

FEC FORM 1

STATEMENT OF ORGANIZATION

RECEIVED

Office Use Only

1. NAME OF COMMITTEE (in full) (Check if name is changed) Example: If typing, type over the lines.

2012 NOV 19 AM 11:07
12 FEB 15
FEC MAIL CENTER

MEDICINAL CANNABIS SUPERPAC

ADDRESS (number and street)

1182 24th st

(Check if address is changed)

Oakland

CITY

CA

STATE

94607

ZIP CODE

COMMITTEE'S E-MAIL ADDRESS

(Check if address is changed)

Federalcannabis@gmail.com

Optional Second E-Mail Address

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address is changed)

MEDICINALCANNABISSUPERPAC.COM

2. DATE

11 ' 10 ' 2012

3. FEC IDENTIFICATION NUMBER

C00534529

4. IS THIS STATEMENT

NEW (N)

OR

A

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

JOSEPH C HOUSTON

Signature of Treasurer

Joseph C Houston

Date

11 ' 10 ' 2012

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.

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

FEC FORM 1 (Revised 06/2012)

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Federal Election Commission
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JM
 PREPARER

11/19/12
 DATE PREPARED

12030953662