

FEC FORM 1

STATEMENT OF ORGANIZATION

SECRETARY OF THE SENATE

16 APR 21 PM 3:49

Office Use Only

1. NAME OF COMMITTEE (in full)



(Check if name is changed)

Example: if typing, type over the lines.

12FB4M5

Billy Felling For US Senate

ADDRESS (number and street)

731 G St. Spc B 5

(Check if address is changed)

Chula Vista

CITY

CA

STATE

91910

ZIP CODE

COMMITTEE'S E-MAIL ADDRESS

(Check if address is changed)

billy.felling39@gmail.com

Optional Second E-Mail Address

COMMITTEE'S WEB PAGE ADDRESS (URL)

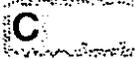
(Check if address is changed)

www.billyfellingforsenate.com

2. DATE

04 18 2016

3. FEC IDENTIFICATION NUMBER



4. 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.

Type or Print Name of Treasurer

Felicia Woods

Signature of Treasurer

Felicia Woods

Date

04 18 2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 52 U.S.C. §30109.

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

Office Use Only

For further information contact: Federal Election Commission Toll Free 800-424-9530 Local 202-694-1100

FEC FORM 1 (Revised 06/2012)

201604220200171583

5. TYPE OF COMMITTEE

Candidate 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. (Complete the candidate information below.)

Name of Candidate _____

Candidate Party Affiliation: **Rep** Office Sought: House Senate President State: **CA** District: **00**

- (c) This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate: **Billy Stalling**

Party Committee:

- (d) This committee is a _____ (National, State or subordinate) committee of the _____ (Democratic, Republican, etc.) Party.

Political Action Committee (PAC):

- (e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:

Corporation Corporation w/b 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 segregated 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 Fundraising Representative:

- (g) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political 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 two or more political committees/organizations, none of which is an authorized committee of a federal candidate.

Committees Participating in Joint Fundraiser

1. _____ FEC ID number: **C**
2. _____ FEC ID number: **C**
3. _____ FEC ID number: **C**
4. _____ FEC ID number: **C**

201604220200171584

Write or Type Committee Name

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

[Empty grid lines for organization name]

Mailing Address

[Empty grid lines for mailing address]

CITY

STATE

ZIP CODE

Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor

7. Custodian of Records: Identify by name, address (phone number - optional) and position of the person in possession of committee books and records.

Full Name

Felicia Woods

Mailing Address

521 Orange Ave 147

Chula Vista

CA

91911

Title or Position

CITY

STATE

ZIP CODE

Custodian of Records

Telephone number

775-750-6622

8. 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

Felicia Woods

Mailing Address

521 Orange Ave 147

Chula Vista

CA

91911

Title or Position

CITY

STATE

ZIP CODE

Treasurer

Telephone number

775-750-6622

201604220200171585

Full Name of Designated Agent

[Empty grid for Full Name of Designated Agent]

Mailing Address

[Empty grid for Mailing Address line 1]

[Empty grid for Mailing Address line 2]

[Empty grid for Mailing Address line 3]

CITY

STATE

ZIP CODE

Title or Position

[Empty grid for Title or Position]

Telephone number

[Empty grid for Telephone number]

9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

Wells Fargo

Mailing Address

444 H St

[Empty grid for Mailing Address line 3]

Chula Vista CA 91910

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

[Empty grid for Name of Bank, Depository, etc.]

Mailing Address

[Empty grid for Mailing Address line 1]

[Empty grid for Mailing Address line 2]

[Empty grid for Mailing Address line 3]

CITY

STATE

ZIP CODE

201604220200171586



UNITED STATES POSTAL SERVICE

FROM

Mr. Bill Felling
731 G. St. Spc B5
Chula Vista, CA 91910

EXTREMELY URGENT

Please Rush To Add

Bill Felling

Office of Public Records

Flat Rate
Mailing Envelope

P.O. Box 77578

Visit us at usps.com

Wash. D.C. 20013-7578

E	U.S. POSTAGE \$22.95
	PNE 1-DAY 91910 0007
	DATE OF SALE 04/19/16
	06 2500 01
	08258384

PRIORITY MAIL EXPRESS 1-DAY™

WAIVER OF SIGNATURE REQUESTED
SCHEDULED DELIVERY 04/20/2018 BY 12 Noon 01b. 2.40 OZ.

SHIP TO: OFFICE OF 0007

Public Records

PO BOX 77578
WASHINGTON DC 20013-8578

USPS TRACKING NUMBER



9570 1000 1259 6110 0002 63

785110002022709102

United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

ELECTRONICALLY DELIVERED _____
Date of Receipt

HAND DELIVERED _____
Date of Receipt

USPS FIRST CLASS MAIL _____
Date of Receipt Postmark

USPS REGISTERED/CERTIFIED _____
Postmark

USPS PRIORITY MAIL _____
Postmark

DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL

USPS EXPRESS MAIL 4/19/16
Postmark

OVERNIGHT DELIVERY SERVICE:

	SHIPPING DATE	NEXT BUSINESS DAY DELIVERY
FEDERAL EXPRESS	_____	<input type="checkbox"/>
UPS	_____	<input type="checkbox"/>
DHL	_____	<input type="checkbox"/>
AIRBORNE EXPRESS	_____	<input type="checkbox"/>

RECEIVED FROM FEDERAL ELECTION COMMISSION _____
Date of Receipt

POSTMARK ILLEGIBLE NO POSTMARK

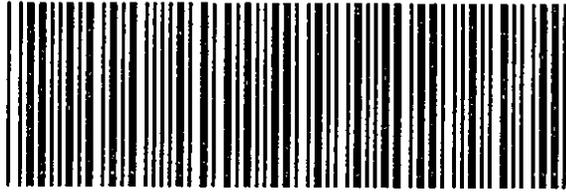
FAX _____
Date of Receipt

OTHER _____
Date of Receipt or Postmark

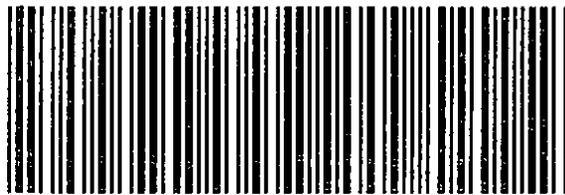
PREPARER MN DATE PREPARED 4/21/16

4/04/16

201604220200171588



SEN PATCH



SEN PATCH

201604220200171589