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TEC MAIL CENTER

Community Coalition

If registered, FEC ID:

Today's Date:

09/18/2013

Federal Election Commission 999 E Street, N.W. Washington, D.C. 20463

Re: Form 1, Statement of Organization—Unlimited Contributions

To Whom It May Concern:

This committee intends to make independent expenditures, and consistent with the U.S. Court of Appeals for the District of Columbia Circuit decision in SpeechNow v. FEC, it therefore intends to raise funds in unlimited amounts. This committee will not use those funds to make contributions, whether direct, in-kind, or via coordinated communications, to federal candidates or committees.

Respectfully submitted,

Treasurer's Name:

Barbara Pope

, Treasurer

FORM 1

Use

STATEMENT OF **ORGANIZATION**

RECEIVED

2013 Someolise of M 11: 55

(Revised 06/2012)

3. 4. I c	FEC IDENTIFICATION NUIS THIS STATEMENT Certify that I have examined the pe or Print Name of Treasurer gnature of Treasurer	NEW (N) is Statement and to BAR eous, or incomplete inf	C OR the best of my BARA ormation may su	POPE	Date 0 1	and complete.			
3. 4. 1 c	FEC IDENTIFICATION NUIS THIS STATEMENT Certify that I have examined the pe or Print Name of Treasure	JMBER ▶ NEW (N) nis Statement and to	C OR the best of my		M I				
3. 4. 1 c	FEC IDENTIFICATION NUIS THIS STATEMENT	JMBER ▶ NEW (N) nis Statement and to	C OR the best of my		it is true, correct	and complete.			
3. 4.	FEC IDENTIFICATION NU	JMBER ▶ NEW (N)	C		it is true, correct	and complete.			
	FEC IDENTIFICATION NU	JMBER ▶	С	AMENDED (A)					
			С						
2.	DATE D 4 1	8 2017	•						
	M M / D	2. DATE 09 18 2017							
		92 / Y2 Y Y Y							
		L			1111				
	(Check if address is changed)	NONE				L.I. I. I. I. I. I. I. I. I. I.			
CC	COMMITTEE'S WEB PAGE ADDRESS (URL)								
									
	• •	Optional Second E	-Mail Address						
(Check if address RoyJAGUILLONEGAAILL.COM									
i	COMMITTEE'S E-MAIL ADDRESS								
) 		CITY A			STATE A	[3,3,1,3,7]-[ZIP CODE▲			
5	(Check if address is changed)			<u> </u>	<u> </u>				
ΑC	DDRESS (number and street)	2/4/1/21/	A1610161A1	P.R.I.VE.					
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		40, a, 1, i, t, i,	01/11						
<u>C</u> L	" O AM UNITY								
<u>C</u>	COMMITTEE (in full)	is changed) OVE	or the lines.		C MAIL CENTER			

Federal Election Commission

Toll Free 800-424-9530

FEC Form 1 (Revised 02/2009)		Page 2					
TYPE OF COMMITTEE							
Candidate Committee:							
(a) This committee is a princ	cipal campaign committee. (Complete the candidate information below.)						
(b) This committee is an autinformation below.)	thorized committee, and is NOT a principal campaign committee. (Complete	e the candidate					
Name of Candidate							
Candidate Party Affiliation	Office Sought: House Senate President	State					
(c) This committee supports/	opposes only one candidate, and is NOT an authorized committee.						
Name of Candidate							
Party Committee:							
(d) This committee is a	• • •	mocratic, ublican, etc.) Party.					
Political Action Committee (PA	C):						
(e) This committee is a sepa	arate segregated fund. (Identify connected organization on line 6.) Its connec	ted organization is a:					
Corporation	Corporation w/o Capital Stock La	abor Organization					
Membership Org	partization Trade Association Co	ooperative					
In additter	n, this committee is a Lobbyist/Registrant PAC.						
	This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or process committee. (i.e., nonconnected committee)						
In addition, this co	mmittee is a Lobbyist/Registrant PAC.						
In addition, this co	contaitee is a Leadership PAC. (Identify sponsor on lion 6.)						
Joint Fundraising Representation	ve:						
	ontributions, pays fundraising expenses and disburses net proceeds for two o	r more political					
(h) This committee collects co committees/organizations,	ontributions, pays fundraising expenses and disburses net proceeds for two or , none of which is an authorized committee of a federal candidate.	r more political					
Committees Participating in	Joint Fundraiser						
1. []	FEC ID number C						
2.	FEC ID number C						
3.	FEC ID number C						
	1						

Vrite or Type Committee Nam	ре				
Name of Any Connected	Organization, Affiliated Committee, Joint Fundralsing Representative, or Leadership	PAC Sponsor			
<u> </u>					
Mailing Address					
		1111			
	CITY STATE ZIP	CODE			
Relationship: Connecte	ed Organization Affiliated Committee Joint Fundraising Representative Leader	ship PAC Sponsor			
Custodian of Records: Ide books and records.	entify by name, address (phone number optional) and position of the person in possess	sion of committee			
Full Name BAZ	BARA POPE	1 1 1 1			
Mailing Address	12,6,22, TALUGA, DRIVE				
	M.J.A.M.J. FL 133.7.3	21-L			
Title or Position	CITY STATE ZIP	CODE			
[REASURER	Telephone number 305-58	81-1511.24			
8. Treasurer: List the name and address (phone number optional) of the treasurer of the committee; and the any designated agent (e.g., assistant treasurer).					
Full Name of Treasurer BAR	BARA, POPE				
Mailing Address	Z.b. JZ, T.A.L. V.G.A. DR.I.V.E.				
	CITY STATE ZIP	7]-LLLL			
Title or Position					
	Name of Any Connected	Custodian of Records: Identify by name, address (phone number optional) and position of the person in possess books and records. Full Name BARBARA POPE Mailing Address 2 2 1 2 1 4 4 4 4 4 4 4 4 4			

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Name of Bank, Depository, etc.

FEC Form 1 (Revised 02/2009)

Mailing Address

CITY

STATE

ZIP CODE

130311205<u>4</u>

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COMMISSION FEDERAL ELECTION WASHINGTON; I

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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** Postmarked **USPS Priority Mail Express** 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): 9/26/13 DATE PREPARED **PREPARER** (8/2013)