12030702537

FEC FORM 1

STATEMENT OF **ORGANIZATION**

RECEIVED

2012 JAN -9 AM 11: 43

			T-E-G	flice Use Only
NAME OF COMMITTEE (in full)	(Check if name is changed)	Example:If typing, type over the lines.	12FE4M5	TIME OF THE
Citizens, F	0,5, Paul He	e rowx 1		
ADDRESS (number and street)		<u> </u>	<u> </u>	
(Check if address is changed)				
		CITY	STATE	ZIP CODE
COMMITTEE'S E-MAIL ADDRE	SS (Please provide only one	e-mail address)		
(Check if address	Plaju CHIEITIO	u x 1 . 1 M. P. A. B. G. M. A.	1, 1, 1, CO M	
is changed)				
COMMITTEE'S WEB PAGE AD	DRESS (URL)			
(Check if address is changed)				
2. DATE (2 3	å žŏĭi [*]	·		
3. FEC IDENTIFICATION N	UMBER C			
4. IS THIS STATEMENT	NEW (N) OR	AMENDED (A)		
I certify that I have examined t	his Statement and to the be	st of my knowledge and belief	it is true, correct and	d complete.
Type or Print Name of Treasure	or X Rebecca	KATZ		
Signature of Treasurer	Rebeix	a Katz	Date 1 2	29 2011
NOTE: Submission of false, erron	·	n may subject the person signing		penalties of 2 U.S.C. §437g.
Office Use Only		For further information Federal Election Commis Toll Free 800-424-9530		FEC FORM 1 (Revised 02/2009)

	. 20.0	The following of the following	i ago =
5.	TYPE OF C		
	V	e Committee:	
	(a) \	This committee is a principal campaign committee. (Complete the candidate information below	w.)
	(b)	This committee is an authorized committee, and is NOT a principal campaign committee. (Coinformation below.)	omplete the candidate
	Name of Candidate	Parul Heroux	<u> </u>
	Candidate Party Affiliati	Office	State MA District 0 4
	(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
~/A	Name of Candidate		
10	Party Con	nmittee:	
MA	(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 content of the c	onnected organization is a:
		Corporation W/o Capital Stock	Labor Organization
		Membership Organization Trade Association	Cooperative
N/F	+	In addition, 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	draising 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	
N.	/ 1.	FEC ID number C	
19,	2.	FEC ID number C	
	3.	FEC ID number C	
	4.		
		1 de la	

CITY

STATE

FEC Form 1 (Revised 02/2009)

Write or Type Committee Name

Mailing Address

Title or Position

[,r,e,a,s,v,r,e,[

Page 3

Full Name of Designated	ebecca Katz		
Agent Mailing Address	111 Daileu St Apt	H	
Walling Fladiood	1		
	Attleboro	STATE	[02:703]-[; ;]
Title or Position			011-18711-15361
safety deposit boxes of		committee deposits	funds, holds accounts, rents
Name of Bank, Depos	sitory. etc.		
	itizens Bank	11:11:	<u> </u>
Mailing Address	128, State Street		
Mailing Address	28, State Street		
Mailing Address	180 siton	<u>m</u> A	021091-
Mailing Address			0.2:1091- ZIP CODE
Mailing Address Name of Bank, Depos	BIOISITIOIN CITY	<u>MA</u>	
	BIOISITIOIN CITY	<u>MA</u>	
Name of Bank, Depos	BIOISITIOIN CITY	<u>MA</u>	
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Name of Bank, Depos	BIOISITIOIN CITY	<u>MA</u>	

(3/2005)

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