Only

PAGE 1/5

STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) over the lines. is changed) DUTCH CHAMBER OF COMMERCE OF AMERICA 1900 WEST OAKLAND PARK BLVD. ADDRESS (number and street) # 9961 (Check if address is changed) FORT LAUDERDALE  $\mathsf{FL}$ 33310 CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS USPoliticalActionCommittees@gmail.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 2015 C00595579 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. JOSHUA LAROSE Type or Print Name of Treasurer JOSHUA LAROSE [Electronically Filed] 12 2015 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

FEC <b>Fo</b>	rm 1 (Revised 02/2009)	Page <b>2</b>			
TYPE OF C		<u>-</u>			
(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. (Corinformation below.)	nplete the candidate			
Name of Candidate					
Candidate Party Affiliati	Office Sought: House Senate President	State			
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.				
Name of Candidate					
Party Con	arty Committee:				
(d)	This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party			
Political A	ction Committee (PAC):				
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its co	nnected 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)	This committee supports/opposes more than one Federal candidate, and is NOT a separate scommittee. (i.e., nonconnected committee)	egregated fund 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 the 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 t 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				

	-		
	FEC Form 1 (Revised	02/2009)	Page <b>3</b>
V	Vrite or Type Committee Name		
[	DUTCH CHAM	BER OF COMMERCE OF AMERICA	
6.	Name of Any Connected (	Organization, Affiliated Committee, Joint Fundraising Representative, or Leadersh	ip PAC Sponsor
N	IONE		
L			
	Mailing Address		
		CITY STATE 2	ZIP CODE
	Relationship: Connected	d Organization Affiliated Committee Joint Fundraising Representative Lead	dership PAC Sponsor
	_		
		ntify by name, address (phone number optional) and position of the person in poss	session of committee
	books and records.		
	JOSHUA   LILI   LILI	LAROSE	
	Mailing Address	1900 WEST OAKLAND PARK BLVD.	<b>.</b>
	maining made eee	# 9961	
		FORT LAUDERDALE FL 33310	.  _
	Title or Position	CITY STATE Z	IP CODE
	PRESIDENT		43   -   4269
3.	<b>Treasurer:</b> List the name an any designated agent (e.g.,	d address (phone number optional) of the treasurer of the committee; and the namessistant treasurer).	ne and address of
	of Treasurer JOSHUA I		
	Mailing Address	1900 WEST OAKLAND PARK BLVD.	
		# 9961	
		FORT LAUDERDALE FL 33310	
	Title or Position	CITY STATE Z	IP CODE
	TREASURER		43 - 4269

FEC Form	n 1 (Revised 02/2009)	Page <b>4</b>			
Full Name of Designated Agent	Designated JOSHUA LAROSE				
Mailing Address	1900 WEST OAKLAND PARK BLVD.				
-	# 9961				
	FORT LAUDERDALE FL 333310  CITY STATE ZIF	P CODE			
Title or Position ADMINISTRATO	DR	3 - 4269			
safety deposit bo	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.				
	BANK OF AMERICA				
Mailing Address	401 LAS OLAS BLVD				
	FORT LAUDERDALE FL 333301				
	CITY STATE ZIF	P CODE			
Name of Bank, [	Depository, etc.				
Mailing Address					
	CITY STATE ZIF	P CODE			

## : 97 A = G7 9 @ G5 B9 CI G H9 L H F 9 @ 5 H9 8 HC 5 F 9 DC F H Z G7 < 98 I @ C F → H9 A = N 5 H = C B

Form/Schedule: F1N Transaction ID:

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.

Form/Schedule: Transaction ID: