## 13031143556

FEC FORM

## STATEMENT OF ORGANIZATION

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FORM 1		OR	GANIZ	2A110	ON		FECHALLOGENTER
1. NAME OF COMMITTEE (in	n full)		ck if name anged)		umple:If typing, type or the lines.		<u>~_~~</u>
John Dale	for (	Congre	ss 				
		0045			11111		
ADDRESS (number a	nd street)	9815	νγ <u>5</u> 1ί	),5			
(Check if a is changed)		Westp	ooint			iN.	47992
				CITY		STATE	ZIP CODE
COMMITTEE'S E-MA					<sup>ldress)</sup> ss@gmai	I.com	
is change		ىبىيا		لللا	11111	1111	
COMMITTEE'S WEB	PAGE AD	DRESS (URL)			ing the second of the second o		··· · · · · · · · · · · · · · · · · ·
(Check if is change		سبا					
2. DATE 12	<b>2</b> ′ <b>6</b> .	ື <sup>′</sup> 201	<b>3</b>				
3. FEC IDENTIFIC	Cation N	UMBER	C				
4. IS THIS STATE	MENT 🗵	NEW (N)	OR		AMENDED (A)	)	
I certify that I have of	examined ti	his Statement a	and to the be	est of my	knowledge and belie	ef it is true, cor	rect and complete.
Type or Print Name	of Treasure	, <u>Maril</u>	yn Jo	Burk	(S		
Signature of Treasure		Jarly	Jox	Bur	ls	Date	2 12 2013
NOTE: Submission of	-	•		-	bject the person signi	_	it to the penalties of 2 U.S.C. §437
Office Use					For further Information Federal Election Communication Toll Free 800-424-9530	nission	FEC FORM 1 (Revised 02/2009)

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5.	TYPE	OF C	OMMITTEE		
	Cen	didate	Committee:		
	(a)	$\boxtimes$	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. (Complete information below.)	the candid	ate
	Name Candi		John Dale		
	Candi Party	idate Affiliati	on Dem Sought: X House Senate President	State District	IN _ 04
	(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.		
	Name Candi				
	Part	y Con	mittee:		
	(d)		B = B + B + B + B + B + B + B + B + B +	nocratic, ublican, etc.	) Party.
	Polit	ical A	ction Committee (PAC):		
	(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connect	ed organiza	tion is a:
	<b>\-</b> /	لــا			
				bor Organiz	allon
			Memberahip Organization Trade Association Co	operative	
			In additien, this committee is a Lobbyist/Registrant PAC.		
	(1)		This committee supports/opposes more than one Federal candidate, and is NOT a separate segreg committee. (i.e., nonconnected committee)	ated fund o	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	raising Representative:		
	(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or committees/organizations, at least one of which is an authorized committee of a federal candidate.	more politic	al
	(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or	more politic	al
			committees/organizations, none of which is an authorized committee of a federal candidate.		
		Com	mittees Participating in Joint Fundraiser		
		1.	FEC ID number		
		2.	FEC ID number		
		3.	FEC ID number		
		4.	FEC ID number		

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Write or Type Committee Name	1 295 0
John Dale for Congress	
	archin DAC Coorner
6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Lead	ersnip PAC Sponsor
Mailing Address	
CITY STATE	ZIP CODE
Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative	Leadership PAC Sponsor
·	
<ol> <li>Custodian of Records: Identify by name, address (phone number optional) and position of the person in books and records.</li> </ol>	possession of committee
Marilyn Jo Burks	
1180 North State Rd 75	<del></del>
Mailing Address	<del></del>
Thorntown IN 1460	771
[7] [7] [7] [7] [7] [7] [7] [7] [7] [7]	<u> </u>
Title or Position CITY STATE	ZIP CODE
Treasurer [765] -	485 <sub>   </sub>
<ol> <li>Treasurer: List the name and address (phone number - optional) of the treasurer of the committee; and the any designated agent (e.g., assistant treasurer).</li> </ol>	name and address of
Full Name Marilyn Jo Burks	
Mailing Address 1180 North State Rd 75	
<u>[ , , , , , , , , , , , , , , , , , , ,</u>	<u> </u>
Thorntown IIN 1460	7,1, 1-1 1
CITY STATE	ZIP CODE
Title or Position  Treasurer  Telephone number	لــــا-لــــا

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	•	
Full Name of Designated Agent	Kathy Dale	
Mailing Address	19815,W 510,S	<u> </u>
	Westpoint IN	47992
	CITY STATE	ZIP CODE
Title or Position Campaig	·	65   572   2392,
safety deposit b	r Depositories: List all banks or other depositories in which the committee deposits boxes or maintains funds.  Depository, etc.	runus, nords accounts, rents
safety deposit b		Tunus, nords accounts, rents
safety deposit b	Depository, etc.  State Bank of Lizton	Tunus, nords accounts, rents
safety deposit b	Depository, etc.  State Bank of Lizton	Tunus, nords accounts, rents
safety deposit b	Depository, etc.  State Bank of Lizton  206 North State St	46149   -
safety deposit b	Depository, etc.    State Bank of Lizton     206 North State St     P.O Box 170	
safety deposit by Name of Bank,  Mailing Address	Depository, etc.    State Bank of Lizton     206 North State St     P.O Box 170     Lizton	46149   46149
safety deposit by Name of Bank,  Mailing Address	Depository, etc.    State Bank of Lizton     206 North State St     P O Box 170     Lizton     CITY   STATE	46149   46149
safety deposit by Name of Bank,  Mailing Address  Name of Bank,	Depository, etc.    State Bank of Lizton     206 North State St     P O Box 170     Lizton     CITY STATE	46149    -
safety deposit by Name of Bank,  Mailing Address	Depository, etc.    State Bank of Lizton     206 North State St     P O Box 170     Lizton     CITY STATE	46149    -
safety deposit by Name of Bank,  Mailing Address  Name of Bank,	Depository, etc.    State Bank of Lizton     206 North State St     P O Box 170     Lizton     CITY STATE	46149    -

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Federal Election Commission 999 E St. NW Washington DC 20463

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