	0,[6165
8. Treasurer: List the name a any designated agent (e.g.,	nd address (phone number optional) of the treasurer of the committee; and the name assistant treasurer).	e and address of
Full Name John of Treasurer	Altman	1 1 1 1 1
Mailing Address	John Altman	1 1 1 1 1
	PO BOx 441641	
	Indianapolis IN 46244	
Title or Position	CITY STATE ZI	P CODE
Treasurer	Telephone number [317, ] - [989	6165

FEC For	n 1 (Revised 02/2009)		Page 4
		<del> </del>	
Full Name of Designated Agent	John Altman		
Mailing Address	PO Box 441641		
		1. 1. 1	
	Indianapolis city	STATE	46244 LIP CODE
Title or Position Director	Telephone n	umber [	317,  - [989,  - [6165,
Banks or Othe safety deposit b     Name of Bank,	Depositories: List all banks or other depositories in which the commoxes or maintains funds.  Depository, etc.	nittee depos	its funds, holds accounts, rents
Mailing Address			
			ا ا
	СІТҮ	STATE	ZIP CODE
Name of Bank,	Depository, etc.	<del></del>	
Mailing Address			
		1 1 1	
		L	-   -   -   -   -
	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** 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