RECEIVED

2014 DEC -8 AH 9: 10

Committee Name:

FEC MAIL CENTER

GLUBAL STRATEGY FOUNDATION If registered, FEC ID:

Today's Date:

11-28-2014

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: JOHN IC. FLOROPOULOS |, Treasurer

FEC FORM 1	STATEMEI ORGANIZ		RECEIVED 2014-DEC-07,8 AM 9: 10
1. NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5 FEC MAIL CENTER
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ADDRESS (number and street)		Vie Vin 11 + 35	
is changed)	Bloomfiel CITY A	d	
COMMITTEE'S E-MAIL ADDF	RESS		
(Check if address is changed)	Prional Second E-Mail Ad	0	rategy center. com
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COMMITTEE'S WEB PAGE A	DDRESS (URL)		a da ante de la companya de la compa
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2. DATE	8 2014		
3. FEC IDENTIFICATION			
4. IS THIS STATEMENT		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 Treasu	rer John K. Floropou	<i>lus</i>	
Signature of Treasurer	sq. All	ſ	Date 11282014
NOTE: Submission of false, erro		may subject the person signing the formation of the formation of the second sec	his Statement to the penalties of 52 U.S.C. §30109. VITHIN 10 DAYS.
Office Use Only		For further information co Federal Election Commissio Toll Free 800-424-9530 Local 202-694-1100	

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FEC Form 1 (Revised 02/2009)

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Page 2

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5.	TYPE	OF C	DMMITTEE
	Cano	didate	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 Candi		
	Candi Party	date Affiliatio	Office State In Sought: House Senate President District
	(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.
	Name Candi		
	Part	y Com	mittee:
	(d)		(National, State(Democratic,This committee is aor subordinate) committee of theRepublican, etc.) Party.
	Polit	ical A	ction Committee (PAC):
	(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected 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)	\checkmark	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	Fund	raising 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.
		Comr	nittees Participating in Joint Fundraiser
		1.	
		2.	
		3.	FEC ID number C
		4.	FEC ID number
			· ·

_	FEC Form 1 (Rev	vised 02/2009)	Page 3
V	Vrite or Type Committee	Name	
6.	Name of Any Connec	cted Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership A	PAC Sponsor
L		<u> </u>	
L			
	Mailing Address		
		. CITY STATE ZIP	CODE
	Relationship: Con	nected Organization Affiliated Committee Joint Fundraising Representative Leaders	ship PAC Sponsor
7.	Custodian of Records books and records.	s: Identify by name, address (phone number optional) and position of the person in possess	sion of committee
		$h_n, F_{10,r,0,p,0,u}$	
	Mailing Address	55, Park, Ave Unit 35	
		181,0,0,mf,1,e,1,d, [NJ] [NJ] [0,7,00]	3]-[]
	Title or Position	CITY STATE ZIP	CODE
	[T,r,e,a,s,u,r,	e_1C_1 Telephone number $[4_17_13] - [6_1]$	5]-17447-1
8.		ne and address (phone number optional) of the treasurer of the committee; and the name a e.g., assistant treasurer).	and address of
	Full Name of Treasurer	15,5, Park Ave Unit 35	<u></u>]
	Mailing Address	55, Park Ave Unit 35	

FEC Form 1 (Revised 02/2009)

Page	4

Full Name of Designated Agent	John, Floropolulos
Mailing Address	55, Piaicik, Avie, Unilit, 35, 11, 11, 11, 11
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	177, 615, 7447,
Treasi	$J [e_1 (1 + 1 + 1 + 1 + 1 + 1 + 1 + 1 + 1 + 1$

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.

Pirioivilidenti Bank 1100 Bloomfilel HV.C 0 Mailing Address MJ 070 0 3 0 m PJ -1 0 CITY ZIP CODE STATE Name of Bank, Depository, etc.

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Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMIN The FEC added this page to the end of this filing to indica	
Hand Delivered	Date of Receipt
USPS First Class Mail	Postmarked 12/1/14
USPS Registered/Certified	Postmarked (R/C)
USPS Priority Mail	Postmarked
USPS Priority Mail Express	Postmarked
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No Postmark	
Overnight Delivery Service (Specify):	Shipping Date
Next Busi	ness Day Delivery
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
Date of Other (Specify):	of Receipt or Postmarked
<i>\$</i> }	12/8/14
PREPARER (8/2013)	DATE PREPARED