



CHAMPION THE AMERICAN DREAM

PO Box 113255
Stamford, CT 06911

RECEIVED
SECRETARY OF THE SENATE
PUBLIC RECORDS

16 MAR 24 PM 12:22

Secretary of the Senate
Office of Public Records
232 Hart Senate Office Building
Washington, DC 20510-7116

Dear Sirs:

March 21, 2016

Please find the enclosed filings:

1-FORM 1 amended, reflecting John Pascal assuming role of Treasurer.

2-FORM 3 for Q4 2015. The delay was due to the termination of a contractor who was our Treasurer on 1/24/16. We are sorry about the delay.

We are assembling a team of professionals for the upcoming Convention, Primary and General Election, and expect to have future filings submitted in a timely fashion. Feel free to call me if you have any questions. Thank you.

Sincerely,

August Wolf
August Wolf for Senate
PO BOX 113255
Stamford CT 06911

www.wolf2016.com

augustwolf@wolf2016.com
Personal Cell 860-422-5444

Cc: Justin Clark, Davis, Clark & Bonafonte, LLC

FEC
FORM 1

STATEMENT OF
ORGANIZATION

RECEIVED
SECRETARY OF THE SENATE
PUBLIC PROGRAMS

16 MAR 24 PM 12:22
Office Use Only

1. NAME OF
COMMITTEE (in full)

(Check if name
is changed)

Example: If typing, type
over the lines.

12FE4M5

August Wolf for Senate

ADDRESS (number and street)

76 Progress Drive

Suite 210

(Check if address
is changed)

Stamford

CT

06902

CITY

STATE

ZIP CODE

COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address)

compliance@wolf2016.com

(Check if address
is changed)

COMMITTEE'S WEB PAGE ADDRESS (URL)

www.wolf2016.com

(Check if address
is changed)

2. DATE

03rd 20th 2016^{Y.Y.}

3. FEC IDENTIFICATION NUMBER

C 00577536

4. IS THIS STATEMENT

NEW (N)

OR

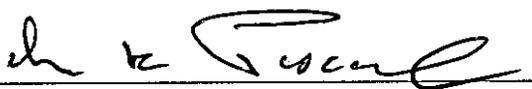
AMENDED (A)

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

John Pascal

Signature of Treasurer



Date

03rd 21st 2016^{Y.Y.}

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
Use
Only

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

FEC FORM 1
(Revised 02/2009)

201603240200087650

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 _____ Office Sought: House Senate President State _____ District _____

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

Name of Candidate _____

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/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 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

201603240200087651

Write or Type Committee Name

August Wolf for Senate

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

Empty grid line for full name

Mailing Address

Empty grid lines for mailing address

Title or Position

CITY

STATE

ZIP CODE

Empty grid line for title or position

Telephone number

Empty grid lines for telephone number

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

John Pascal

Mailing Address

PO Box 113255

Stamford

CT

06911

CITY

STATE

ZIP CODE

Title or Position

Treasurer

Empty grid line for title or position

Telephone number

Empty grid lines for telephone number

201603240200087652

Full Name of Designated Agent

[Grid for Full Name of Designated Agent]

Mailing Address

[Grid for Mailing Address Line 1]

[Grid for Mailing Address Line 2]

[Grid for Mailing Address Line 3]

CITY

STATE

ZIP CODE

Title or Position

[Grid for Title or Position]

Telephone number

[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.

People's Bank

[Grid for Name of Bank, Depository, etc.]

Mailing Address

72 Edgerton Road

[Grid for Mailing Address Line 1]

[Grid for Mailing Address Line 2]

Darien

CT

06820

[Grid for Mailing Address Line 3]

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

[Grid for Name of Bank, Depository, etc.]

Mailing Address

[Grid for Mailing Address Line 1]

[Grid for Mailing Address Line 2]

[Grid for Mailing Address Line 3]

CITY

STATE

ZIP CODE

201603240200087653

Express

Sender: You must seal flap before shipping.

Press here to seal. Press here to seal. Press here to seal.



FedEx carbon-neutral envelope shipping

10:30 4305 03:22 RT 729 FZ

ORIGIN ID: JSDA (860) 422-5444
AUGUST WOLF
88 MAPLE TREE LANE
UNIT C
STAMFORD, CT 06906
UNITED STATES US

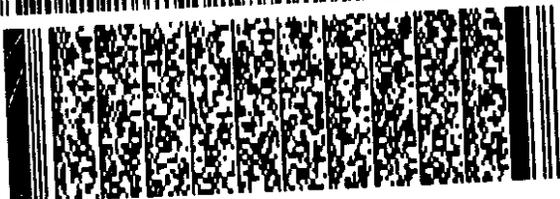
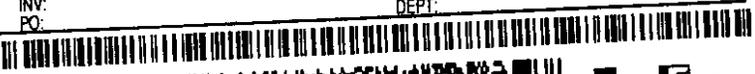
SHIP DATE: 21MAR16
ACTWGT: 1.00 LB
CAD: 4059691/NET3732

BILL SENDER

TO US SENATE
SECRETARY OF THE SENATE
232 HART SENATE OFFICE BUILDING

WASHINGTON DC 20510

(202) 694-1000 REF:
INV: DEPT:
PO:



TUE - 22 MAR 10:30A
PRIORITY OVERNIGHT

TRK# 7759 1815 4305
0201

EP YKNA

20510
DC-US IAD



Screened by 25
Senate Post Office

Created by
Post Office
MAR 22 2016

201603240200087654

United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

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 _____
Postmark

OVERNIGHT DELIVERY SERVICE:

	SHIPPING DATE	NEXT BUSINESS DAY DELIVERY
FEDERAL EXPRESS	<u>3-21-16</u>	<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 POSTMARK

FAX _____
Date of Receipt

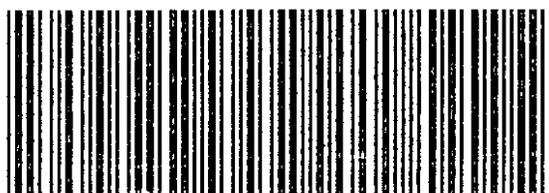
OTHER _____
Date of Receipt or Postmark

PREPARER DH DATE PREPARED 3-24-16

201603240200087655



SEN PATCH



SEN PATCH

201603240200087656