FEC

Only

STATEMENT OF

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ORGANIZATION FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. Trump Has Tiny Hands PAC 1621 NE Killingsworth St. ADDRESS (number and street) Apt. 7 (Check if address is changed) Portland 97211 OR CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS donaldtrumphastinyhands@gmail.com (Check if address is changed) Optional Second E-Mail Address kraemer.henry@gmail.com COMMITTEE'S WEB PAGE ADDRESS (URL) donaldtrumphastinyhands.com (Check if address is changed) DATE 07 2016 C00611020 FEC IDENTIFICATION NUMBER 3. X IS THIS STATEMENT NEW (N) OR AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. Henry Kraemer Type or Print Name of Treasurer Henry Kraemer [Electronically Filed] 03 07 2016 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012)

Toll Free 800-424-9530

Local 202-694-1100

FE	EC Fo i	rm 1 (Revised 02/2009)	Page 2
		OMMITTEE	
	ııdate	Committee:	
(a)	Н	This committee is a principal campaign committee. (Complete the candidate information below.)	
(b)	Ш	This committee is an authorized committee, and is NOT a principal campaign committee. (Compinformation below.)	lete the candidate
Name Candic		Donald Trump	
Candid Party A		Office on Sought: House Senate President	State
raity 7	Aiman	Sought. House Senate Fresident	District
(c)	X	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name Candid			
Party	Com	nmittee:	
(d)		· · · · · · · · · · · · · · · · · · ·	Democratic, Republican, etc.) Party.
Politi	cal A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its conn	nected 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)	П	This committee supports/opposes more than one Federal candidate, and is NOT a separate seg	gregated fund or party
		committee. (i.e., nonconnected committee)	
		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 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.	o or more political
	Com	mittees Participating in Joint Fundraiser	
	1.	FEC ID number	
	2.	FEC ID number	
	3.	FEC ID number	
	4.		

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 books and records. Henry Kraemer Full Name Henry Kraemer Apt. 7 Portland OR 97211 Title or Position CITY STATE ZIP CODE			
Trump Has Tiny Hands PAC i. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor NONE Mailing Address 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 books and records. Henry Kraemer Full Name 1621 NE Killingsworth Ave. Apt. 7 Portland OR 97211 Title or Position City State Zip Code Telephone number and address of any designated agent (e.g., assistant treasurer). Full Name of 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 of Treasurer Mailing Address 1621 NE Killingsworth Ave. Apt. 7 Portland OR 97211 City State Zip Code Title or Position	FEC Form 1 (Revised 0	2/2009)	Page 3
Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor NONE Connected Organization	Write or Type Committee Name		
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Full Name of Designated		
Agent		
Mailing Address		
	CITY STATE	ZIP CODE
Title or Position		1 2
	Telephone number	
safety deposit be Name of Bank, I	Depositories: List all banks or other depositories in which the committee deposits funds, hold oxes or maintains funds. Depository, etc. Advantis Credit Union	
safety deposit bo	Advantis Credit Union 3515 NE 15th Ave.	
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Form/Schedule: F1N Transaction ID:

We are patriotic Americans devoted to educating our fellow citizens about Donald Trump's tiny baby hands.

Form/Schedule: Transaction ID: